

2022 Community Health Needs Assessment

Niagara County
Community Health Improvement Plan 2022-2024



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December 2022

Dear Community Resident:

As the healthcare quality and safety leader in WNY, Catholic Health continues to look for ways to lead the transformation of healthcare and create healthier communities. To help support this important work, we conduct a Community Health Needs Assessment (CHNA) every three years in Erie and Niagara counties to gain a better understanding of the health concerns of area residents and collaborate with others to improve healthcare across the region. We are pleased to share with you the results of our CHNA as well as Catholic Health's 2022-2024 Community Health Improvement Plan.

The assessment process was a collaborative effort between Catholic Health and other local organizations concerned about the health of our community, including the Erie County Department of Health and Niagara County Department of Health. Additionally, we solicited input from a variety of organizations, groups, and individuals in the form of surveys and community meetings. This input helped us identify how Catholic Health can best address the health and wellness needs of the people who rely on us for care.

Dating back generations, Catholic Health's mission has been to reveal the healing love of Jesus to all. Whether it was our industry-leading response to the COVID pandemic or implementing Epic, one of the world's most advanced electronic health record systems designed to improve patient safety and community health, our mission has always been our guiding star. To that end, in 2021, Catholic Health provided nearly \$9 million in charity care and \$210 million in community benefit to the people of WNY, while continuing to receive local and national recognitions for high quality care and patient safety.

While the COVID pandemic consumed much of our time as we responded to pressing needs of our patients and the broader community, our commitment to provide safe, high quality care never wavered. Now, as life begins to return to normal, we are looking forward to continuing to address the needs identified in the 2022 CHNA as well as partner with our county health departments to focus on priority health issues, including food insecurity, substance use treatment, and women's and children's health.

We encourage you to resume your individual health journey as well by focusing on preventative care, including regular check-ups and health screenings, and following prescribed medical plans to manage existing health conditions. We look forward to working with our community partners to improve your health and the quality of life for individuals and families throughout Erie and Niagara Counties. We invite you to learn more about Catholic Health by visiting chsbuffalo.org or calling 716-447-6205.

Sincerely,



Mark A. Sullivan
President & CEO



Catholic Health Mission, Vision, and Values

Our Mission

We are called to reveal the healing love of Jesus to all.

Our Vision

As a trusted partner, inspired by faith and committed to excellence, we lead the transformation of healthcare and create healthier communities.

Our Values

Reverence

We honor the inherent dignity and uniqueness of each person.

Compassion

We unconditionally demonstrate empathy, kindness, and acceptance.

Integrity

We are honest, transparent, and accountable.

Innovation

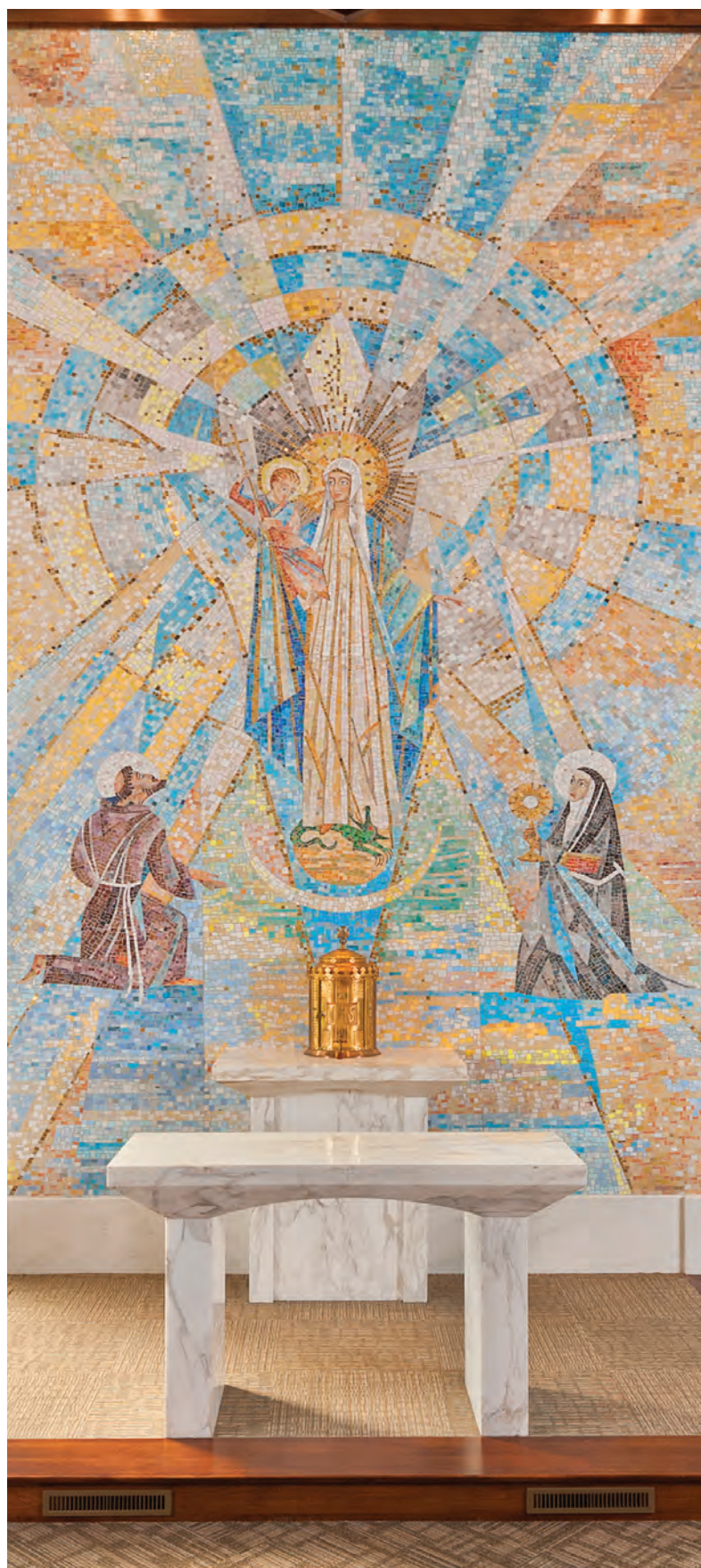
We continually learn, find creative solutions, and embrace change.

Community

We work together to build community and promote social justice in our organization and in society.

Excellence

We commit to achieve the highest standards of quality, safety, and service.



Catholic Health System

Community Needs Assessment (CHNA)
Community Health Improvement Plan (CHIP)
New York State 2022 – 2024

COUNTY COVERED:

Niagara County

PARTICIPATING LOCAL HEALTH DEPARTMENT:

Niagara County Department of Health

5467 Upper Mountain Road, Suite 100
Lockport, NY 14094
(716) 439-7430
Web: www.niagaracounty.com

PARTICIPATING HOSPITALS:

Catholic Health System

Mount St. Mary's Hospital and Health Center

5300 Military Road
Lewiston, NY 14092
(716) 297-4800
Web: www.chsbuffalo.org

Eastern Niagara Health System

521 East Avenue
Lockport, NY 14094
(716) 514-5700
Web: www.enhs.org

Kaleida Health System

DeGraff Memorial Hospital

445 Tremont Street
North Tonawanda, NY 14120
(716) 694-4500
Web: www.kaleidahealth.org

Niagara Falls Memorial Medical Center

621 Tenth Street
Niagara Falls, NY 14301
(716) 278-4000
Web: www.nfmmc.org

COALITION/ENTITY COMPLETING ASSESSMENT AND PLAN:

Catholic Health System has completed its assessment and plan in collaboration with the Niagara County Department of Health and local hospital and community partner organizations.

NIAGARA COUNTY CHA/CHIP STEERING COMMITTEE

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B. Executive Summary

As one of the largest health care providers in Western New York, Catholic Health continually looks for ways to improve the health of those who reside in our community to achieve equitable outcomes through high quality, patient focused care. The New York State Prevention Agenda's vision to be the healthiest state for people across all ages is used as the framework to support this effort through our Community Health Improvement Plan (CHIP). As directed by the state, every three years a Community Health Needs Assessment (CHNA) is conducted to better understand the health concerns and issues facing community residents in the counties we serve.

We are in unprecedented times due to the ongoing global COVID-19 Pandemic. Its impact on the community and county operations continues to stretch resources, as well as the health and livelihood of many. As a result, the Niagara County Health Department announced the county's focus will remain on the Prevention Agenda Priorities that were identified for the 2019-2021 CHNA. The priorities that will continue through 2024 are Prevent Chronic Disease and Promote Well-Being and Prevent Mental and Substance Use Disorders. The insight gained from the 2022 community survey results, as well as the community and stakeholder conversations, would however be reviewed by the steering committee and any necessary updates would be incorporated. Those updates, as well as the overall results, will continue to be shared by the county and community leaders and organizations, including Catholic Health, as we collectively work to support residents during this unprecedented time.

The healing love of Jesus is revealed in all we do at Catholic Health. In 2021, Catholic Health provided \$210 million in charity care and community benefit for the people of Western New York. Catholic Health associates across the geographic footprint of the health system are also engaged with a wide range of community based organizations as volunteers. This service to community is a fundamental component of the organization's culture. Our associates also provide a tangible, diverse response to this calling through which relationships deepen and feedback from the community is garnered. In addition, Catholic Health has actively identified and been awarded funding from the Federal Emergency Management Agency (FEMA) and other national, regional, and local agencies to support specific needs that align with our mission and the needs of the community. Catholic Health, with the support of our associates, is committed to our Social Responsibility and Community Benefit Framework.



Catholic Health 2022-2024 Prevention Agenda Priorities and Disparity

In collaboration with the Niagara County Department of Health and other community partners, the following priorities, goals, focus areas and interventions were selected for the Catholic Health Community Health Improvement Plans. Priority Area #1 and Priority Area #2 were priorities identified by the Niagara County Department of Health and selected for our community collaboration. Catholic Health is required to align with at least two county Priority Areas as part of the CHNA process. Of note, the Erie County Department of Health identified the same priorities.

Priority Area #1: Prevent Chronic Diseases

Disparity: Socioeconomic

Focus Area 1: Healthy Eating and Food Security

Overarching Goal: Reduce obesity and the risk of chronic disease

Goal 1.13: Increase the percentage of adults with perceived food security

Priority Area #2: Promote Well-Being and Prevent Mental and Substance Use Disorders

Disparity: Socioeconomic

Focus Area 1: Promote Well-Being

Goal 1.2: Facilitate supportive environments that promote respect and dignity for people of all ages

Goal 2.2: Prevent opioid and other substance misuse and deaths

Focus Area 2: Prevent Mental and Substance Use Disorders

Goal 2.2: Prevent opioid and other substance misuse and deaths

Priority Area #3: Promote Healthy Women, Infants, and Children

Disparity: Ethnicity

Focus Area 1: Maternal and Women's Health

Goal 1.2: Reduce maternal mortality and morbidity

Focus Area 2: Perinatal and Infant Health

Goal 2.2: Increase breastfeeding

A comprehensive review of outcome data from a variety of state and national resources were reviewed as part of the CHNA process. Primary resources utilized included the New York Prevention Agenda Dashboard, data from the United States census reporting, the University of Wisconsin's Population Health Institute's County Health Rankings and Roadmaps, as well as others. Due to the proximity and nature of the interrelationships between Erie and Niagara counties, as well as the reach of the Catholic Health service area and goal for high level of inclusivity for community health, data from both counties is represented in the following report. This provides a more comprehensive view of the overall service area while still allowing county specific needs to be identified.

The overall assessment process is a collaborative effort between Catholic Health, Niagara County Department of Health, and other local organizations and hospitals. More than 15 organizations directly participated in planning meetings and feedback sessions and over 1,300 residents responded to the CHNA survey. Input was also solicited from a broad range of other community organizations, individuals, and groups. This input helped validate and bring focus to areas of specific need and disparity, as well as helped prioritize interventions to address the needs of those we serve. The completed assessment and analysis of the data provided a framework for the health system's overall implementation plan to support priority needs that were identified for the community over the next three years.

The progress and overall improvement related to the Prevention Agenda priorities in the Catholic Health improvement plan will be monitored by the internal leaders who are coordinating the interventions identified by the teams to support the priorities identified and as outlined on the CHIP template provided by the New York State Department of Health. Catholic Health will submit updates on progress towards each intervention annually, or as requested. The county's steering committee representatives will also continue to meet at least annually and review progress as well as explore new opportunities to collaborate on to support the priority areas. The Prevention Agenda Dashboard will continue to serve as the primary resource to track latest available trending details and monitor outcome data.

While Catholic Health is committed to serving the community through the CHNA priorities in this report, there are a number of needs that were not incorporated into Catholic Health's individual 2022-2024 Community Health Improvement Plan at this time for one or more of the following reasons:

- Requires resources that Catholic Health does not currently have available without compromising other important initiatives.
- Is being targeted or addressed by other entities within the community.
- Was deemed not as impactful on the overall health of the community as compared to other identified needs.

Should community circumstances change or additional resources become available, Catholic Health will consider incorporating other initiatives into its plan.

The Community Health Needs Assessment and Community Health Improvement Plan processes are linked directly to requirements specified by the Federal Internal Revenue Service and the New York State Department of Health. Under the Patient Protection and Affordable Care Act of 2010, the Internal Revenue Service requires all state-licensed, tax-exempt hospitals to develop a Community Health Needs Assessment and Community Health Improvement Plan to maintain their Internal Revenue Code Section 501(c)(3) tax-exempt status. Similarly, New York State requires hospitals and local health departments to collaborate within their community to identify local health priorities and to plan and implement a strategy for local health improvement focused on the Prevention Agenda 2022-2024: New York State Health Improvement Plan.

C. Community Health Assessment

1. Community Description

Catholic Health is a not-for-profit integrated healthcare delivery system that operates four acute care operations in Erie County and one in neighboring Niagara County. The Niagara County facility, Mount St. Mary's, provides services for residents from the county's cities, towns and the many rural areas in the county. In addition, Catholic Health has Home and Community Based Care, Primary Care Centers, as well as Diagnostic and Testing Centers that serve Niagara County residents. The target populations include our general community population including those who may be at risk or disadvantaged.

Geographic Location

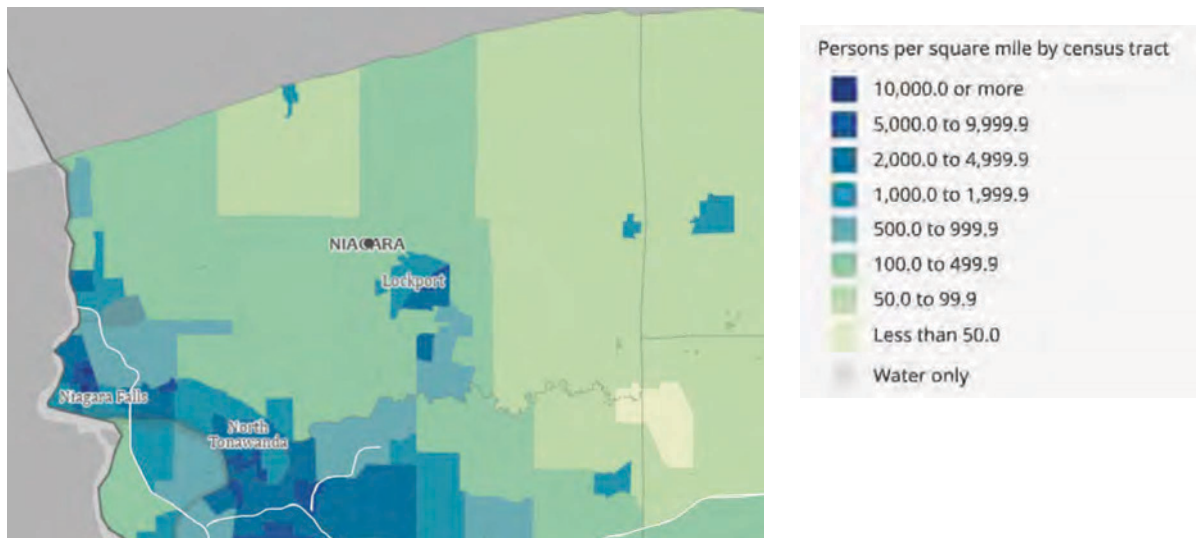
Niagara County is one of the 62 counties that comprise the State of New York. Niagara County has a total area of 522 square miles. It consists of 3 cities (Niagara Falls, North Tonawanda and Lockport) and 12 towns (Cambria, Hartland, Lewiston, Lockport, Newfane, Niagara, Pendleton, Porter, Royalton, Somerset, Wheatfield and Wilson.) It is also the most western part of New York State and is bordered by Lake Ontario on its northern border and the Niagara River (Canada) on its western border.

Population

The population of Niagara County, New York in 2020 was 208,396, a loss of 3.7% from the 216,474 who lived there in 2010. For comparison, the US population grew 6.5% and New York's population shrank by 0.3% during that period.

The largest ethnic groups in Niagara County are White (Non-Hispanic) 85.4% and Black or African American (Non-Hispanic) 6.89%. White (Hispanic) accounts for 1.78% and Asian (Non-Hispanic) accounts for 1.1%.

Population Density – Niagara County



Source: 2020 US Census Demographic Data Map Viewer

Population Trend – Niagara County

YEAR	POPULATION	GROWTH	ANNUAL GROWTH RATE
2022*	206,944	-779	-0.38%
2021*	207,723	-779	-0.37%
2020	208,502	-779	-0.37%
2019	209,281	-779	-0.37%
2018	210,060	-788	-0.37%

*2021 and 2022 data is projected

Source: worldpopulationreview.com

Population Distribution by Age – Niagara County

Age

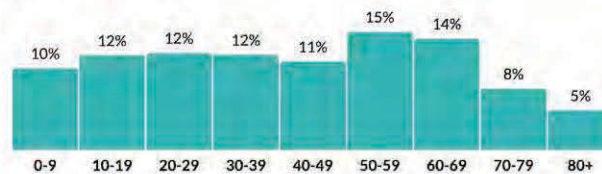
43.4

Median age

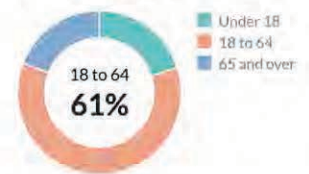
about 10 percent higher than the figure in New York: 39

about 10 percent higher than the figure in United States: 38.2

Population by age range



Population by age category



Source: Censusreporter.org

a. Population Demographics

SELECT DEMOGRAPHICS	ERIE COUNTY	NIAGARA COUNTY
Population (4/1/20)	954,236	212,666
Median Age (2020)	40.2	43.4
Gender		
Female persons percent (2020)	51.20%	50.9%
Male	48.80%	49%
Race/Ethnicity (2020)		
White alone	78.8%	87.2%
Black or African American alone	14%	7.40%
Hispanic or Latino	6.0%	3.7%
Asian alone	4.3%	1.2%
American Indian and Alaska Native alone	0.8%	1.2%
Foreign-born persons, percent, 2016-2020	7.2%	3.9%
Not proficient in English	2%	1%
Median household income (in 2020 \$), 2016-2020	\$59,464	\$57,252
Persons in poverty (2015-2019)	13.20%	11.70%
Persons with a disability, under age 65 years, 2016-2020	9.5%	10.2%
Persons without health insurance, under age 65 years	4.10%	4.30%
High school graduate or higher, percent of persons aged 25 years +, 2016-2020	92%	92%
Bachelor's degree or higher, percent of persons aged 25 years +, 2016-2020	35%	26%
Owner-occupied housing unit rate, 2016-2020	64.8	71.7
Median gross rent, 2016-2020	\$852	\$714
In civilian labor force, total, percent of population aged 16 years +, 2016-2020	62.50%	60.70%
Adults who have a regular health care provider, age-adjusted percentage (2018)	85.6	83.9
Language other than English spoken at home, percent of persons age 5 years +, 2015-2019	10.7	4.3
Veterans, 2016-2020	50,200	14,239
Percent of people using alternate modes of transportation (e.g., public trans, carpool, bike/walk) or who telecommute (2015-2019)	17.40%	13.10%
Households with a computer, percent 2016-2020	89.70%	88.60%

Source: <https://www.census.gov/quickfacts/fact/table/US/PST045221>

b. Community Health Status

New York State Prevention Agenda Tracking Indicators

The New York State Prevention Agenda Tracking Indicators were reviewed to identify where Erie and Niagara County residents showed worsening health trends. These trends were considered and integrated into the 2022-2024 plans when appropriate. The following issues were identified as among the most pressing for both Erie and Niagara Counties:

- Percentage of children with obesity, among children ages 2-4 years participating in the WIC program
- Opportunity Index Score. The Opportunity Index is made up of 20 indicators across four dimensions (Economy, Education, Health, and Community).
- Community Score (component access to healthy food). The Community Score is compiled from seven data sources: volunteering, voter registration, youth disconnection, violent crime, access to primary health care, access to healthy food, and incarceration.
- Suicide mortality among youth, rate per 100,000, ages 15-19 years
- Suicide mortality, age-adjusted rate per 100,000 population

Data Source: New York State Department of Health

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/sources.htm

Distribution of Health Issues and Health Outcomes

County Health Rankings and Roadmaps (CHR&R) is recognized as the primary source for data to improve health equity. The Health Outcomes data provides an indication of the health status of Niagara County residents. Niagara County is ranked among the least healthy counties in New York State for both health outcomes and health factors. The overall data for Niagara County morbidity and mortality shows that Niagara County is ranked 53 out of the 62 counties in New York (lowest 0%-25% range of counties in New York).

In terms of health factors identified by CHR&R, those factors that influence how well and how long we live, Niagara County is ranked 50 of 62 (lowest 0%-25% range of counties New York). Our focus remains committed to the health factors of today as they are an indicator of the overall health outcomes of the future.

The County Health Rankings recognizes that much of what contributes to the health outcomes of individuals, and communities, happens outside the traditional influence of the physician's office; in schools, workplaces and neighborhoods. The Health Outcomes and Health Factors are measured and ranked for each county which allows for comparisons between counties.

Health Outcomes – Niagara County

RANKING CATEGORY OUT OF 62 NY COUNTIES	YEAR 2019	YEAR 2020	YEAR 2021	YEAR 2022	TREND
Health Outcomes: based on mortality and morbidity	58	58	55	53	Positive
Health Factors: based on behavioral, clinical, social, economic and environmental	52	53	44	50	Negative

Source: County Health Rankings & Roadmaps, 2018

Physical and Mental Disease Burden

The 2022 County Health Rankings used data from 2018-2020 and reported that the residents of Erie and Niagara County report more physical unhealthy days compared to the state rates, which indicates a greater burden of chronic diseases in the community.

They also reported mentally unhealthy days for Erie and Niagara County residents is higher than the state rate, indicating a greater need for mental health services in this community.

Health Behaviors

Health risk behaviors identified in the County Health Ranking data review of Niagara County included tobacco, alcohol and obesity. Erie and Niagara County residents report a higher percentage of smoking, heavy drinking and obesity than the state.

Health Outcome Detail

	New York	Erie (ER), NY ✘	Niagara (NI), NY ✘
Health Outcomes			
Length of Life			
Premature Death	6,000	7,300	7,900
Quality of Life			
Poor or Fair Health	i 16%	17%	17%
Poor Physical Health Days	i 3.6	3.8	4.0
Poor Mental Health Days	i 3.9	4.6	4.9
Low Birthweight	8%	9%	8%
Health Factors			
Health Behaviors			
Adult Smoking	i 13%	18%	21%
Adult Obesity	i 27%	32%	32%
Food Environment Index	i 9.0	8.1	8.0
Physical Inactivity	i 27%	25%	27%
Access to Exercise Opportunities	88%	93%	83%
Excessive Drinking	i 19%	22%	21%
Alcohol-Impaired Driving Deaths	20%	22%	11%
Sexually Transmitted Infections	i 640.6	598.2	449.2
Teen Births	13	16	18

Source: County Health Rankings & Roadmaps, 2018

Neighborhood Economics

Income and poverty are key indicators associated with the health and well-being of the community. Catholic Health has programs and resources throughout the county including geographic areas designated as some of the poorest census tracts in the county. The health system is dedicated to providing improved access to services to support a healthier community.

The Mount St. Mary's Neighborhood Health Center is located within Census Tract 202 in Niagara County. Per capita income is \$11,271 which is well below the Niagara County average of \$31,762. The median household

income is \$18,320 which is about one-third of the Niagara County median household income \$57,252. The percentage of persons below the poverty line is 60.9% in this area, double the rate of Niagara County overall (12.4%).

Source: *Censusreporter.org* (Census data: *American Community Survey 2020*)

Life Expectancy and Preventable Deaths

Compared to the state benchmark, Erie and Niagara County residents have a greater rate of potential life lost before age 75.

Within Erie County, Black and Hispanic populations have a greater rate of potential life lost before age 75 than the White population. Within Niagara County, American Indian/Native American, Black, and Hispanic populations have a greater rate of potential life lost before age 75 than the White population.

Leading Causes of Death Under Age 75 in Erie and Niagara County

The leading causes of death and rankings are the same for both Erie and Niagara County, and include Heart disease, Cancer, Chronic Lower Respiratory Disease, Cerebrovascular Disease, and Unintentional Injury.

Leading Causes of All Deaths for Total Population Selected Counties: Erie

Top 5 Causes

		Number of deaths and age-adjusted death rate					
		Total Deaths	#1 Cause of Death	#2 Cause of Death	#3 Cause of Death	#4 Cause of Death	#5 Cause of Death
Erie	2019	Total Deaths 9,679 760.0 per 100,000	Heart Disease 2,158 164.9 per 100,000	Cancer 2,037 159.1 per 100,000	CLRD 499 38.9 per 100,000	Cerebrovascular Disease 467 35.4 per 100,000	Unintentional Injury 406 38.8 per 100,000

Leading Causes of All Deaths for Total Population Selected Counties: Niagara

Top 5 Causes

		Number of deaths and age-adjusted death rate					
		Total Deaths	#1 Cause of Death	#2 Cause of Death	#3 Cause of Death	#4 Cause of Death	#5 Cause of Death
Niagara	2019	Total Deaths 2,408 798.0 per 100,000	Heart Disease 657 211.3 per 100,000	Cancer 513 167.6 per 100,000	CLRD 145 46.3 per 100,000	Cerebrovascular Disease 118 38.6 per 100,000	Unintentional Injury 105 45.3 per 100,000

CLRD: Chronic Lower Respiratory Diseases

*Rates based on fewer than 10 events in the numerator are unstable.

Note: Ranks are based on numbers of deaths, then on mortality rates. Where county's death counts and rates are tied, '(tie)' appears at the bottom of the corresponding cells, and causes are further ranked alphabetically.

If a cell is blank, then there were no deaths from any of the 25 causes used in our tables. These causes are listed in the technical notes.

Source: *Vital Statistics Data as of January 2022*

Substance Abuse

Throughout the pandemic, New York and the entire nation saw an increase in opioid overdoses. More than 93,000 people in the United States died from drug overdoses in 2020, a 29.4% increase from 2019, according to the Centers for Disease Control and Prevention.

Erie and Niagara County residents experience a higher number of drug overdose deaths compared to New York State overall.

Drug Overdose Mortality Rate

NUMBER OF DRUG POISONING DEATHS PER 100,000 POPULATION.	
New York State	21
Erie County	25
Niagara County	27

Source: *Health Behaviors in the County Health Rankings & Roadmaps, 2018*

Opioid Related Metrics

OPIOID INDICATOR	DATA YEARS	NEW YORK STATE		ERIE		NIAGARA	
		COUNT	RATE	COUNT	RATE	COUNT	RATE
Overdose deaths involving any opioid, crude rate per 100,000 population	2019	2,955	15.1	143	15.5	37	17.6
All emergency department visits (including outpatients and admitted patients) involving any opioid overdose, crude rate per 100,000 population	2019	10,628	54.4	625	67.9	137	65.1
Patients who received at least one buprenorphine prescription for opioid use disorder, crude rate per 100,000 population	2020	79,864	408.7	6,408	696.7	2,474	1175.7

Source: <https://www.health.ny.gov/statistics/opioid/>

2. Main Health Challenges Facing the Community

Impact and Successes Achieved

Several of the health challenges that impact the residents of Erie and Niagara counties, as previously stated, have consistently proven to negatively impact the poor and vulnerable residents of Erie and Niagara counties. Improvement of the community's well-being and health status has been a specific focus for Catholic Health with regard to disparity, social determinants, and prevalence of chronic disease as guided by our Mission, Vision, and Values. Despite the global pandemic that started in 2020 and continued through 2022, the 2019 – 2021 Community Health Improvement Plans for Erie and Niagara Counties showed significant progress.

Examples of Impact and Successes Achieved in the 2019-2021 Community Health Improvement Plans

- Depression screenings are done on every patient. The nationally recognized Patient Health Questionnaire-2 (PHQ-2) and 9 (PHQ-9) are done in provider offices as well as on admission with patient and then every 10 days thereafter. The assessment is now integrated into the hospital system electronic health record.
- Trauma Informed Care education, training, policy and practice review, and evaluation of environment completed across the hospital and ancillary care locations with transition of focus to associates during pandemic period (Niagara County).
- A Doula training program was developed for maternity staff and matches the New York Governor's Task Force requirements for reduction of Maternal Mortality for African American women.
- Care Managers were hired for the Emergency Department at Sisters of Charity Hospital (Erie County). The goal is to improve self-management skills for those patients with chronic conditions.
- Health literacy principles incorporated into patient education material design.
- The Catholic Health Diversity, Equity and Inclusion Initiative was founded to identify and inventory educational initiatives across the health system.



Deferred due to COVID-19 Pandemic

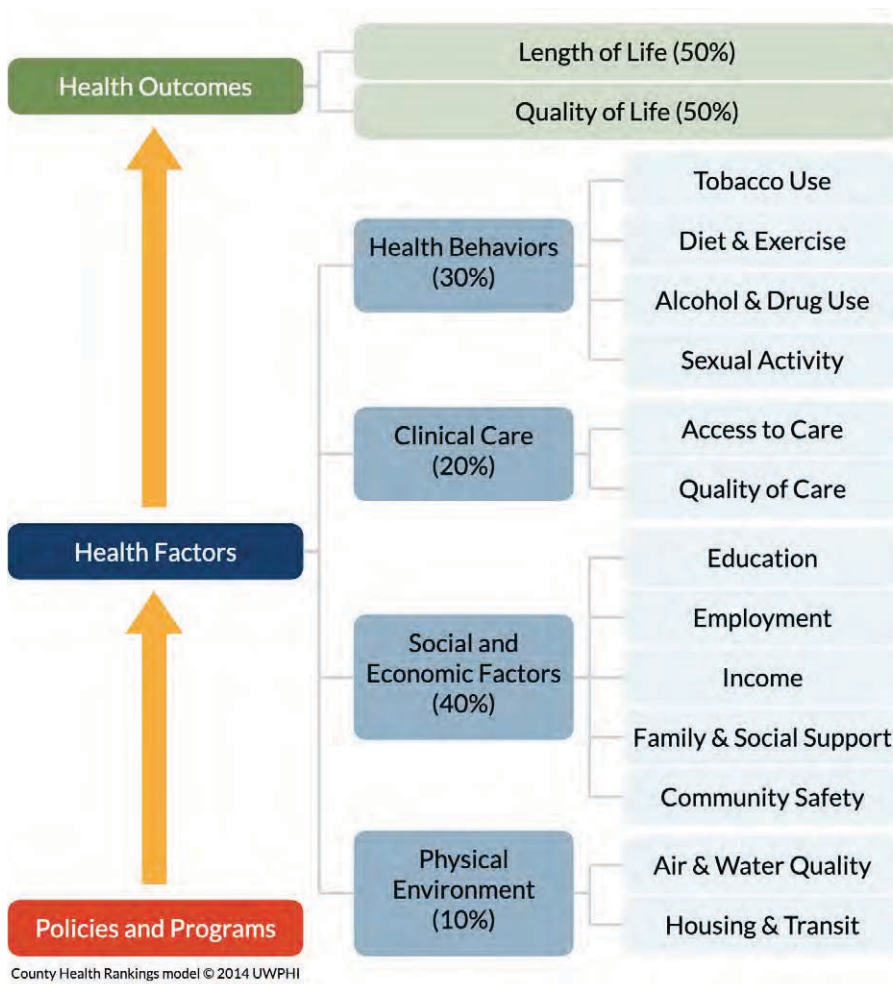
- Planning a speaker series with Erie County Health Department to offer continuing medical education credits for providers to expand understand of pain classification for musculoskeletal providers.

Due to the unprecedented times that have resulted as the nation continues to respond to the global pandemic, both the Erie County Health Department, as well as the Niagara County Health Department, announced that they would be continuing with their existing New York State Prevention priorities for the new report cycle. This provides Catholic Health facilities the opportunity to support and further its efforts to address the two priorities which are aligned with each of the counties. The aligned priorities for both counties are the same and include: 1. Prevent Chronic Diseases and 2. Promote Well-Being and Prevent Mental and Substance Use Disorders.

New York State Health Rankings for Erie County and Niagara County

While the Prevention Agenda priorities for each county are remaining unchanged, a review was conducted to validate and identify any new trends as a result of the global pandemic, changes in identified needs, outcomes or population changes. The current health challenges of each county were reviewed in detail using the 2022 County Health Rankings and Roadmaps Model (CHR&R). CHR&R is a program of the University of Wisconsin Population Health Institute and provides data, evidence, guidance, and examples to build awareness of the multiple factors that influence health and support leaders in growing community power to improve health equity. CHR&R rankings are derived from more than 30 measures that include health behaviors (30%), clinical care (20%), social and economic factors (40%), and physical environment (10%). The most recently available data is used to calculate CHR&R measures. Data from New York state and both Erie and Niagara counties is included below to allow for a comprehensive review of the data.

County Health Rankings Model



University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2022. www.countyhealthrankings.org.

New York State Health Factor Rankings by County

*New York State has a total of 62 counties

	ERIE COUNTY	NIAGARA COUNTY
Overall Health Factors	29	50
Health Behaviors	23	34
Clinical Care	11	52
Social and Economic Factors	43	46
Physical Environment	29	44

Data source: County Health Rankings & Roadmaps 2022

Overview of Contributing Causes of Health Challenges Compared to New York State Median

Behavioral Risk Factors

The 2022 County Health Rankings and Roadmaps Health Behaviors group include measures related to tobacco use, diet and exercise, alcohol and drug use, and sexual activity. The rates for all measures for both Erie and Niagara counties are higher as compared to New York State.

	NEW YORK STATE	ERIE COUNTY	NIAGARA COUNTY
Percentage of adults who are current smokers (age-adjusted)	13	18	21
Obesity, Adult ⁽¹⁾	27	32	32
Excessive Drinking ⁽²⁾	19	22	21
Teen Births ⁽³⁾	13	16	18

Data source: County Health Rankings & Roadmaps 2022

(1) Percentage of the adult population (age 18 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m² (age-adjusted)

(2) Percentage of adults reporting binge or heavy drinking (age-adjusted).

(3) Number of births per 1,000 female population ages 15-19.

Environmental Risk Factors

The 2022 County Health Rankings and Roadmaps Physical Environment group include measures related to air and water quality, housing, and transit. The rate for both Erie and Niagara counties is higher than New York State.

	NEW YORK STATE	ERIE COUNTY	NIAGARA COUNTY
Air Pollution - Particulate Matter*	6.9	7.6	8.7

*Average daily density of particulate matter in micrograms per cubic meter.

Socioeconomic Factors

The 2022 County Health Rankings and Roadmaps Social and Economic group include measures related to education, employment, income, family and social support, and community safety. This category includes a broad range of components that significantly influence the health status of individuals and communities. Notably, the level of income can be viewed as the fundamental metric in that greater health risks and outcomes (i.e. food security, obesity) are associated with lower income levels in comparison to those from a higher socioeconomic group.

Percentage of Children Living Below Poverty Level

The rate of children living below poverty level for Erie County is higher than New York State. The Niagara County rate is slightly lower than the percentage of children in New York overall. Both the state and Erie and Niagara County are higher than the national child poverty rates. According to the 2019 U.S. Census Poverty Data, the child poverty rate in the U.S. is 14.4 percent or nearly 1 in 7 children.

	NEW YORK STATE	ERIE COUNTY	NIAGARA COUNTY
Percentage of People under 18 Living in Poverty	17	18	15

Limited Access to Healthy Foods

Access to healthy foods is correlated to the availability of a grocery store in the New York Prevention Agenda Dashboard. Access is measured by the percentage of population who are low-income and do not live near a grocery store. Low access is defined as greater than one mile from a supermarket or grocery store in urban areas or greater than 10 miles for rural areas. The rate for both Erie and Niagara counties is higher than New York State.

	NEW YORK STATE	ERIE COUNTY	NIAGARA COUNTY
Percentage of population who are low-income and do not live close to a grocery store	2	6	5



Violent Crime

The rate for both Erie and Niagara counties is higher than New York State overall when excluding New York City. Only one county, Schenectady, is higher than Erie County. Schenectady has a rate of 429. Erie County and Niagara County rank at #2 and #3 respectively for violent crimes in New York State, excluding New York City.

	NEW YORK STATE	ERIE COUNTY	NIAGARA COUNTY
Number of reported violent crime offenses per 100,000 population	379	428	395

Policy Environment

Policy changes have the opportunity to impact a multitude of factors that directly affect the health of the community across every sector. County and City Government representatives seek opportunities to change the environment and resources of our geographic locations in order to retain and attract new businesses. Partnerships with the many trade and academic institutions in the region have provided a workforce development focus. The global pandemic has identified and exacerbated equity issues in both Erie and Niagara counties. This heightened awareness has resulted in multiple collaborative efforts among partners in each county to address and support changes to facilitate actions to meet gaps and resources needed by the community. The communities in each county have also responded by supporting neighbors, neighborhoods and the community overall by advocating and taking positive steps to improve or support each other during times of significant stress and violence.

Other Unique Characteristics

Erie and Niagara counties both have highly ranked academic institutions and quaint villages and areas that are walkable destinations.

Niagara Falls is located within Niagara County and spans Ontario, Canada and Niagara Falls, New York. It is considered one of the natural wonders of the world due to its impressive, powerful, and breathtaking water falls. This geographic location is a popular tourist destination and visited by approximately 20 million people annually. Niagara County borders Canada which continues to stimulate commerce and tourism. Agriculture is one of the leading industry sectors in the county which features agriculture and food production as well as multiple local wineries.

3. Assets and Resources to Address Health Issues Identified

Community Resources

Niagara County Hospitals

- **Catholic Health**
 - Mount St. Mary's Hospital
- **Eastern Niagara Hospital**
- **Kaleida Health**
 - DeGraff Emergency Department
- **Niagara Falls Memorial Hospital**

Niagara County Department of Health

- **Environmental Health**
- **Nursing**
- **Children with Special Needs**
- **Public Health Preparedness and Emergency Preparedness**
- **Healthy Neighborhoods Program**
- **Lactation and Breastfeeding**

Niagara County Department of Mental Health and Substance Abuse Services

Niagara County Department of Social Services

Niagara County Office for the Aging

Niagara County Women, Infants, and Children (WIC) Program

Niagara County Community Action Program

Cornell Cooperative Extension (CCE) – Department of Agriculture and Markets

Pinnacle Community Services

- **Domestic Violence Services**
- **Parenting Services**
- **CORE Program – Connections, Opportunities, Reliance, Experience**

Population Health Collaborative

Buffalo Niagara American Heart Association

Catholic Charities of WNY

FeedMore WNY (Western New York)

211 of WNY – Get Connected. Get Help.

Niagara Falls Health Equity Task Force

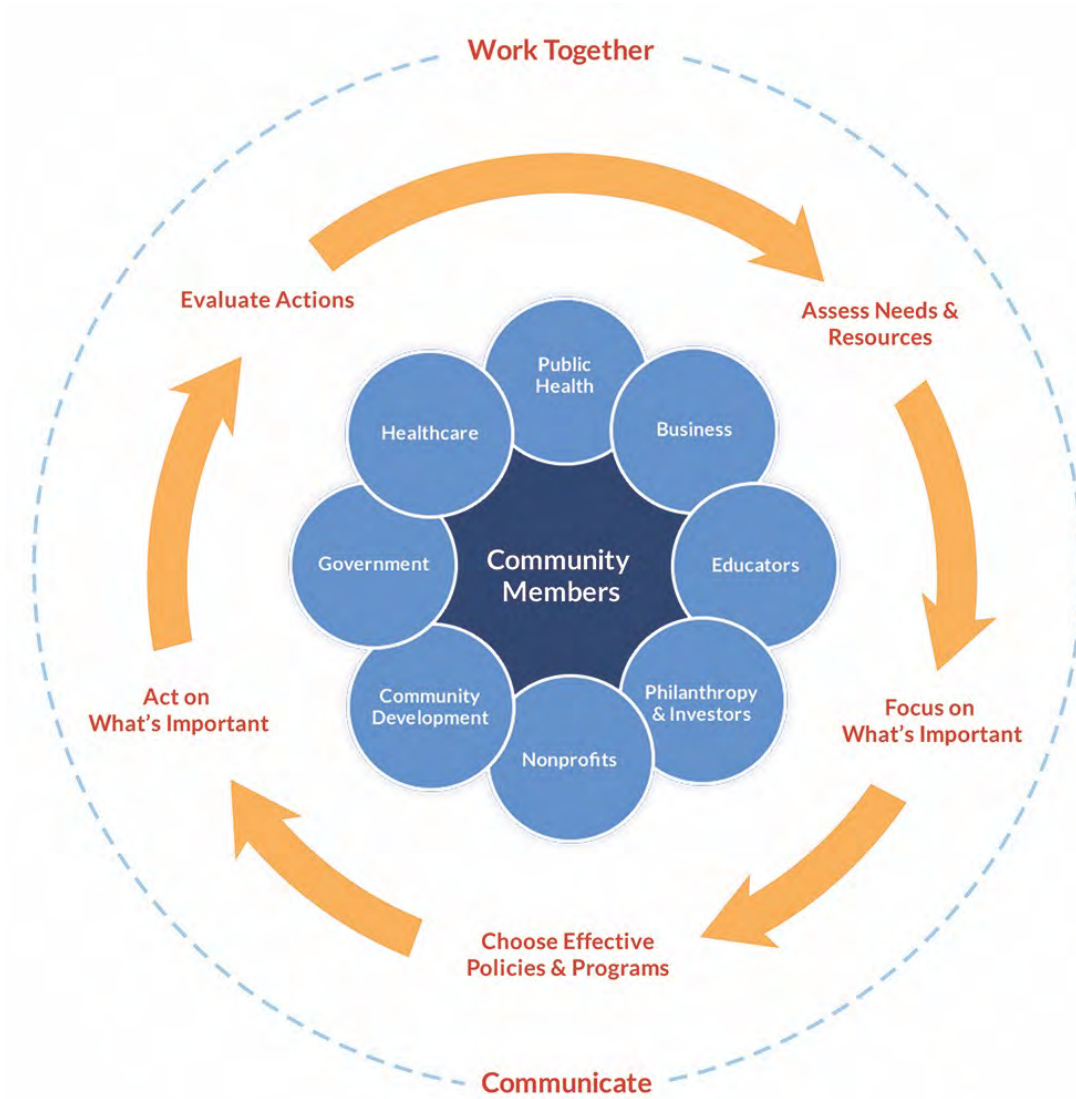
- **The Rose Bente Lee Ostapenko Center for Race, Equity, and Mission, Niagara University**
- **Mount St. Mary's Hospital**
- **Mount St. Mary's Neighborhood Health Center**
- **Community Health Center of Niagara**
- **Heart, Love and Soul**
- **Community Missions of Niagara Frontier, Inc. (CMI)**
- **Pinnacle Community Services**
- **Niagara Falls Housing Authority**
- **Niagara Falls School District**
- **Niagara County Legislature**
- **Niagara Organizing Alliance for Hope**
- **City of Niagara Falls – Mayor Robert Restaino**
- **Congressman Brian Higgins**
- **New York State Senator Robert Ort**
- **YWCA of Niagara**
- **211 of WNY**
- **True Bethel Baptist Church**
- **Niagara Falls ESPRI (Empire State Poverty Reduction Initiative)**
- **Creating a Healthier Niagara Falls Collaborative**

Colleges & Universities

- **Niagara University**
- **Niagara County Community College**

Process and Methods Used to Conduct Community Health Needs Assessment

The Community Health Needs Assessment is guided by a process that is outlined in The New York State Prevention Agenda 2019-2024. As seen in the County Health Rankings' Take Action Cycle model below, the overall objective is to work together to improve health.



Source: University of Wisconsin Population Health Institute.

County Health Rankings & Roadmaps 2022. www.countyhealthrankings.org.

The Steering Committee members collaborated to implement a comprehensive Community Health Needs Assessment (CHNA) process focused on strengthening 2019-2021 priorities while identifying and defining any changes in significant health needs. The six-month process centered on gathering and analyzing data as well as receiving input from people who represented the broad interests of the community to provide focus for the community and hospitals to create a plan to continue improving the health of our communities. Below is a summary of the process and methods used.

- Niagara County Health Department – Assessed resources and determined that they would extend the 2019-2021 Priorities for the 2022-2024 cycle due to the COVID-19 pandemic.
- CHNA/CHIP Steering Committee – Monthly meetings held starting in February 2022. Delayed start due to resource allocation as a result of global COVID-19 pandemic.
- Three Surveys Conducted – Consumer, Provider, and Community Based Organizations
 - Consumer survey late March 2022 through mid-June 2022 – 2,329 respondents, reviewed by zip code to ensure equitable geographic input
 - Provider Survey – Conducted in May 2022, 49 responses received
 - Niagara Falls Health Equity Task Force survey – Conducted in May 2022, 10 respondents
- Focus Groups – April 2022 through June 2022, 5 groups for a total of 61 participants
- Findings of surveys and focus groups were compiled and reviewed by the Steering Committee which is comprised of the hospitals, county representatives, and other community organizations who each then disseminate results with their networks, county contacts, and other organizations (i.e., Niagara Falls Health Equity Task Force). The results continue to be shared with county and community leaders as the county works to support residents during this unprecedented time.
- Catholic Health CHNA Summit – June 13, 2022. Health system clinical and non-clinical leaders were invited to review and approve priorities identified through above processes.
- Catholic Health Board Strategic Planning Committee Meeting – July 11, 2022. Health priorities were shared with the committee for review and comment.
- Catholic Health Mission Integration Committee – September 7, 2022. The 2022-2024 health priorities and initiatives were presented and the reporting dashboard was discussed.
- Niagara County Community Health Stakeholder Meeting – September 12, 2022. Priorities reviewed and potential interventions and strategies to target focus areas identified.
- Catholic Health Ministry Services Board Meeting – November 17, 2022. The CHNA reports and CHIP for each of the hospitals were presented and approved by the board members.
- Catholic Health Board of Directors were informed of the Ministry Services Board’s approval of the 2022-2024 CHNA reports and CHIP during the December 1, 2022 Board of Directors meeting.
- All reports have been published electronically on the Catholic Health website (chsbuffalo.org) with hard copies available upon request from the Catholic Health Mission Integration office.

D. Community Health Improvement Plan

1. Identification of Priorities

Catholic Health 2022-2024 Prevention Agenda Priorities

1. Prevent Chronic Disease (addressing the disparity of poverty)
 - Healthy Eating and Food Security*
2. Promote Well-Being and Prevent Mental and Substance Use Disorders
 - Prevent opioid and other substance misuse and deaths*
3. Promote Healthy Women, Infants, and Children
 - Reduce infant mortality and morbidity**

*Aligns with Niagara County Prevention Agenda Priority Area

**Disparity and Health Equity Focus Priority

Description of the Community Engagement Process

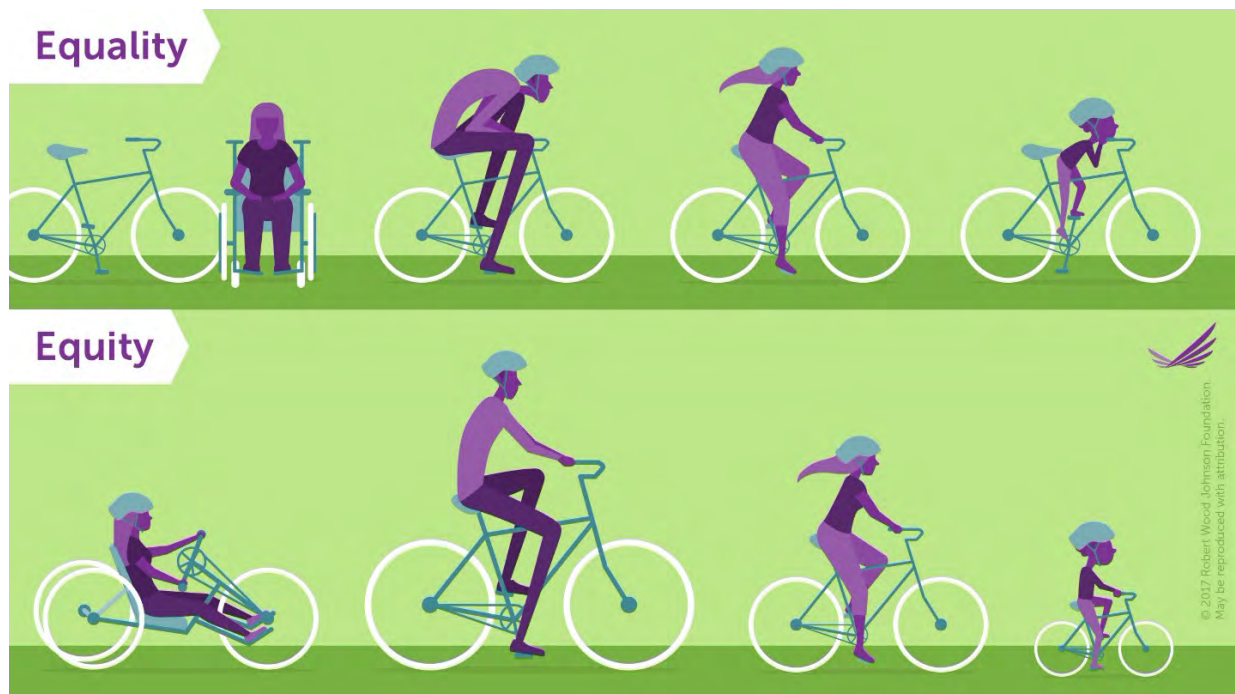
- Due to the ongoing global COVID-19 Pandemic and its impact on the community and county operations, the Niagara County Health Department announced it would continue to focus on the priorities that were identified in 2019-2021. The priorities to be continued include Prevent Chronic Disease and Promote Well-Being and Prevent Mental and Substance Use Disorders. Insights gained from the community survey results, provider survey and Health Equity Task Force Committee, as well as the community conversations, were reviewed by the CHA/CHIP Steering Committee. The recommendations were shared related to opportunities for updates for existing initiatives. The results continue to be shared with county and community leaders as the county works to support residents during this unprecedented time.
- From late March 2022 through mid-June 2022, residents of Niagara County were invited to submit their responses to the CHA/CHIP Steering Committee's 2022 Niagara County Community Health Needs Assessment. Catholic Health, the Niagara County Health Department, and other local hospital systems and community organizations sought input from persons who represented the broad interests of the community. A total of 2,329 surveys were completed with special intention to ensure representation from members of the medically underserved, low-income, and minority populations in the hospital's service areas or individuals and organizations serving or representing the interests of these populations. Survey promotion was done by flyer postings, word of mouth, email, and social media. All promotional materials included a QR code link to facilitate online survey completion. Paper surveys were also made available upon request in multiple settings and locations throughout the county.
- Five Community Focus Groups were held during late spring. A total of 61 participants offered feedback to 6 questions during face to face, socially distanced conversations. Questions asked for feedback on the current health status of community and what they would like to see improved.
- The Niagara Falls Health Equity Task Force of Niagara County, which is comprised of over 20 community organizations, was surveyed to assist in the assessment of community needs. The results of the 10 surveys returned supported the Niagara County decision to continue to focus on Prevention of Chronic Disease and Promotion of Well-Being and Prevention of Mental and Substance Use Disorders.
- Niagara County Health Care Providers (physician offices) were also surveyed using a three-question Survey

Monkey distributed via email. A total of 49 provider responses were received. The top three health concerns identified were Prevention of Chronic Disease and Promotion of Well-Being, Prevention of Mental and Substance Use Disorders, and Healthy Eating/Food Security.

Process and Criteria Used to Identify Priorities

- The CHA/CHIP Steering Committee is comprised of eighteen people representing eight organizations. The Committee collaborated to assess the input and responses from the Community Health Needs Assessment survey to understand the current priorities. The group was focused on identifying, validating, and defining significant health needs, issues, and concerns of Niagara County.
- After review of the Community Health Needs Assessment survey results, Community Focus Groups, Provider and Health Equity Task Force surveys, as well as the input of the Niagara County Health Department with their recommendation to continue to focus on existing priorities, Catholic Health leaders identified the following New York State Prevention Agenda Priorities for the 2022-2024 Catholic Health Community Health Improvement Plan.
- The priority areas selected include Prevent Chronic Disease and Promote Well-Being, Prevent Mental and Substance Use Disorders as well as Promote Healthy Women, Infants, and Children.
- Catholic Health and Niagara County are aligned on two priorities as required by the state. The two shared New York State Prevention Agenda Priorities for 2022-2024 are Prevent Chronic Disease and Prevent Mental and Substance Use Disorders.
- The Catholic Health Maternity Team identified exclusive breastfeeding as a Prevention Priority based on their review of health system and county data. This priority area also reflects a disparity in the exclusivity by ethnicity reported by the New York Prevention Agenda Dashboard. Catholic Health will identify strategies that focus on how to improve ethnicity disparities and promote health equity related to exclusive breastfeeding with a focus on implicit bias staff training.

Health Equity: Fair and Just Opportunity for All



Source: Robert Wood Johnson Foundation Achieving Health Equity

2. Work Plans - Objectives, Intervention Strategies, Disparity, Activities, Process Measures, and Time Frame Targets to Track Progress Through 2024

Priority #1 Prevent Chronic Disease – Healthy Eating and Food Security

FOCUS AREA 1: HEALTHY EATING AND FOOD SECURITY

GOAL

Goal 1.3 Increase food security

OBJECTIVES THROUGH 2024

Objective 1.13 Increase the percentage of adults with perceived food security (among all adults). (CH Erie County and CH Niagara County) *Common priority with Erie County Health Department and Niagara County Health Department.

Target 80.2%

Baseline 76.4% (Baseline Year 2016)

2019 (released 2/9/22) 80.6 *pre-COVID

Data Source BRFSS

Data Level State (by sex, age, race/ethnicity, income educational attainments, disability and region), county

% Food Insecurity by County

New York State 9% / Erie County 11% / Niagara County 12%

County Health Rankings 2022 (2019 data)

Year 1 (2022):	Year 2 (2023)	Year 3 (2024)
<p>1. Catholic Health Trinity Medical Offices with Epic will establish a baseline of % of patients who come through the clinic and have an assessment completed. (CH Erie County and CH Niagara County)</p> <p>2. D'Youville Food Pantry will serve 700 households in 2022. (CH Erie County)</p> <p>3. The Mercy Comprehensive Care Center (MCCC) will host monthly Food Bank Days. (CH Erie County)</p> <p>4. Maintain Free Food Giveaway Table at Mount St. Mary's Neighborhood Health Center offering clients variety of donated items received from other community sources. (CH Niagara County)</p>	<p>1. Catholic Health Trinity Medical Offices with Epic will establish a 2023 goal in quarter 1 of 2023 for the % of patients who visit clinic and are assessed using baseline as a starting point. (CH Erie County and CH Niagara County)</p> <p>2. D'Youville Food Pantry - Increase number of households served by 5%. (CH Erie County)</p> <p>3. MCCC will host monthly Food Bank Days. (CH Erie County)</p> <p>4. Maintain Free Food Giveaway Table at Mount St. Mary's Neighborhood Health Center offering clients variety of donated items received from other community sources. (CH Niagara County)</p>	<p>1. Catholic Health Trinity Medical Offices with Epic will continue to show positive trend in the % of patients who come through the clinic and have an assessment complete. (CH Erie County and CH Niagara County)</p> <p>2. D'Youville Food Pantry - Increase number of households served by 5%. (CH Erie County)</p> <p>3. MCCC will host monthly Food Bank Days. (CH Erie County)</p> <p>4. Maintain Free Food Giveaway Table at Mount St. Mary's Neighborhood Health Center offering clients variety of donated items received from other community sources. (CH Niagara County)</p>

DISPARITIES

Socioeconomic

INTERVENTIONS

Intervention 1.0.6

Screen for food insecurity, facilitate and actively support referrals. Catholic Health medical offices utilize Epic to guide and capture patient SDOH screening for Food Security in provider offices. If a need is identified there are referral options available by geographic location selected by patient. (Erie County and Niagara County)

Catholic Health will support D'Youville Food Pantry in planning and promotion of the site (Opened October 2021). (Erie County)

MCCC will continue to host Food Bank Days. (Erie County)

Mount St. Mary's Neighborhood Health Center will continue to maintain the Free Food Giveaway Table so patients are able to take from available options as desired. (Niagara County)

Evidence Based Intervention Reference:

Andermann A. Screening for social determinants of health in clinical care: moving from the margins to the mainstream. *Public Health Rev.* 2018 Jun 22;39:19. doi: 10.1186/s40985-018-0094-7. PMID: 29977645; PMCID: PMC6014006.

Andermann A; CLEAR Collaboration. Taking action on the social determinants of health in clinical practice: a framework for health professionals. *CMAJ.* 2016 Dec 6;188(17-18):E474-E483. doi: 10.1503/cmaj.160177. Epub 2016 Aug 8. PMID: 27503870; PMCID: PMC5135524.

Bertmann F, Rogomentich K, Belarmino EH, Niles MT. The Food Bank and Food Pantries Help Food Insecure Participants Maintain Fruit and Vegetable Intake During COVID-19. *Front Nutr.* 2021 Aug 6;8:673158. doi: 10.3389/fnut.2021.673158. PMID: 34422877; PMCID: PMC8378669.

Ahmad NSS, Sulaiman N, Sabri MF. Food Insecurity: Is It a Threat to University Students' Well-Being and Success? *Int J Environ Res Public Health.* 2021 May 25;18(11):5627. doi: 10.3390/ijerph18115627. PMID: 34070321; PMCID: PMC8197461.

FAMILY OF MEASURES

Input Measures:

1. Data entry by care team during client rooming. (Erie County and Niagara County)
2. Referral to D'Youville Food Pantry per Epic Referral options.(Erie County)
3. Food Bank Days scheduled by MCCC. (Erie County)
4. Manager and Care Team members collect food donations for Food Giveaway Table. (Niagara County)

Output measures:

1. Percent of clients screened for Food Security in CH Trinity Medical Offices with Epic. (Erie County and Niagara County)
2. Number of client served at D'Youville Food Pantry. (Erie County)
3. Number of Food Bank Days at MCCC. (Erie County)
4. Availability of food on Food Giveaway Table at Mount St. Mary's Neighborhood Health Center. (Niagara County)

Intermediate Outcome:

- 1. Clients screened and provided appropriate community resources identified as nearest to client per Epic. (Erie County)
- 2. Increase seen in number of clients served.
- 3. Food Bank Days maintained at MCCC. (Erie County)
- 4. Food Giveaway table is available and stocked for client selection. (Niagara County)

BY DECEMBER 2023, WE WILL HAVE COMPLETED

Year 1 (2022)	Year 2 (2023)	Year 3 (2024)
<ul style="list-style-type: none">1. Establish Baseline. Monitor % screenings documented for Food Security in CH Trinity Medical Offices with Epic. Education, outreach and data review provided as needed. (Erie County and Niagara County)2. Maintain the number of Food Bank Days at MCCC. (Erie County)3. Establish Baseline. Monitor monthly the number of households served by D’Youville Food Pantry. (Erie County)4. Maintain Food Giveaway table at the Mount St. Mary’s Neighborhood Health Center. (Niagara County)	<ul style="list-style-type: none">1. Quarter 1. Establish goal for 2023 % increase in screenings for Food Security. (Erie County and Niagara County)2. Maintain at least the same the number of Food Bank Days at MCCC as held in 2022. (Erie County)3. Achieve targets for number of households served by D’Youville Food Pantry. (Erie County)4. Maintain Food Giveaway table at the Mount St. Mary’s Neighborhood Health Center. (Niagara County)	<ul style="list-style-type: none">1. Monitor % increase in screenings for Food Security for positive trending. (Erie County and Niagara County)2. Maintain at least the same the number of Food Bank Days at MCCC as held in 2023. (Erie County)3. Achieve targets for number of households served by D’Youville Food Pantry. (Erie County)4. Maintain Food Giveaway table at the Mount St. Mary’s Neighborhood Health Center. (Niagara County)

Implementation Partner

Social Services

Partner Role(s) and Resources

Feedmore WNY. Role is to partner with Catholic Health to further both our missions and serve those in need of nutritious food in our most vulnerable Erie and Niagara County communities.

Erie County Health Department provides leadership and support in coordinating, promoting, educating and engaging in food distribution activities coordinated by the county as well as other local community organizations.

Niagara County Health Department provides leadership and support in coordinating, promoting, educating and engaging in food distribution activities coordinated by the county as well as other local community organizations.

Priority #2 Promote Well-Being and Prevent Mental and Substance Use Disorders

FOCUS AREA 1: PROMOTE WELL-BEING

GOAL

Goal 1.2 Facilitate supportive environments that promote respect and dignity for people of all ages

Goal 2.2 Prevent opioid and other substance misuse and deaths

OBJECTIVES THROUGH 2024

1.1.1 Increase New York State's Opportunity Scores by 5% to 59.2%. (CH Erie County and CH Niagara County)

Target 59.2%

Baseline 56.4%

Baseline Year 2017

Data Source Child Trends and Opportunity Nation with data from Opportunity Index, American Community Survey

Data Level - County

Erie County - 55.7

Niagara County - 52.1

*Note - Prevention Agenda suggests using Health Score however that is not found as a unique metric on the Prevention Agenda Dashboard. The Opportunity Index Score Data Views "i" definition indicates it compiles a dimension level Opportunity Score which includes dimensions of includes Economy, Education, Health and Community.

DISPARITIES

Socioeconomic

INTERVENTIONS

Intervention 1.2.4

1.2.4 Use thoughtful messaging on mental illness and substance use: Expert opinion in messaging about Mental, Emotional, and Behavioral Health humanize the experiences and struggles of person living with disorders; highlight structural barriers; avoid blaming people for the disorder or associate disorders with violence.

Evidence Based Intervention Reference:

Center for Substance Abuse Treatment (US). Trauma-Informed Care in Behavioral Health Services. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2014. (Treatment Improvement Protocol (TIP) Series, No. 57.) Chapter 1, Trauma-Informed Care: A Sociocultural Perspective. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK207195/>

Purkey E, Patel R, Phillips SP. Trauma-informed care: Better care for everyone. Can Fam Physician. 2018 Mar;64(3):170-172. PMID: 29540379; PMCID: PMC5851387.

FAMILY OF MEASURES

Short-term Outcome - Plan educational offerings with UB School of Social Work.

Intermediate-term Outcome - Evaluations of program offered indicate associates rated program relevance to their role as high.

BY DECEMBER 2023, WE WILL HAVE COMPLETED

Year 1 (2022)	Year 2 (2023)	Year 3 (2024)
1. Planning and scheduling of programs with the UB School of Social Work.	1. 100% of eligible associates will have completed the Trauma Informed Care program presented by the UB School of Social Work.	1. New Clearview and Pathways associates will be required to complete available trauma-informed care program or training as part of onboarding.

IMPLEMENTATION PARTNER

College

PARTNER ROLE(S) AND RESOURCES

University of Buffalo School of Social Work will plan and facilitate training program for the Clearview care team.

Erie County Health Department provides leadership and support in coordinating, promoting, educating and engaging in mental health related activities coordinated by the county as well as other local community organizations.

Niagara County Health Department provides leadership and support in coordinating, promoting, educating and engaging in mental health related activities coordinated by the county as well as other local community organizations.

FOCUS AREA 2: PREVENT MENTAL AND SUBSTANCE USER DISORDERS

GOAL

Goal 2.2 Prevent opioid overdose deaths

OBJECTIVES THROUGH 2024

2.2.2 Increase the age-adjusted rate of patients who received at least one Buprenorphine prescription for opioid use disorder by 20% to 415.6 per 100,000 population. (CH Erie County and CH Niagara County)

*Common priority with Erie County Health Department and Niagara County Health Department.

Target 415.6 per 100,000

Baseline 346.3 per 100,000

Baseline Year - 2017

Data Source - PMP Registry

Data Level - County

Erie County - 765.0 (2020)

Niagara County - 1374.4 (2020)

DISPARITIES

Health Care

INTERVENTIONS

Intervention 2.2.1

Increase availability of/access and linkages to medication-assisted treatment (MAT) including Buprenorphine.

Evidence Based Intervention Reference:

Mackey K, Veazie S, Anderson J, Bourne D, Peterson K. Barriers and Facilitators to the Use of Medications for Opioid Use Disorder: a Rapid Review. J Gen Intern Med. 2020 Dec;35(Suppl 3):954-963. doi: 10.1007/s11606-020-06257-4. Epub 2020 Nov 3. PMID: 33145687; PMCID: PMC7728943.

FAMILY OF MEASURES

Input Measure - Clearview Director plans and implements processes to support new regulation.

Output Measure - New processes operationalized to support referral prior to discharge and referral rate prior to discharged is tracked.

BY DECEMBER 2023, WE WILL HAVE COMPLETED

Year 1 (2022)	Year 2 (2023)	Year 3 (2024)
Develop and implement process to refer Clearview inpatients to Pathways Methadone outpatient program prior to discharge per new state regulation. Proposed state regulation 815s, Patient Rights regulation requires that inpatient program have agreement with a methadone provider to initiate use of methadone while patient is still inpatient.	Initiate at least 75% of Clearview inpatients that are referred to the Pathways Methadone outpatient program prior to discharge from Clearview residential program at St. Joseph (when opens) or Mount St. Mary's Clearview.	Increase to 80% are referred in 2024.

IMPLEMENTATION PARTNER

Hospital

PARTNER ROLE(S) AND RESOURCES

Pathways program will partner with Catholic Health Inpatient program to implement referral process.

Erie County Health Department provides leadership and support in coordinating, promoting, educating and engaging in mental health related activities coordinated by the county as well as other local community organizations.

Niagara County Health Department provides leadership and support in coordinating, promoting, educating and engaging in mental health related activities coordinated by the county as well as other local community organizations.

FOCUS AREA 2: PREVENT MENTAL AND SUBSTANCE USER DISORDERS

GOAL

Goal 2.2 Prevent opioid overdose deaths

OBJECTIVES THROUGH 2024

2.2.2 Increase the age-adjusted rate of patients who received at least one Buprenorphine prescription for opioid use disorder by 20% to 415.6 per 100,000 population. (CH Erie County)

*Common priority with Erie County Health Department.

Target 415.6 per 100,000

Baseline 346.3 per 100,000

Baseline Year - 2017

Data Source - PMP Registry

Data Level - County

Erie County - 765.0 (2020)

DISPARITIES

Health Care

INTERVENTIONS

Intervention 2.2.1

Increase availability of/access and linkages to medication-assisted treatment (MAT) including Buprenorphine.

Evidence Based Intervention Reference:

Mackey K, Veazie S, Anderson J, Bourne D, Peterson K. Barriers and Facilitators to the Use of Medications for Opioid Use Disorder: a Rapid Review. J Gen Intern Med. 2020 Dec;35(Suppl 3):954-963. doi: 10.1007/s11606-020-06257-4. Epub 2020 Nov 3. PMID: 33145687; PMCID: PMC7728943.

FAMILY OF MEASURES

Input Measure - CON granted for construction.

Short-term Outcome - initiation of build out of treatment beds at St. Joseph.

Long-term Outcome - completion of build out of treatment beds at St. Joseph by the end of 2023.

BY DECEMBER 2023, WE WILL HAVE COMPLETED

Year 1 (2022)	Year 2 (2023)	Year 3 (2024)
1. State approval for construction.	1. Catholic Health will increase the number of available treatment beds by 40 in the Erie/Niagara County region by the end of 2023.	1. New unit open and admitting patients.

IMPLEMENTATION PARTNER

Providers

PARTNER ROLE(S) AND RESOURCES

Providers and care team to support patients seeking MAT treatment from Catholic Health.

Erie County Health Department provides leadership and support in coordinating, promoting, educating and engaging in mental health related activities coordinated by the county as well as other local community organizations.

Niagara County Health Department provides leadership and support in coordinating, promoting, educating and engaging in mental health related activities coordinated by the county as well as other local community organizations.

Priority #3 Promote Healthy Women, Infants and Children

FOCUS AREA 1. MATERNAL & WOMEN'S HEALTH

GOAL

Goal 1.2: Reduce Maternal Mortality and Morbidity

OBJECTIVES THROUGH 2024

By December 31, 2024

Objective 2.1.1 Decrease the maternal mortality rate by 22% to 16.0 maternal deaths per 100,000 live births. (CH Erie County and CH Niagara County)

Target 16.0

Baseline 20.4

Baseline Year 2014-2016

Data Source NYS Vital Statistics

Data Level - State, Region, County

State 2019 19.3

Erie County 2019 -13.6 *(4)

Niagara County 2019 -31.8* (2)

*County rates unstable due to fewer than 10 deaths

Objective 2.1.2 Decrease the percentage of births that are preterm by 5% to 8.3 percent of live births. (CH Erie County and CH Niagara County)

Target 8.3

Baseline 8.7

Baseline Year 2015

Data Source Vital Statistics

Data Level State, Region, County

Erie County 2019 - 10.1

Niagara County 2019 - 9.8

DISPARITIES

Socioeconomic

INTERVENTIONS

Intervention 2.1.2

Increase the capacity and competencies of local maternal and infant home visiting programs

Evidence Based Intervention Reference:

chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.nursefamilypartnership.org/wp-content/uploads/2022/03/NFP-Research-Trials-and-Outcomes.pdf

Miller TR. Projected Outcomes of Nurse-Family Partnership Home Visitation During 1996-2013, USA. *Prev Sci.* 2015 Aug;16(6):765-77. doi: 10.1007/s11121-015-0572-9. PMID: 26076883; PMCID: PMC4512284.

<https://www.nursefamilypartnership.org/wp-content/uploads/2020/07/NFP-NSO-M3-Response.pdf>

FAMILY OF MEASURES

Input Measures -

1. Positions posted and filled with support of Catholic Health Human Resources.
2. Provider offices detailed by NFP team to ensure providers and staff are aware of program and how to refer clients.

Intermediate Outcome - Client data is reviewed and reported to Nurse Family Partnership national office to validate outcomes are consistent with national program.

BY DECEMBER 2023, WE WILL HAVE COMPLETED

Year 1 (2022)	Year 2 (2023)	Year 3 (2024)
<ol style="list-style-type: none">1. With support of Human Resources all Catholic Health - Nurse Family Partnership positions filled. Current 4.5 and budgeted for 5.5.2. Data reviewed and uploaded to national NFP as requested.	<ol style="list-style-type: none">1. Catholic Health - Nurse Family Partnership Enrollment at full capacity of 138 clients.2. Data reviewed and uploaded to national NFP as requested.	<ol style="list-style-type: none">1. Catholic Health - Nurse Family Partnership Staffing ratio will be at 1 RN:25 clients.2. Data reviewed and uploaded to national NFP as requested.3. Review county and state Maternal Mortality Rates.4. Review county and state Preterm Birth percentages.

IMPLEMENTATION PARTNER

New York State Department of Health, Buffalo Prenatal-Perinatal Network, Healthy Families

PARTNER ROLE(S) AND RESOURCES

New York State Department of Health - MCVEY Funding

Erie County Health Department provides leadership and support in coordinating, promoting, educating and engaging in perinatal health related activities coordinated by the county as well as other local community organizations.

Niagara County Health Department provides leadership and support in coordinating, promoting, educating and engaging in perinatal health related activities coordinated by the county as well as other local community organizations.

FOCUS AREA 2. PERINATAL AND INFANT HEALTH

GOAL

Goal 2.2: Increase breastfeeding

OBJECTIVES THROUGH 2024

Objective 2.2.1.0: Increase the percentage of infants who are exclusively breastfed in the hospital by 10% from 47.0% (2016) to 51.7% among all infants. (CH Erie County and CH Niagara County)

2024 Target

NYS All 51.7%

Hispanic 37.4%

Black 38.4%

Baseline 47.0

Baseline Year 2016

Data Source - Vital Statistics

Data Level - State, Region, County

2019 Report (most recent)

Erie County

All 45.4%

Hispanic 30.9%

Black 28.2%

Niagara County

All 45.8%

Hispanic 30.8%

Black 30.2%

2021 Catholic Health Overall

All - 40.9%

Hispanic - 29.8%

Black - 25.3%

Sisters of Charity

All - 39.7%

Hispanic - 28.7%

Black - 24.6%

Mercy Hospital

All - 44.2%

Hispanic - 33.3%

Black - 28.2%

Mount St. Mary's

All - 35.1%

Hispanic - 27.2%

Black - 28.1%

DISPARITIES

Race

All

Hispanic

Black, Non-Hispanic

INTERVENTIONS

Intervention 2.2.1: Increase access to professional support, peer support, and formal education to change behavior and outcomes.

Evidence Based Intervention Reference:

Hall WJ, Chapman MV, Lee KM, Merino YM, Thomas TW, Payne BK, Eng E, Day SH, Coyne-Beasley T. Implicit Racial/Ethnic Bias Among Health Care Professionals and Its Influence on Health Care Outcomes: A Systematic Review. *Am J Public Health*. 2015 Dec;105(12):e60-76. doi: 10.2105/AJPH.2015.302903. Epub 2015 Oct 15. PMID: 26469668; PMCID: PMC4638275.

Interventions targeting implicit attitudes among health care professionals are needed because implicit bias may contribute to health disparities for people of color.

March of Dimes Implicit Bias Training: Awareness to Action: Dismantling Bias in Maternal and Infant Healthcare™ <https://www.aha.org/march-dimes-implicit-bias-training>

Training alone won't lead to immediate improvements in racial and ethnic disparities, but it can provide health care providers with important insights to recognize and remedy implicit bias. These actions can result in improved patient-provider communication, overall patient experience and quality of care, and a culture shift across committed organizations towards the broader goal of achieving equity for all moms and babies.

FAMILY OF MEASURES

Input Measures

1. Develop and offer implicit bias training/education/care focus for care team/cultural sensitivity based on leadership identified needs in each facility.

Output Measures -

1. Number of programs offered.
2. Number of care team associates that participate in program offered at each facility.
3. Exclusive breastfeeding rates at each facility and overall.

BY DECEMBER 2023, WE WILL HAVE COMPLETED

Year 1 (2022)	Year 2 (2023)	Year 3 (2024)
<ol style="list-style-type: none">1. Research and develop implicit bias training strategy for each of the maternity units.2. Identify goals for exclusive breastfeeding by ethnicity.3. Review policies and procedures to ensure reflect unit's focus on cultural sensitivity related to expectations for advocacy and support of exclusive breastfeeding.3. Schedule implicit bias training activities for Year 2.	<ol style="list-style-type: none">1. Implicit bias training activities made available to all maternity staff.2. Program Activities, Dates, and Attendance Numbers tracked for each unit.	<ol style="list-style-type: none">1. Monitor exclusive breastfeeding rates by facility and overall for Catholic Health.

IMPLEMENTATION PARTNER

Hospital

PARTNER ROLE(S) AND RESOURCES

Hospital maternity leaders will collaborate with care team, education department and other local and national resources to develop program or identify presenters to invite to facilitate programs for care team and providers practicing at each facility.

Erie County Health Department provides leadership and support in coordinating, promoting, educating and engaging in perinatal health related activities coordinated by the county as well as other local community organizations.

Niagara County Health Department provides leadership and support in coordinating, promoting, educating and engaging in perinatal health related activities coordinated by the county as well as other local community organizations.

3. Maintaining Engagement, Tracking Progress and Mid-Course Corrections

Catholic Health will continue to be an active partner in the CHA/CHIP Steering Committee. The Committee will continue to be convened regularly by the Niagara County Health Department, at least annually. Catholic Health representatives are also engaged in a variety of local, regional, state, and national committees, as well as with organizations and other task force initiatives. Focuses for engagement include Prevention Agenda Priorities as well as other priority areas that are not specific to the 2022-2024 Community Health Improvement Plan but may be strategic initiatives to support the overall organization's mission and future. While the global pandemic and other recent organizational and community events have influenced many focuses, collectively they have strengthened the organization's commitment to its overall mission of revealing the healing love of Jesus to all.

Progress toward the goals identified in the 2022-2024 Community Health Improvement Plan will be reviewed and measured using a variety of resources. Catholic Health will leverage access to data from the system wide Epic electronic medical record system when possible. Ongoing input from the community, CHA/CHIP partners, as well as Catholic Health associates will also be used to validate interventions and progress. Catholic Health's Mission Integration team will collect data and submit updates via the New York State Health Commerce System. The need for mid-course corrections will be monitored and discussed over the next three years as part of the organization's ongoing prioritization of continuous quality improvement. Updates will be documented and submitted per the state's documentation process.

4. Dissemination of the Executive Summary and Community Health Improvement Plans

The 2022-2024 Catholic Health Needs Assessment and Community Health Improvement Plan for Niagara County will be made widely available to the community via the Catholic Health System website (chsbuffalo.org). Paper copies may be requested at no charge by contacting Catholic Health attention: Mission Integration 144 Genesee Street, Buffalo, NY 14203.

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Catholic Health
the right way to care...



Five-Star Rated
Long Term
Care facilities

**Joint
Commission
Certified**
for all hospitals

**2020 Healthcare
Company of the Year**
in Western New York

Five-Star Rating
McAuley Seton Home Care
for patient experience
(highest in WNY)



Catholic Health Locations



Hospitals & Emergency Care

Kenmore Mercy Hospital

2950 Elmwood Avenue
Kenmore, NY 14217
(716) 447-6100

Mercy Hospital of Buffalo

565 Abbott Road
Buffalo, NY 14220
(716) 826-7000

Mount St. Mary's Hospital

5300 Military Road
Lewiston, NY 14092
(716) 297-4800

Sisters of Charity Hospital

2157 Main Street
Buffalo, NY 14214
(716) 862-1000

Sisters of Charity Hospital, St. Joseph Campus

2605 Harlem Road
Cheektowaga, NY 14225
(716) 891-2400

Diagnostic & Testing Centers

Kenmore Medical Office Building

2914 Elmwood Avenue
Kenmore, NY 14217
(716) 447-6671

Mount St. Mary's Imaging & Lab Center

7300 Porter Road
Niagara Falls, NY 14304
(716) 298-8400

Mercy Ambulatory Care Center (MACC)

3669 Southwestern Boulevard
Orchard Park, NY 14127
(716) 662-0500

Mercy Diagnostic Center

94 Olean Street
East Aurora, NY 14052
(716) 655-2525

Mercy Diagnostic & Treatment Center

550 Orchard Park Road, Bldg. C
West Seneca, NY 14224
(716) 677-5000

Primary Care & OB/GYN Centers

Ken-Ton Family Care Center

2625 Delaware Avenue
Buffalo, NY 14216
(716) 447-6635

Mercy Comprehensive Care Center (MCCC)

397 Louisiana Street
Buffalo, NY 14204
(716) 847-6610

Mercy OB/GYN Center

515 Abbott Road, Suite 302
Buffalo, NY 14220
(716) 828-3520

Mount St. Mary's Center for Women

5300 Military Road
Lewiston, NY 14092
(716) 298-2224

Mount St. Mary's Primary Care Niagara Falls

5290 Military Road
Lewiston, NY 14092
(716) 298-3000

Mount St. Mary's Health Center Lockport

6000 Brockton Rd Suite 106
Lockport, NY 14094
(716) 342-3026

Mount St. Mary's Primary Care

1 Colomba Drive, Suite 2
Niagara Falls, NY 14305
(716) 298-8440

Mount St. Mary's Neighborhood Health Center

3101 9th Street
Niagara Falls, NY 14305
(716) 284-8917

M. Steven Piver, MD Center for Women's Health & Wellness
2121 Main Street, Suite 100
Buffalo, NY 14214
(716) 862-1965

OLV Family Care Center
227 Ridge Road
Lackawanna, NY 14218
(716) 822-5944

Sisters OB/GYN Center
2157 Main Street
Buffalo, NY 14214
(716) 862-1984

Sisters Health Center Caritas
2625 Harlem Rd Suite 160
Cheektowaga, NY 14225
(716) 862-2570

Sisters Health Center D'Youville
301 Connecticut St
Buffalo, NY 14213
(716) 862-1984

Springville OB/GYN Center
27 Franklin St
Springville, NY 14141
(716) 592-7400

St. Vincent Health Center
1500 Broadway Street
Buffalo, NY 14212
(716) 893-8550

Home & Community Based Care

McAuley Seton Home Care Erie County Office; Mercy Home Care of WNY; Nurse Family Partnership Program; Right Start Program; Health Home Program
144 Genesee Street
Buffalo, NY 14203
(716) 685-4870

McAuley Seton Home Care Niagara County Office
3571 Niagara Falls Blvd, Suite 10 (Meadowbrook Plaza)
North Tonawanda, NY 14120
(716) 433-2475

Catholic Health Infusion Pharmacy; Home Response Medical Alert System
6350 Transit Road
Depew NY, 14043
(716) 685-4870

LIFE – Living Independently for Elders (PACE Program)
OLV Senior Neighborhood
55 Melroy Avenue
Lackawanna, NY 14218
600 Doat Street
Buffalo, NY 14211
(716) 819-LIFE (5433)

St. Francis Park
5229 South Park Avenue
Hamburg, NY 14075
(716) 649-1205

Long-Term & Subacute Care

Father Baker Manor
6400 Powers Road
Orchard Park, NY 14127
(716) 667-0001

McAuley Residence
1503 Military Road
Kenmore, NY 14217
(716) 447-6600

Mercy Nursing Facility at OLV
55 Melroy Avenue
Lackawanna, NY 14218
(716) 819-5300

St. Catherine Labourè Health Care Center
2157 Main Street
Buffalo, NY 14214
(716) 862-1450

Administrative Services

Catholic Health Administrative & Regional Training Center (ARTC)
144 Genesee Street
Buffalo, NY 14203
(716) 923-9800



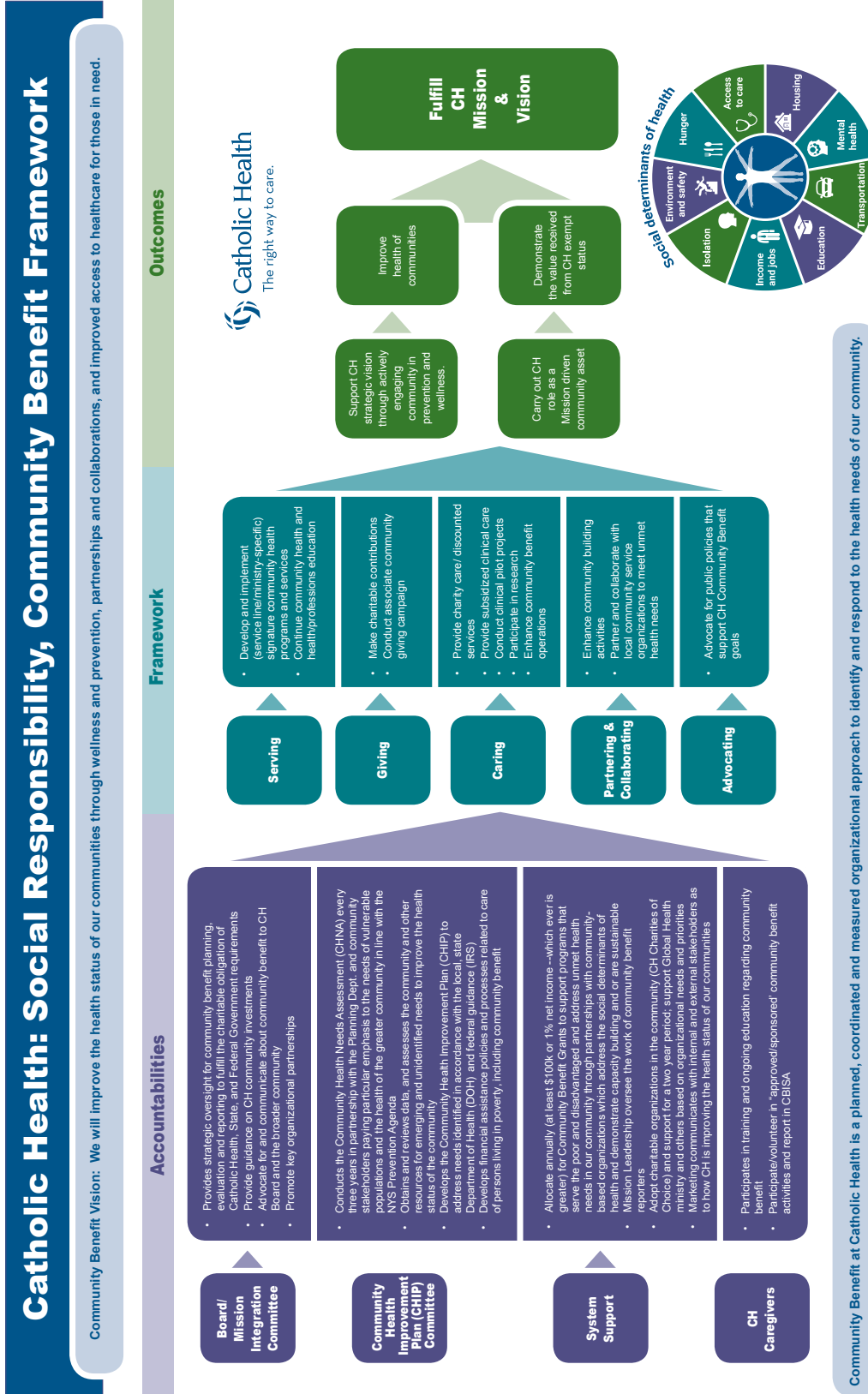
2022 Catholic Health Associate Community Involvement

- 11 Day Power Play
- Altus Managemnt / CRS Radiopharmaceutical
- American Red Cross
- Amherst Chamber of Commerce
- Antioch Missionary Baptist Church “
- Bar Association of Erie County, Volunteer Lawyers Project
- BSA (Troop 229G & Pack 816)
- Buffalo Prenatal Perinatal Network INC.
- Canopy of Neighbors
- Catholic Charities
- Catholic Daughters of the Americas
- Cheektowaga Senior Services
- Department of Family Services - Niagara Falls
- Diamonds in the Ruff Animal Rescue
- Diocese of Buffalo
- D’Youville College Governance Committee
- East Aurora Boys Volley Ball Boosters
- Ed Tech of WNY
- Empower
- Feed More WNY
- Fourteen Holy Helpers
- Franciscan Sisters of Saint Joseph
- Gerard Place
- Harvest House
- Health Association of NYS
- Healthcare Association of Western/Central NY
- Heart, Love and Soul Dining, Food Pantry, and Daybreak
- Holy Cross Church
- InTandem
- Juvenile Diabetes Research Foundation-JDRF
- Kappa Alpha Psi
- Lions Club of Hamburg
- Literacy Buffalo Niagara
- Little Portion Friary
- Make-A-Wish of WNY
- Masjid Al-Eiman and Islamic Cultural Association of WNY
- Nativity Miguel
- Near East and West Side (NEWS) Task Force
- Niagara Organizing Alliance for Hope
- Niagara River Region Chamber of Commerce
- Operation Home Front for Military Families
- Parish Nurse Ministries of NY, Inc
- Paws for Love, Erie County SPCA
- Pendleton Athletic Boosters Association
- People Inc
- Pinnacle Community Services
- Save the Michaels
- Sigma Pi Phi (Boule)
- Squeaky Wheel Film & Media Arts Center
- Stella Niagara Education Park
- St. Leo the Great RC Church
- St. Peter RC Church
- The Buffalo Zoo
- The Fellowship of God’s Word
- Trinidad Neighborhood Association
- Urban Christian Ministries
- Value Network Advisory Board
- Western New York Invention Convention
- WNY Church Unleashed/St. Paul’s Lutheran Church
- WNY Professional Nurses Association
- WNYNYON-NY Organization of Nursing Leaders
- Worldwide Community First Responders (WCFR)

Note: The above list reflects names of organizations associates reported involvement with as part of a 2022 survey coordinated by the Catholic Health Diversity, Equity and Inclusion Committee as well as organizations identified by associates and providers through the Catholic Health Community Benefit Occurrence Tracker system.



Catholic Health: Social Responsibility, Community Benefit Framework



September 3, 2019

Community Benefit at Catholic Health is a planned, coordinated and measured organizational approach to identify and respond to the health needs of our community.

Learn about
financial assistance at
Catholic Health



Healthcare Assistance Program

Catholic Health is proud of its mission
to provide care to all who need it.

Catholic Health's Healthcare Assistance Program (HAP) benefits in this brochure are effective January 1, 2007 and are subject to change. HAP does not apply to long-term and home care programs. Information in this brochure is also available online at chsbuffalo.org.



Catholic Health was founded in 1998 by four religious sponsors: the Diocese of Buffalo, the Daughters of Charity of St. Vincent dePaul, the Franciscan Sisters of St. Joseph, and the Sisters of Mercy.

Our Mission

We are called to reveal the healing love of Jesus to all.

Our 2025 Vision

Inspired by faith and committed to excellence, we will lead the transformation of healthcare in our communities.

We believe in the basic right to healthcare, with the responsibility to take care of the most vulnerable people in our community. Our Healthcare Assistance Program was created to make sure members of our community are able to receive the medical care they need regardless of what they can afford to pay.

Financial Aid Statement

If you do not have health insurance, or worry that you may not be able to pay in full for your care, we can help. Catholic Health hospitals provide healthcare assistance to patients based on their income and needs. We also may be able to help you with information/assistance with obtaining free or low-cost health coverage, or work with you to arrange a manageable payment plan.

It is important that you let us know if you will have trouble paying your bill. Federal and state laws require all hospitals to seek full payment for what they bill patients. This means we may have to turn unpaid or ignored bills over to a collection agency. We want to work with you to make sure this does not happen.

Catholic Health Healthcare Assistance

Call for more information about financial aid available at Catholic Health Hospitals, Primary Care, and Ambulatory Sites.

(716) 601-3600

Kenmore Mercy Hospital
2950 Elmwood Avenue, Kenmore, NY 14217

- Ken-Ton Family Care Center
- Kenmore Mercy Medical Office Building
- Kenmore Specialty Care Center

Mercy Hospital of Buffalo
565 Abbott Road, Buffalo, NY 14220

- Mercy Ambulatory Care Center
- Mercy Comprehensive Care Center
- Mercy Diagnostic Center - East Aurora
- Mercy Diagnostic & Treatment Center - West Seneca
- Mercy OB/GYN Center
- OLV Family Care Center
- Springville OB/GYN Center

Mount St. Mary's Hospital
5300 Military Road, Lewiston NY 14092

- Center for Women
- MSM Imaging and Laboratory Center
- MSM Neighborhood Health Center
- MSM Primary Care

Sisters of Charity Hospital
2157 Main Street, Buffalo NY 14214

- Sisters OB/GYN Center
- St. Vincent Health Center
- M. Steven Piver, MD Center for Women's Health and Wellness

Sisters, St. Joseph Campus
2605 Harlem Road, Cheektowaga, NY 14225



chsbuffalo.org



What is Catholic Health's Healthcare Assistance Program?

Healthcare Assistance is a program that allows people to receive medically necessary services at no charge or reduced charge, if they are eligible, at Catholic Health facilities. It is not an insurance program and does not replace benefits and payments that are, or could be, received from government programs that pay for care. Some of these programs include Medicaid and Exchange plans. HAP covers the cost of healthcare "forgiven" by Catholic Health hospitals and services for people who are unable (through private payment, employer payment, or public aid) to pay for healthcare services.

The HAP program does not apply to long-term and home care programs, however, other assistance is available. (For information on these other programs, refer to the Charity Care Policy located online at chsbuffalo.org).

Who Qualifies for Catholic Health Healthcare Assistance?

Catholic Health extends discounts to uninsured and underinsured patients who receive medically necessary services. Discount amounts are based on the Federal Poverty Level (FPL) guidelines and sliding income scales, and patients who qualify for financial assistance will not be financially responsible for more than the Medicaid discounted rate.

While Catholic Health primarily serves the five counties of Western New York, everyone in New York State who needs emergency services can receive care and get a discount if they do not have health insurance. Additionally, everyone in New York State can get a discount on non-emergency medically necessary services in Catholic Health Acute Care Facilities if they do not have health insurance. ***You will not be denied medically necessary care because you need financial assistance.*** You may apply for a discount regardless of immigration status.

What is NOT Covered?

Catholic Health's Healthcare Assistance Program (HAP) does have limits to what it will cover.

Please read the information below carefully.

- This program does NOT cover doctor fees even if that doctor's office is located at one of our hospitals. Only physician fees/services at our hospital-operated primary care sites listed in this brochure are covered.
- Cosmetic surgery is NOT covered.
- Charges for medical equipment and supplies are NOT covered.
- Physician services such as radiology, anesthesia, emergency room physicians, consulting visits, or any private provider are NOT covered. For these services you will need to make private/separate payment arrangements.

What Other Assistance is Available?

MEDICAID Medicaid is a program for New York State residents who cannot afford to pay for medical care. People may be covered by Medicaid if they have high medical bills, receive Supplemental Security Income (SSI), or if they meet certain income, resource, age or disability requirements.

For more information contact **1 (855) 355-5777** or go to nystateofhealth.ny.gov.

HEALTHCARE INSURANCE MARKETPLACE The Affordable Care Act (ACA) requires everyone legally living in the U.S. to have health insurance as of January 1, 2014. It also gives millions of individuals with too little or no insurance access to health plans at different cost levels. The law also provides financial assistance to those who qualify based on family size and income.

NEW YORK STATE OF HEALTH (Exchange Plans)

New York State of Health is a new Health Plan Marketplace. Individuals and families can use it to buy health insurance. It lets you shop and compare many health plans. It is the only place to get help lowering the cost of health insurance coverage.

For additional assistance call **1 (855) 355-5777** or go to nystateofhealth.ny.gov.

PRESCRIPTION DRUG COVERAGE

Elderly Pharmaceutical Insurance Coverage (EPIC) is a New York State sponsored prescription plan for senior citizens who need help paying for prescriptions. New York State residents can join EPIC if they are 65 or older and meet income requirements. EPIC members will be required to pay fees, deductibles, or co-payments. Seniors who receive full Medicaid benefits or have other prescription coverage that is better than EPIC are not eligible. EPIC will not pay for medication dispensed by a Catholic Health pharmacy.

To apply, call **1 (800) 332-3742**.



New York State Prevention Agenda 2019-2024: An Overview

Updated: April 27, 2021

The Prevention Agenda 2019-2024 is New York State's health improvement plan, the blueprint for state and local action to improve the health and well-being of all New Yorkers and promote health equity across populations who experience disparities. In partnership with more than 100 organizations across the state, the Prevention Agenda is updated by the New York State Public Health and Health Planning Council at the request of the Department of Health. This is the third cycle for this statewide initiative that started in 2008.

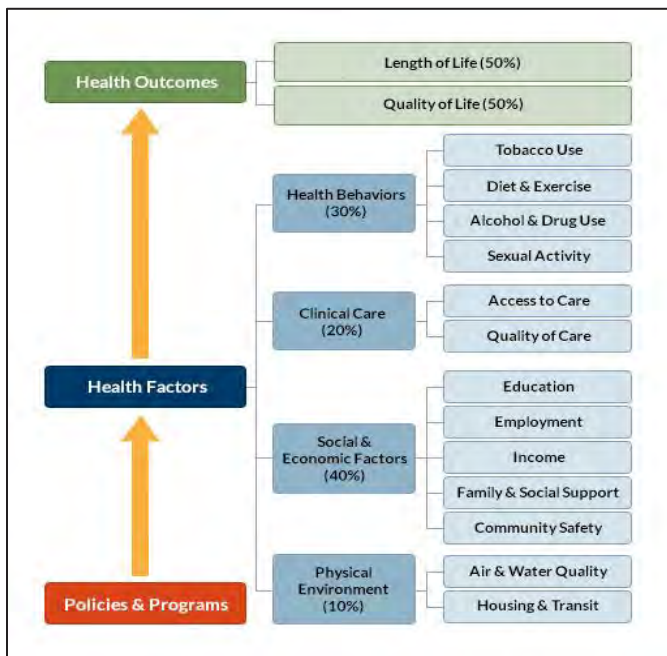
The vision of the Prevention Agenda for 2019-2024 is that New York is the Healthiest State in the Nation for People of All Ages. We are proud that, since 2008, New York has moved from the 28th to 10th healthiest state on America's Health Rankings,¹ demonstrating real progress toward achieving our vision.

The Prevention Agenda is based on a comprehensive statewide assessment of health status and health disparities, changing demographics, and the underlying causes of death and diseases. We used the County Health Rankings model (*Figure 1*) as the framework for understanding the modifiable determinants of health (without discounting the role of genetics).² New to this 2019-2024 cycle is the incorporation of a Health Across All Policies approach, initiated by New York State in 2017, which calls on all State agencies to identify and strengthen the ways that their policies and programs can have a positive impact on health. It embraces Healthy Aging to support the State's commitment to making New York the first age-friendly state. The 2019-2024 cycle also builds on the important experiences—both successes and challenges—of local

Prevention Agenda coalitions from across the state, who were formed in previous cycles of the Prevention Agenda to identify and address their local communities' health priorities.

The overarching strategy of the Prevention Agenda is to implement public health approaches that improve the health and well-being of entire populations and achieve health equity. This strategy includes an emphasis on social determinants of health – defined by Healthy People 2020 as the conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

Figure 1: County Health Rankings model © 2014 UWPHI



New York State Prevention Agenda 2019-2024: An Overview

continued

Such determinants include social and economic opportunities, education, safety in neighborhoods and communities, the quality of physical environments (e.g., the cleanliness of our water, food, air, and housing), and social interactions and relationships. Health behaviors and access to health care are also important (*Figure 2*).

Figure 2^{3,4}

Examples of Social Determinants

- Availability of resources to meet daily needs (e.g., safe housing and local food markets)
- Access to educational, economic and job opportunities
- Access to health care services
- Quality of education and job training
- Availability of community-based resources that support healthy lifestyles and opportunities for recreational and leisure-time activities
- Transportation options
- Public safety
- Social support
- Social norms and attitudes (e.g., discrimination, racism, and distrust of government)
- Exposure to crime, violence, and social disorder (e.g., presence of trash, lack of cooperation in a community)
- Socioeconomic conditions (e.g., concentrated poverty and the accompanying stressful conditions)
- Residential segregation
- Language and literacy
- Access to mass media and emerging technologies (e.g., cell phones, the Internet and social media)
- Culture
- Natural environment, such as green space (e.g., trees and grass) or weather (e.g., climate change)
- Built environment, such as buildings, sidewalks, bike lanes, and roads
- Worksites, schools, and recreational settings
- Housing and community design
- Exposure to toxic substances and other physical hazards
- Physical barriers, especially for people with disabilities
- Aesthetic elements (e.g., good lighting, trees, and benches)

The conditions in the environments where people live, work and play have a significant influence on health status and quality of life and are root causes of poor health and adverse outcomes. Changing these outcomes requires us to address collaboratively the social, economic, and physical conditions that contribute to poor health and well-being.

New York State Prevention Agenda 2019-2024: An Overview

continued

To achieve our vision, the Prevention Agenda calls for cross-sector partnerships (e.g., public health, health care, housing, education, and social services, etc.) to address social determinants of health across five key areas (*Figure 3*):

1. Economic Stability
2. Education
3. Social and Community Context
4. Health and Health Care
5. Neighborhood and Built Environment

especially by encouraging alignment of investments in primary prevention⁵ and using community and policy-level interventions to have widespread and lasting positive health impacts (*Figure 4*).

Figure 3: Social Determinants of Health



Figure 4: Social Ecological Model⁶



New York State Prevention Agenda 2019-2024: An Overview

continued

Process for Developing the Updated Prevention Agenda

Active participation and feedback from the Ad Hoc Committee to Lead the Prevention Agenda and stakeholders across the state were essential for updating the Prevention Agenda for 2019-2024. Many organizations were engaged in developing this updated plan, including local health departments, health care providers, community-based organizations, advocacy groups, academia, employers, schools, and businesses. These organizations reviewed the data on health status and emerging health issues, participated in finalizing the Cross-Cutting Principles (*Figure 5*), updated the list of priorities and developed priority-specific action plans.

Figure 5

Cross-Cutting Principles

To improve health outcomes, enable well-being, and promote equity across the lifespan, the Prevention Agenda:

- Focuses on addressing social determinants of health and reducing health disparities
- Incorporates a Health Across All Policies approach
- Emphasizes healthy aging across the lifespan
- Promotes community engagement and collaboration across sectors in the development and implementation of local plans
- Maximizes impact with evidence-based interventions for state and local action
- Advocates for increased investments in prevention from all sources
- Concentrates on primary and secondary prevention, rather than on health care design or reimbursement

The New York State Office of Mental Health and the New York State Office of Alcoholism and Substance Abuse Services have been core partners since 2013. New in this 2019-2024 cycle is the involvement of the New York State Office for the Aging and other State agencies in identifying specific interventions that they will implement to advance the Prevention Agenda in improving the health of individuals of all ages. These collaborations are the foundation of the 2019-2024 plan.

The Prevention Agenda 2019-2024 has five priorities with priority-specific action plans developed collaboratively with input from community stakeholders (*Figure 6*).

New York State Prevention Agenda 2019-2024: An Overview

continued

Figure 6: New York State Prevention Agenda 2019-2024 – Priority Areas, Focus Areas, and Goals

Priority Area: Prevent Chronic Diseases	Focus Area 1: Healthy Eating and Food Security
	Overarching Goal: Reduce obesity and the risk of chronic diseases
	Goal 1.1: Increase access to healthy and affordable foods and beverages
	Goal 1.2: Increase skills and knowledge to support healthy food and beverage choices
	Goal 1.3: Increase food security
	Focus Area 2: Physical Activity
	Overarching Goal: Reduce obesity and the risk of chronic diseases
	Goal 2.1: Improve community environments that support active transportation and recreational physical activity for people of all ages and abilities
	Goal 2.2: Promote school, child care, and worksite environments that support physical activity for people of all ages and abilities
	Goal 2.3: Increase access, for people of all ages and abilities, to safe indoor and/or outdoor places for physical activity
	Focus Area 3: Tobacco Prevention
	Goal 3.1: Prevent initiation of tobacco use, including combustible tobacco and electronic vaping products (electronic cigarettes and similar devices) by youth and young adults
	Goal 3.2: Promote tobacco use cessation, especially among populations disproportionately affected by tobacco use including: low SES; frequent mental distress/substance use disorder; LGBT; and disability
	Goal 3.3: Eliminate exposure to secondhand smoke and exposure to secondhand aerosol/emissions from electronic vapor products
	Focus Area 4: Preventive Care and Management
	Goal 4.1: Increase cancer screening rates for breast, cervical, and colorectal cancer
Goal 4.2: Increase early detection of cardiovascular disease, diabetes, prediabetes and obesity	
Goal 4.3: Promote the use of evidence-based care to manage chronic diseases	
Goal 4.4: Improve self-management skills for individuals with chronic conditions	
Priority Area: Promote a Healthy and Safe Environment	Focus Area 1: Injuries, Violence and Occupational Health
	Goal 1.1: Reduce falls among vulnerable populations
	Goal 1.2: Reduce violence by targeting prevention programs particularly to highest risk populations
	Goal 1.3: Reduce occupational injuries and illness
	Goal 1.4: Reduce traffic related injuries for pedestrians and bicyclists
	Focus Area 2: Outdoor Air Quality
	Goal 2.1: Reduce exposure to outdoor air pollutants
	Focus Area 3: Built and Indoor Environments
	Goal 3.1: Improve design and maintenance of the built environment to promote healthy lifestyles, sustainability, and adaptation to climate change
	Goal 3.2: Promote healthy home and school environments
	Focus Area 4: Water Quality
	Goal 4.1: Protect water sources and ensure quality drinking water
	Goal 4.2: Protect vulnerable waterbodies to reduce potential public health risks associated with exposure to recreational water
	Focus Area 5: Food and Consumer Products
	Goal 5.1: Raise awareness of the potential presence of chemical contaminants and promote strategies to reduce exposure
	Goal 5.2: Improve food safety management

New York State Prevention Agenda 2019-2024: An Overview

continued

Figure 6 Continued: New York State Prevention Agenda 2019-2024 – Priority Areas, Focus Areas, and Goals

Priority Area: Promote Healthy Women, Infants and Children	Focus Area 1: Maternal & Women’s Health
	Goal 1.1: Increase use of primary and preventive health care services by women of all ages, with a focus on women of reproductive age
	Goal 1.2: Reduce maternal mortality and morbidity
	Focus Area 2: Perinatal & Infant Health
	Goal 2.1: Reduce infant mortality and morbidity
	Goal 2.2: Increase breastfeeding
	Focus Area 3: Child & Adolescent Health
	Goal 3.1: Support and enhance children and adolescents’ social-emotional development and relationships
	Goal 3.2: Increase supports for children and youth with special health care needs
	Goal 3.3: Reduce dental caries among children
	Focus Area 4: Cross Cutting Healthy Women, Infants, & Children
	Goal 4.1: Reduce racial, ethnic, economic, and geographic disparities in maternal and child health outcomes and promote health equity for maternal and child health populations
Priority Area: Promote Well-Being and Prevent Mental and Substance Use Disorders	Focus Area 1: Promote Well-Being
	Goal 1.1: Strengthen opportunities to build well-being and resilience across the lifespan
	Goal 1.2: Facilitate supportive environments that promote respect and dignity for people of all ages
	Focus Area 2: Prevent Mental and Substance Use Disorders
	Goal 2.1: Prevent underage drinking and excessive alcohol consumption by adults
	Goal 2.2: Prevent opioid and other substance misuse and deaths
	Goal 2.3: Prevent and address adverse childhood experiences (ACEs)
	Goal 2.4: Reduce the prevalence of major depressive disorders
Goal 2.5: Prevent suicides	
Goal 2.6: Reduce the mortality gap between those living with serious mental illness and the general population	
Priority Area: Prevent Communicable Diseases	Focus Area 1: Vaccine-Preventable Diseases
	Goal 1.1: Improve vaccination rates
	Goal 1.2: Reduce vaccination coverage disparities
	Focus Area 2: Human Immunodeficiency Virus (HIV)
	Goal 2.1: Decrease HIV morbidity (new HIV diagnoses)
	Goal 2.2: Increase viral suppression
	Focus Area 3: Sexually Transmitted Infections (STIs)
	Goal 3.1: Reduce the annual rate of growth for STIs
	Focus Area 4: Hepatitis C Virus (HCV)
	Goal 4.1: Increase the number of persons treated for HCV
	Goal 4.2: Reduce the number of new HCV cases among people who inject drugs
	Focus Area 5: Antibiotic Resistance and Healthcare-Associated Infections
	Goal 5.1: Improve infection control in healthcare facilities
	Goal 5.2: Reduce infections caused by multidrug resistant organisms and C. difficile
	Goal 5.3: Reduce inappropriate antibiotic use

New York State Prevention Agenda 2019-2024: An Overview

continued

Each priority-specific action plan includes focus areas, goals, objectives, and measures for evidence-based interventions to track their impacts – including reductions in health disparities among racial, ethnic, and socioeconomic groups, age groups, and persons with disabilities. These objectives will be tracked on the New York State [Prevention Agenda Dashboard](#). The Prevention Agenda Action Plans provide communities with recommended evidence-based interventions, promising practices, and guidance to support implementation (e.g., by highlighting organizations that are well-positioned to take leading or supporting roles). The plans emphasize interventions that address social determinants of health, promote health equity across communities, and support healthy and active aging.

Implementing the five priority-specific action plans in the Prevention Agenda 2019-2024 will improve major cross-cutting health outcomes and reduce health disparities (*Figure 7*), as measured by the following indicators:

Figure 7: New York State Prevention Agenda 2019-2024 Cross-Cutting Objectives

Prevention Agenda (PA) Indicator	Baseline Year	Baseline	Prevention Agenda 2024 Objective	Percent Improvement from Baseline
Cross-Cutting Objectives to Improve Health Status and Reduce Health Disparities				
Percentage of premature deaths (before age 65 years)	2016	24	22.8	-5%
Difference in percentage (Black non-Hispanic and White non-Hispanic) of premature deaths	2016	18.2	17.3	-5%
Difference in percentage (Hispanic and White non-Hispanic) of premature deaths	2016	17.1	16.2	-5%
Preventable hospitalizations among adults, age-adjusted rate per 10,000	2016	121.1	115.0	-5%
Preventable hospitalizations among adults, difference in age-adjusted rates per 10,000 between Black non-Hispanics and White non-Hispanics	2016	98.9	94.0	-5%
Preventable hospitalizations among adults, difference in age-adjusted rates per 10,000 between Hispanics and White non-Hispanics	2016	25.2	23.9	-5%
Percentage of adults (aged 18-64) with health insurance	2016	91.4	97.0	+ 6%
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	2016	82.6	86.7	+ 5%

New York State Prevention Agenda 2019-2024: An Overview

continued

The Prevention Agenda aims to be a dynamic plan and a catalyst for action. Key to its success will be the alignment of efforts across State agencies, working with local governments and Prevention Agenda coalitions, and facilitating active community engagement. The Ad Hoc Committee will encourage its members and partners across the state to share effective strategies for improving community health. The Public Health and Health Planning Council will oversee implementation and use lessons learned to advance the Prevention Agenda.

References

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<https://www.americashealthrankings.org/about/methodology/our-reports>

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³ US Department of Health and Human Services. Healthy People 2020. Social Determinants of Health. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

⁴ Social Determinants of Health, 2nd Edition. M Marmot and R Wilkinson (eds). Oxford University Press, 2006.

⁵ NYS Department of Health Letter and Community Health Planning Guidance 2016-18

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/docs/letter_community_planning_guidance_2016_18.pdf

⁶ Social Ecological Model. Centers for Disease Control and Prevention web site. Updated January 28, 2013. <https://www.cdc.gov/cancer/nbccedp/sem.htm>. Accessed November 2, 2018.

Niagara County Health Indicators by Race/Ethnicity, 2017-2019

Health Indicator	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
Socio-Demographic Indicators					
Population (2018)	181,802	16,572	2,726	6,780	210,300
Percentage of population (2018)	86.4%	7.9%	1.3%	3.2%	100.0%
Median annual household income in US dollars (2015-2019) [~]	59,231	25,190	48,611*	36,993	55,522
Percentage of families below poverty (2015-2019) [~]	7.2%	34.5%	13.9%*	31.0%	9.8%
General Health Indicators					
Total mortality per 100,000 population, age-adjusted	781.1	1,070.9	272.1	703.6	802.2
Percentage of premature deaths (< 75 years)	38.8%	67.4%	66.7%	70.7%	41.3%
Years of potential life lost per 100,000 population, age-adjusted	6,574.2	13,320.5	3,119.8	6,833.5	7,241.4
Birth-Related Indicators					
Number of births per year (3 year average)	1,624	223	30	110	2,097
Percentage of births with early (1st trimester) prenatal care	73.4%	53.9%	69.7%	62.4%	69.6%
Percentage of births with adequate prenatal care (APNCU) [△]	72.7%	62.9%	73.6%	68.7%	71.1%
Percentage of premature births (< 37 weeks gestation - clinical estimate)	9.2%	12.0%	14.3%	7.8%	9.8%
Percentage of low birthweight births (< 2.5 kg)	7.8%	11.5%	7.7%*	6.9%	8.5%
Teen pregnancies per 1,000 females aged under 18 years	3.3	12.4	2.5*	8.1	5.3
Pregnancies per 1,000 females aged 15-44 years	63.4	103.8	45.4	92.2	73.4
Fertility per 1,000 females aged 15-44 years	52.3	61.5	47.5	74.2	56.3
Infant mortality per 1,000 live births	4.1	12.0*	11.0*	6.1*	5.4
Injury-Related Indicators					
Motor vehicle-related mortality per 100,000 population, age-adjusted	7.2	9.6*	0.0*	9.3*	7.2
Unintentional injury mortality per 100,000 population, age-adjusted	43.5	54.8	26.2*	51.8*	45.5
Unintentional injury hospitalizations per 10,000 population, age-adjusted	57.4	66.1	13.0*	39.8	59.0
Fall hospitalizations per 10,000 population, aged 65+ years	192.2	115.8	<u>s</u>	117.5	189.1
Poisoning hospitalizations per 10,000 population, age-adjusted	8.2	10.6	<u>s</u>	10.3	8.6

New York State Niagara County Health Indicators Report by Race/Ethnicity 2017-2019

continued

Opioid burden per 100,000 population	303.9	340.6	<u>s</u>	360.3	313.7
Suicide mortality per 100,000 population, age-adjusted	12.0	7.2*	0.0*	6.4*	11.2
Respiratory Disease Indicators					
Asthma hospitalizations per 10,000 population, age-adjusted	4.2	12.0	7.5*	6.4	5.2
Asthma hospitalizations per 10,000 population, aged 0-17 years	10.3	13.8	29.7*	12.8	11.7
Chronic lower respiratory disease mortality per 100,000 population, age-adjusted	51.3	38.9	0.0*	25.0*	50.5
Chronic lower respiratory disease hospitalizations per 10,000 population, age-adjusted	27.2	48.3	13.5*	22.3	28.9
Heart Disease and Stroke Indicators					
Diseases of the heart mortality per 100,000 population, age-adjusted	201.2	306.1	72.5*	184.1	208.5
Diseases of the heart hospitalizations per 10,000 population, age-adjusted	92.7	190.9	60.2	70.6	99.1
Cerebrovascular disease (stroke) mortality per 100,000 population, age-adjusted	33.5	52.6	26.2*	31.7*	34.1
Cerebrovascular disease (stroke) hospitalizations per 10,000 population, age-adjusted	23.2	52.7	11.4*	6.6*	24.7
Coronary heart disease mortality per 100,000 population, age-adjusted	125.9	208.3	53.4*	108.4	131.3
Coronary heart disease hospitalizations per 10,000 population, age-adjusted	28.8	42.1	16.6	21.9	30.2
Congestive heart failure mortality per 100,000 population, age-adjusted	40.3	30.0	8.4*	31.0*	39.7
Potentially preventable heart failure hospitalization rate per 10,000 population - Aged 18 years and older (2017-2018)	47.0	104.0	24.6	13.9	50.0
Diabetes Indicators					
Diabetes mortality per 100,000 population, age-adjusted	20.1	56.9	8.4*	25.1*	22.4
Diabetes (primary diagnosis) hospitalizations per 10,000 population, age-adjusted	17.9	55.0	8.4*	28.9	20.9
Diabetes (any diagnosis) hospitalizations per 10,000 population, age-adjusted	198.4	488.0	122.6	220.4	219.4
Potentially preventable diabetes short-term complications hospitalization rate per 10,000 population - Aged 18+ Years	6.4	23.5	<u>s</u>	9.0	7.6

New York State Niagara County Health Indicators Report by Race/Ethnicity 2017-2019

continued

Cancer Indicators					
Lung cancer incidence per 100,000 population, age-adjusted (2016-2018)	74.5	63.4	<u>s</u>	<u>s</u>	73.2
Colorectal cancer mortality per 100,000 population, age-adjusted (2016-2018)	11.3	13.7*	<u>s</u>	0.0*	11.4
Colorectal cancer incidence per 100,000 population, age-adjusted (2016-2018)	42.3	42.1	0.0*	<u>s</u>	42.0
Female breast cancer mortality per 100,000 female population, age-adjusted (2016-2018)	21.5	33.4*	<u>s</u>	0.0*	21.9
Female late stage breast cancer incidence per 100,000 female population, age-adjusted (2016-2018)	42.4	45.4	<u>s</u>	0.0*	41.4
Cervix uteri cancer mortality per 100,000 female population, age-adjusted (2016-2018)	1.1*	0.0*	0.0*	0.0*	1.1*
Cervical cancer incidence per 100,000 female population, age-adjusted (2016-2018)	10.1	0.0*	0.0*	0.0*	9.6

Symbol	Meaning
*	The rate or percentage is unstable. See the “About” page .
s	Data are suppressed. The data do not meet the criteria for confidentiality.
~	White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic.
NA	Data do not meet the criteria for statistical reliability or data quality, or data not available.
^	APNCU: Adequacy of Prenatal Care Utilization Index.
	In 2015, SPARCS transitioned from ICD-9-CM to ICD-10-CM diagnosis codes. These two are not comparable, so ED and hospitalization data for 2016-and-forward should not be compared with earlier data.
	The 2018 population estimates are also used to calculate rates for 2019 and 2020.

Questions or comments phinfo@health.ny.gov

Revised: March 2022

<https://www.health.ny.gov/statistics/community/minority/county/niagara.htm>

County Health Rankings and Roadmaps Compare Counties 2022 Rankings

The 2022 Rankings include deaths attributable to COVID-19 from 2020. See our FAQs for more information on COVID-specific data.

Compare Counties 2022 Rankings

	New York	Erie (ER), NY X	Niagara (NI), NY X
Health Outcomes			
Length of Life			
Premature Death	6,000	7,300	7,900
Quality of Life			
Poor or Fair Health**	16%	17%	17%
Poor Physical Health Days**	3.6	3.8	4.0
Poor Mental Health Days**	3.9	4.6	4.9
Low Birthweight	8%	9%	8%
Health Factors			
Health Behaviors			
Adult Smoking**	13%	18%	21%
Adult Obesity**	27%	32%	32%
Food Environment Index**	9.0	8.1	8.0
Physical Inactivity**	27%	25%	27%
Access to Exercise Opportunities	88%	93%	83%
Excessive Drinking**	19%	22%	21%
Alcohol-Impaired Driving Deaths	20%	22%	11%
Sexually Transmitted Infections**	640.6	598.2	449.2
Teen Births	13	16	18
Clinical Care			
Uninsured	6%	4%	4%
Primary Care Physicians	1,180:1	1,250:1	2,430:1
Dentists	1,190:1	1,170:1	1,950:1
Mental Health Providers	310:1	280:1	720:1
Preventable Hospital Stays	3,717	3,257	4,279
Mammography Screening	43%	44%	42%

County Health Rankings and Roadmaps Compare Counties 2022 Rankings

continued

	New York	Erie (ER), NY X	Niagara (NI), NY X
Flu Vaccinations	49%	46%	42%
Social & Economic Factors			
High School Completion	87%	92%	92%
Some College	70%	74%	69%
Unemployment**	10.0%	9.5%	10.4%
Children in Poverty	17%	18%	15%
Income Inequality	5.7	5.0	4.7
Children in Single-Parent Households	26%	29%	26%
Social Associations	8.1	10.1	10.0
Violent Crime**	379	428	395
Injury Deaths	53	71	71
Physical Environment			
Air Pollution - Particulate Matter	6.9	7.6	8.7
Drinking Water Violations		No	No
Severe Housing Problems	23%	15%	13%
Driving Alone to Work	52%	80%	83%
Long Commute - Driving Alone	39%	24%	32%

** Compare across states with caution

^ This measure should not be compared across states

Note: Blank values reflect unreliable or missing data



2022 Niagara County Community Health Survey

We need YOUR help!

You can make a difference in the health and wellbeing of your Niagara County community!

Please take a few minutes to complete this confidential survey, which asks NO personally-identifying questions that would lead back to you or any individual. The information will be used by Niagara County Department of Health, local hospitals and community organizations to identify health issues important to residents and ways to make the community a healthier place to live. Thank you!

1. Are you a Niagara County resident or a college student resident?
 - Yes
 - Yes (college student)
 - No

2. What is your ZIP code? _____

3. Do you have any kind of health care coverage or health insurance?
 - Yes
 - No
 - Used to, but don't have any now
 - Don't know

4. How do you pay for your health care? Please select all that apply.
 - I have health insurance through my employer or family member
 - I have Medicare
 - I use Medicaid
 - I am covered by the VA
 - I purchased health insurance through NYS of Health
 - I use Tribal health services/insurance
 - I pay cash
 - Other (please specify) _____

5. Where do you get most of your health information? Please select all that apply.
 - Doctor or Medical Provider
 - Library
 - Newspaper or Magazine
 - School Nurse/School Health Educator/Teacher
 - Computer or Internet
 - Social Media (Facebook, Twitter, etc.)
 - Television (TV) or Radio
 - Friends and Family
 - Health Insurance Company
 - Social Services
 - Head Start
 - WIC (Nutrition program for children and pregnant/nursing women)
 - Work Place
 - Other (please specify) _____

6. How often do you see your primary care provider (doctor)?

- Several times a year
- For a yearly check-up
- Only when I'm sick
- I don't go see my primary care provider
- I don't have a primary care provider

7. When you seek medical care, where do you usually go?

- Doctor's office
- Emergency room
- Urgent or Immediate care
- Health clinic
- Other (please specify) _____

8. Roughly how long ago did you last visit a hospital emergency department for yourself?

- Within the past year
- 1-3 years ago
- More than 3 years ago
- Never

9. Have you used virtual or telehealth services?

- Yes
- Yes, I would use it again
- Yes, I would **not** use it again
- No
- I don't know what virtual or telehealth is

10. In the past year, was there any time that you needed medical care but could not - or did not - get it? **If no, skip to question 13.**

- Yes
- No

11. What were the main reasons you did not get the medical care you needed? Please select all that apply.

- Cost - Without insurance, it was too expensive
- Cost - Even with insurance, it was too expensive
- Transportation -- It was too hard to get there
- Hours - They weren't open when I could get there
- I couldn't get time off from work
- I had no one to watch my children
- I couldn't get an appointment for a long time
- The medical staff didn't speak my language
- I couldn't get a referral to see a specialist
- I didn't know where to get the care I needed
- I decided not to go because I don't like going to doctors
- Some other reason (please explain) _____

12. Have you ever been told by a doctor or a nurse, that you had any of the following? Please select all that apply.

- Blood sugar problems, or diabetes
- High blood pressure, or hypertension
- High cholesterol
- Asthma, COPD, or other breathing issues
- Extreme overweight or obesity
- None of the above
- Other (please specify)

13. When you think about your own health or the health of your community, which of the following issues are you most concerned about? Please select **three** (3).

- Access to affordable health care
- Access to healthy food
- Alcohol and/or substance use or addiction
- Asthma/COPD
- Child abuse/neglect
- Cancer
- Dental health
- Diabetes
- Domestic violence
- Family planning (pregnancy prevention)
- Firearm-related injuries; homicide
- Food/water safety and quality
- Heart-related issues (high blood pressure, heart disease, or stroke)
- HIV/AIDs
- Immunization and/or prevention of infectious disease (such as flu)
- Injury prevention (falls, motor vehicle safety, etc.)
- Infectious diseases (hepatitis, TB.)
- Infant death
- Maternal health (care for moms during and after pregnancy)
- Mental health/depression/anxiety
- Nutrition/eating a healthy diet
- Overweight/obesity; weight management
- Physical activity; fitness and exercise
- Safety of neighborhood
- Sexually transmitted infections
- Stress management
- Suicide prevention
- Teenage pregnancy
- Tobacco/nicotine, quitting smoking
- Other (please specify) _____

14. How would you rate your overall physical health?

- Excellent Very good Good Fair Poor

15. How would you rate your overall mental or emotional health?

- Excellent Very good Good Fair Poor

16. In the past two years, have you experienced stress related to the COVID-19 pandemic?

- No
- Yes, mild stress such as occasional worries or minor stress related symptoms
- Yes, moderate stress with frequent worries, often feeling anxious, sad, or angry, or some trouble sleeping
- Yes, severe stress with constant worries of feeling extremely anxious, sad, or angry, or frequent trouble sleeping

17. Do you use any of the following nicotine products? Please select all that apply:

- I do not use nicotine products
- Cigarettes (e.g., Marlboro, Camel, Newport, Pall Mall, Winston, etc.)
- Electronic cigarettes
- Vape
- Smokeless tobacco (e.g., chewing tobacco, snuff, snus, etc.)
- Bidis/Kreteks
- Cigars, Cigarillos, Little Cigars, or Blunts
- Pipes
- Hookah/Water Pipe
- Other (please specify)

18. And how often, if ever, do you now smoke or use any nicotine product?

- Never
- Only occasionally
- Some days
- Most days
- All days

19. Are you currently using e-cigarettes to quit smoking?

- Yes
- No

20. During the past 30 days, what drugs, if any, have you used recreationally (not prescribed by a doctor). Please choose all that apply as your anonymity is GUARANTEED.

- I do not use any drugs recreationally
- Anxiety medication (Xanax, Activian, etc.)
- CBD products
- Codeine
- Demerol
- Dilaudid
- Fentanyl
- Heroin/Opium
- Hydrocodone
- Lortab
- Marijuana
- Methadone
- Morphine
- Norco
- Oxycodone
- Percocet
- Suboxone/Buprenorphine/Subsolve
- Vicodin

Other (please specify) _____

21. Have you administered Naloxone (Narcan) in the last year?

Yes

No

If yes, how many

22. Has Naloxone (Narcan) been administered to you?

Yes

No

If yes, how many

23. During the past 7 days, on how many days were you physically active for a total of at least thirty (30) minutes?

0 days

1 day

2 days

3 days

4 days

5 days

6 days

7 days

24. Compared to your own level of physical activity prior to COVID-19 pandemic, are you now more active, less active, or about the same as you were then?

More Active

Less Active

The Same

25. In the future, what might help you make healthy changes in your life? Please select **three** (3).

Access to free workshops/classes in your community on exercise, diet, stress reduction, chronic disease management, and/or quitting smoking

Being part of a support group that supports and encourages healthy habits (example: a local church, the YMCA)

Getting more information from social media, internet, newspapers and TV

Getting reminders when you are due for certain tests (such as annual doctor visits)

Having safe areas to exercise within your community

Having more affordable fresh fruits and vegetables or more healthy food choices at local convenience stores

Having the desire for me and my family to be healthier

Local hospitals and businesses offering free health screenings (blood pressure, etc.)

More recreational/sports opportunities that are appropriate to your age and skill level

Taking more time to talk with healthcare professionals (doctors, nurses, counselors, etc.)

Transportation

Other (please specify) _____

26. What keeps you from eating more fruits and vegetables every day? Please select all that apply.

I DO eat fresh fruits and vegetables

Time it takes to prepare

Cost

The stores near me don't sell fresh fruits and vegetables

I don't like to eat fruits and vegetables

My family does not like to eat fruits and vegetables

I am not sure how to cook/prepare fresh fruits and vegetables.

Other: _____

Community Survey 2022-2024 Niagara County Community Health Assessment
continued

27. What is your drink of choice on most days? Please select all that apply.

- Water
- Milk
- Pop or Soda
- Diet Pop or Soda
- Coffee (hot or iced)
- Tea (hot or iced)
- Other: _____
- 100% Juice
- Juice Drinks
- Energy Drinks (Monster, Amp, Red Bull)
- Sports Drinks (Gatorade, Powerade)
- Kool-Aid, Crystal Light, Other drink mixes
- Beer, Wine, Liquor

28. If you have alcoholic drinks, how often do you have 4 or more drinks in a row?

- Never
- Daily
- Weekly
- Monthly
- Holidays/special occasions
- Other (please specify) _____

29. We are interested in what you are proud of in your community. What are some existing services or characteristics in the community that support the health and well-being of your family.

30. We are also interested in what you believe we are lacking in our community. What are some existing services or characteristics in the community that we do not have that would support the health and well-being of your family.

The following questions will tell us a little more about who is completing this survey. All responses are voluntary and completely confidential.

31. What is your age?

- Under 18
- 18 – 29
- 30 – 39
- 40 – 49
- 50 – 59
- 60 – 69
- 70 and over

32. What is your current gender identity? Please select all that apply.

- Male
- Female
- Male to female transgender
- Female to male transgender
- Prefer not to answer
- Other (please specify) _____

33. Which one or more of the following would you say is your race? Please select all that apply.

- American Indian
- Hispanic/Latino
- Black/ African American
- White/Caucasian
- Asian/Pacific Islander
- Prefer not to answer
- Other (please specify) _____

Community Survey 2022-2024 Niagara County Community Health Assessment
continued

34. What is the highest grade or year of school you completed?

- Never attended school or only attended kindergarten
- Grades 1 through 8 (Elementary)
- Grades 9 through 11 (Some high school)
- Grade 12 or GED (High school graduate)
- Some college or technical school
- Associates Degree
- Bachelors Degree
- Masters Degree
- More than a Masters Degree

35. Are you currently...? Please select all that apply.

- Employed for wages
- Self-employed
- Out of work for 1 year or more
- Out of work for less than 1 year
- A Homemaker
- A Student
- Retired
- Unable to work
- Other (please specify) _____

36. Do you (or a household member) own or rent your home? Please select only **one** (1)

- Own
- Rent
- I live in a congregate setting (college dorm, assisted living, group home, barracks...)
- I do not have a stable address (homeless, stay temporarily with friends/family, live in a shelter, vehicle...)
- Other (please specify) _____

37. Your annual household income from all sources

- \$0 - \$10,000
- \$10,000 - \$15,000
- \$15,000 - \$20,000
- \$20,000 - \$25,000
- \$25,000 - \$35,000
- \$35,000 - \$50,000
- \$50,000 - \$75,000
- \$75,000+

38. How many people live in your home, including yourself? Please enter the total number for each age group? Children (17 & under)___ Adults (18 to 64) ___ Seniors (65 & over)_____

You have reached the end of the 2022-2024 Niagara County Community Health Survey. Thank you for your participation.

Niagara County Community Survey Distribution

Niagara County Community Health Assessment Survey Distribution - 2022			
Workgroup Contact	Organization for Distribution	Target/Recipient	Method of Distribution
Cathy Hoy-Patterson	NCDOH	NCDOH Trott Clinic	physical posting flyer
Cathy Hoy-Patterson	NCDOH	Trott Building	physical posting flyer
Stacy Knott	NCDOH	NCCC	physical posting flyer
Stacy Knott	NCDOH	NCCC Students in class	paper survey in class
Stacy Knott	NCDOH	NFHA	email survey link to contact list
Stacy Knott	NCDOH	Niagara Falls School District staff/faculty	email
	NCDOH	Diabetes Coalition	
Cathy Hoy-Patterson	NCDOH	Summit Pediatrics - 3 locations - Lewiston, Wheatfield, Pine Ave	physical posting flyer
Cathy Hoy-Patterson	NCDOH	Niagara Apothecary Pharmacy	physical posting flyer
Cathy Hoy-Patterson	NCDOH	CHANT	email
Cathy Hoy-Patterson	NCDOH	Lockport Family Focus Group	email
Stacy Knott	NCDOH	Human Services Association of Lockport	email survey link to contact list
Stacy Knott	NCDOH	CNOC-Children's Network of Care	email survey link to contact list
Cathy Hoy-Patterson	NCDOH	Healthy Moms, Healthy Babies	email
Cathy Hoy-Patterson	NCDOH	Mary Glenn, Asst. Dean of Community Engagement at UB	email
Cathy Hoy-Patterson	NCDOH	Dr. Jayaselvi Kolli's office	physical posting flyer
Cathy Hoy-Patterson	NCDOH	Connie Brown, United Way	She contacted me, and offered to send through United Way
Jean Roemer	NCDOH	Niagara Falls Library, Main St.	flyers
Cathy Hoy-Patterson	NCDOH	Danielle Ross, DePaul Organization	email- link and flyer
Cathy Hoy-Patterson	NCDOH	Urban Park Towers	paper surveys, (May 11th wellness fair)
Cathy Hoy-Patterson	NCDOH	Lewiston Senior Center	Flyer and paper survey
Cathy Hoy-Patterson	NCDOH	Walk to End Child Abuse @ Ice Pavilion NF on 4/28/22	Flyer and paper survey
Cathy Hoy-Patterson	NCDOH	WLVL radio	Public Service Announcement
Cathy Hoy-Patterson	NCDOH	Hoover's Dairy in Sanborn	Flyer
Cathy Hoy-Patterson	NCDOH	Barker Faith UMC	Email survey link + flyer

Niagara County Community Survey Distribution *continued*

Cathy Hoy-Patterson	NCDOH	Spallino Towers	survey link + flyer
Cathy Hoy-Patterson	NCDOH	Wrobel Towers	survey link + flyer
Cathy Hoy-Patterson	NCDOH	St. Johns AME Church	survey link + flyer
Cathy Hoy-Patterson	NCDOH	Duke Center- NF	Paper Surveys, email Survey link +Flyer
Cathy Hoy-Patterson	NCDOH	Calvin Richards Senior Center-Town of Niagara	Paper Surveys, email Survey link +Flyer
Cathy Hoy-Patterson	NCDOH	Wheatfield Community Center	Paper Surveys, email Survey link +Flyer
Cathy Hoy-Patterson	NCDOH	Empower Administrative Office	survey link + flyer
Cathy Hoy-Patterson	NCDOH	Notaro Chiropractic office-NF	survey link + flyer
Cathy Hoy-Patterson	NCDOH	Don McLean-Director of Family Med. Residency Program	Flyer and paper survey
Tracy/Cathy	NCDOH	Lockport Community Wellness Fair	Direct promotion - paper surveys + QR Code
Cathy Hoy-Patterson	NCDOH	Move for Mental Health Walk & Run event	Direct promotion - paper surveys + QR Code
Tracy/Cathy	NCDOH	Wheatfield Towers	Direct promotion - paper surveys + QR Code
Stacy/Cathy	NCDOH	Packet Landing, Lockport	Direct promotion - paper surveys
Jacquelyn Langdon	NCDOH	web viewers - NCDOH web page	addition of survey link to NCDOH website main page
Jacquelyn Langdon	NCDOH	Public - Social Media Users	Facebook post
Jacquelyn Langdon	NCDOH	Facebook followers	Physical Fitness Month post with CHA survey promo
Jacquelyn Langdon	NCDOH	NCDOH Staff Members	email survey link + flyer
Jacquelyn Langdon	NCDOH	NC Board of Health members	email - link and flyer
Jacquelyn Langdon	NCDOH	Bulletin Boards-Public-NCDOH posting contacts	email for printing by NCDOH posting contacts
Jacquelyn Langdon	NCDOH	Elderly Population Target - Office for the Aging	Darlene Dicarlio to get out to clients
Jackie Langdon	NCDOH	Low Income demographic - Jackie spoke with Sharon @ Urban Pk Towers	email printable survey to SharonM@oahsaffordable.com 433-0653.
Jacquelyn Langdon	NCDOH	Fire Dept./Chiefs	Confirmed with OEM that sent to all fire chiefs
Jacquelyn Langdon	NCDOH	All County Employees	email w/survey link
Jacquelyn Langdon	NCDOH	Public / News Readers	Press Release distributed to Media & PH Partners
Jacquelyn Langdon	NCDOH	Niagara County Medical Providers	email survey link to contact list
Jacquelyn Langdon	NCDOH	NC Schools Superintendents	email survey link to contact list - Tracy communicated

Niagara County Community Survey Distribution *continued*

Jacquelyn Langdon	NCDOH	Child Care Providers - Clearinghouse list of 100+	email survey link to contact list
Jacquelyn Langdon	NCDOH	Group Home Care Agencies	email survey link to contact list
Jacquelyn Langdon	NCDOH	Home Care Contacts	email survey link to contact list
Jacquelyn Langdon	NCDOH	Home Health Agencies	email survey link to contact list
Jacquelyn Langdon	NCDOH	Niagara County Jail - Jackie to reach out to J. Kolbe, D Engert or Jail Medical	Paper survey for inmates; link & flyer to Captain to share as well
Jacquelyn Langdon	NCDOH	Homeless Shelter Contacts List in Health Common	paper surveys
Jacquelyn Langdon	NCDOH	Employment & Training-Don Jablonski - traffic + distribution	Flyer for traffic areas & email to distributions
Jacquelyn Langdon	NCDOH	Food Pantries	left message for Pete Robinson-PB&J contact
Jacquelyn Langdon	NCDOH	Flyer at DMV Offices?	County Clerk's office to post DMV waiting areas
Jacquelyn Langdon	NCDOH	E & T clients	email flyer and printables to E&T director
Jacquelyn Langdon	NCDOH	Niagara University - Dwyer Arena and Gallagher Center	communication w/NU Athletics and Vanwagner Acct Exec
Jacquelyn Langdon	NCDOH	Municipal Town/City/Village Clerks	compiled email addresses for clerks - saved in Health Common
Jacquelyn Langdon	NCDOH	Health Equity Task Force	forwarded survey info & Qs for any distributions,etc.
Jacquelyn Langdon	NCDOH	Veterans (via County Veterans Services)	forwarded survey info/link to JGlatz/Vets Svcs
Meghan Lutz	NCDOH	Social Services Clients	paper surveys, flyers, and link on website
Heather Cruz		Libraries	Heather Cruz sent to her distribution
Cathy Hoy-Patterson	NCDOH	LCTV (cable TV) viewers (Gen Public)	Health Scope Taping aired April 11th
Tracy Fricano Chalmers	NCDOH	Tuscarora Nation - Health Center	Email survey/flyer; Offer to present with paper survey collection
Tracy Fricano Chalmers	NCDOH	Migrant Coalition	Email survey/flyer; Offer to present with paper survey collection
Tracy Fricano Chalmers	NCDOH	Migrant Owners - Contacts listing in the Health Common	Email survey/flyer; Offer to present with paper survey collection
Tracy Fricano Chalmers	NCDOH	List Srv-Pediatric, OB/GYN, EMS/Fire/Police, Schools, Functional Needs Providers, Companion Animal Response Partners	Email survey/flyer; Offer to present with paper survey collection

Niagara County Community Survey Distribution *continued*

Tracy Fricano Chalmers	NCDOH	Functional Access Needs Contact List (2019)	Email survey/flyer; Offer to present with paper survey collection
Tracy Fricano Chalmers	NCDOH	Code Enforcement Officer	Email survey/flyer
Tracy Fricano Chalmers	NCDOH	CERT	distribute flyer & link
Tracy Fricano Chalmers	NCDOH	OEM/Miranda to send to EMS Council	
Tracy Fricano Chalmers	NCDOH	OEM/Miranda to send to LEPC	
Tracy Fricano Chalmers	NCDOH	Medical Reserve Corps Volunteers	text notification/email survey to distribution list
Tracy Fricano Chalmers	NCDOH	WNY 211	email survey link for dissemination to additional contacts
Tracy Fricano Chalmers	NCDOH	Homeless Shelters, Food Pantries, Soup Kitchens	email survey link for dissemination to additional contacts
Tracy Fricano Chalmers (Leslie Bernad)	NCDOH	Laundromats	Phone calls for permission to post on bulletin boards
Tracy Fricano Chalmers	NCDOH	April 21 COVID /Flu Vax Clinic at Boces	Direct promotion - online/QR Code offered + paper surveys
Tracy Fricano Chalmers	NCDOH	April 27 COVID/Flu Vaccination Clinic at Niagara Wheatfield	Direct promotion - paper surveys
Tracy Fricano Chalmers	NCDOH	May 2 clinic at HEART, LOVE & SOUL (SOUP KITCHEN)	Direct promotion - paper surveys + QR Code
Tracy Fricano Chalmers	NCDOH	May 12, 2022 Royalton-Hartland COVID Vaccine Clinic	Direct promotion - paper surveys + QR Code
Tracy Fricano Chalmers	NCDOH	Spallino Towers	Direct promotion - paper surveys + QR Code
Tracy Fricano Chalmers	NCDOH	Citizens Academy	Direct promotion - paper surveys + QR Code
Tracy Fricano Chalmers	NCDOH	Wilson COVID Clinic	Direct promotion - paper surveys + QR Code
Tracy Fricano Chalmers	NCDOH	Heart, Love & Soul Clinic	Direct promotion - paper surveys + QR Code
Tracy Fricano Chalmers	NCDOH	Roy-Hart Clinic	Direct promotion - paper surveys + QR Code
Tracy Fricano Chalmers	NCDOH	BOCES Clinic	Direct promotion - paper surveys + QR Code
Mitch Tomtishen	NCDOH	General Public (within c/o NF & Lckpt)	Healthy Neighborhood packets/door-to-door,
Paul Dicky/EH Staff	NCDOH	April 9 Rabies Clinic visitors	Promotion of Online Survey to All
Paul Dicky/EH Staff	NCDOH	June 6 Rabies Clinic visitors	Promotion of Online Survey to All

Niagara County Community Survey Distribution *continued*

EH Staff/Leslie	NCDOH	Laundromats	Flyers posted on bulletin boards
EH Staff/Leslie	EH Staff/Leslie	Barbershops	Flyers posted on bulletin boards
	CWSN	Birth-8 Coalition	email link
Stacy Lampman	CWSN	Help Me Grow of WNY	email link
Stacy Lampman	CWSN	NU Niagara Quality Improvement Program	email link
Stacy Lampman	CWSN	Closing the Gap - NFMCC	email link
Stacy Lampman	CWSN	Niagara County Community Services Assoc.	email link
Stacy Lampman	CWSN	LEICC Members, including parents	email link
Stacy Lampman	CWSN	Early Childhood Direction Center > listserv	email link
Stacy Lampman	CWSN	School Districts/Committees on Preschool Ed	email link
Stacy Lampman	CWSN	Early Childhood Learning Collaborative	email link
Stacy Lampman	CWSN	WNY CoIIN	email link
Stacy Lampman	CWSN	IBEW Local 37 - Lisa's sister works there	email link
Stacy Lampman	CWSN	Families in CSHCNP	paper survey guidance/completion/collection
Stacy Lampman	CWSN	Parent Night of the LEICC	paper survey guidance/completion/collection
Robert Mowery	NFMCC	Aspire Dental Clinic 1705 Pine Ave, Niagara Falls, NY 14301	flyer
Robert Mowery	NFMCC	University Niagara Peds Dental 521 Buffalo Ave, Niagara Falls, NY 14303	flyer
Robert Mowery	NFMCC	USPS Employee Break Room 615 Main St Ste 1, Niagara Falls, NY 14301	flyer
Robert Mowery	NFMCC	F-Bites 616 Niagara St, Niagara Falls, NY 14303	flyer
Robert Mowery	NFMCC	Caribbean Flava 2501 Pine Ave, Niagara Falls, NY 14301	flyer
Robert Mowery	NFMCC	Dirty Bird Chicken N' Waffles 6004 Buffalo Ave, Niagara Falls, NY 14304	flyer
Lauri McCoy	Catholic Health	Alpha and Omega - NF women's group	table tents, flyer and giveaways
Lauri McCoy	Catholic Health	Speak Up (NF Domestic Violence group)	table tents, flyer and giveaways
Stacy Knott	Nursing	Montondos Seafood	flyer
Stacy Knott	Nursing	Gordie Harpers	flyer
Stacy Knott	Nursing	Bills Diner	Table tents and flyer
Stacy Knott	Nursing	NT library	flyer
Dan Hunter	MRC	Transit Car Wash Laundromat	flyer
Dennis Demmin	MRC	Holy Ghost Lutheran Church	flyer
Dennis Demmin	MRC	St Paul Lutheran Church	flyer
Dan and Linda Hunter	MRC	Super Cuts	flyer

Niagara County Community Survey Distribution *continued*

Dennis Demmin	MRC	Olympia Restaurant	flyer
Dan Hunter	MRC	33 Smoke Shop	flyer
David Bauer	MRC	All Saints Catholic Church	flyer
Dan Hunter	MRC	South Transit Firehall	flyer
Dan Hunter	MRC	Tater Cakes Bakery	flyer
Dan Hunter	MRC	Lockport Office Max	flyer
Dan Hunter	MRC	Lockport Library	flyer
Dan Hunter	MRC	Tops Lockport	flyer
Dan Hunter	MRC	Citizens Bank	flyer
Dan Hunter	MRC	Pendleton Town Hall	flyer
Dennis Demmin	MRC	Tops in NT	flyer
Dennis Demmin	MRC	Iron Locks Salon	flyer
David Bauer	MRC	Village Pharmacy in Lockport	flyer
David Bauer	MRC	Wrights Corners Laundromat	flyer
Stacy Knott	Nursing	Tops Gasport	flyer
Stacy Knott	Nursing	Durfs Tires	flyer
Stacy Knott	Nursing	Middleport Pharmacy	flyer
Stacy Knott	Nursing	Gasport Laundromat	flyer
Stacy Knott	Nursing	Middleport Laundromat	flyer
Stacy Knott	Nursing	Middleport Library	flyer
Stacy Knott	Nursing	Chops Bar and Grill	flyer
Stacy Knott	Nursing	Sunrise Cafe	flyer
Lauri McCoy	Catholic Health	Catholic Health Social Media	online
Lauri McCoy	Catholic Health	Catholic Health Associate Intranet-Screensaver post	Associate/corporate monitor screens
Bernadette Franjoine	Catholic Health	Mount St. Mary's Neighborhood Health Center	flyer, table tents, paper surveys
Bernadette Franjoine	Catholic Health	Niagara Falls Health Equity Task Force members/organizations	flyer

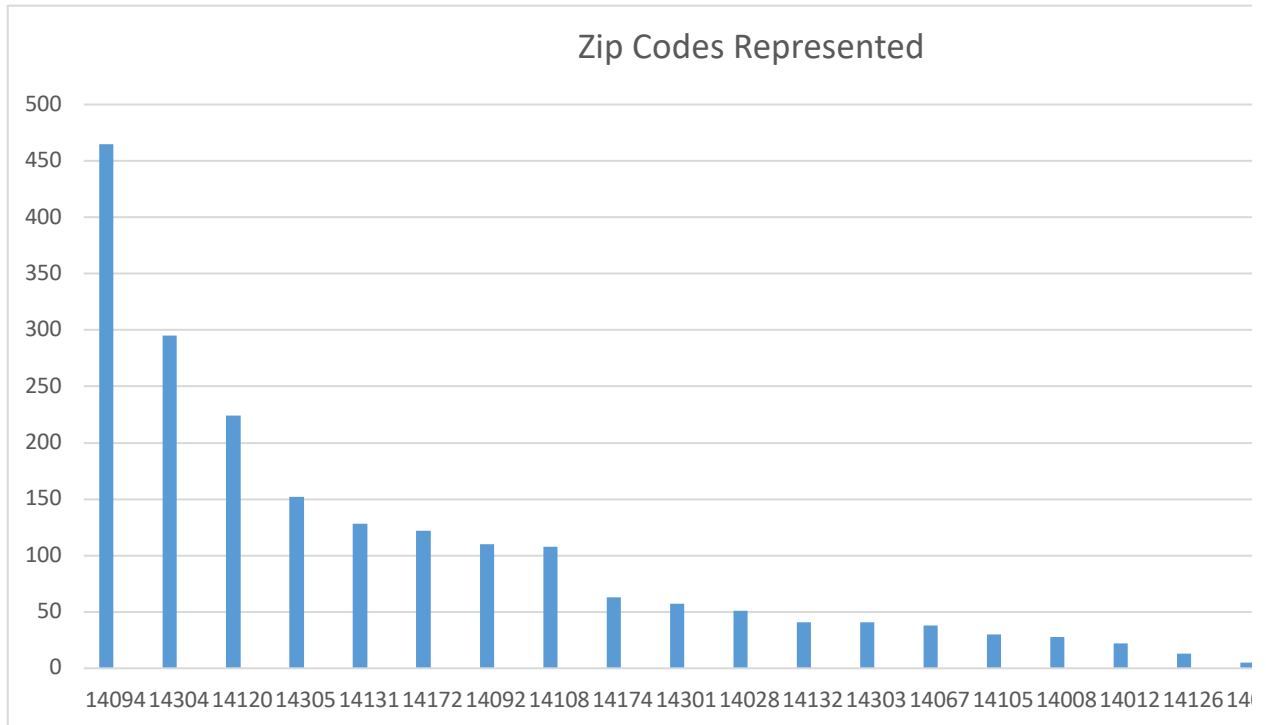
2022 Niagara County Community Needs Assessment Summary

2022 Niagara County Community Needs Assessment Summary

Survey Dates: **April 4, 2022 – June 30, 2022**

Total Completed Surveys: **2335**

Q2. Zip Code Review



Areas Represented by Zip Codes

Zip Code	Total Responses	Zip Code Area
14094	465	Lockport
14304	295	Niagara Falls
14120	224	North Tonawanda
14305	152	Niagara Falls
14131	128	Ransomville
14172	122	Wilson
14092	110	Lewiston, Stella Niagara
14108	108	Newfane
14174	63	Youngstown
14301	57	Niagara Falls

2022 Niagara County Community Needs Assessment Summary *continued*

14028	51	Burt
14132	41	Sanborn
14303	41	Niagara Falls
14067	38	Gasport
14105	30	Middleport
14008	28	Appleton
14012	22	Barker
14126	13	Olcott
14095	5	Lockport
14302	1	Niagara Falls

Q31. Age Review

Row Labels	Count of Age
Under 18	0
18 – 29	105
30 - 39	270
40 – 49	392
50 – 59	468
60 – 69	360
70 and over	166
Grand Total	1761

Q32. Gender Review

Row Labels	Count of Gender
Male	410
Female	1323
Male to female transgender	3
Female to male transgender	1
Prefer not to answer	22
Other	10
Grand Total	1769

Q33. Ethnicity

Race/Ethnicity, check all that apply:	Count of Race/Ethnicity
American Indian	25
Hispanic / Latino	16

2022 Niagara County Community Needs Assessment Summary *continued*

Black / African American	71
White / Caucasian	1556
Asian / Pacific Islander	14
Prefer not to answer	51
Other	33
Grand Total	1766

Q13. Top Health Concerns

When you think about your own health and the health of the community, which of the following issues are you most concerned about? Select three	Count of Responses
Access to affordable health care	852
Access to healthy food	340
Alcohol and/or substance abuse	246
Asthma/COPD	100
Child abuse/neglect	184
Cancer	486
Dental health	288
Diabetes	193
Domestic violence	101
Family planning (pregnancy prevention)	58
Firearm related injuries; homicide	70
Food/water safety and quality	161
Heart-related issues ((high blood pressure, heart disease, stroke)	414
HIV/AIDS	5
Immunization and/or prevention of infectious disease (such as the flu)	170
Injury prevention (falls, motor vehicle safety, etc.)	72
Infectious diseases (hepatitis, TB)	37
Infant death	16
Maternal health (care for moms during and after pregnancy)	74
Mental health/depression/anxiety	652
Nutrition/eating a healthy diet	243
Overweight/obesity, weight management	313
Physical activity; fitness and exercise	285
Safety of neighborhood	185
Sexually transmitted infections	24
Stress management	243
Suicide prevention	111
Teenage pregnancy	35
Tobacco/nicotine, quitting smoking	68
Other	70
Grand Total	1889

Overall Top Health Concerns Identified:

1. Access to affordable health care – 852
2. Mental health/depression - 652
3. Cancer – 486
4. Heart-related issues – 414
5. Access to healthy food – 340
6. Overweight/obesity; weight management – 313

Q14. Perceived Overall Physical Health

	Count of How would you rate your overall physical health?
Excellent	133
Very good	618
Good	835
Fair	263
Poor	38
Grand Total	1887

Q15. Perceived Overall Mental or Emotional Health

	Count of How would you rate your overall mental or emotional health?
Excellent	284
Very good	635
Good	619
Fair	300
Poor	58
Grand Total	1896

Q26. Fresh Fruits and Vegetables Review

	Count of What keeps you from eating more fresh fruits and vegetables every day?
I DO eat fruits and vegetables	1056
Cost	574
Time it takes to prepare	298
Other	106
I don't like to eat fruits and vegetables	83
The stores near me don't sell fresh fruits and vegetables	44
My family does not like to eat fruits and vegetables	44
I am not sure how to cook/prepare fresh fruits and vegetables	43
Grand Total	2248

Q25. Healthy Changes Review

	Count of What might help you make healthy changes in your life?
Having more affordable fresh fruits and vegetables or more healthy food choices at local convenience stores	739
Access to free workshops / classes in your community on exercise, diet, stress reduction, chronic disease management, and/or quitting smoking	649
Having safe areas to exercise in your community	618
Having the desire for me and my family to be healthier	611
More recreational/sports opportunities that are appropriate to your age and skill level	601
Taking more time to talk with healthcare professionals (doctors, nurses, counselors, etc.)	316

Being part of a support group that supports and encourages healthy habits (e.g. a local church, the YMCA)	301
Getting reminders for certain tests (such as an annual doctor visits)	266
Local hospitals and businesses offering free health screenings (blood pressure, etc.)	182
Getting more information from social media, internet, newspapers and TV	165
Other	119
Transportation	78
Grand Total	1760

Overall Top Responses:

1. Having more affordable fresh fruits and vegetables or more healthy food choices at local convenience stores – 739
2. Access to free workshops / classes in your community on exercise, diet, stress reduction, chronic disease management, and/or quitting smoking - 649
3. Having safe areas to exercise in your community – 618
4. Having the desire for me and my family to be healthier – 611
5. More recreational/sports opportunities that are appropriate to your age and skill level – 601

Niagara County Community Focus Group Notes Template

Focus Group Notes

Date of Focus Group	
Location	
Number of Participants	
Category of Group	
Moderator/Facilitator	
Asst. Moderator/Note Taker	

1. What does a healthy community mean to you?

Brief Summary/Key Points	Notable Quotes

2. What health problems are of biggest concern to you or your community?

Brief Summary/Key Points	Notable Quotes

3. What barriers exist or what type of resources would you, or your community, need to become healthier?

Brief Summary/Key Points	Notable Quotes

4. What is the best way for you to get health information?

Brief Summary/Key Points	Notable Quotes

5. What are some of the programs or services in your community that support the health and well-being of your family?

Brief Summary/Key Points	Notable Quotes

6. If you had the power, what would you do differently to improve the health of your community?

Brief Summary/Key Points	Notable Quotes

Niagara County Community Health Needs Assessment Focus Group Responses

Niagara County 2022 Community Health Needs Assessment Focus Groups

Spring 2022

**Five Focus Groups facilitated by members of the CHA/CHIP Steering Committee
61 Total Participants**

Summary

What does a healthy community mean to you?

Plenty of accessible health care services

Good primary care physicians

Families with health insurance whose needs are being met

Equal opportunity and access

What health problems are of biggest concern to you or your community?

Increased crime

Increased drug activity

Healthcare affordability

Transportation

Diabetes

Cancer

Mental Illness

Drugs and alcohol

Pollution

Few people working

More specialists so you don't have to wait as long for appointments

Can't afford copays

Crime/ unsafe walking at night

Type 1 Diabetes

Kidneys

Binge eating in children

Domestic Violence – including against young boys and men

What barriers exist or what type of resources would you, or your community, need to become healthier?

Continued need for more transportation

Insurance that is affordable.

Evening/weekend hours

Walk in appointment availability

Money

Food costs

Need more programs about eating right.

Need more interactive, creative things for kids

Physical activity for children

Need better and more Home Ed and Health Education classes for kids

People get labeled – obese etc and then are afraid to participate, ie kids

Niagara County Community Health Needs Assessment Focus Group Responses

continued

Lack of widespread media coverage
Safe playgrounds
Want more patrols like in Buffalo – police in cars, bikes

What is the best way for you to get health information?

Online

Doctor

Family/Friends

Community bulletin boards

What are some of the programs in your community that support the health and wellbeing of your family?

Dale Association

Farmers markets

Neighborhood Health Center

Senior Centers

Speak Up – Domestic Violence Group.

Heart and Soul

Outpatient behavioral health

Horizon Health

Health Home

If you had the power, what would you do differently to improve the health of your community?

Mental Health programs – outpatient programs and support groups

Get people outside and kids outside instead of electronics

Affordable dentists for everyone Safe places to exercise – in gyms and outdoor spaces

Safe houses for women and babies – victims of Domestic Violence

Make it easier for those with limited income – affordable insurance

Build housing for battered women and children – provide them with food and transportation

Programs – inclusive for children, especially obese children, so can get comfortable with movement and exercise

Need more for the kids to do – be active, music lessons, dance classes, crafts

Offer kids chance to learn a trade

Create an agency that plan community events

- Noted across multiple questions

- Noted on 3 or more focus groups

Niagara Falls Health Equity Task Force Survey and Summary

Niagara Falls Health Equity Task Force Survey

Your input as a member of the Task Force is requested.

The health department, hospitals and community organizations are currently seeking feedback to assist in identifying the Niagara County priorities and strategies to be included in the 2022-2024 Community Health Improvement Plan. For additional information on the Community Health Needs Assessment process please visit https://www.health.ny.gov/prevention/prevention_agenda/2019-2024/

All responses are confidential.

SURVEYS SHOULD BE RETURNED BY June 3rd, 2022.

Question Title

* 1. In the following list, what do you think are the **three** most important health problems in our Niagara community? *(Those problems which have the greatest impact on overall community health.)*

- Healthy Eating and Food Security
- Physical Activity
- Tobacco Prevention
- Chronic Disease and Preventive Care and Management
- Injuries, Violence, and Occupational Health
- Outdoor Air Quality
- Built and Indoor Environments
- Water Quality
- Food and Consumer Products
- Maternal and Women's Health
- Perinatal and Infant Health
- Child and Adolescent Health
- Cross Cutting Health Women, Infants and Children
- Promote Well-Being
- Prevent Mental and Substance Use Disorders
- Vaccine Preventable Diseases
- Human Immunodeficiency Virus (HIV)
- Sexually Transmitted Infections (STIs)
- Hepatitis C Virus (HCV)
- Antibiotic Resistance and Healthcare-Associated Infections

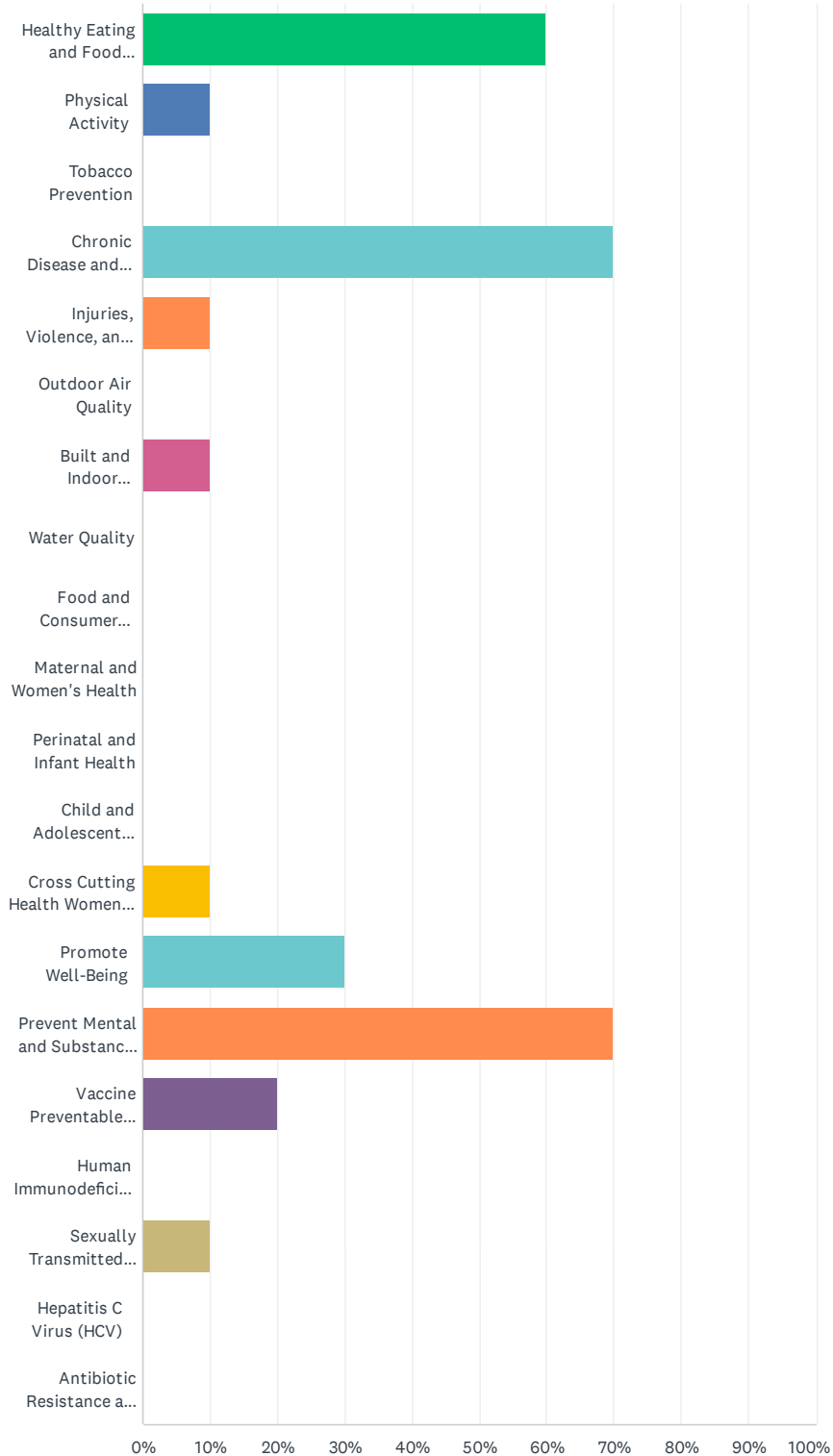
Question Title

2. If you had the power, what would you do differently to improve the health of our community?

Niagara Falls Health Equity Task Force Responses

Q1 In the following list, what do you think are the three most important health problems in our Niagara community? (Those problems which have the greatest impact on overall community health.)

Answered: 10 Skipped: 0



Niagara Falls Health Equity Task Force Responses *continued*

ANSWER CHOICES	RESPONSES	
Healthy Eating and Food Security	60.00%	6
Physical Activity	10.00%	1
Tobacco Prevention	0.00%	0
Chronic Disease and Preventive Care and Management	70.00%	7
Injuries, Violence, and Occupational Health	10.00%	1
Outdoor Air Quality	0.00%	0
Built and Indoor Environments	10.00%	1
Water Quality	0.00%	0
Food and Consumer Products	0.00%	0
Maternal and Women's Health	0.00%	0
Perinatal and Infant Health	0.00%	0
Child and Adolescent Health	0.00%	0
Cross Cutting Health Women, Infants and Children	10.00%	1
Promote Well-Being	30.00%	3
Prevent Mental and Substance Use Disorders	70.00%	7
Vaccine Preventable Diseases	20.00%	2
Human Immunodeficiency Virus (HIV)	0.00%	0
Sexually Transmitted Infections (STIs)	10.00%	1
Hepatitis C Virus (HCV)	0.00%	0
Antibiotic Resistance and Healthcare-Associated Infections	0.00%	0
Total Respondents: 10		

Q2 If you had the power, what would you do differently to improve the health of our community?

Answered: 9 Skipped: 1

#	RESPONSES	DATE
1	Provide more funding and programming	5/24/2022 11:42 AM
2	We need additional low income housing, more funding for wraparound services for high risk individuals and families, and to improve economic security. Being poor is very hazardous to health.	5/19/2022 2:27 PM
3	payment assistance/ grants to help incentive health education for individuals	5/19/2022 9:36 AM
4	Utilize the Community Health Center of Niagara Falls more!	5/18/2022 5:19 PM
5	Expand access to primary health care and health education. The grouping of violence with occupational health prompted me to select food insecurity as the third major concern. I may have otherwise selected violence, especially gun violence, as it is a major public health concern in the community.	5/18/2022 4:14 PM
6	Equitable opportunities for affordable health care (better supports and services for people in low income households)	5/18/2022 3:32 PM
7	Good health happens when people's basic needs are addressed: housing, income, safety/security, and food	5/18/2022 3:28 PM
8	Never legalize drugs like marajuana.	5/18/2022 3:27 PM
9	More public transportation in the eastern NC communities.	5/18/2022 3:22 PM

Niagara County Health Care Provider Survey

The Niagara County Health Department, hospitals and community organizations in our county are in the process of facilitating the 2022-2024 Community Health Needs Assessment (CHNA) and the Community Health Improvement Plan (CHIP). The results of the assessment will guide the development of the CHIP which will include the focuses, programs and initiatives that will be reported on for the next 3 years. As a healthcare provider in Niagara County your input is valuable to this effort.

All responses are confidential. No individuals or organizations will be specifically identified in the CHNA or CHIP documents that will be compiled for reporting.

Your opinion is important. PLEASE RETURN BY MAY 20, 2022.

1. In the following list, what do you think are the three most important health problems in our Niagara community? *(Those problems which have the greatest impact on overall community health.)*

Healthy Eating and Food Security
Physical Activity
Tobacco Prevention
Preventative Care and Management
Injuries, Violence and Occupational Health
Outdoor Air Quality
Built and Indoor Environments
Water Quality
Food and Consumer Products
Maternal and Women's Health
Perinatal and Infant Health
Child and Adolescent Health
Cross Cutting Healthy Women, Infants, and Children
Promote Well-Being
Prevent Mental and Substance Use Disorders
Vaccine-Preventable Diseases
Human Immunodeficiency Virus (HIV)
Sexually Transmitted Infections (STIs)
Hepatitis C Virus (HCV)
Antibiotic Resistance and Healthcare-Associated Infections

2. How would you rate our community as a "Healthy Community?"

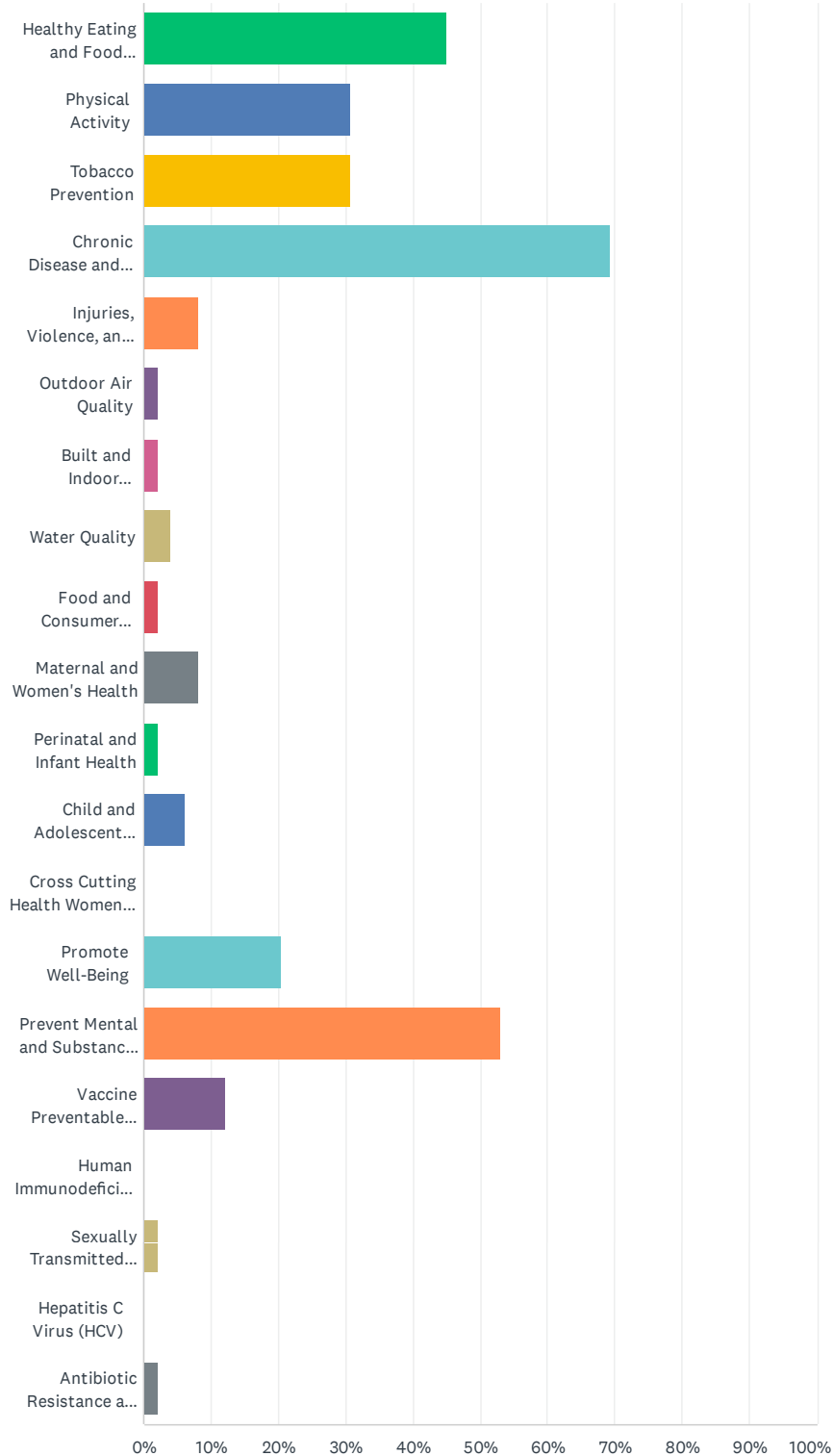
Very Healthy Healthy Somewhat Healthy Unhealthy Very Unhealthy

3. If you had the power, what would you do differently to improve the health of our community?

Niagara County Health Care Provider Responses

Q1 In the following list, what do you think are the three most important health problems in our Niagara community? (Those problems which have the greatest impact on overall community health.)

Answered: 49 Skipped: 0



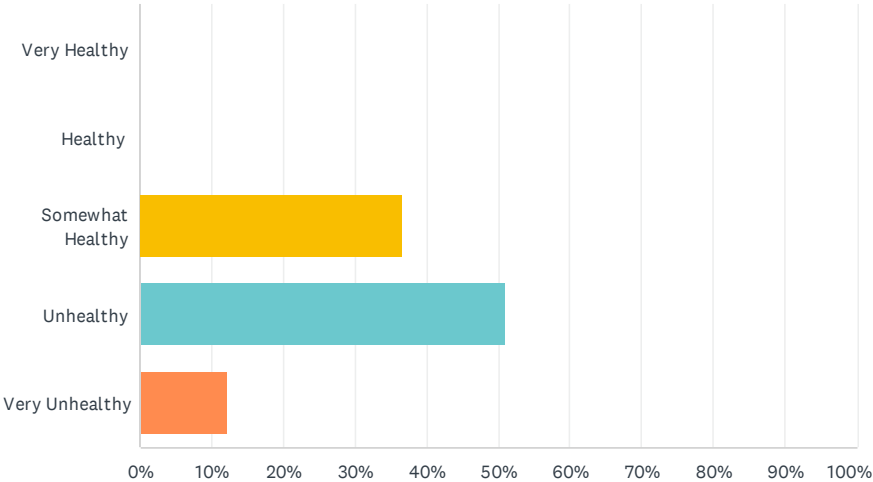
Niagara County Health Care Provider Responses *continued*

ANSWER CHOICES	RESPONSES	
Healthy Eating and Food Security	44.90%	22
Physical Activity	30.61%	15
Tobacco Prevention	30.61%	15
Chronic Disease and Preventive Care and Management	69.39%	34
Injuries, Violence, and Occupational Health	8.16%	4
Outdoor Air Quality	2.04%	1
Built and Indoor Environments	2.04%	1
Water Quality	4.08%	2
Food and Consumer Products	2.04%	1
Maternal and Women's Health	8.16%	4
Perinatal and Infant Health	2.04%	1
Child and Adolescent Health	6.12%	3
Cross Cutting Health Women, Infants and Children	0.00%	0
Promote Well-Being	20.41%	10
Prevent Mental and Substance Use Disorders	53.06%	26
Vaccine Preventable Diseases	12.24%	6
Human Immunodeficiency Virus (HIV)	0.00%	0
Sexually Transmitted Infections (STIs)	2.04%	1
Hepatitis C Virus (HCV)	0.00%	0
Antibiotic Resistance and Healthcare-Associated Infections	2.04%	1
Total Respondents: 49		

Niagara County CHNA Provider Survey

Q2 How would you rate the health of our community?

Answered: 49 Skipped: 0



ANSWER CHOICES	RESPONSES	
Very Healthy	0.00%	0
Healthy	0.00%	0
Somewhat Healthy	36.73%	18
Unhealthy	51.02%	25
Very Unhealthy	12.24%	6
Total Respondents: 49		

Niagara County Health Care Provider Responses *continued*

Niagara County CHNA Provider Survey

Q3 If you had the power, what would you do differently to improve the health of our community?

Answered: 36 Skipped: 13

#	RESPONSES	DATE
1	Identify and implement strategies to facilitate attendance at medial and behavioral health appointments.	6/6/2022 2:47 PM
2	Do for to door health and quality of life assessments in low income and communities of Color.	6/6/2022 10:51 AM
3	better education to public on covid 19 related issues including use of vaccine, Evusheld and antiviral agents like Paxlovid	6/4/2022 10:24 AM
4	Geriatric health is not an option on this survey when it should be, and quite realistically the number one option, considering Niagara County has the largest aging population in New York State, and it is the largest population served.	6/2/2022 12:44 PM
5	provide free smoking cessation classes online	5/23/2022 2:08 PM
6	decrease the amount to pay for healthy food, ie, produce & increase the amount to pay for fast food	5/23/2022 2:06 PM
7	More community engagement via employers and local government	5/20/2022 10:49 AM
8	Bring back health and wellness education (home ec) in the school systems starting at grade levels through higher education. People don't seem to be able to take care of themselves these days, physically, mentally, economically, socially. Mental health and physical health go hand in hand and if one is off the other will be also and affects every aspect of one's life. Education needs to start at young age about potential disease processes, both mental and physical, recognizing these and long term consequences if not taken care of at early start. I realize covid has exacerbated this but issues have been prior to covid.	5/19/2022 5:47 PM
9	proide more local medical services	5/19/2022 10:34 AM
10	My dream has always been to have the healthiest population in the nation. I would love to make a healthy lifestyle in vogue. Get EVERYONE, including you, to eat better, more nutritious foods, exercise, and in general just care about themselves enough to actually take care of themselves.	5/19/2022 9:26 AM
11	Establish onsite/ in hospital detox and psychiatric services for adolescents and adults that work closely with outpatient & after hospital care services such as rehab programs, suboxone clinics, psychiatric care and counseling services. This patient population in particular waits for hours in the ENH ED while staff searches for an available inpatient bed for their need. Sometimes nearly 48 hours are spent waiting. This also takes away an available hospital bed to treat other patients in need, furthering the strain on our community healthcare system.	5/18/2022 7:07 PM
12	Encourage higher education. Make the higher education free or almost free to low income family. Encouraging working parents. So kids can learn from their parents.	5/18/2022 7:06 PM
13	Improve access to health care in our community	5/18/2022 6:59 PM
14	Implement mental health in patient for substance abuse	5/18/2022 1:32 PM
15	mental	5/18/2022 1:20 PM
16	Access to primary care must be expanded, particularly toward eastern side of the county. Expand hospital sub specialty services and outpatient specialist accessibility.	5/18/2022 1:07 PM
17	Increase social workers/case managers to help people who need to access the healthcare system, and help navigate the healthcare system. Ways to help people get to their appointments, get their medications, how to follow up and when, etc	5/18/2022 12:35 PM
18	Free preventative health incl screening, recommended tests/labs/exams, education like	5/18/2022 12:33 PM

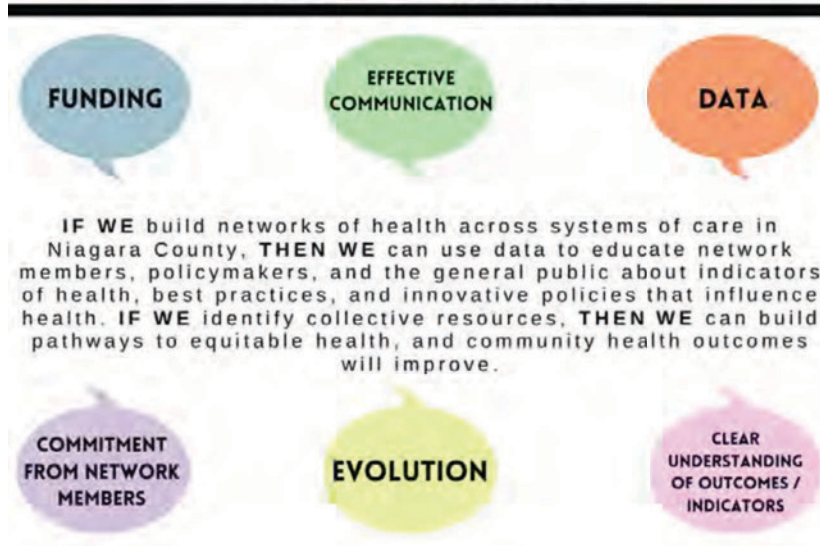
Niagara County Health Care Provider Responses *continued*

Niagara County CHNA Provider Survey

	nutrition, tobacco cessation/risk education, drug cessation/risk education Free or low-cost cost mental health services with appropriate access and follow up care Heather affordable food and activity programs, initiatives	
19	educate the public about the importance of healthy eating habits, exercise- modified to the physical limitations , cessation of smoking , stress control -- simple living style	5/18/2022 12:25 PM
20	More available primary care in the outlying areas	5/18/2022 12:25 PM
21	Provide community with general medical education classes for common medical conditions, importance of healthy lifestyle habits	5/18/2022 12:24 PM
22	Improve mental health and alcohol and drugs treatment services	5/18/2022 12:17 PM
23	Increase mental health resources specifically, mental health inpatient treatment programs	5/18/2022 12:12 PM
24	Improve access to mental health treatment and counseling. Promote activities to decrease the need for social media and social networking for our youth.	5/18/2022 12:02 PM
25	Diet and exercise programs subsidized	5/18/2022 12:02 PM
26	More community screenings for common chronic conditions	5/18/2022 11:32 AM
27	Need more avenues for mental health treatment via psychiatrists that serve the adolescent population.	5/18/2022 10:50 AM
28	start from scratch	5/18/2022 10:30 AM
29	Better hospital, more services able to this area as well radiology, labs, specialists there is not enough a lot falls on primary care. The hospital (ENH) needs a wake up big time	5/18/2022 10:15 AM
30	Better education on prevention and early detection education	5/16/2022 9:18 PM
31	More nurses Clean drinking water for all	5/16/2022 7:41 PM
32	universal access to health care	5/16/2022 6:40 PM
33	Abolish cigarettes and soda pop.	5/16/2022 5:29 PM
34	Education regarding health and mental well-being	5/16/2022 5:12 PM
35	Improve health education	5/16/2022 2:38 PM
36	Primary care initiative	5/16/2022 1:08 PM

Task Force Information

**NIAGARA FALLS
HEALTH EQUITY TASK FORCE
THEORY OF CHANGE:**





**Niagara County Department of Health and the
Niagara County Community Health Assessment
Workgroup NEED YOUR HELP!**

— — — — —

**Please join us in
completing the
confidential health
survey for Niagara
County residents**

Tell us what you think

It only takes a few minutes...

— — — — —

Help us discover the best ways to meet the
health needs of your community by filling out
this completely confidential survey.

The survey is available online through May 27, 2022

<https://www.surveymonkey.com/r/Niagara2022>





2022 Niagara County Community Health Assessment Survey



Help us discover the best ways to meet the health needs of your Niagara County community by completing this short confidential Community Health survey. Personally identifying information is not required. It only takes a few minutes. Tell us what you think! The survey is available online through May 27, 2022.

Scan QR Code:



Link: <https://www.surveymonkey.com/r/Niagara2022>

Other Marketing/Promotional Materials

Applying a Trauma-Informed Lens



Applying
a **Trauma-
Informed
Lens**

**FREE
Webinar**

**APPLYING A
TRAUMA-INFORMED LENS**
*Building a Culture of Resilience
in the Professions of Care*

**September 2, 2022
2:00 pm - 3:30 pm**

 **Catholic Health**
The right way to care.

Laurie M. Belanger, LCSWR

Laurie Belanger has been providing services to children, adults, and families in Western NY



for over 20 years. She is passionate about serving the needs of families coping with multi-layered, complicated concerns. Laurie has a strong interest and background in trauma, sensory development, chronic pain, adoption,

mental health and learning differences. She is an approved EMDR Consultant through EMDRIA, and is professionally trained in TBRI® (Trust Based Relational Interventions) by the Karyn Purvis Institute of Child Development. Laurie currently provides therapy in her private practice setting in East Amherst, NY. Her passion for sharing trauma education has led her, over the last several years, to provide presentations and training. Laurie has worked with school districts, foster care/adoption agencies, churches, mental health providers and has presented at professional conferences for a diverse group of disciplines. She is dedicated to providing cross-discipline education to the community so that those outside of the trauma therapy field might have access to the most up-to-date, evidence-based knowledge to add to their own area of service. Laurie has also worked at Christian Counseling Ministries and is an active member of her local Presbyterian Church.

Sisters of Charity Hospital Clinical Pastoral Education

Clinical Pastoral Education
ACPE Accredited Center

Rev. Christopher Okoli
Director of CPE

Dr. Yvonne Valeris
Certified Educator

Rev. Amir Tawadrous
Certified Educator Candidate

Nancy Koteris
Administrative Assistant III

Sisters of Charity Hospital Clinical Pastoral Education

2157 Main Street, Buffalo, NY 14214
(716) 862-1374

Speaker Contact

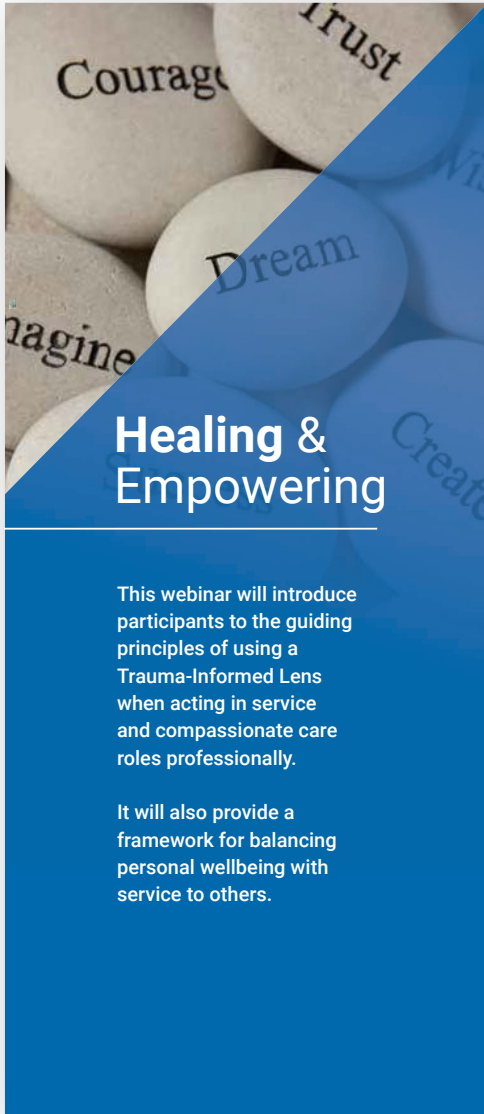
lbelanger@willowintegrative.com
(716) 276-9520
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Contact
Nancy Koteris
to register for this
FREE WEBINAR
(716) 862-1374
nkoteris@chsbuffalo.org

Once registered, the
Webex link will be
sent to you.

 **Catholic Health**

23211 rev 8/9/22



Healing & Empowering

This webinar will introduce participants to the guiding principles of using a Trauma-Informed Lens when acting in service and compassionate care roles professionally.

It will also provide a framework for balancing personal wellbeing with service to others.

Applying a Trauma-Informed Lens

Free Webinar • September 2, 2022

Objectives

Join us in learning practical material that will bring *color* and *light* to difficult times and circumstances.

- Participants will learn about various forms of trauma and the different ways in which they can impact physical experience, the processing of thoughts, and the experience of emotion.
- Participants will be able to identify practical and resilience building strategies for reducing the often harmful effects of holding compassionate space and witnessing patient trauma on a daily basis.
- Participants will be able to describe, discuss, and implement independently, in their own unique settings, trauma-informed strategies for supporting their own skills for delivering care.



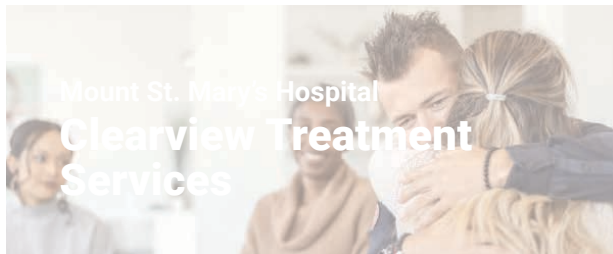
Register Today!
Call Nancy Koteras at
(716) 862-1374 or email
nkoteras@chsbuffalo.org

Once registered, the Webex link will be sent to you.



Other Marketing/Promotional Materials

Clearview Treatment Services



Clearview Treatment Services has been helping individuals with substance use disorders since 1986. Located in Mount St. Mary's Hospital in Lewiston, Clearview provides an inpatient rehabilitation program in a safe, comfortable environment. Our team takes a comprehensive approach to addiction management. We provide individualized, progressive care for individuals, including 24/7 nursing coverage, a medical director, a clinical psychologist, and a psychiatrist to address patient needs.

You don't have to overcome your addiction alone. Having the right type of support system around you is critical on your path to recovery. Our addiction management programs are tailored to the individual, with recommended treatment for your circumstances and the complexity of your condition. We respect the person living with addiction by treating patients with compassion and observing their privacy.

What to Expect from Clearview:

- Individualized care in a safe, comfortable short-term rehabilitative environment
- Individual and group counseling sessions focusing on medical and social needs, relapse prevention, addiction education, mental health and wellness, spirituality, infectious diseases, grief and loss, and self-help.
- Available therapies include Cognitive Behavioral Therapy (CBT) and Rational Emotive Behavior Therapy (REBT).
- Gender-specific treatment and living arrangements



Eligibility:

- 18 years of age or older with a severe alcohol/drug dependency issue

Please note: All potential patients undergo a medical and mental health assessment prior to admission. Clearview does not offer detox services.

Referrals:

- Referrals are accepted by an individual's physician, outpatient provider, detoxification unit, legal entity, and others involved in assisting those with substance use disorders. Clearview also accepts self-referrals.

Cost:

- Clearview Treatment Services accepts Medicaid, Medicare, and most private insurances.
- Individuals may also choose self-payment.

Length of Stay:

28 days

What happens after discharge?

Because all cases are different, the steps after discharge vary; some patients continue treatment in an outpatient setting in the community, while others will enter into additional residential treatment.

Contact us at:

**Clearview Treatment Services at
Mount St. Mary's Hospital**
5300 Military Road
Lewiston, NY 14092
(716) 298-2115



22032 - REV 4/15/21

Other Marketing/Promotional Materials
Mount St. Mary's Neighborhood Health Center




Mount St. Mary's
Neighborhood Health Center

Neighborhood Health Center

Located near Mount St. Mary's Hospital, our practice offers numerous advantages over a traditional primary care practice.



Catholic Health
The right way to care.



Committed to your care

Our office is staffed by skilled and experienced physicians, nurses and other professionals who are committed to providing compassionate, high quality care for expectant mothers, children of all ages, and adults at all stages of life.

We offer same-day appointments and wheelchair accessibility. In addition, our primary care centers accept most insurances, including Medicaid and Medicare. Healthcare assistance on a sliding fee scale is available for those who are under-insured or uninsured.

Catholic Health Connect is a secure, easy-to-use online connection to your health information at Catholic Health.

Mount St. Mary's Neighborhood Health Center


Mount St. Mary's Neighborhood Health Center
3101 Ninth Street
Niagara Falls, NY 14305
(716) 284-8917

Monday – Friday: 8:30am - 4:30pm

Take the New York Thruway I-190N, exit 24 for NY-31/Witmer Road. Turn left on NY-31/Witmer Road and continue straight onto Highland Avenue. Turn right onto Profit Lane and then turn left onto Ninth Street.

Our Mission
We are called to reveal the healing love of Jesus to all.

Our 2025 Vision
As your trusted partner, inspired by faith and committed to excellence, we lead the transformation of healthcare and create healthier communities.



Catholic Health

21810 - REV 1/27/21

Other Marketing/Promotional Materials

Mount St. Mary's Neighborhood Health Center, *continued*



Care for the whole family

As a team, we will give you and your family the kind of special care and attention that is needed... when it's needed. The Neighborhood Health Center provides for the healthcare and supportive needs of families in our Niagara community.

Our office is pleased to participate with most major health insurance plans. Financial counseling available on premises by appointment. To better serve you please notify our office of any change in your address, phone number, or insurance coverage.

We are available for appointments every Monday thru Friday from 8:30 am to 4:30 pm. Please bring a list of your current medications and the dosage to your appointment.

Taking care of you is our top priority.

Mount St. Mary's Neighborhood Health Center offers complete healthcare services for all members of the community. Our dedicated staff provides quality, respectful healthcare to everyone. Our physicians, nurse practitioner, and physician assistant will take care of you and your family. We also have a social worker and care coordinators on staff to help you.

Special Programs and Services

We recognize that we serve a wide array of individuals with a variety of needs for programs and services. From healthcare to social services and daily needs, we strive to help.

Dental Program

- Oral health/hygiene services
- Transportation to visits
- Cleanings, fillings, extractions and dentures

Advocacy & Assistance

- Networking with local social service agencies and providers
- Personal care items
- Year-round donation drives
- Transportation to-and-from appointments

Our Comprehensive Services for Kids, Teens and Adults Include:

- Health Education
- Preventative Health Care
- Well & Sick Visits
- Dental Care
- Referrals to Community Resources
- Physicals
- Immunizations (i.e. Flu, Tetanus)
- Transportation
- Advocacy

Women's Health

- Annual Gynecological Exams
- Pap Tests
- Maternity Care
- Pregnancy Tests
- Family Planning

Pastoral Care

- Referral for Individual, Family and Grief Counseling

Outreach

- Advocacy for Community Needs
- Spiritual Care
- Nutrition and Education

To make an appointment, call us
(716) 284-8917.





A lot's gonna change



Contact Us
CALL (716) 706-2482
TEXT (844) 637-6667
www.chsbuffalo.org

You've got this!

with a free personal nurse

that can give you the support, advice and information you need as a new mom, pregnant with your first baby.

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www.chsbuffalo.org
For your free personal nurse

Other Marketing/Promotional Materials

Nurse Family Partnership

Pregnant with your first baby?



**A lot's
gonna
change**

You've got this!
with a free personal nurse



What is Nurse-Family Partnership?

Nurse-Family Partnership is **free** for women who are pregnant with their first baby. When you enroll you will be connected to a registered nurse who will provide the support, advice and information you need to have a healthy pregnancy, a healthy baby and be a great mom.



How much does it cost?

Nurse-Family Partnership is **free** to eligible women.

Your nurse will support you to:

- Have a healthy pregnancy and a healthy baby.
- Become the best mom you can be.
- Learn and practice things that make you more confident as a mom, like breastfeeding, nutrition, child development, safe-sleep techniques and much more.
- Get referrals for healthcare, childcare, job training and other support services available in your community.
- Continue your education, develop job skills or follow your dreams for the future.

Who can enroll in Nurse-Family Partnership?

Any woman who:

- Is pregnant with her first child
- Is pregnant 28 weeks or less
- Meets income requirements
- Lives in an area where Nurse-Family Partnership is available

Can my baby's father participate?

The father, family members and friends are welcome to participate in the program, but as the mom, **you are the main focus!**



Other Marketing/Promotional Materials

Women's Services – Breastfeeding



Breastfeeding Support Group

Every Tuesday from 11 am - 1 pm

Every Thursday from 6:30 pm - 8:30 pm

Offering Support from Pregnancy to Weaning

Get support at our Baby Café – live, online!

- Breastfeeding: planning, guidance and support
- Breast pumping support
- Information about breastfeeding and returning to work
- Opportunity to meet other mothers – share tips and socialize
- Support when you are ready to wean your child

Interested? Simply provide your name, email address, and phone number to jscarpen@chsbuffalo.org or log on using the below QR code.



Licensed & recognized by:



22865 Rev 4/7/22





Our Mission

We are called to reveal the healing love of Jesus to all.

Our Vision

As a trusted partner, inspired by faith and committed to excellence, we lead the transformation of healthcare and create healthier communities.

Our Values

REVERENCE

We honor the inherent dignity and uniqueness of each person.

COMPASSION

We unconditionally demonstrate empathy, kindness, and acceptance.

INTEGRITY

We are honest, transparent, and accountable.

INNOVATION

We continually learn, find creative solutions, and embrace change.

COMMUNITY

We work together to build community and promote social justice in our organization and in society.

EXCELLENCE

We commit to achieve the highest standards of quality, safety, and service.



Mount St. Mary's Hospital
5300 Military Road
Lewiston, NY 14092
chs.buffalo.org