Initiative #1

Priority: Promote Well-Being and Prevent Mental and Substance Use Disorders

Focus Area: Promote Well Being

Goal: Facilitate supportive enhancements that promote respect and dignity for people of all ages.

Objective: Increase Chenango County community scores by 7% to 44.8%.

Disparities: Lack of education of mental health issues in county, low-income, low provider area, lack of transportation and services access.

Interventions

- Mental health first aid courses made available/delivered to community and professionals
- Educate providers via detailing visits to promote Postpartum Depression (PPD) screening at infant’s well child visits (1wk, 2wk, 2, 4 and 6 months) in pediatric office with referral to mother's primary health care provider (PCP)
- Educate pediatric providers in the county on the Project Teach referral and Maternal Health Mental Health project through Project Teach initiative via detailing visits to providers
- Multi-agency lobbying efforts to NYS Medicaid Transportation program to improve access and timeliness of transportation to medical appointments for county residents
- Improve awareness of local and regional services in an effort to improve outreach efforts
- Evaluate and improve outreach efforts

Family of Measures

Mental Health First Aid

- Number of courses held
- Number of individuals trained

Provider Detailing Postpartum Depression

- Number of providers educated on project
- Number of pediatric practices willing to screen moms

Project Teach Detailing

- 100% of Health Care Providers in county educated on both projects
- 100% of Health Care Providers in county receive annual updates and education
- Number of providers participating in kick off dinner/webinar
- Number of providers completing CORE training by Project Teach

**Medicaid Transportation Lobbying**
- Number of agencies joining letter writing campaign
- Agency self-reports improvement in Medicaid transportation for clients

**Services Awareness and Improved Outreach**
- Number of Chenango County calls to 211
- Agency self-reports improvement for clients

**Projected (or completed) Year 1 Interventions**

**Mental Health First Aid**
1. Organize resources
2. Coalesce partners
3. Prioritize and schedule first trainings

**Provider Detailing - Postpartum Depression**
1. By end of 2019, reach out and meet with 100% of Health Care Providers in county who see newborns and infants to provide education regarding Postpartum Depression screening of moms in pediatric offices
2. Educate Health Care Providers on the evidence based program

**Project Teach Detailing Project**
1. By end of 2019, reach out to Project Teach facilitator to discuss plan
2. Form subcommittee to plan kick off informational dinner
3. Secure funding for dinner presentation

**Transportation**
1. Form workgroup
2. Explore issue in depth
3. Interview partners
4. Draft advocacy letter

**Access to Services**
1. Form workgroup
2. Explore issue in depth
3. Collect 211 user data
4. Identify and target short comings and gaps

**Projected Year 2 Interventions**

**Mental Health First Aid**
1. Execute full slate of training courses

**Provider Detailing - Postpartum Depression**
1. Begin detailing visits at 2nd quarter with planned revisit by end of the year 2020 to remind and re-inforce the project details
2. Have at least one Health Care Provider successfully implement Postpartum Depression screening in their pediatric practice

**Project Teach Detailing Project**
1. Plan and implement informational dinner for Health Care Providers to educate them on Project Teach in first quarter of the year 2020
2. Encourage participants to sign up for Core trainings for their staff by Project Teach facilitators
3. Begin detailing visits in 2nd quarter, with planned revisit by end of the year 2020 to remind and re-inforce

**Transportation**
1. Introduce partners to advocacy letter
2. Edit draft as needed
3. Collect signatures
4. Send letters

**Access to Service**
1. Gather referrals, contacts and program information to fill gaps in 211 services

**Projected Year 3 Interventions**

**Mental Health First Aid**
1. Execute additional trainings
2. Evaluate progress and future needs

**Provider Detailing - Postpartum Depression**
1. Annual detailing to Health Care Providers to encourage those who are not screening to start doing so
2. Have one additional Health Care Provider agree to and implement Postpartum Depression screening in their pediatric practice

**Project Teach Detailing Project**
1. Visit each Health Care Provider annually to review Project Teach and encourage its use

**Transportation**
1. Continue conversation with partners and target program staff
2. Evaluate change and additional needs

**Access to Services**
1. Continue to improve program detail in 211 system
2. Encourage agency updates to the system
3. Promote system use

**Implementation Partner, Role(s) and Resources**

**Local Health Department**
Mental Health First Aid
1. Host training for staff
2. Promote and refer

Provider Detailing - Postpartum Depression
1. Carry out detailing project with providers

Project Teach Detailing
1. Facilitate trainings & events
2. Funding

Medicaid Transportation Lobbying
1. Lead agency lobbying efforts

Services Awareness and Improved Outreach
Workgroup participant
1. ID resources
2. ID gaps in resource awareness
3. Culminate corrective resources and recommendations

Hospital
Mental Health First Aid
1. Host training for staff
2. Facilitate
3. Provide space
4. Promote program
5. Obtain funding

Provider Detailing - Postpartum Depression
UHS Chenango Memorial Hospital Community Health Advocate - Promote to providers

Medicaid Transportation Lobbying
Assist in finalizing letter

Services Awareness and Improved Outreach
UHS Chenango Memorial Community Health Advocate - Workgroup participant
1. ID resources
2. ID gaps in resource awareness
3. Culminate corrective resources and recommendations

Providers
Mental Health First Aid
Bassett - staff training, promote

Provider Detailing - Postpartum Depression
UHS Chenango Memorial Hospital - adopt practice change
Bassett - adopt practice change

*Project Teach Detailing*
UHS Chenango Memorial Hospital - promote & utilize.
Bassett - promote & utilize.
Private - promote & utilize.

*Medicaid Transportation Lobbying*
1. Assist in finalizing letter
2. Consider Support

**Community Based Organizations**

*Mental Health First Aid*
Chenango Health Network (CHN)
1. Facilitate
2. Provide space
3. Promote program
4. Obtain funding

Chenango County Behavioral Health
1. Staff trained as program facilitators

*Project Teach Detailing*
Chenango Health Network
1. Volunteer
2. Obtain funding
3. Facilitate kickoff event

Chenango County Behavioral Health
1. Support
2. Kickoff event participant

*Medicaid Transportation Lobbying*
Catholic Charities - lobbying efforts
Chenango County Behavioral Health - lobbying efforts

*Services Awareness and Improved Outreach*
Catholic Charities – workgroup participant
1. ID resources
2. ID gaps in resource awareness
3. Culminate corrective resources and recommendations

Chenango County Behavioral Health - workgroup participant
1. ID resources
2. ID gaps in resource awareness
3. Culminate corrective resources and recommendations
Other
*Mental Health First Aid*
First Responders – Host trainings for staff

**Law Enforcement**
*Mental Health First Aid*
Host trainings for staff

**K-12 School**
*Mental Health First Aid*
Host trainings for staff and promote

*Project Teach Detailing*
Unadilla Valley School Based Clinic - promote and utilize
Sherburne School Based Clinic – promote and utilize

**2019 Update**

*Mental Health First Aid*
In 2019 with collaboration between Chenango Health Network and Chenango Memorial Hospital there were 13 Adult and Youth Mental Health First Aid classes held around the county training over 200 community members, business professionals and education staff. Multiple presentations have been given through Chenango and Delaware counties schools, providing a curriculum overview and benefit of hosting a training for their staff.

All of the Chenango County Sheriff’s office personnel went through the Fire/EMS Mental Health training in 2019.

*Postpartum Depression*
Department of Health has reached out and met with 100% of Health Care Providers in county who see newborns and infants to provide education regarding Postpartum Depression screening of moms in pediatric offices. UHS Chenango Memorial Hospital started screening in their pediatric offices.

*Project Teach*
The planning for a provider education event is being planned for Spring of 2020. Project Teach facilitator is scheduled to discuss program benefits, plan and how to implement. Funding has been secured for dinner event and will be organized by Chenango Health Network and Chenango County Department of Health. All providers within Chenango County will be invited to attend.

*Transportation*
Workgroup has been formed, the group has explored the issue in depth, partners were interviewed and the draft of the advocacy letter has been started and continuing to be finalized.

*Access to Services*
The workgroup was formalized and a resource guide is being developed for Chenango County along with a collaboration with Chenango United Way to improve our community relationship and resources with our local 211.

2020 Update

Mental Health First Aid
In 2020 with collaboration between Chenango Health Network and Chenango Memorial Hospital, there were 4 Adult and Youth Mental Health First Aid classes held around the county training over 68 community members, business professionals and education staff.

Trainings were suspended in February in response to the COVID pandemic. During the pandemic, the courses were moved to a digital platform with 3 trainings scheduled by the end of the year. Classes are planned to continue in 2021.

Postpartum Depression
Provider detailing in the spring of 2020 was delayed due to COVID response. We are looking forward to resuming this initiative in the Summer of 2021.

Project Teach
Provider education planned for Spring of 2020 was postponed in response to the pandemic. Project Teach may be converted to a digital platform for virtual training in 2021. Project Teach facilitator is scheduled to discuss program benefits, plan and how to implement. Funding has been secured for a dinner event and will be organized by Chenango Health Network and Chenango County Department of Health. All providers within Chenango County will be invited to attend.

Transportation
A draft of the advocacy letter was completed but before partner signatories could be collected the project was suspended by the pandemic. It has been noted that increased virtual options for care have been created as a result of the pandemic and this may serve to change the need for this intervention. It will be re-evaluated in 2021.

Access to Services
The workgroup was formalized and a resource guide is being developed for Chenango County along with a collaboration with Chenango United Way to improve our community relationship and resources with our local 211. This entire initiative was suspended due to the pandemic due to component agency resources being reassigned to COVID relief efforts. Intervention will be resumed after the pandemic concludes.

Initiative #2

Priority: Prevent Chronic Diseases

Focus Area: Healthy Eating and Food Security
**Goal:** Increase skills and knowledge to support healthy food and beverage choices.

**Objective:** Decrease the percentage of adults who consume one or more sugary drinks per day by 5%. Decrease the percent of children with obesity by 5%. Decrease the percent of adults, ages 18 years and older with obesity by 5%. Reduce dental caries.

**Disparities:** Low income, geography

**Interventions**

**Project Year 1**
- "Rethink Your Drink: Drink Water" - Campaign
- Adopt beverage standards and promote message through literature and programming to reduce over consumption of sugary sweetened beverages
- Provide dental supplies to Pre K - 5th grades in all 9 community schools
- Encourage classroom dental care practice change in the schools

**Project Year 2**
- Expand "Rethink Your Drink: Drink Water" Campaign
- Focus on: Sugary Sweetened Beverage practice change among
  1. Schools
  2. Community - Based Partners
  3. Business
- Provide dental supplies to Pre K - 5th grades in all 9 community schools along with a dental presentation
- Encourage classroom dental care practice change in the schools

**Project Year 3**
- Expand "Rethink Your Drink: Drink Water" Campaign
- Focus on: Sugary Sweetened Beverage practice change for Providers
  1. Chenango Memorial Hospital Providers
  2. Bassett and Private Providers
  3. Dental Providers
- Provide dental supplies to Pre K - 5th grades in all 9 community schools
- Encourage classroom dental care practice change in the schools

**Family of Measures**

**Project Year 1**
- Number of community partners and their staff educated
- Number of providers’ offices and their staff educated
- Number of households reached with door to door messaging
- Number of new families of newborns reached through mailings
- Number of community events
• Number of people reached during community events
• Phone survey (100 random calls throughout the townships) to assess number of people reached via campaign
• Number of Pre K - 5th grade classes provided with dental supplies and educational presentations in the Spring and Fall
• Number of students reached
• Number of schools that agree to adopt classroom dental care practice change for Pre K- 5th grade

**Project Year 2**
• Number potentially reached in 2020 with bill board messaging created on 2019
• Number of schools that agree to class room sugary sweetened beverages practice change (pledge)
• Number of community partners agreed to sugary sweetened beverages practice change for meetings and events (pledge)
• Number of businesses that agree to sugary sweetened beverages practice change for meetings and events (pledge)
• Number of Pre K - 5th grade classes provided with dental supplies and sugary sweetened beverages educational presentations
• Number of students reached
• Increase the number of schools adopting classroom dental practice change by 1
• Sugary sweetened beverages consumption among NYS adults by County Behavioral Risk Factor Surveillance System
• Prevalence of obesity among NYS adults by County Behavioral Risk Factor Surveillance System

**Project Year 3**
• Providers to screen and counsel patients regarding sugary sweetened beverages consumption as part of routine medical care
• Number of Chenango Memorial Hospital providers currently screening and counselling
• Number of Chenango Memorial Hospital providers that agree to practice change
• Number of Bassett and Private providers currently screening and counselling
• Number of Bassett and Private providers that agree to practice change
• Number of Dentists currently screening and counselling
• Number of Dentists that agree to practice change
• Increase the number of schools adopting classroom dental practice change by 1
• Sugary sweetened beverages consumption among NYS adults by County Behavioral Risk Factor Surveillance System
• Prevalence of obesity among NYS adults by County Behavioral Risk Factor Surveillance System

**Projected (or completed) Year 1 Interventions**
1. Campaign Creation (3 pronged approach - Partners, Providers and Community)
2. Campaign presentations to partners and their staff, providers and office staff, and community at large
3. Cups with Campaign messaging developed and distributed during educational opportunities (5,000+)
4. Work with the Dental Task Force to combine messaging

**Projected Year 2 Interventions**
1. Work with community schools to provide presentations to students, messaging in schools and sugary sweetened beverages practice change
2. Work with community partners around sugary sweetened beverages practice change
3. Work with businesses around sugary sweetened beverages practice change
4. Increase the number of schools adopting classroom dental practice change

**Projected Year 3 Interventions**
1. Work with providers (physicians and dentists) to screen and counsel about sugary sweetened beverages consumption as part of routine medical care
2. Increase the number of schools adopting classroom dental practice change (brushing in the classroom)

**Implementation Partners, Roles(s) and Resources**

**Local Health Department**
*Sugary Sweetened Beverages*
Create and facilitate sugary sweetened beverage campaign
*Dental*
Funding, volunteers, presentations in schools

**Businesses**
*Sugary Sweetened Beverages*
Advocate for worksite practice change
*Dental*
Frontier – volunteer
NBT Bank – volunteer
Blueox – volunteer

**Community-based Organizations**
*Sugary Sweetened Beverages*
Advocate for worksite practice change
*Dental*
Chenango United Way - formation of dental taskforce, funding, volunteer
Chenango Health Network - funding, volunteer
Norwich Rotary - funding, volunteer
Rogers Center - host events/space, volunteer

**Health Insurance Plans**
*Dental*
Fidelis – funding
Hospital
Sugary Sweetened Beverages
UHS Chenango Memorial Hospital Community Health advocate – facilitate sugary sweetened beverages practice change among their providers

Dental
UHS Chenango Memorial Hospital - funding, volunteer

K-12 School
Sugary Sweetened Beverages
Pledge to adopt classroom practice change
Promote messaging in schools

Dental
Adopt classroom practice change

Project Year 1
- 11 schools provided with dental supplies (Zip Bags, toothbrushes, toothbrush covers and toothpaste) twice during the school year (4000 children impacted)
- 11 schools accepted the initial dental presentation (4000 children impacted)
- Unadilla Valley Central School - role model for classroom practice change
- Perry Brown - adopted classroom practice change
- Stanford Gibson - adopted classroom practice change
- Holy Family - adopted classroom practice change

Media
Sugary Sweetened Beverages
Evening Sun - run press releases
Park Outdoors - assist with billboard ads
Local Radio - assist with ads

Providers
Sugary Sweetened Beverages
Advocate for staff training, practice change around sugary sweetened beverages
Providers - screen and educate during medical visits

Other
Dental
Care Compass Network, DSRIP – donation collection

Office for the Aging
Sugary Sweetened Beverages
Advocate for messaging campaign

Dental Initiative and Rethink Your Drink Initiative 2019 Update
Four Chenango County schools have students brushing their teeth in school to develop healthy habits. Along with in-school teeth brushing the Chenango Dental Taskforce has 2 drop-offs a year for dental hygiene bags for all students Pre-K through 5th grade. Chenango County Public Health has partners on this initiative and is planning their next drop-off and education to be focused around drinking water and dental health. Below are the statistics from outreach from the Chenango Dental Taskforce and Rethink Your Drink Initiative. The Rethink Your Drink has also been outreaching to community businesses for pledges to only serve water, coffee or tea at staff meetings and gatherings. Any business that pledges will be highlighted on a billboard in the spring of 2020.

- Number of community partners 23 and their staff educated 224
- Number of providers’ offices 12 and their staff educated 114
- Number of households reached with door to door messaging 5,085
- Number of new families of newborns reached through mailings 402
- Number of community events 5,125
- Number of people reached during community events were 97
- Phone survey (100 random calls throughout the townships) to assess number of people reached via campaign, 28 heard of it, 72 Not

**Dental Initiative and Rethink Your Drink Initiative 2020 Update**

This initiative was stalled during 2020 because of the inability to get into the schools during the pandemic. Prior to the pandemic, 3,740 students Pre K-5th grade received dental supplies and educational presentations in the spring and fall. In total, 10,366 dental kits consisting of a toothbrush, toothpaste and dental floss were distributed to 12 elementary schools throughout Chenango County. Dental supplies were also distributed to the Emmanuel Soul Kitchen that provides a free meal once a month; Helping Hands that distributes food and supplies to the needy; and Nourishing NY that helps people who are food insecure to access the nourishment they need. All of the supplies were donated, primarily from Excellus Blue Cross/Blue Shield. This initiative will resume when schools return to normal activities.

Despite the pandemic, the LHD continued to promote the Rethink Your Drink program using a multi-faceted approach to reach the most people possible in a socially distant manner.

- A billboard appeared in a different location each month reaching an estimated 20,500 drivers per month for a total of 205,000.
- 2 schools (middle and high school) agreed to have water only in class.
- 12 schools (middle and high school) pledged to change to water only in class. These schools also received a 6’x4’ banner acknowledging their commitment.
- The LHD presented information and education about the program to 12 elementary schools.
• The LHD surveyed health partners in the area. Six (6) reported they currently serve water only. The LHD met with another 17 including Chenango County Hospice, United Way, Chenango County Behavioral Health, WIC, Headstart, and the YMCA. All pledged to change to water only.
• The LHD met with 5 large employers in the area and they too pledged to change to serving only water.
• A Rethink Your Drink insert was included in the local Pennysaver that has a circulation of 16,000 readers.
• A Rethink Your Drink door-to-door messaging campaign reached 5,085 households.
• Rethink Your Drink information was included in 422 birth packets mailed to parents of newborns.

Looking ahead, the group is reconsidering their options due to the inability to get into schools and other public facilities to increase the awareness of consuming sugary beverages.

**Priority: Prevent Chronic Diseases**

**Focus Area:** Physical Activity

**Goal:** Increase access, for people of all ages and abilities, to indoor and/or outdoor places for physical activities.

**Objective:** By December 31, 2021: Decrease the percentage of adults ages 18 years and older with obesity (among all adults). Objective 1.7 – Increase the percentage of adults age 18 years and older who participate in leisure-time physical activity (among all adults). Disparities: Low-income, geography

**Interventions**
Chenango Healthy Challenge: A free resource for all community members to become engaged in physical activity, healthy eating and whole health wellness.

**Family of Measures**

**Project Year 1**
• Number of community partners and their staff involved
• Number of families involved
• Number of participants
• Number of organizational teams
• Number of surveyed participants who improved their physical activity
• Number of surveyed participants who improved their overall health

**Project Year 2**
• Increase number of community partners and their staff involved
• Increase number of families involved
• Increase number of participants
• Increase number of organizational teams
Number of surveyed participants who improved their physical activity
Number of surveyed participants who improved their overall health

**Project Year 3**
- Number of community partners and their staff involved
- Number of families involved
- Number of participants
- Number of organizational teams
- Number of surveyed participants who improved their physical activity
- Number of surveyed participants who improved their overall health

**Projected (or completed) Year 1 Interventions**
Launch the Chenango Healthy Challenge

**Projected Year 2 Interventions**
Increase the number of participants who participate in the challenge and complete it

**Projected Year 3 Interventions**
To have the support of community partners, businesses and the community at large to extend the Healthy Challenge beyond 2021

**Implementation Partners, Partner Role(s) and Resources**

**Local Health Department**
Chenango Healthy Challenge
Volunteer, promote and educate participants around Sugary Sweetened Beverages messaging

**Business**
Chenango Healthy Challenge
CHOBANI – donations
Willow Primitive & Boutique – facilitate classes around creative therapy for emotional and social health
Other - promote to staff

**Headstart**
Chenango Healthy Challenge
Volunteer

**Hospital**
Chenango Healthy Challenge
UHS Chenango Memorial Hospital, Community Health Advocate - volunteer, promote to hospital staff

**K-12 School**
Chenango Healthy Challenge
Promote to families and staff
Office of the Aging
Chenango Healthy Challenge
Promote to staff and seniors

Healthy Chenango 2019 Update

In 2019 The Healthy Chenango Challenge formerly known as the Chobani Healthy Challenge was reformed to a fun and free challenge for our community. Our goal for 2019 was to reestablish the challenge and bring attention back to it and help to promote overall wellbeing including healthy eating as well as mental, physical, and emotional health. We ran the challenge from late summer into fall so we could build interest backup for our 2020 Challenges. We developed and held a successful challenge and began planning for a more robust challenge in 2020.

Number of community partners and their staff involved 6-8
Number of families involved 6
Number of participants 107
Number of organizational teams 14
Number of surveyed participants who improved their physical activity 20
Number of surveyed participants who improved their overall health 45

Healthy Chenango 2020 Update

Due to COVID-19, the in-person event was cancelled. Instead, Challenge organizers engaged participants through social media by providing tips and strategies to help during the quarantine. Posts included tips on healthy living, eating, exercise and mental health. The Facebook site has 100 active participants. It is hoped a virtual challenge can be held in 2021. The walk/run is now part of the Suicide Prevention Coalition.

Initiative #3

Priority: Prevent Chronic Diseases

Focus Area: Preventive Care and Management

Goal: In the community setting, improve self-management skills for individuals with chronic diseases, including asthma, arthritis, cardiovascular disease, diabetes and prediabetes and obesity.

Objective: By December 31, 2021 increase the percentage of adults with chronic conditions (arthritis, asthma, CVD, diabetes, CKD,) who have taken a course or class to learn how to manage their condition by 5%. Increase health system referrals by 5%. Overall, decrease A1Cs by 5% of participants that completed the program.

Disparities: Low-income, geography, age
Interventions:
- CHN, UHS Chenango Memorial Hospital and Bassett Health Care: Chronic Disease Self-Management Program
  Expand access to evidence-based self-management interventions for individuals with chronic disease (arthritis, asthma, cardiovascular disease, diabetes, prediabetes, and obesity) whose condition(s) is not well-controlled with guidelines-based medical management alone
- Basset Health Care: National Diabetes Prevention Program
  Expand access to the National Diabetes Prevention Program (National DPP), a lifestyle change for preventing Type 2 Diabetes

Family of Measures:
- Number of health systems that have policies & practices for identifying and referring patients to evidence-based self-management education (EBSMP) (Programs offered: Chronic Disease Self-Management Program (CDSMP), Diabetes Self-Management Program (DSMP), Pain Self-Management Program (PSMP))
- Number and type of evidence-based self-management education programs in community settings
- Number of patients who participate in evidence-based self-management education programs
- Percentage of patients who complete evidence-based self-management education programs
- A1C pre/post for diabetes management program
- Other pre/post for pain management program
- Number of health systems that have policies & practices for identifying and referring patients to National Diabetes Prevention Programs (NDPP)
- Number of National Diabetes Prevention Programs in community settings
- Number of patients referred to National Diabetes Prevention Programs
- Number of patients who participate in National Diabetes Prevention Programs
- Percentage of patients who complete National Diabetes Prevention Programs

Projected (or completed) Year 1 Interventions
- Offer:
  - Chronic Disease Self-Management Program (CDSMP)
  - Diabetes Self-Management Program (DSMP)
- 95% of participants registered complete the program

Projected Year 2 Interventions
- Offer:
  - Chronic Disease Self-Management Program (CDSMP)
  - Diabetes Self-Management Program (DSMP)
  - Pain Self-Management Program (PSMP)
- UHS Chenango Memorial Hospital to generate referrals via their electronic medical record

Projected Year 3 Interventions
- Offer:
Chronic Disease Self-Management Program (CDSMP)
Diabetes Self-Management Program (DSMP)
Pain Self-Management Program (PSMP)
• Institute the National Diabetes Prevention Program (NDPP)

Implementation Partners, Partner Role(s) and Resources

Local Health Department
Chronic Disease Self-Management
Referrals, outreach, and class promotion

Community-based Organization
Chronic Disease Self-Management
• Chenango Health Network - funding, program facilitators, space, referrals, outreach and education about classes, advertise the classes, collecting and tracking data in GSI
• Norwich Family YMCA - space, outreach and education about classes, and advertise the classes

Hospital
Chronic Disease Self-Management
• UHS Chenango Memorial Hospital - funding, program facilitators, space, referrals via providers and EMR, outreach and promotion
• Bassett – facilitate National Diabetes Prevention Program, funding, referrals, outreach and promotion.

Providers
Chronic Disease Self-Management
Promote and referral source

Other
Chronic Disease Self-Management
Care Compass Network, DSRIP – outreach and promotion

Office of the Aging
Chronic Disease Self-Management
Space, referral, outreach and promotion

2019 Update

Chronic Disease Self Management and Diabetes Self Management
There was 1 Chronic Disease Self Management class held and 2 Diabetes Self Management classes in 2019; about 30 community members benefited from the workshops. With community collaboration and partnerships we are planning to hold more workshops in 2020.

2020 Update
**Chronic Disease Self Management and Diabetes Self Management**

Bassett Healthcare offered virtual sessions but they were poorly attended. It is unknown if they continued the sessions during the pandemic but they do plan to continue to offer them in 2021.

The LHD and Chenango Health Network are looking for people to become trainers for these programs. During the pandemic, training transitioned to a virtual format making it easier for people to complete the training. Additionally, the self management classes also transitioned to a virtual format making it easier for people to attend in this rural environment.