"UMatter Schenectady":

A coalition's unique approach to learning about their community's needs and their response to the findings

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What is UMatter Schenectady?

- A city-wide, neighborhood-level, boots-on-the ground community health assessment

- Goal was to acquire neighborhood-level data and to use those to identify city needs and health disparities

- The data would then be used to develop priorities and a community action plan for Schenectady

- Because the focus was at the neighborhood level, interventions for the identified needs can be targeted where they're most needed

How did this get started?

- From September 2002-April 2003, the Sinai Urban Health Institute (SUHI) in Chicago conducted 1,699 adult interviews and 811 child interviews in residents' homes across six racial, ethnic, and socioeconomic diverse neighborhoods

- Identified numerous health disparities

- Key findings from this survey allowed SUHI to make policy recommendations and take action to improve health outcomes

Prevention Agenda 2013-2017

- New York State's health improvement plan
- Developed by the New York State Public Health and Health Planning Council (PHHPC) in partnership with more than 140 organizations across the state
- Unprecedented collaboration of local health departments, health care providers, health plans, community based organizations, advocacy groups, academia, employers as well as state agencies, schools, and businesses
- The Plan identifies five priorities for improving the health of all New Yorkers and asks communities to work together to address them

5 Priority Areas

- Prevent chronic diseases
- Promote healthy and safe environments
- Promote healthy women, infants and children
- Promote mental health and prevent substance abuse
- Prevent HIV, sexually transmitted diseases, vaccine-preventable diseases and healthcare-associated infections

Hospital Requirements

For 2013-2017, hospitals are being asked to work with local health departments to complete a Community Service Plan that mirrors the Community Health Needs Assessment (CHNA) and Improvement Strategy required for nonprofit hospitals per the Affordable Care Act

http://www.health.ny.gov/prevention/prevention_agenda/20132017/docs/planning_guidance.pdf

Building the Schenectady Coalition for a Healthy Community

- Began as Ellis Medicine's Medical Home Advisory Group
  - Build and grow on an existing foundation
- Ellis' CEO brought the idea of a "boots on the ground" assessment to the group
  - Asked for feedback and commitment
  - Project has been framed as the community's, not Ellis Medicine's
  - Initial funding from The Schenectady Foundation

Building the Coalition

- The survey was to be broad in scope, addressing not just health care, but social needs as well

- Knew we needed organizations that represented multiple sectors

- Had a meeting with Schenectady County Public Health Services to brainstorm organizations to invite to the table

- Since the group started meeting for this new purpose in November 2012, the coalition has grown to over 70 organizations

The Schenectady Coalition for a Healthy Community

- American Cancer Society of Northeastern New York
- Asthma Coalition of the Capital Region
- Bethesda House
- Bigelow Corners Partnership
- BOCES Capit
- Boys and Girls Clubs of Schenectady
- Capital District Center for Independence
- Capital District Child Care Coordinating Council
- Capital District Physicians Health Plan
- Capital District Tobacco Free Coalition
- Capital District Transportation Authority
- Catholic Charities
- City Mission of Schenectady
- City of Schenectady
- Community Fathers, Inc.
- Cornell Cooperative Extension of Schenectady County
- Ellis Medicine
- Fidelis Care
- Girls Inc.
- Guyanese American Association of Schenectady
- Habitat for Humanity of Schenectady County, Inc.
- Healthy Capital District Initiative
- Hometown Health Center
- League of Women Voters of Schenectady County
- Mohawk Ambulance Service
- MVP Health Care
- Northeast Parent and Child Society
- Optimum Health Chiropractic
- Parsons Child and Family Center
- Planned Parenthood
- Price Chopper
- Rainbow Access Initiative

- Rehabilitation Support Services, Inc.
- SAFE, Inc.
- Schenectady ARC
- Schenectady City School District
- Schenectady Community Action Program
- Schenectady County Community College
- Schenectady County Department of Social Services
- Schenectady County Department of Probation
- Schenectady County Human Rights
- Schenectady County Office of Community Services
- Schenectady County Public Health Services
- Schenectady County Senior and Long Term Care Services
- Schenectady Day Nursery
- Schenectady Free Health Clinic
- Schenectady Inner City Ministry
- Schenectady Municipal Housing Authority
- Schenectady Stand Up Guys
- Schenectady United Neighborhoods
- Seton Health Center for Smoking Cessation
- Sunnyview Rehabilitation Hospital
- The Albany Damien Center
- The Chamber of Schenectady County
- The Schenectady Foundation
- Union College
- Union Graduate College
- United Way
- University at Albany, School of Public Health
- Visiting Nurse Service of Schenectady and Saratoga Counties, Inc.
- YMCA of the Capital District
- YWCA

LEADERSHIP

Strategy & Approach

- Partnered with SCAP to identify and hire people for the role of Community Health Worker (CHW)
- Health Profession Opportunity Grant (HPOG) and Displaced Homemaker Program (DHP) graduates
- SCAP played a vital role in helping us interview and train the CHWs
- Need people who know the community and have established trust
- Need diversity to represent diversity of Schenectady
- Students from Union College volunteered to go door-to-door with the CHWs

Strategy & Approach

- Wanted it to be grassroots
- Had a meeting with some women at the City Mission out of which came the name "UMatter"
- Met with neighborhood associations and spoke at some of their meetings
- Developed an offshoot of the coalition that was called the Community Committee
- This group was formed to provide feedback on the process from the perspective of a community resident

Strategy & Approach

- Surveys were loaded on iPad Minis
- iSurvey software ran the survey and allowed for storage of the data without an internet connection

- Data collection occurred over a 3 month period
- Each weekend the CHWs and students were in a different city neighborhood
- During the week the CHWs visited community venues, which without partnership would not have been possible

Response Summary

- Total Responses = 2,229
- Responses from Outside the City = 155
- Responses from Inside the City = 2,074
  - Schenectady (city) 18 years and over population = 49,998[*]

Sampled over 4% of the population

[*]U.S. Census Bureau, 2010 Census

SURVEYS COLLECTED BY NEIGHBORHOOD

NORTH END- 142

STOCKADE - 114

DOWNTOWN - 198

UNION STREET- 184

EASTERN AVE- 97

HAMILTON HILL - 418

BELLEVUE - 163

MONT PLEASANT - 348

CENTRAL STATE STREET - 217

WOODLAWN - 193

Prepared by:
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Responses by Neighborhood
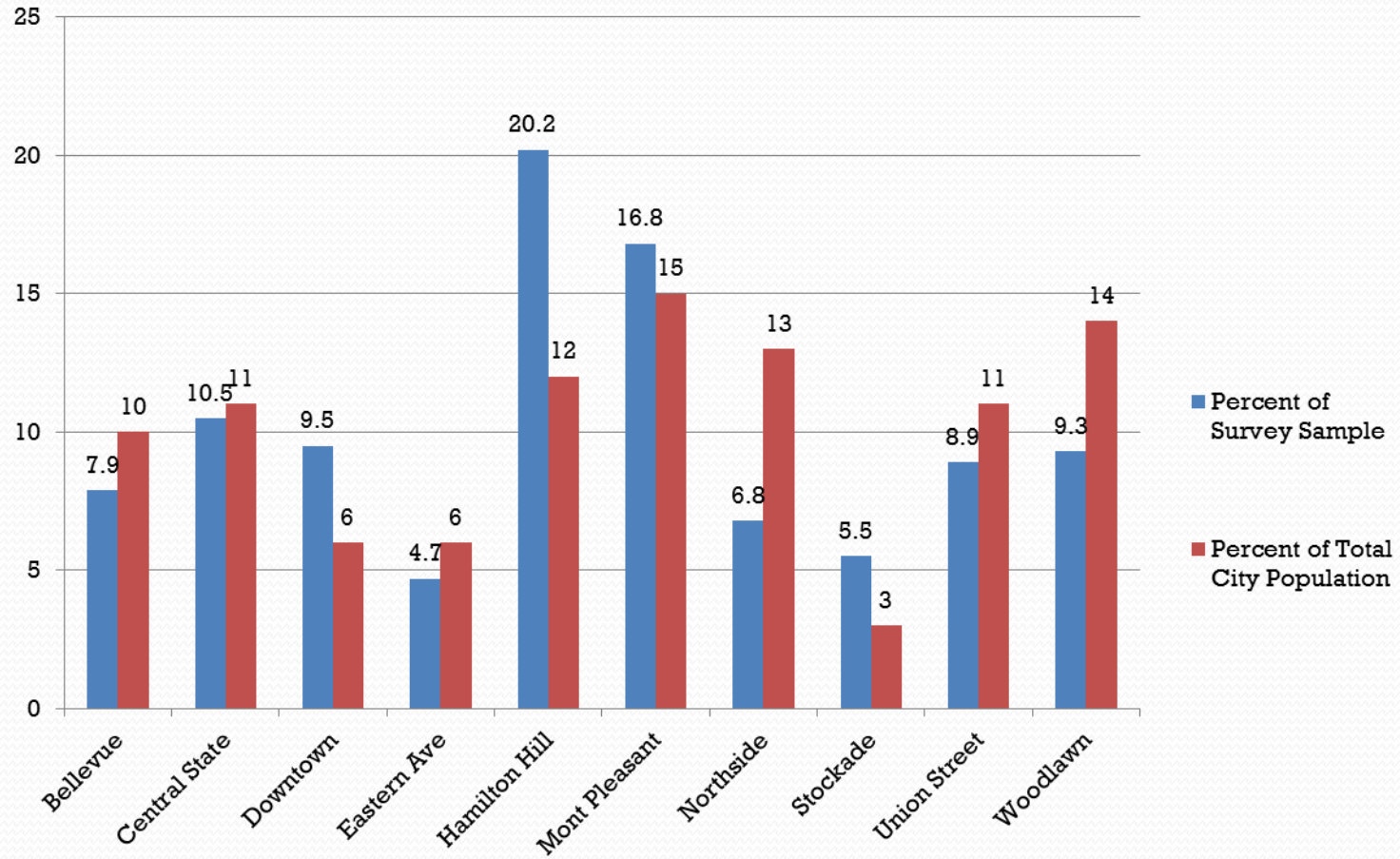
Demographics: Race/Ethnicity

UMatter Respondents

- Black or African American = 30.8%
- White or Caucasian = 54.4%
- Guyanese = 12.9%
- Sudanese = 1.2%

- Hispanic or Latino(a) = 11.5%

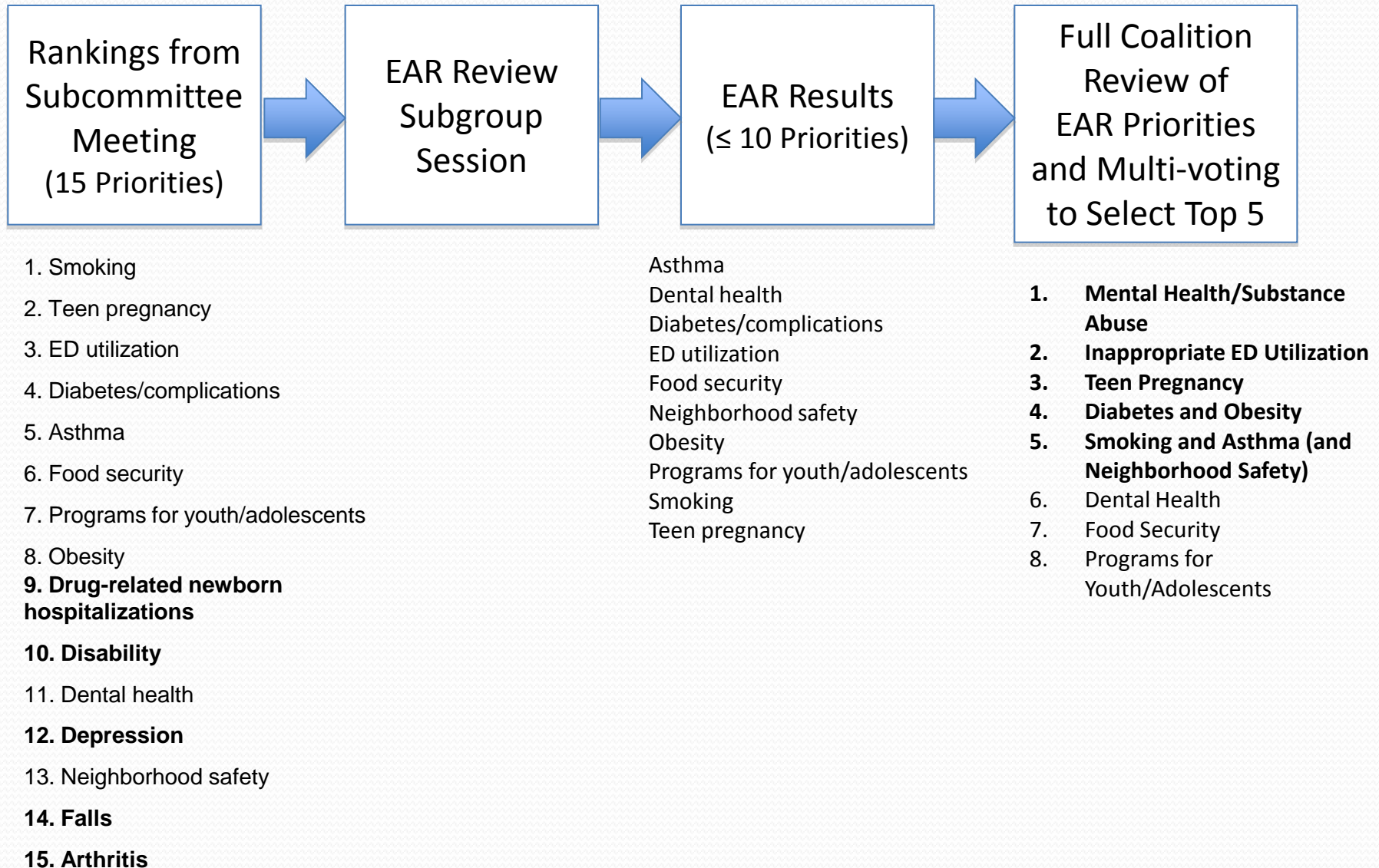## Schenectady City Population

- Black or African American = 20.2%
- White or Caucasian = 61.4%

- Hispanic or Latino(a) = 10.5%

Data Sources

- UMatter Schenectady Survey
- Healthy Capital District Initiative Community Health Profile 2013
- US Census
- REACH (Racial and Ethnic Approaches to Community Health) grant outcomes
- Local data (e.g., Mohawk Ambulance)

Refining the Community Health Need Priorities

| Rankings from Subcommittee Meeting (15 Priorities) | → | EAR Review Subgroup Session | → | EAR Results (≤ 10 Priorities) | → | Full Coalition Review of EAR Priorities and Multi-voting to Select Top 5 |

Rankings from Subcommittee Meeting (15 Priorities)

1. Smoking
2. Teen pregnancy
3. ED utilization
4. Diabetes/complications
5. Asthma
6. Food security
7. Programs for youth/adolescents
8. Obesity
9. **Drug-related newborn hospitalizations**
10. **Disability**
11. Dental health
12. **Depression**
13. Neighborhood safety
14. **Falls**
15. **Arthritis**

EAR Results (≤ 10 Priorities)

Asthma
Dental health
Diabetes/complications
ED utilization
Food security
Neighborhood safety
Obesity
Programs for youth/adolescents
Smoking
Teen pregnancy

Full Coalition Review of EAR Priorities and Multi-voting to Select Top 5

1. **Mental Health/Substance Abuse**
2. **Inappropriate ED Utilization**
3. **Teen Pregnancy**
4. **Diabetes and Obesity**
5. **Smoking and Asthma (and Neighborhood Safety)**
6. Dental Health
7. Food Security
8. Programs for Youth/Adolescents

Building the Implementation Plan

- Held focus groups with experts in each of the top 5 priority areas to learn more about the issues, barriers to improvement, and their ideas for the future

- Researched evidence-based interventions

- Also met with representatives from Schenectady United Neighborhoods to determine feasibility and acceptability of implementing potential interventions in the community

Moving the Plan Forward

The coalition has formed 11 work groups that will be responsible for the implementation and evaluation of their objective's activities over the life of the plan

The Plan for Asthma

- Grant from NYS Health Foundation to implement new asthma care model

- Collaboration between Care Central (health home), Ellis' Asthma Education Program, Public Health's Healthy Neighborhoods Program

- Modeled after an evidence-based program out of Boston Children's Hospital

The Plan for Diabetes

- Piloting a wellness program at a local church that will cover chronic disease prevention, nutrition, physical activity, diabetes self-management skills
- Numerous organizations are giving of their time and resources to contribute to the program
  - YMCA
  - Price Chopper
  - Cornell Cooperative Extension

The Plan for Physical Activity

- Working with neighborhood associations to complete an asset inventory for each of Schenectady's city neighborhoods
- Working with students from Union College to coordinate a field day for local youth

The Plan for Falls

- Our partnership with Mohawk Ambulance led us to discover that 30% of all the ambulance calls for falls were coming from one city neighborhood

- Examined data by street name and discovered that the majority of calls were coming from a senior living facility (comprised of nursing home, assisted living, memory care and independent living)

- Now working with administrators at this facility to discuss potential interventions

The Plan for Adolescent Pregnancy

- Organizing an event with Schenectady teens to discuss root causes
- The results of this analysis will be used to develop a community campaign for adolescent pregnancy prevention
- Working with the AIDS Council, Schenectady City School District, Planned Parenthood

What's *Not* Working?

- Having a difficult time moving the mental health workgroup forward- system is very broken and community has needed to focus on violence prevention

- Maintaining participation from community residents outside of the neighborhood associations

Use Available Resources-
Be Creative!

- Local colleges: Union College students have been very active in our work

- Neighborhood associations: many are already doing great things that you can help promote through your networks; go to a meeting!

- Local ambulance service: great source of data

- Local foundations

What keeps people engaged?

- Acquisition of neighborhood-level data
  - Provides targeted information about the needs of those we serve
  - Needed to support and evaluate programs/services and inform policy, systems, and environmental change
  - In looking at health broadly, many different interests are satisfied
- Playing an active role
  - SCAP assisted with the recruitment, hiring, and training of CHWs
  - Many organizations served as survey sites
  - Asked coalition members to join planning subcommittees and implementation workgroups
  - Meeting regularly
- Creating a positive buzz

Building in Accountability

- Made a promise to the community that this survey would drive action
- The coalition developed a **Community** Action Plan, in which everyone has a stake
- Need one or more designated individuals to coordinate execution of the plan and evaluate progress; champions at each organization
- Plan should include benchmarks/measurable goals to motivate action
- Coalition members should report on updates, challenges, and successes throughout the implementation phase
- Keep community residents involved in developing and implementing the plan

Questions?

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