



*Your hospital for life.™*

# **2014-17 Community Service Plan**

**ORGANIZATION**

**Mount St. Mary's Hospital and Health Center  
5300 Military Road  
Lewiston, NY 14092  
(716) 298-2146**

## 2014-2017

### COMMUNITY SERVICE PLAN OVERVIEW

#### 1) MISSION

*Mount St. Mary's Hospital and Health Center, sponsored by Ascension Health, shares in the loving ministry of Jesus as Healer.*

*Our Mission: We are called to continue the healing ministry of Jesus by providing compassionate person-centered care. We will respect the dignity of all, with special concern for those who are poor and vulnerable.*

#### 2) COMMUNITY SERVED

##### A) AREA SERVED:

THE PRIMARY SERVICE AREA FOR MOUNT ST. MARY'S IS GENERALLY DESCRIBED AS WESTERN NIAGARA COUNTY AND THE TOWN OF GRAND ISLAND, NY. EIGHTY-FIVE PERCENT OF OUR PATIENTS COME FROM THIS AREA.

##### B) DEMOGRAPHICS:

DETAILED DEMOGRAPHICS OF THE COMMUNITY FROM US CENTER ARE INCLUDED IN THE REPORT.

##### C) EXISTING HEALTH CARE FACILITIES:

THERE ARE TWO COMMUNITY HOSPITALS IN OUR PRIMARY SERVICE AREA. **MOUNT ST. MARY'S HOSPITAL** AT 5300 MILITARY ROAD IN THE TOWN OF LEWISTON AND **NIAGARA FALLS MEMORIAL MEDICAL CENTER** ON 10<sup>TH</sup> STREET IN THE CITY OF NIAGARA FALLS.

#### 3) PUBLIC PARTICIPATION - SURVEY INFORMATION:

INFORMATION WAS OBTAINED MAINLY THROUGH A MAIL SURVEY TO COMMUNITY ORGANIZATIONS AND CHURCHES AND INDIVIDUAL INTERVIEWS WITH HOSPITAL VOLUNTEERS. IN ADDITION, MOUNT ST. MARY'S SURVEYED MEMBERS OF ITS COMMUNITY INTERNALLY (DEC 2012 AND JAN/FEB 2013) THROUGH ITS BOARD OF ASSOCIATES' VOLUNTEERS, ST. FRANCIS GUILD VOLUNTEERS, AND GENERAL HOSPITAL VOLUNTEERS. INFORMATION WAS ALSO GAINED FROM AN EXTENSIVE COUNTYWIDE SURVEY CONDUCTED BY THE NIAGARA COUNTY HEALTH DEPARTMENT IN MID-2013.

#### 4) SELECTION OF PUBLIC HEALTH PRIORITIES:

- COUNTY/HOSPITAL COLLABORATIVE PRIORITY:
  - FALL PREVENTION
  - BEHAVIORAL HEALTH
- MSMH ADDITIONAL PRIORITY:
  - CHRONIC DISEASE (CARDIO/CANCER/DIABETES)
  - HEALTHY MOTHERS, HEALTHY BABIES, HEALTHY CHILDREN
  - PHYSICAL ACTIVITY AND NUTRITION (OBESITY)

#### 5) DISSEMINATION OF PLAN TO THE PUBLIC

- A) POSTING ON HOSPITAL INTERNET WEBSITE: **YES**
- B) NOTICE IN NEWSPAPERS ON AVAILABILITY: **YES**
- C) AVAILABLE ON REQUEST FROM HOSPITAL FACILITY: **YES**
- D) OTHER: **AWARENESS ON MSMH FACEBOOK PAGE**

## 6) THREE YEAR PLAN OF ACTION

### **Mount St. Mary's Community Survey**

**(ATTACHMENT 2 & 3)**

Mount St. Mary's conducted a survey of various community stakeholders to identify health issues in the community.

- Priority 1: Chronic Disease (Cardio/Cancer/Stroke/Diabetes)
- Priority 2: Healthy Mothers, Healthy Babies, Healthy Children
- Priority 3: Concern Physical Activity and Nutrition (Obesity)

### **Niagara County Community Health Survey**

Conducted over a period of several months in mid-2013, the Niagara County Department of Health compiled results of surveys received from 1,455 respondents. In response to the question: "When you think about your community, which of the following issues are you most concerned about (please select three)?"

- Concern 1: Cancer
- Concern 2: Heart Related Issues (high blood pressure, cholesterol, heart disease, stroke)
- Concern 3: Overweight/Obesity/Weight Management

### **Niagara County Health Department/Hospitals**

Through the direction of the New York State Department of Health, the Niagara County Department of Health joined with hospitals in Niagara County to identify two specific priorities and outline a process to measure outcomes on initiatives. The two initiatives are:

- Initiative 1: Reduce Risk of Falls in over 65 population
- Concern 2: Use of Evidence Based Care to Manage Chronic Diseases – Awareness that treating mental health improves chronic disease outcomes

### **New York State Prevention Agenda**

"Chronic diseases such as cancer, diabetes, heart disease, stroke and asthma are conditions of long duration and generally slow progression. Chronic diseases are among the leading causes of death, disability and rising health care costs in New York State. Specifically, they account for approximately 70% of all deaths in New York State and affect the quality of life for millions of New Yorkers."

*- NYS Prevention Agenda Action Plan*

- Focus Area 1: Reduce obesity in children and adults
- Focus Area 2: Reduce illness, disability and death related to tobacco use and secondhand smoke
- Focus Area 3: Increase access to high-quality chronic disease preventive care and management in clinical and community settings

**7) PROCESS OF IDENTIFYING NEEDS:**

FOLLOWING THE TABULATION OF INFORMATION RECEIVED, THOSE INVOLVED IN DEVELOPING COMMUNITY EDUCATION AND INFORMATION PROGRAMS MET TO IDENTIFY PRIORITIES.

**8) CONSULTING OF INDIVIDUALS:**

MOUNT ST. MARY'S HAS MORE THAN 250 PEOPLE SERVING AS VOLUNTEERS, AS WELL AS INFORMATION FROM A VARIETY OF COMMUNITY LEADERS.

**9) INFORMATION GAPS**

OUR SURVEY REACHED OUT TO A WIDE-ARRAY OF COMMUNITY ORGANIZATIONS. WE ARE A SMALL COMMUNITY AND WE HAVE A MAJOR HEALTHCARE FACILITY IN THE CENSUS TRACT OF THE COMMUNITY THAT HAS THE LOWEST INCOME POPULATION AND IS THE MOST UNDERSERVED. WE WORK WITH THESE INDIVIDUALS AS OUR PATIENTS EVERY DAY. WE DID NOT SPECIFICALLY SURVEY OUR GRAND ISLAND AREA FROM WHICH WE RECEIVE ABOUT 3% OF OUR PATIENTS.

**10) DID THE HOSPITAL ADDRESS ALL OF THE NEEDS IDENTIFIED IN THE SURVEY:**

NO. SOME OF THE IDENTIFIED NEEDS (VETERANS CARE, GOOD SCHOOLS, ECONOMIC DEVELOPMENT, LOW CRIME), ARE ISSUES BETTER HANDLED BY OTHERS IN THE COMMUNITY. WE ARE ADDRESSING THE MAJOR ISSUES THAT WE CAN EFFECTIVELY AND EFFICIENTLY ADDRESS.

**11) OTHER**

**FINANCIAL ASSISTANCE**

MOUNT ST. MARY'S HAS FULLY REVIEWED ITS FINANCIAL ASSISTANCE POLICIES AND THROUGH POSTINGS, BROCHURES, INPATIENT MATERIALS, AND GENERAL AWARENESS HAS FULL-TIME FINANCIAL ASSISTANCE COUNSELORS AVAILABLE TO ASSIST PATIENTS IN NEED.

## **BACKGROUND**

Mount St. Mary's Hospital and Health Center is comprised of a 175-bed community hospital, a 250-bed nursing care residence, and a fully-licensed Child Care Center on its campus in Lewiston, NY. It also operates a Neighborhood Health Center clinic in the City of Niagara Falls and an off-site Outpatient Rehabilitation Center. In addition, medical specialties in Otolaryngology, Primary Care, and Orthopedics are offered at facilities on-campus and throughout the community. Mount St. Mary's serves as the Medical Provider for the PACE Program in Niagara Falls.

Staff includes more than 200 physicians with privileges, 300+ RN's and LPN's, 30 allied health professionals and numerous employees in supporting roles. In all, Mount St. Mary's Hospital and Health Center employs more than 1,200 people and has about 250 volunteers.

Mount St. Mary's Hospital was formed in 1907 by the Sisters of St. Francis who came north from Buffalo to care for the sick and the poor. In 1997 the Sisters of St. Francis turned over sponsorship to the Daughters of Charity to continue in their tradition of excellence and service. In 2000 the Daughters of Charity merged with the Sisters of St. Joseph to create Ascension Health. Ascension Health is the largest not-for-profit healthcare system in the nation.

## **MISSION**

Mount St. Mary's Hospital and Health Center, sponsored by Ascension Health, shares in the loving ministry of Jesus as Healer.

*Our Mission: We are called to continue the healing ministry of Jesus by providing compassionate person-centered care. We will respect the dignity of all, with special concern for those who are poor and vulnerable.*

**COMMUNITY SERVED**

**A. Our Community**

Our community is comprised of Niagara County, New York and a portion of Grand Island, which is in Erie County, New York. The following describes Niagara County’s demographics and health indicators relative to New York State.

**Overall Population = 216,000 (approximately 110,000 are in MSMH Primary Service Area)**

- 16% of residents are over the age of 65
- 22% of residents are below the age of 18
- 7% of residents are African American and 2% are Hispanic
- Median Household Income is \$45,545, which is 20% below the state average
- 12% of population is illiterate

**Highlights of Health Indicators for Niagara County:**

- Niagara County ranks 59<sup>th</sup> (out of 62 counties) in New York State in “Health Outcomes”
- 15% of residents are considered in poor or fair health
- 26% of residents smoke
- 27% of residents consider themselves obese
- 17% of residents consider their alcohol use as excessive
- 9% of residents are diabetic
- 16% of residents are uninsured
- 83% of residents have been screened for diabetes
- 69% of residents have been screened for mammograms
- 18% of residents believe there is inadequate social support
- 34% of children live in single-parent households

**B. Service Area**

The Primary Service Area (PSA) for Mount St. Mary's is Western Niagara County and Grand Island, Erie County. The PSA, more particularly, is comprised of the City of Niagara Falls; the townships of Grand Island, Wheatfield, Niagara, Lewiston, Youngstown and Wilson; and the villages of Lewiston, Youngstown and Wilson. The Secondary Service Area (SSA) includes the remainder of Niagara County, most notably the cities of Lockport and North Tonawanda.

**C. Market Characteristics – Demographic/Socioeconomic Trends**

**Population** – The population growth in our Primary and Secondary Service Areas has been negligible in the past 30 years. The population of the City of Niagara Falls (where 50% of our patients reside) has declined from over 110,000 in 1960, to 55,000 in the 2000 census, to just 50,200 in the 2010 census.

| <b>Population Changes in Niagara County:</b> |                |                 |            |          |
|--|----------------|-----------------|------------|----------|
| Age Cohort                                   | 2010           | 2015            | Difference | % Change |
|  | (Current Year) | (Forecast Year) |            |          |
| 0-17   | 24,898         | 22,820          | -2,078     | -8.30%   |
| 18-34  | 26,629         | 27,483          | 854        | 3.20%    |
| 35-64  | 47,754         | 45,831          | -1,923     | -4.00%   |
| 65+  | 19,478         | 20,960          | 1,482      | 7.60%    |

Source: Demographic Forecaster, Thompson Reuters

**Market Diversity** – Mount St. Mary’s market is comprised of predominately Caucasians and African-Americans. The growth in the Hispanic population has been limited to the rural areas.

| <b>Market Diversity in Niagara County:</b>       |                |                 |            |          |
|--|----------------|-----------------|------------|----------|
| Race   | 2010           | 2015            | Difference | % Change |
|  | (Current Year) | (Forecast Year) |            |          |
| Caucasian  | 100,289        | N/A             | N/A        | N/A      |
| African-American                                 | 11,694         | N/A             | N/A        | N/A      |
| Hispanic   | 2,110          | N/A             | N/A        | N/A      |
| Asian  | 1,208          | N/A             | N/A        | N/A      |
| Other  | 3,458          | N/A             | N/A        | N/A      |
| Source: Demographic Forecaster, Thompson Reuters |                |                 |            |          |

**Poor and Vulnerable Populations** – Because unemployment rates remain high, the PSA’s median income remains low. However, median household income varies widely in each community:

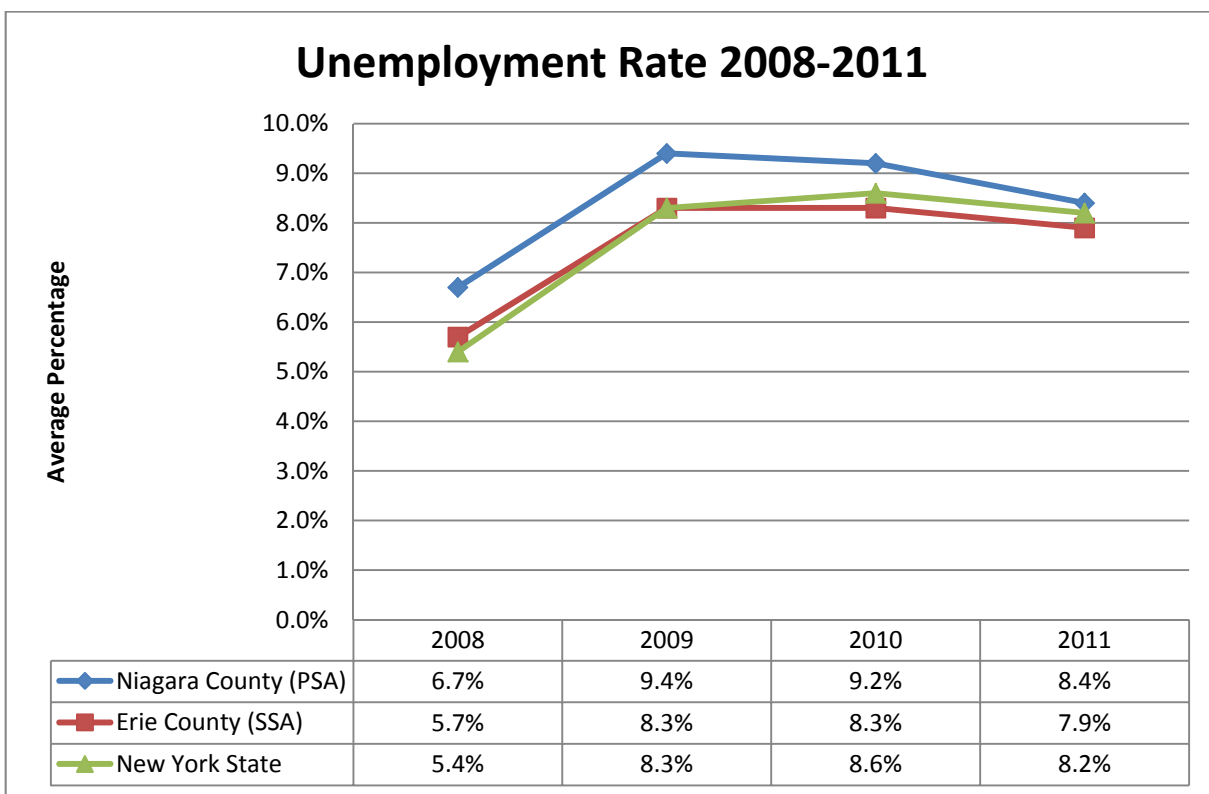
|   |          |
|---|----------|
| Town of Lewiston (Location of Hospital)           | \$59,719 |
| Town of Niagara                                   | \$42,029 |
| Town of Porter                                    | \$59,338 |
| City of Niagara Falls (Location of Health Center) | \$31,336 |
| Niagara County                                    | \$45,749 |
| United States                                     | \$51,425 |

| <b>Uninsured Individuals in Niagara County:</b> |       |
|---|-------|
| 2012: % of Total Population                     |       |
| <i>Uninsured Individuals:</i>                   |       |
| Ages 0-19:                                      | 7.2%  |
| Ages 0-65:                                      | 15.6% |
| 2012: % of Total Households                     |       |
| <i>Household Income:</i>                        |       |
| \$0 - 14,999                                    |       |
| Niagara Falls = 22.3%                           |       |

As the Affordable Care Act implementation begins, we anticipate the number of uninsured persons to decline significantly between now and 2015 because of Medicaid expansion in our state and increased access to health insurance in the market.

**Unemployment/Job Growth** – While Mount St. Mary’s is located in a more affluent suburban area, 50% of our patients come from the City of Niagara Falls where employment rates remain low. A January 2013 report from the Niagara Gazette indicated that joblessness in both the cities of Buffalo and Niagara Falls has increased by 0.6% to 8.6%, since December 2012. Compared to New York State, Niagara County traditionally has much higher unemployment rates than the surrounding areas.

| <b>Unemployment Rates (Annual Average):</b>                   |             |             |             |             |
|---|-------------|-------------|-------------|-------------|
| <b>Unemployment Rate</b>                                      | <b>2008</b> | <b>2009</b> | <b>2010</b> | <b>2011</b> |
| Niagara County - PSA  | 6.7%        | 9.4%        | 9.2%        | 8.4%        |
| Erie County - SSA   | 5.7%        | 8.3%        | 8.3%        | 7.9%        |
| New York State  | 5.4%        | 8.3%        | 8.6%        | 8.2%        |
| Source: U.S. Census Bureau & Bureau of Labor Statistics (BLS) |             |             |             |             |



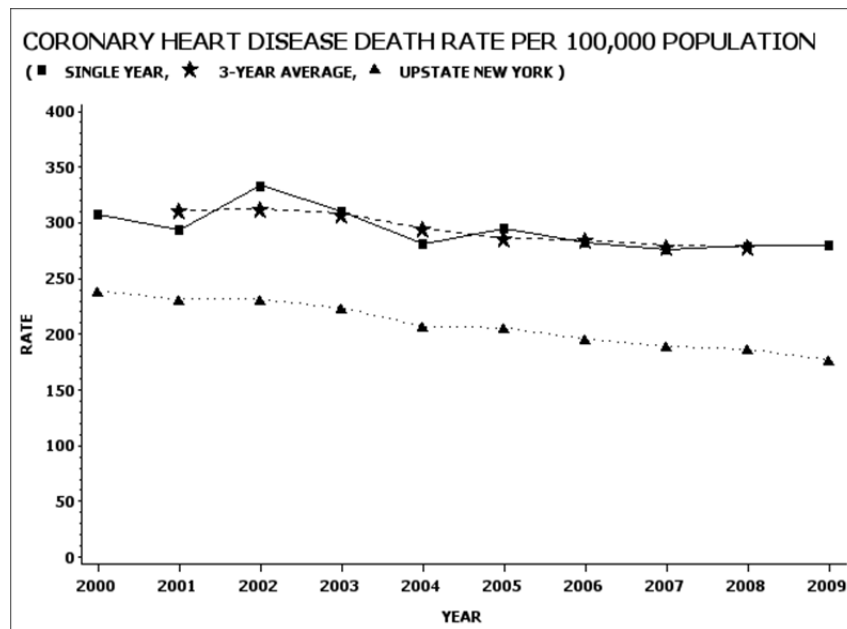
Information for unemployment in the Niagara Region compared to New York State was obtained from the Niagara County Profile from 2013 (page 21) which is a compilation of recent statistical information in all areas including demographic, social, economic and agricultural data. Further statistics were obtained from the Bureau of Labor Statistics. The data provided includes the Buffalo-Niagara Falls Metropolitan Statistical Area.



**D. MARKET CHARACTERISTICS – OTHER**

**Community Health Status** – Niagara County ranks 59<sup>th</sup> out of 62 Counties in New York State in overall health outcomes. Niagara County residents have higher mortality rates for cardiac diseases when compared to New York State averages, as shown below.

| Death Rates per 100,000 Population for Diseases of the Heart |       |       |          |
|--|-------|-------|----------|
|  | 2007  | 2008  | % Change |
| Niagara County – non adjusted                                | 355.1 | 361.8 | 1.90%    |
| NYS - non adjusted   | 255.5 | 252.1 | -1.30%   |
| Niagara county - age-sex adjusted                            | 260.4 | 265.9 | 2.10%    |
| NYS - age-sex adjusted                                       | 219.6 | 213.5 | -2.80%   |



\*Source: New York State Department of Health

The chart above shows that the average death rate in Niagara County for coronary heart disease is higher than that of Upstate New York. Death rates for diseases of the heart have increased slightly between 2007 and 2008 in Niagara County while the rates for New York State have decreased. Niagara County residents experience the *highest* mortality rates due to diseases of the heart as compared to other counties with a similar number of residents.

Niagara County does not currently have any catheterization laboratories. Niagara County residents have experienced higher mortality rates than counties with fewer residents that have catheterization labs. Moreover, Niagara County’s mortality rate, adjusted for age and gender, from coronary heart disease decreased at a slower rate in Niagara County than other counties with catheterization labs (except Rensselaer County).

## COMMUNITY PROGRAMS – (2013-14)

- **Moms Net™.** The Moms Net™ Collaborative was created to develop an “education services safety net” for women in Niagara County that supports their health education needs through pregnancy and beyond. The Collaborative is comprised of Hospital staff in addition to nine Community-based agencies which provide a broad spectrum of education services in Niagara County, including the Niagara County Health Department. Moms Net™ Partners focus on reducing duplication of education services, creating individualized education plans, improving access to care and supporting a seamless network of education services to women and their families.
- **HERO.** The HERO (Health Education Raises Opportunities) Program, a Hospital health literacy initiative, offers health education to the Community in three components: HERO Elementary; Pathways to Careers and Partnering With Parents. All three programs are designed to help students and their families become better consumers of health care.
  - **HERO Elementary** affords students in Grades 3 – 8 education on cogent health concerns. Students are instructed to teach their families about what they have learned in the sessions. The Program links Hospital health experts in an 8-learning module instructional series with 5 County schools and boasts a collaborative which includes 15 County and WNY agencies.
  - **Pathways to Careers.** The Pathways to Careers Program, also a component of the HERO Program, provides on-site health care occupational training with college credit for high school students, through Hospital-based Departments and Hospital Management Staff. In addition to the Hospital, collaborative partners include Niagara University and Niagara Catholic High School.
  - **Partnering With Parents.** Partnering With Parents is a series of Community-based health education programs designed by School Administrators to address specific Community needs. The Partnering With Parents Program is a component of the HERO Program and has a total of several County academic institutions as well as four WNY agencies which support its collaborative promotion efforts.
- **CHEERS.** (Choosing Healthy Eating and Exercise RoutineS for a healthier life) is a program which teaches children and their families simple eating and exercise plans to use throughout life, as well as how to boost self-esteem. In addition to three Hospital Departments, CHEERS has three Community-Based academic and service partners.
- **Orleans/Niagara BOCES Allied Health Occupational Initiative.** Orleans/Niagara Board of Cooperative Educational Services Students have the opportunity through this program to complete internships on site at the Hospital. Niagara University’s NU-OP Program, the Hospital and Orleans/Niagara BOCES, collaborate in this opportunity which affords high school students the option to achieve college credit for their work on site in Hospital Departments.
- **Faith and Health Coalition.** The Faith and Health Coalition is a partnership comprised of several Hospital Departments, six (6) Inner-City Churches and several local County agencies which has been structured to provide health education to Congregations and neighborhoods with emphasis on specific population needs. The Hospital either directly responds to educational program requests from the Coalition or acts as a broker to obtain the educational services as requested by Coalition Partners.

- **Diabetes Advisory Committee** has Community representation at all meetings as well as Hospitals, health providers and social agencies. Program efficiencies are discussed at each meeting and gaps in care and services are identified.
- **Diabetes Coalition**, led by MSMH, has developed a collaborative of agencies to address specific needs of diabetes patients in the County through collective effort. The Coalition is supported by the County Health Department and all County Hospitals and assesses needs whether educational or clinical throughout the County.
- **PACE Program:** Mount St. Mary's serves as the Medical Provider for the Niagara PACE Program (Program of All-Inclusive Care for the Elderly)

# **2014-2017 OVERVIEW**

## **PREVENTION AGENDA PRIORITIES**

Chronic Disease (Cardio/Cancer/Diabetes)  
Healthy Mothers, Healthy Babies, Healthy Children  
Physical Activity and Nutrition (Obesity)

## **PREVENTION AGENDA GOALS**

Our overall goal is to work with and bring together all of those interested in improving the delivery of healthcare in the community. By working on Mom's Net, Childhood Obesity, and Chronic Diseases (Cardiology and Diabetes) in the specific objectives outlined, we continue to expand the collaborative to bring more individuals and organizations to the table to meet our overall goals.

## **COLLABORATIVE PARTNERS**

Mount St. Mary's will continue to support several health collaborative groups which include community partners, the Niagara County Health Department, academia, and local schools. These partners will be engaged throughout the years in an evaluation process to determine new areas of need or refine current service offerings.

## **TRACKING PRIORITIES**

We rely on input from the community via community meetings and stakeholder meetings, information gathered through our admission process, input directly from our physicians (both employed and independent) and reports compiled by local, state and national organizations. We will continue to expand our outreach in the Community to engage additional organizations and experts in an effort to meet our goals.

## **2014-2017 PLAN OF ACTION**

### **A. Continue major programs such as:**

- a. CHEERS Program
- b. Moms Net™
- c. HERO Program
- d. HERO – Pathways to Careers
- e. Partnering With Parents
- f. Faith and Health Coalition
- g. PACE
- ❖ Reduce Risk of Falls among vulnerable populations
- ❖ Promote Use of Evidence-Based Care to Manage Chronic Diseases as treating mental health improves chronic disease outcomes

### **B. Continue to build on such initiatives as Community Health Screenings**

- a. Free Lipid Panel Screening
- b. Free PSA Screening
- c. Free A1c Screening
- d. Free Digital Mammography Screening
- e. Free HgbA<sub>1</sub>C Screening

### **C. Continue Mount St. Mary's Parish Nurse**

### **D. Continue Diabetes Education Programs**

### **E. Continue Stroke Awareness Programs**

### **F. Continue Heart Disease Education Program**

### **G. Continue Community Health Education Programs**

❖ *Denotes Niagara County Health Department and Joint Hospital Priorities*

## 1. MAJOR PROGRAMS

### a. CHEERS Program (Choosing Healthy Eating and Exercise RoutineS for a healthier life)

Childhood obesity is a health problem reaching epidemic proportions throughout the United States. Obesity in the young brings along with it, the stigma of being “different.” Children who are obese are often challenged with poor self-esteem and the emotional trauma of taunting, bullying and other negative behaviors from other children. In addition, these children are at risk for other health problems as they grow, which may affect them in later life. In an effort to address childhood obesity with a comprehensive, clinically sound, age-appropriate and results-oriented focus, the Hospital has developed a program with six learning sessions for children, their parents and schools.

The Program (CHEERS: Choosing Healthy Eating and Exercise RoutineS for a healthier life) is limited to 25 children and their parents, and features a unique combination of portable and flexible elements designed with busy families in mind. The Program teaches children a simple healthy eating plan, which they can easily internalize and use throughout their lives. By engaging parents in the Program sessions and homework assignments, their participation in the selection of foods, exercise and other aspects of the curriculum can be encouraged and supported.

#### **CHEERS Program Goals:**

- To solicit parental engagement in encouraging children to improve eating and exercise behaviors through better nutrition and increased activity.
- To promote healthier lifestyles among family members as a result of nutrition and exercise education.
- To provide children and their families with a simple methodology to use throughout life to both understand and promote healthier behaviors.
- To identify self-esteem issues which may relate to childhood obesity, including taunting, bullying or other negative behaviors; to provide children with tools which will assist them in developing a healthier emotional outlook while they are working to improve their nutrition and exercise routines.

#### **Program Impact Measurement:**

- **Satisfaction Surveys.** Program effectiveness will be measured through surveys administered to both children and their family members. Elements which will be measured will include:
  - *Classes were helpful to child and family (where the desired impact threshold for the child and family is = to or > 85%)*
  - *Will use the information received to improve nutrition of child immediately and in the future (where the desired impact threshold is = or > 85%)*
  - *Will encourage child to engage in exercise to improve their health and will join them in exercising (where desired impact threshold is = or > 85%).*
  - *Understanding of importance of improving self-esteem for the child (where desired impact threshold is = or > 85%).*

## **MOM'S NET™ - A NIAGARA COUNTY HEALTH EDUCATION SERVICES COLLABORATIVE**

Moms Net™, the trade-marked byproduct of a major collaborative effort amongst Niagara County hospitals, academic institutions, health care providers and not-for-profit agencies over the past four years was created to address an identified education deficit amongst many at-risk, women in poverty and their families with regard to pregnancy and child care. Included in the Moms Net™ original service offering constellation was a strong emphasis on screening for postpartum depression and the creation of a wrap-around educational and social structure to provide support services to women in the County.

Over the years the program has evolved, other health and service issues have arisen in the execution of the Moms Net™ "mantle" which have propelled the need to focus on expansion of the program to include a broader spectrum of inter-related educational offerings. At this time, programs which address various aspects of maternal/child education and parenting are offered throughout the County, but no single architecture exists to integrate these programs, services and resources into a comprehensive structure. The Moms Net™ concept has been created as a seamless, accessible and effective framework in which to identify the at-risk pregnant population.

Moms Net™ is a structure of health education programs and services for at-risk pregnant and newly delivered women at the poverty level. As such, Moms Net™ for Moms is structured to address the needs of the poor, the underserved and the uninsured. The Program focuses on creating a seamless integration of educational services targeting economic, social, intellectual and access issues which pose barriers to educating women and families in making better health consumer choices. The primary objective of Moms Net™ to reduce fragmentation of services through a comprehensive, collaborative approach to health education. This approach is comprised of a menu of educational offerings and social support systems which can be selected and applied to meet individual patient need.

### **Moms Net™ Program Goals:**

- To enhance the primary care experience by creating full circle of educational resources to which the patient can either be referred or can select to engage in to improve understanding of specific health issues and concerns.
- To provide education through local programs, agencies, network resources and instruction to support gaps in service.
- To create and promote a trustworthy network of resources for the patient which support one another, promote the mission and work of each network partner and enhance the patient's care and service experiences.
- To establish an education services "safety net" to support individual need ant to promote better understanding of health literacy issues and concerns.

## Program Impact Measurement:

- **Volume/Utilization Indicators.** *Volume and utilization indicators will measure:*
  - *the number of clients served (i.e., clients who have engaged the services) through the Moms Net™ program over the total number of clients referred.*
  - *The percent of referrals generated to Moms Net™ partners by providers over the total number of clients engaged.*
  
- **Client Satisfaction Indicators (Quality of Life).** *Surveys administered through Collaborative Partners as well as through the Hospital's primary care centers will collect the following elements:*
  - *Number of clients indicating that their quality of life improved through education received through Moms Net™ intervention (where desired impact threshold is = to or > 80%).*
  - *Number of clients indicating satisfaction with education services (where desired impact threshold is = or > 80%)*
  - *Number of clients indicating they have embraced healthier behaviors as a result of education they received from Moms Net™ partners (where desired impact threshold is = or > 80%)*
  - *Number of clients indicating they no longer smoke as the result of education received from Moms Net™ partners (where desired impact threshold is = to or > 80%).* *Number of clients attending Coffee Groups as a result of education from collaborative partners (where desired impact threshold is = to or > 80%)*
  - *Number of clients seeking additional education services as a result of education from Moms Net™ partners (where desired impact threshold is = to or > 80%).*
  - *Number of clients who would recommend Moms Net™ to their family or friends on the basis of their experiences (where desired impact threshold is = to or > 80%).*
  
- **Quality Indicators**
  - *% of client infants compliant with proscribed immunizations at one year of age (where desired impact threshold is = or > 80%).*
  - *% of client infants receiving all well baby visits as proscribed by 15 months of age (where desired impact threshold is = or > 80%)*
  - *% of clients engaged in breast feeding as a result of Moms Net™ partner education at:*
    - *3 months of age (where desired impact threshold is = to or > 80%)*
    - *9 months of age (where desired impact threshold is = to or > 70%)*
    - *12 months of age (where desired impact threshold is = to or > 65%)*
  - *% of engaged clients who have attended parenting education sessions provided by the Hospital or other Moms Net™ partners (where desired impact threshold is = or > 80%)*
  - *% of clients who have been screened for postpartum depression by Moms Net™ partners as a result of education provided by Moms Net™ providers (where desired impact threshold is = or > 80%)*

## b. HERO (HEALTH EDUCATION RAISES OPPORTUNITIES)

The Health Education Raises Opportunities (HERO) Program, initiated by Mount St. Mary's Hospital and Health Center in February, 2009, focuses on improving health literacy for local school children and their families. HERO is offered in three components: Hero Elementary, Pathways to Careers and Partnering With Parents.

HERO Elementary is currently offered in different menu formats for students in Grades 3 – 8 in five local schools. The Program brings experts in the health and behavioral sciences fields into classrooms to teach children about important and current health topics. Each Menu Topic offered provides age-appropriate information on a specific health issue, teaches children how to identify important signs and symptoms of a disease process, or offers a simple plan for children to internalize to improve their personal health or that of their family. HERO's ultimate goal is to help students and their families to become better consumers of health care.

### HERO Elementary Program Goals

- To provide instruction in health and health-related topics to elementary school students, which have the potential to influence their future health and well being.
- To improve the ability of students to think critically by providing them with the tools necessary to read and process health information efficiently.
- To teach students how to extract and differentiate key ideas from media-based electronic and print advertising as it relates to educational information.
- To enable students to assess the veracity of health information they read, see or hear.
- To encourage students to research health topics and determine appropriate solutions within the context of their everyday lives.
- To assist students and their families in becoming better consumers of health care.

### Program Impact Measurement

- **Satisfaction Surveys.** The HERO Elementary Program annually reaches over 400 students and their families. To measure the impact HERO has had on these families, various surveys have been developed to collect feedback on each HERO educational module and on the impact the Program has had on students, their families and their schools.
  - **Student Surveys.** Student Surveys are administered through focus groups (approximately 10 students, a composite of all grades engaging in HERO at the school) at the end of each year, over the years since the program's implementation. These surveys measure the following elements:
    - *Student Retention of Information (where desired impact threshold is = to or > 90%)*
    - *Student Rating of the Importance of Information Provided through the HERO Elementary Program (where desired impact threshold is = or > 90%)*
    - *Student Understanding of the Material Provided through the HERO Program Modules (where desired impact threshold is = or > 90%)*
    - *Impact on Family Eating, Exercising and Food-Buying Habits*
    - *Relevance of Content to the Family Unit (where desired impact threshold is = or > 90%)*



- **Parent/Guardian Surveys.** New to the HERO Program in the 2013 – 2014 school year, parents will be asked to comment on the information which their children are communicating to them at home. The elements of the surveys include the following:
  - *Top Three Topics shared and “taught” to parents, siblings and extended family by HERO Program students.*
  - *Impact of information shared by the students on the selection of healthy foods and exercise routines for the family (where desired impact threshold is = or > 85%)*
  - *Impact of information as it may have influenced the family’s health or education needs (where desired impact threshold is = or > 85%)*
  - *Education shared by students with families on stroke signs and symptoms and heart healthy behaviors.(where desired impact threshold is = to or > 85%)*
  - *Requests from parents for suggested program module additions which could make a difference in their family’s health.*
- **Administrative Surveys.** In the 2012 – 2013 school year, a survey was added to gather information on how school administrators perceived student behaviors relative to eating healthier or embracing exercise routines. They were also asked to comment on their observations of students’ understanding of chronic health problems in their respective school settings. Elements of the survey included the following:
  - *Programs providing the most impact to students and their families.*
  - *Behavior changes noted in students’ understanding of nutrition habits and exercise which relate to HERO as directly observed or reported by school faculty.*
  - *Discussions with parents on adoption of exercise and healthier eating habits or other healthy lifestyle changes as they result to HERO program modules.*

Topics covered in the HERO menu include:

- **The Magic of Values**
- **Managing Angry Feelings and Building Self-Esteem**
- **Healthy Breakfast Choices**
- **Understanding Diabetes and its Prevention**
- **Fitness for Everyday Life**
- **Signs and Symptoms of Stroke**
- **Smoking is Bad For You**
- **Grief & Loss for Children**
- **Keeping Your Heart Healthy**
- **Bullying, Cyber Bullying and Precautions to Use in Text Messaging (Grades 6 – 8)**
- **Medical Mysteries (Grades 6 – 8 only)**

## **HERO - Pathways to Careers Program (Grades 9-12)**

HERO's high school program: "Pathways to Careers," a collaborative effort amongst Mount St. Mary's Hospital and Health Center, Niagara Catholic High School and Niagara University is offered to juniors and seniors who have an interest in health science careers and occupations. Student Interns working under the direction of Hospital Departmental Leaders as their instructors, obtain college credit through Niagara University for their on-site work in occupational research, hands-on contributions to the Hospital's operations and volunteer efforts. The Program also serves as a long-range recruitment tool, designed to provide ongoing mentoring to the Interns after their completion of the program and post-graduation from high school. Pathways to Careers was also developed to encourage students to select educational programs serving the health occupations in Western New York academic settings, with the ultimate goal of keeping students local for their higher education and subsequent employment upon graduation from college.

### **Pathways to Careers Program Goals:**

- To provide opportunities for high school students to explore careers in healthcare through a structured internship program and directed research.
- To afford students information regarding local academic programs in various disciplines which serve the healthcare industry in the area.
- To channel student interest in healthcare occupations through age-appropriate activities which offer a realistic understanding of the training, licensure and education requirements of the career pathway.

### **Program Impact Measurement:**

- **Course Moderator Evaluation.** *Midway through each of the Pathways to Careers course program semesters, student interns meet with the Niagara University Course Moderator to discuss their course work. These sessions are open to the on-site Instructors as well, who have an opportunity to review student commentary on the course work, clarify instructions and share with peers what activities and focus their internship work has provided to date.*
- **Instructor Evaluation of Students.** *Hospital staff serving as Instructors evaluate students at intervals in the program and evaluate their course work components upon completion of each assignment. Course materials are compiled and then sent to the Course Moderator at Niagara University for review and grades.*
- **Successful Achievement of College Credits.** *While federal law prohibits the exchange of specific student performance information relative to course grades, Niagara University does notify the Hospital of the students' successful completion of the course work and credit awards. (Where desired impact score is = to or > 95%).*

### **c. Partnering With Parents Program**

HERO's third component is "Partnering With Parents." In May, 2011, as part of the HERO (Health Education Raises Opportunities Program) annual evaluation, school administrators convened to discuss expanding the educational elements of the HERO school program into a broader Community health framework. They subsequently identified several topics which they considered most urgent for parents to be aware of and which could be provided in a series of programs. "Partnering With Parents" was established under the sponsorship of Mount St. Mary's as part of an annual Community education outreach series, designed specifically for parents. Topics which have been presented through the Partnering With Parents Program include: Bullying, Cyber-Bullying and the Dangers of Text Messaging; Nutrition and Healthy Meals for Busy Families; Understanding Grief and Loss in Children and Keeping Children Safe From Predators.

#### **Partnering With Parents Program Goals:**

- To provide instruction to parents and the Community-at-large on high profile health issues which have the potential to affect wellness and disease prevention.
- To develop outreach methodologies to expand opportunities for health education to a larger audience.
- To provide programs which focus on the health education needs of families and which provide support for the development of healthier lifestyles.

#### **Program Impact Measurement:**

- **Satisfaction Surveys.** *After each program, attendees are asked to complete a survey (five-point Likert scale where 1 was "poor" and 5 was "excellent") and provide commentary on the content and speakers as well as recommend future topics for consideration (where the desired impact threshold of each prompter is = to or > 90%).*

#### **HERO's Collaborative Partners include the following:**

- The Mental Health Association in Niagara County, Inc.
- The Niagara County Health Department
- Niagara University Departments of Nursing and Biology
- Niagara University College of Education
- Daemen College
- Catholic Charities of Western New York
- The Northpointe Council
- Dr. Shawn Ferguson, Rainbow Pediatrics (Clinical Moderator)
- The Buffalo Diocesan Catholic Schools
- Fidelis Care New York
- Catholic Academy of Niagara Falls
- De Sales Catholic School, Lockport, NY
- St. Peter's Roman Catholic School, Lewiston, NY
- St. Matthew Lutheran School
- The Niagara Charter School
- Niagara Catholic Middle & High School
- St. Mary's Hospital and Health Center, Departments of:
  - Education and Staff Development
  - Mission Integration
  - Parish Nursing
  - Rehabilitation and Sports Medicine
  - Community Relations

#### **d. FAITH AND HEALTH COALITION**

In September, 2011, the Faith and Health Coalition was initiated by Mount St. Mary's Hospital and Health Center in response to a request from area inner-City Churches to provide education to their constituents and urban neighborhoods. Pastors, administrators and health providers from six local City Churches met with Hospital administrators and educators to discuss ideas for creating a proactive work group aimed at developing effective Community educational programs. Among the participants, were associates invited from the Hospital's workforce, who were also members of the participating Churches. These Associates had expressed an interest in supporting the Hospital's efforts in identifying health education needs and providing Hospital-sponsored services within their respective congregations

#### **Faith and Health Coalition Program Goals:**

- *To conduct an assessment of specific neighborhood health needs in light of Church ministries and Church health resources.*
- *To support a unified platform of Churches and Church groups to provide health education programs and events which are culturally focused and pertinent to specific Community health needs.*
- *To promote health and wellness behaviors which will make a difference for Church members, within the framework of ministerial offerings and spiritual convictions.*
- *To provide active support for Church health initiatives, which will benefit not only the Ministries themselves, but the Community-at-large as well.*

#### **Program Impact Measurement:**

- **Satisfaction Surveys.** Church groups and congregations to whom programs are provided, will be surveyed as to the effectiveness of the content, teaching and application of the material presented (where desired impact of the program of those who agree or agree strongly with prompter presentations is = to or > than 85%).

#### **PLAN OF ACTION - IMPACT**

Impact is anecdotal. We do not have ready access to records to compare from year to year. We do know, however, that more and more individuals are reaching out to become involved in our educational programs.

As previously mentioned, the expansion of the HERO schools, Moms Net™ and CHEERS collaborative task forces and the addition of the Partnering With Parents Program have been the direct result of evaluation and assessment of needs within schools and the Community-at-large. In addition, the Hospital's establishment of the Faith and Health Coalition, conceptualized as a health education advisory board for Community outreach and education needs in the inner city, has been structured to provide continuous feedback on populations at risk.

In addition, the Hospital's Department of Education has completed surveys for diabetes and pre-diabetes class participants as part of its clinical quality program over the past three years. These reports have demonstrated improvements in the health, quality of life and evidence-based results as reported by individuals participating in these programs.

### **OTHER ISSUES**

In addition to the above, Mount St. Mary's is working with DePaul USA, an organization that working with the agencies in Niagara Falls to determine the greatest need in Niagara Falls. Many, many agencies are represented. So far, their determination is that "homelessness" is the most serious issue. They meet regularly.

### **DISSEMINATION TO PUBLIC**

Online/Website

Newsletter

Availability in hard copy in facility

### **FINANCIAL AID ASSISTANCE**

We have 2 full-time financial aid counselors and more than 1,200 individuals/families that qualify. We have our counselors stationed in a visible location in our ER and our policy is posted on our website, along with our brochure. In addition, our Neighborhood Health Center clinic has a full-time social worker who works with individuals on financial assistance, insurance enrollment and socioeconomic challenges. Our Parish Nurse is on-site at the local soup kitchen 3 days a week working with the clients and directing them to facilities where they can receive the healthcare and the financial assistance they need.

### **SUBMITTED BY:**

**Community Service Plan Committee**

**c/o Fred Caso**

**Vice President – Community Relations**

**[fred.caso@msmh.org](mailto:fred.caso@msmh.org)**

**716-298-2146**

NIAGARA COUNTY HEALTH RANKINGS

ATTACHMENT 1

|   | Niagara County | Error Margin | National Benchmark* | New York | Trend | Rank (of 62) |
|---|----------------|--------------|---------------------|----------|-------|--------------|
| <b>Health Outcomes</b>                          |                |              |                     |          |       | <b>59</b>    |
| Mortality                                       |                |              |                     |          |       | 60           |
| <a href="#">Premature death</a>                 | 7,294          | 6,888-7,700  | 5,466               | 5,812    |       |              |
| Morbidity                                       |                |              |                     |          |       | 54           |
| <a href="#">Poor or fair health</a>             | 15%            | 12-18%       | 10%                 | 16%      |       |              |
| <a href="#">Poor physical health days</a>       | 4.3            | 3.6-5.1      | 2.6                 | 3.5      |       |              |
| <a href="#">Poor mental health days</a>         | 4.1            | 3.3-4.9      | 2.3                 | 3.4      |       |              |
| <a href="#">Low birthweight</a>                 | 7.8%           | 7.4-8.3%     | 6.0%                | 8.1%     |       |              |
| <b>Health Factors</b>                           |                |              |                     |          |       | <b>49</b>    |
| Health Behaviors                                |                |              |                     |          |       | 52           |
| <a href="#">Adult smoking</a>                   | 27%            | 23-32%       | 14%                 | 18%      |       |              |
| <a href="#">Adult obesity</a>                   | 29%            | 25-33%       | 25%                 | 25%      |       |              |
| <a href="#">Physical inactivity</a>             | 29%            | 25-34%       | 21%                 | 25%      |       |              |
| <a href="#">Excessive drinking</a>              | 18%            | 14-22%       | 8%                  | 17%      |       |              |
| <a href="#">Motor vehicle crash death rate</a>  | 11             | 9-13         | 12                  | 8        |       |              |
| <a href="#">Sexually transmitted infections</a> | 363            |              | 84                  | 472      |       |              |
| <a href="#">Teen birth rate</a>                 | 28             | 27-30        | 22                  | 27       |       |              |
| Clinical Care                                   |                |              |                     |          |       | 43           |

|   | Niagara County | Error Margin | National Benchmark* | New York | Trend | Rank (of 62) |
|---|----------------|--------------|---------------------|----------|-------|--------------|
| <a href="#">Uninsured</a>                             | 10%            | 9-11%        | 11%                 | 13%      |       |              |
| <a href="#">Primary care physicians</a>               | 1,373:1        |              | 631:1               | 689:1    |       |              |
| <a href="#">Preventable hospital stays</a>            | 89             | 85-94        | 49                  | 69       |       |              |
| <a href="#">Diabetic screening</a>                    | 83%            | 79-88%       | 89%                 | 83%      |       |              |
| <a href="#">Mammography screening</a>                 | 68%            | 63-73%       | 74%                 | 66%      |       |              |
| Social & Economic Factors                             |                |              |                     |          |       | 35           |
| <a href="#">High school graduation</a>                | 83%            |              |                     | 65%      |       |              |
| <a href="#">Some college</a>                          | 62%            | 60-64%       | 68%                 | 64%      |       |              |
| <a href="#">Unemployment</a>                          | 9.1%           |              | 5.4%                | 8.6%     |       |              |
| <a href="#">Children in poverty</a>                   | 20%            | 16-24%       | 13%                 | 22%      |       |              |
| <a href="#">Inadequate social support</a>             | 17%            | 13-21%       | 14%                 | 24%      |       |              |
| <a href="#">Children in single-parent households</a>  | 35%            | 32-38%       | 20%                 | 34%      |       |              |
| <a href="#">Violent crime rate</a>                    | 366            |              | 73                  | 399      |       |              |
| Physical Environment                                  |                |              |                     |          |       | 54           |
| <a href="#">Air pollution-particulate matter days</a> | 3              |              | 0                   | 4        |       |              |
| <a href="#">Air pollution-ozone days</a>              | 3              |              | 0                   | 5        |       |              |
| <a href="#">Access to recreational facilities</a>     | 12             |              | 16                  | 11       |       |              |
| <a href="#">Limited access to healthy foods</a>       | 13%            |              | 0%                  | 4%       |       |              |
| <a href="#">Fast food restaurants</a>                 | 46%            |              | 25%                 | 45%      |       |              |

\* 90th percentile, i.e., only 10% are better

Note: Blank values reflect unreliable or missing data

County Health Rankings  
 Univ of Wisconsin Population Health Institute and Robert Wood Johnson Foundation



## **COMMUNITY HEALTH SURVEY**

**As a leader in the community we are seeking your personal input and opinion about health problems that exist in the Western Niagara County area.**

**Mount St. Mary's will compile the results and utilize them as we work with others in developing, implementing, and/or continuing any necessary programs or services to address the overall health needs of the community.**

**Your opinion is important. PLEASE RETURN BY MARCH 30**

**If you have any questions, please contact Fred Caso at Mount St. Mary's at:**

**Phone: 298-2146**

**Email: [fred.caso@msmh.org](mailto:fred.caso@msmh.org)**

**Mail: Attn: Fred Caso  
Vice President – Community Relations  
Mount St. Mary's Hospital and Health Center  
5300 Military Road, Room 735  
Lewiston, NY 14092**





# Community Health Survey Questionnaire

Please take a few minutes to complete this that is designed to gather input and opinions about community health problems in Western Niagara County.

Mount St. Mary's Hospital will be utilizing the results in developing its 2012 Community Service Plan. All responses will be kept in confidence and only released as a compilation of all responses. No individuals or organizations will be specifically identified.

**1. In the following list, what do you think are the three most important factors for a Healthy Community? (*Factors which most improve the quality of life in Niagara.*)**

Check only three:

- |                                 |                                     |  |
|---------------------------------|-------------------------------------|--|
| 16 Good Place to Raise Children | 6 Excellent Race Relations          | 16 Low Crime/Safe Neighborhoods        |
| 0 Low Infant Deaths             | 0 Low Level of Child Abuse          | <b>28 Good Jobs and Health Economy</b> |
| <b>19 Strong Family Life</b>    | <b>22 Good Schools</b>              | 10 Healthy Behaviors and Lifestyles    |
| 3 Parks and Recreation          | 1 Low Adult Death and Disease Rates |  |
| 11 Clean Environment            | 13 Religious or Spiritual Values    |  |

**2. 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.*)**

Check only three:

- |                          |                                    |                        |
|--------------------------|------------------------------------|------------------------|
| <b>25 Aging Problems</b> | <b>34 Heart Disease and Stroke</b> | 0 Rape/Sexual Assault  |
| <b>31 Cancers</b>        | 2 Homicide                         | 1 Diseases (STDs)      |
| 9 Child Abuse/Neglect    | 0 Infant Death                     | 8 Teenage Pregnancy    |
| 1 Dental Problems        | <b>24 Diabetes</b>                 | 10 High Blood Pressure |
| 3 Domestic Violence      | 1 Infectious Disease               | 2 Mental Health        |
| 11 Obesity               |                                    |                        |

3. In the following list, what do you think are the three most important risky behaviors in our community? (Behaviors which have the greatest impact on overall community health.)

Check only three:

- |                         |                           |                                       |
|-------------------------|---------------------------|---------------------------------------|
| <b>29</b> Alcohol Abuse | 4 Racism                  | <b>29</b> Being Overweight            |
| 19 Tobacco Use          | 14 Dropping Out of School | 3 Not Using Birth Control             |
| <b>33</b> Drug Abuse    | 22 Poor Eating Habits     | 1 Car Safety (Seat Belts/Child Seats) |

4. How would you rate our community as a “Healthy Community?”

- 3 Very Unhealthy   17 Unhealthy   **27** Somewhat Healthy   1 Healthy   0 Very Healthy

WHY? \_\_\_\_\_

- We are an “old” community   - High rate of unemployment
- Our rate of poverty is high   - Obesity is rampant
- School dropout rate is high   - Lack of affordable dental coverage

5. How would you rate the following in your community:

- |                              |  |              |                |             |
|------------------------------|--|--------------|----------------|-------------|
| Access to Primary Care       | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 11 Very Good | <b>31</b> Good | 8 Not Good  |
| Access to Specialty Services |  | 6 Very Good  | <b>38</b> Good | 6 Not Good  |
| Education on Health Issues   |  | 9 Very Good  | <b>28</b> Good | 15 Not Good |

**Please answer the following to help us see how different people feel about local health issues.**

- Sex: 22 Male   22 Female   Zip code where you live: **Western Niagara County**  
Age: 0 25 or less   6 26 – 39   14 40 – 54   **21** 55 – 64   7 65 or over

**Ethnic group you most identify with:**

- |                          |                             |                                      |
|--------------------------|-----------------------------|--------------------------------------|
| 9 African American/Black | 4 Asian / Pacific Islander  | 2 Hispanic/Latino                    |
| 3 Native American        | <b>34</b> White / Caucasian | <input type="checkbox"/> Other _____ |

**Household income**

- 5 Less than \$20,000   12 \$20,000 to \$49,999   **34** Over \$50,000

**How do you pay for your health care? (check all that apply)**

- |                           |                            |                                      |
|---------------------------|----------------------------|--------------------------------------|
| 3 Pay cash (no insurance) | <b>24</b> Health insurance | 2 Medicaid                           |
| 6 Medicare                | 2 Veterans’ Administration | <input type="checkbox"/> Other _____ |



## **COMMUNITY HEALTH SURVEY**

**As a volunteer at Mount St. Mary's Hospital, we are seeking your personal input and opinion about health problems that exist in the Western Niagara County area.**

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**Mail: Attn: Fred Caso  
Vice President – Community Relations  
Mount St. Mary's Hospital and Health Center  
5300 Military Road, Room 735  
Lewiston, NY 14092**



# MSM Volunteers Community Health Survey Questionnaire

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Mount St. Mary's Hospital will be utilizing the results in developing its 2012 Community Service Plan. All responses will be kept in confidence and only released as a compilation of all responses. No individuals or organizations will be specifically identified.

**1. In the following list, what do you think are the three most important factors for a Healthy Community? (*Factors which most improve the quality of life in Niagara.*)**

Check only three:

- |  |                                     |  |
|--|-------------------------------------|--|
| <b>13</b> Good Place to Raise Children | 1 Excellent Race Relations          | <b>13</b> Low Crime/Safe Neighborhoods |
| 0 Low Infant Deaths                    | 0 Low Level of Child Abuse          | <b>30</b> Good Jobs and Health Economy |
| <b>12</b> Strong Family Life           | <b>15</b> Good Schools              | 3 Healthy Behaviors and Lifestyles     |
| 0 Parks and Recreation                 | 0 Low Adult Death and Disease Rates |  |
| 4 Clean Environment                    | 4 Religious or Spiritual Values     |  |

**2. 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.*)**

Check only three:

- |                         |                                    |                       |
|-------------------------|------------------------------------|-----------------------|
| <b>5</b> Aging Problems | <b>20</b> Heart Disease and Stroke | 0 Rape/Sexual Assault |
| <b>22</b> Cancers       | 2 Homicide                         | 1 Diseases (STDs)     |
| 2 Child Abuse/Neglect   | 0 Infant Death                     | 2 Teenage Pregnancy   |
| 1 Dental Problems       | <b>31</b> Diabetes                 | 5 High Blood Pressure |
| 1 Domestic Violence     | 0 Infectious Disease               | 0 Mental Health       |
| 5 Obesity               |                                    |                       |

3. In the following list, what do you think are the three most important risky behaviors in our community? (*Behaviors which have the greatest impact on overall community health.*)

Check only three:

**22** Alcohol Abuse

0 Racism

**18** Being Overweight

9 Tobacco Use

7 Dropping Out of School

0 Not Using Birth Control

**27** Drug Abuse

12 Poor Eating Habits

0 Car Safety (Seat Belts/Child Seats)

4. How would you rate our community as a “Healthy Community?”

1 Very Unhealthy 10 Unhealthy **17** Somewhat Healthy 1 Healthy 2 Very Healthy

5. How would you rate the following in your community:

Access to Primary Care    5 Very Good **21** Good 5 Not Good

Access to Specialty Services 3 Very Good **28** Good 1 Not Good

Education on Health Issues 12 Very Good **13** Good 7 Not Good

**Please answer the following to help us see how different people feel about local health issues.**

Sex: 18 Male 13 Female Zip code where you live: **Western Niagara County**

Age: 0 25 or less 3 26 – 39 3 40 – 54 **13** 55 – 64 12 65 or over

Ethnic group you most identify with:

2 African American/Black 0 Asian / Pacific Islander 0 Hispanic/Latino

1 Native American **28** White / Caucasian  Other \_\_\_\_\_

Household income

1 Less than \$20,000 5 \$20,000 to \$49,999 **25** Over \$50,000

How do you pay for your health care? (check all that apply)

0 Pay cash (no insurance) **16** Health insurance 1 Medicaid

14 Medicare 0 Veterans’ Administration  Other \_\_\_\_\_

**SURVEY PARTICIPANTS INCLUDED MEMBERS OF THE BOARD OF ASSOCIATES, ST FRANCIS GUILD, AND GENERAL HOSPITAL VOLUNTEERS**