CHENANGO MEMORIAL HOSPITAL
COMMUNITY SERVICE PLAN
2013-2015
1. **Hospital Mission Statement**

UHS Chenango Memorial Hospital’s mission is to deliver local, high quality healthcare and serve as a gateway to clinically integrated services provided in collaboration with other local, regional and national caregivers.

UHS Chenango Memorial is a not-for-profit provider of healthcare services and is a member of United Health Services, Inc. (UHS). UHS is a regional healthcare delivery system consisting of healthcare providers and supporting organizations primarily serving New York’s Southern Tier and surrounding areas. Their mission is “to improve the health of those we serve through our commitment to excellence in all that we do.”

2. **Definition and brief description of the community served**

UHS Chenango Memorial Hospital’s service area is centered in Chenango County, with 88% of patients coming from Chenango County communities, with another 10% coming from Otsego, Delaware, Madison, and Cortland Counties. Since the last filing, Cortland County overtook Broome County as the 5th largest source of patients. The hospital’s 90% zip code service area includes the communities of Norwich, Oxford, Sherburne, New Berlin, South New Berlin, Bainbridge, Sidney, McDonough, Plymouth, South Plymouth, Smyrna, Guilford, Mount Upton, Earlville, and Unadilla.

3. **Public Participation**

The local rural health network, Chenango Health Network, hosted two all-day workshops on August 20 and August 26, 2013. In preparation for the workshops the Chenango Health Network did extensive research in the community including focus groups, on-site assessments, surveys, etc., to determine awareness and gather feedback regarding local services. The Chenango Health Network then narrowed down the results to two Prevention Agenda priorities for discussion during the workshops -- Prevent Chronic Diseases and Healthy Women, Infants, and Children.

Invitations with the agenda went out in June inviting numerous health and human service organizations to attend. The following participants included governmental agencies, the local health department and community-based organizations that discussed the needs of the county.
Major barriers that surfaced during these discussions included lack of grant money or other funding to support community programs and the unwillingness of segments of the population to participate in their own healthcare. In fact, some agencies have offered incentives, such as gas cards, to get people to participate.

4. Assessment and Selection of Public Health Priorities

During the workshops held August 20 & 28, the discussion focused on needs, opportunities, and priorities with the assumption that no new extra funding would be available.

The meeting on August 20 was devoted to brainstorming issues within the county, initiatives already underway, the population served, and the start of developing a final list of strategies for the targeted prevention priorities. During the follow-up meeting on August 28, the group narrowed down the final list of strategies. Representatives of UHS Chenango Memorial Hospital and the Chenango County Department of Health then took this list and collaborated to finalize goals, strategies, objectives and deliverables related to the targeted prevention priorities.

5. Three Year Plan of Action

1. Prevent Chronic Disease – Reduce Tobacco Use

Strategy Objective: Decrease the smoking rate among antepartum patients in Chenango County by year end 2015.

UHS Chenango Memorial will focus on the antepartum patients for these reasons:

- Approximately 75% of Chenango Memorial’s antepartum patient base is self-pay or covered by Medicaid. This represents about 225 babies and mothers per year.
- This group of patients has numerous socio-economic challenges and represents a disparity common in this extremely rural county.
- Anti-tobacco use is critical for the health of the unborn child and the mother.

Goals and Objectives, Improvement Strategies and Performance Measures (with measurable and time-framed targets over the three year period):
Tactics

- Counsel and disseminate information to antepartum patients. Distribute information provided by Chenango County Department of Health to patients during their initial visit. This will include information about the local health department’s “Baby and Me Tobacco Free” program starting January 2014.
- Refer patients to the NYS Quit Line and the local health department. These referrals will be provided at the patient’s initial, 20-week, 36-week, and post-partum visits. The local health department will then follow-up with the patients post-partum.
- Continue to host the “Baby Basics” program in our Women’s Health Center started in 2013 provided by the Mothers & Babies South Central New York Perinatal Network. Nurses will review the “Baby Basics” book, especially with first-time moms, during each visit. Additionally, Mothers & Babies will be on-site once a month discussing a different topic each time.

Goals and Performance Measures

- Track referrals to the NYS Quit Line and local health department with a goal of referring 100% of smoking moms in 2015. We will establish a baseline in 2014 to measure future progress.
- Follow-up with mothers at the time of birth to see if they are still smoking. A baseline will be established in 2013 to measure progress starting in 2014. The goal will be to reduce the percent of mothers who are still smoking at birth by 5% in 2014 and by 10% in 2015.
- Track the number of “Baby Basics” books distributed, especially to first-time moms, during the patient’s first pre-natal visit to the Women’s Health Center. These books cover anti-tobacco use and are reviewed by the nurse at every visit. In 2014 and 2015, 100% of first-time mothers will receive the book. We will track attendance during the monthly “Baby Basics” programs and interview new moms to evaluate the usefulness of the information provided.

Collaboration among all the community agencies makes this a relatively uncomplicated plan to implement. However, the challenges for all of us, especially with patients who have socio-economic challenges, involve:

- Lack of cooperation by the patient
- Use of tobacco as a coping mechanism
- Lack of support at home
- Peer pressure

2. Healthy Women, Infants and Children

Strategy Objective: Provide education and support to pregnant women, particularly those women considered high risk and covered by Medicaid.
UHS Chenango Memorial will focus on the antepartum patients for some of the same reasons as mentioned previously:

- Approximately 75% of UHS Chenango Memorial’s antepartum patient base is self-pay or covered by Medicaid. This represents about 225 babies and mothers per year.
- This group of patients has numerous socio-economic challenges and represents a disparity common in this rural county.
- Attendance at pre-natal education classes has been poor.
- The percentage of pregnant women participating in WIC and who obtain early prenatal care in Chenango County is lower than other WIC participants in NYS and NYS excluding NYC.

Tactics

- The local health department will develop and produce an easy-to-read booklet of resources that UHS Chenango Memorial can distribute to pregnant and post-partum women and their significant others.
- Pregnant women receiving services at UHS Chenango Memorial will be encouraged to attend the pre-natal classes.
- Working collaboratively with the local health department and other community partners, UHS Chenango Memorial will redesign the pre-natal educational program. The redesigned program will be free, include speakers from the community agencies, and potentially include a giveaway. The hospital will host the classes.
- Develop a survey for participants to complete at the end of each class and at the end of the program to measure the value of the information provided.
- Continue to host the “Baby Basics” program in our Women’s Health Center started in 2013 provided by the Mothers & Babies South Central New York Perinatal Network. Nurses will review the “Baby Basics” book, especially with first-time moms, at each visit. Additionally, Mothers & Babies will be on-site once a month discussing a different topic each time.

Goals and Performance Measures

- Improve attendance of the pre-natal educational program by redesigning the program. Use attendance sheets signed by the participants to measure attendance. A baseline will be established in 2013 to measure progress starting in 2014. The goal will be to have 100% of first-time mothers attend the class in 2015. A baseline for first-time mothers will be established in 2014.
- Ensure the education is worthwhile by developing a survey for the participants to complete at the end of each class and at the end of the program. A baseline will be established in 2014 to measure progress in 2015 and beyond. The goal will be to have a rating of “excellent” from 75% of the participants in 2015.
- Track the number of “Baby Basics” books distributed, especially to first-time moms, during the patient’s first pre-natal visit to the Women’s Health Center. In 2014 and 2015, 100% of first-time mothers will receive the book. Track attendance during the monthly “Baby Basics” programs and interview new moms to evaluate if the information provided was helpful.
As mentioned earlier, the collaboration of the local health department, UHS Chenango Memorial and other agencies is the strongest aspect in executing this plan. Our challenge will be to get people to participate, especially the low socio-economic population who don’t consider these types of programs a high priority because they don’t think they need the information or they think they get it from other sources, i.e. friends and the internet.

In addition to the targeted priorities, UHS Chenango Memorial will continue to work on other health-related initiatives which include but are not limited to:

- **Control of Hepatitis C**
  - Continue community Sharps program
  - Disseminate educational materials provided by the local health department and other agencies.
- **Patient-Centered Care**
  - A closer affiliation with the local health department and other agencies will enhance our clinicians’ ability to make referrals to community resources.
- **Palliative Care & Hospice**
  - UHS Chenango Memorial will continue its 5-year relationship with Hospice and Palliative Care of Chenango County particularly when it involves a resident in our long-term care facility. Hospice will also speak periodically at meetings of the hospital’s employed provider group.
- **Breast Cancer Screenings**
  - UHS Chenango Memorial and the local health department are active partners in the Chenango Health Network’s “Every Woman Counts in Chenango County Campaign” that encourages women to seek screenings regularly and timely. Chenango County has a high incidence of women whose breast cancer is detected at a later stage.

6. **Dissemination of the Plan to the Public**

The Community Service Plan is made available to the public through a link on the website [http://www.uhs.net](http://www.uhs.net) in the “About Us” section. The report is downloadable in Adobe Acrobat format (PDF) and information is provided regarding how to obtain a free hard copy. The UHS.net website includes extensive information regarding public health programs on the Stay Healthy page and throughout the site.

7. **A brief description of the process that will be used to maintain engagement with local partners over the three years of the Community Service Plan, and the process that will be used to track progress and make mid-course corrections**

UHS Chenango Memorial will play the lead role in a work team that will, at a minimum, meet quarterly to track progress and make mid-course corrections. The existing team consists of the following members:

- **UHS Chenango Memorial Hospital**
  - Women’s Health Center Site Manager
Nurse Manager – Obstetrics
Chenango County Department of Health
Supervising Public Health Nurse
Director of Nursing

The group will expand, as needed, to include a maternity nurse from UHS Chenango Memorial and representatives from Family Planning of South Central New York, Mothers and Babies Perinatal Network of South Central New York, and Chenango County WIC, to name a few.

Minutes will be recorded of each meeting and an Active Issues Log maintained to keep track of action items and their completion or obstacles encountered.