



UHS Chenango Memorial Hospital  
Community Health Needs Assessment





**Chenango Memorial Hospital, Inc  
Community Health Needs Assessment (CHNA)  
2013-2016**

**Approved by Board of Directors on 4/7/14**

**Hospital Mission Statement**

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

**Definition and Description of the Community Served**

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

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

UHS Chenango Memorial Hospital is the only hospital in Chenango County, a rural county located in south-central New York State in the area known as the Southern Tier. There are two interstate highways accessible to Chenango County residents: I-88 and I-81. New York State Route 12 bisects the county and is the major north-south route between Binghamton and Utica. The majority of health care services are located along Route 12.

Chenango County has a total population of 50,477 and 96.9% of the population is white. The county is poor with 16% living below the Federal Poverty Level including 26% of all of its children. The median family income in 2010 was \$41,418. For 2008-2010, 8.2% of the population was unemployed compared to New York State which was 7.5%; 37% of adults with a disability have an income less than \$25,000.

Of the total number of families living in Chenango County, 10.1% are one parent families with children under 18 years. Of the total number of households in the county, 11.7% are adults 65 years or older who live alone; 28.9% have one or more persons 65 years or older. Further, the area is aging. All eight school districts have experienced a downward trend in enrollment for a combined decrease from the 2006-2007 school year to 2011-2012 of 14% or 1,311 less students.

13.8% of adults do not have health insurance. The three adult age groups with the largest percentage of uninsured are 35-44 (14.9%), 45-44 (8.1%) and 55-64 (10.5%). Younger adults cited cost as a factor for not visiting a doctor when needed. 15% of adults age 35-44 also did not see a doctor due to cost, 13.1% ages 45-54 and 12.3% ages 55-65 did not see a doctor.

Of the county's adult population, 29% have a disability. 11.1% of the county's veteran population have a service-connected disability.

### **Existing Health Care Facilities & Resources Within the Community**

Eight hospitals serve Chenango County residents. However, UHS Chenango Memorial Hospital is the only hospital located within the county. The remaining seven facilities are located in Broome, Delaware, Otsego and Madison counties. UHS Chenango Memorial is part of United Health Services (UHS). UHS Chenango Memorial has a close working relationship with UHS Binghamton General Hospital and UHS Wilson Medical Center, located in Binghamton and Johnson City respectively. UHS Chenango Memorial Hospital frequently refers or transfers patients who need more specialized care to these hospitals.

Two hospitals are part of the Bassett Healthcare Network -- A.O. Fox Memorial in Oneonta and Mary Imogene Bassett Hospital in Cooperstown. The remaining two hospitals are Community Memorial Hospital in Hamilton and Lourdes Hospital in Binghamton.

It should be noted that UHS Chenango Memorial's footprint extends into Delaware County with a health center in Sidney. UHS Delaware Valley Hospital is located in Walton and also is part of United Health Services.

UHS Chenango Memorial Hospital is a 138-bed facility. In-patient care includes pediatrics, physical therapy, general surgery, orthopedics, radiology, laboratory, medical/surgical, ICU, obstetrics, urogynecology, and hospitalists. The hospital's payer mix is primarily government based with 69.9% Medicare/HMO Medicare and 11.7% Medicaid.

Fourteen primary care centers in the county offer primary and/or women's health care. These centers are based in Afton, Bainbridge, Greene, Norwich, Oxford and Sherburne. UHS Chenango Memorial Hospital maintains primary care centers in Norwich, Oxford, Sherburne and Sidney plus pediatric and women's health centers in Norwich. UHS Hospitals maintains a primary care center in Greene. The Bassett Healthcare Network maintains primary care centers in Sherburne and Norwich as well as school-based clinics in the Sherburne-Earlville and Unadilla Valley school districts. Family Planning of South Central New York maintains a clinic in Norwich; the Albany Stratton VA maintains an outpatient clinic in Bainbridge; a privately owned family health center is located in Afton (Afton Family Health Center).

UHS Chenango Memorial Hospital's out-patient care includes primary care, women's health, cardiology, pediatrics, physical therapy, occupational therapy, speech therapy, general surgery, ambulatory surgery, gastrointestinal, orthopedics, radiology, laboratory, ENT, dental, and urogynecology. The hospital also maintains a 24/7 physician-staffed ER.

UHS Chenango Memorial is the sole provider in the county for imaging services such as MRI, CT scans and digital mammography. It is also the sole provider of urogynecology services.

There are seventeen general dentists, three orthodontists and no pediatric dentists practicing in Chenango County. Chenango Memorial's UHS Dental Center and one private practice are the only providers which accept Medicaid. Chenango County NYSARC maintains an Article 16 dental clinic through a satellite arrangement with the Broome Developmental Disabilities Service Office.

UHS Chenango Memorial Hospital is one of the few hospitals that includes a skilled nursing facility. There are a total of five residential health facilities in the county, all of which maintain Medicaid and Medicare certifications. UHS Senior Living at Chenango Memorial is licensed for 80 long-term care beds. In 2013, this nursing home had an occupancy rate of 89.6%. Some of the beds were used for short-term rehab.

There are no NYSDOH-licensed assisted living facilities in Chenango County. There are seven adult residential care facilities, four of which are licensed by New York State.

Chenango County has numerous community resources involved in health care. Please see the section below entitled "Assessment of Community Needs and Identification of Initiatives".

### **Assessment of Community Needs and Identification of Initiatives**

The Chenango Health Network (CHN), Chenango County's rural health network, played a major role in completing the Community Health Assessment for the Chenango County Department of Health. CHN is a community-based, not-for-profit, rural health network whose mission is to bring together health and human services professionals, business people and consumers to strengthen healthcare in Chenango County. The organization is governed by a Board of Directors consisting of 7-16 members who represent senior level management of health and human service providers and business as well as community members. Current Board members include:

Chenango County Public Health Director  
UHS Chenango Memorial Hospital VP of Operations  
Commissioner of Chenango County DSS  
Director of Chenango County Area Agency on Aging  
Director of Chenango County Mental Hygiene Services  
CEO of Family Planning of SCNY  
Executive Director of Chenango Hospice & Palliative Care  
Executive Director of Chenango Valley Home and Apartments  
Dean of Morrisville College – Norwich Campus  
HR Director of Golden Artist Colors  
Doctor of Pharmacy with a local pharmacy  
Two retired school administrators  
Community member

The CHN Board convened meetings, facilitated discussions and solicited input from local health and human service providers, businesses and community members in 2013. A total of 30 community members participated in three small group discussions. Participants were of varying ages and incomes including Headstart participants. Local organizations met separately and in so doing shared their experiences working with the socio-economically challenged residents in



Chenango County. These organizations are acutely aware of the needs of these individuals due to their frequent, and often daily, contact with them. *The discussion focused on ways to address elements of the NYS Prevention Agenda while building on strengths, existing partnerships and resources of the local public health system.* The following is a listing of opportunities and priorities which resulted from these meetings.

- Increase access to health insurance for county residents, adults and children.
- Address needs of persons receiving care from Chenango County Mental Hygiene Services focusing on chronic disease prevention and management.
- Strengthen and support efforts of UHS Chenango Memorial Hospital to provide patient-centered care including referrals and linkages to community-based resources.
- Decrease the smoking rate among specific target groups including pregnant women. Increase referrals smoking cessation supports such as the NYS Quitline and local programs.
- Support policy change such as tobacco-free worksites, parks, playgrounds and point-of-purchase advertising.
- Improve breast cancer screening rates so that breast cancer is detected earlier.
- Market and promote local parks and playgrounds to county residents to encourage use by more people.
- Focus on healthy eating, acknowledge food insecurity issues, access to healthy foods and other stressors which may impede individuals' and families' ability to eat healthy.
- Support worksite wellness initiatives currently underway in the county, expand reach to smaller employer groups.
- Provide education and support to pregnant and post-partum women, particularly those women considered to be high risk (e.g. Medicaid, low income, teens).
- Address the increased rate of Hepatitis C infection. Establish and promote a needle exchange program in the county.
- Increase awareness and utilization of local domestic/interpersonal violence services.
- Enhance provider ability to address needs of youth-at-risk and in need of mental health services and other supports particularly when youth are receiving care from pediatric or primary care clinics.
- Increase utilization of hospice and palliative care services.

## **Identification of Initiatives**

Three groups met focusing on either a) providers, b) chronic disease, or c) healthy women, infants and children to help narrow the list. Some priorities, such as behavioral health, were deemed too big to tackle with the resources available. Representatives in these groups were:

- Providers  
Entire Chenango Health Network Board (see list on pages 3-4)
  
- Chronic Disease  
Chenango County Public Health Director  
UHS Chenango Memorial Hospital VP of Operations  
Chenango Health Network Executive Director
  
- Healthy Women, Infants and Children  
Chenango Health Network Executive Director  
Chenango County Public Health Director  
UHS Chenango Memorial Hospital VP of Operations  
Commissioner of Chenango County DSS  
Director of Chenango County Mental Hygiene Services  
CEO of Family Planning of SCNY  
Opportunities for Chenango Executive Director  
Chenango County Catholic Charities Executive Director

It must be noted that there is an immense need for services in Chenango County. Unfortunately, UHS Chenango Memorial Hospital faces millions of dollars in reduced reimbursement from Medicare and Medicaid over the next several years. These cuts already affect the amount of work we can do because we need the resources to maintain existing services. Likewise, Public Health is experiencing less grant funding which has already impacted the “Baby and Me, Tobacco Free” program. The CHN will discontinue the Tobacco Free Coalition because the grant supporting this program has been regionalized and only one applicant will be funded to serve Chenango, Tompkins and Cortland Counties. The CHN will not apply because of the three-county requirement.

Over the course of 3-4 months, the CHN Executive Director, UHS Chenango Memorial Hospital VP of Operations, and the Chenango County Public Health Director met as a subcommittee to narrow the list of priorities based on the following criteria:

- Connection back to the NYS Prevention Agenda
- Existing knowledge base of community partners to address the priorities
- Capacity to work on the priorities
- Ways to measure outcomes
- Coordination of services to achieve the greatest impact for the money and resources
- Prevent duplication of effort to expand resources further
- Priorities that could be started immediately
- Serve the socio-economically challenged residents of Chenango County

Based on the process mentioned above, the priorities were narrowed down to:

- 1. Prevent Chronic Disease**
- 2. Healthy Women, Infants and Children**

CHN then hosted two all-day workshops on August 20 and August 28, 2013. Invitations with the agenda went out in June inviting numerous health and human service organizations to attend. The following participants included governmental agencies, Public Health, and community-based organizations that discussed the needs of the county.

Chenango County Health Network (Tobacco Free Chenango)  
Southern Tier AIDS Program  
Chenango County Environmental Health  
Opportunities for Chenango – WIC Program  
Chenango County Department of Health  
UHS Hospitals  
UHS Chenango Memorial Hospital  
Chenango County Catholic Charities including Crime Victims Program  
Family Planning of South Central New York  
Chenango County Mental Hygiene/Drug & Alcohol  
Mothers & Babies Perinatal Network  
Family Resource Network

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

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

- Connection back to the NYS Prevention Agenda
- Existing knowledge base of community partners to address the priorities
- Capacity to work on the priorities
- Ways to measure outcomes
- Coordination of services to achieve the greatest impact for the money and resources
- Prevent duplication of effort to expand resources further
- Priorities that could be started immediately
- Serve the socio-economically challenged residents of Chenango County

## **Three Year Plan of Action**

### **Priority Area: Prevent Chronic Disease**

#### **Goal: Reduce Tobacco Use**

- Decrease the smoking rate among antepartum patients in Chenango County by 5% by year end 2014 and by 10% by year end 2015.
- Chenango Memorial will focus on the antepartum patients for these reasons:
- Approximately 75% of Chenango Memorial's antepartum patient base is self-pay or covered by Medicaid. This represents about 225 babies and mothers per year.
- This group of patients has numerous socio-economic challenges and represents a disparity common in this extremely rural county.
- Anti-tobacco use is critical for the health of the unborn child and the mother.

#### *Tactics*

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

#### *Performance Actions and Measures*

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



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

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

**Priority Area: Healthy Women, Infants and Children**

**Goal: Provide education and support to pregnant women, particularly those women considered high risk and covered by Medicaid.**

UHS Chenango Memorial will focus on the antepartum patients for some of the same reasons as mentioned previously:

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

*Tactics*

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

*Performance and Action Measures*

- Improve attendance of the pre-natal educational program by redesigning the program. Use attendance sheets signed by the participants to measure attendance. A baseline will

be established in 2013 to measure progress starting in 2014. The goal will be to have 100% of first-time mothers attend the class in 2015. A baseline for first-time mothers will be established in 2014.

- Ensure the education is worthwhile by developing a survey for the participants to complete at the end of each class and at the end of the program. A baseline will be established in 2014 to measure progress in 2015 and beyond. The goal will be to have a rating of “excellent” from 75% of the participants in 2015.
- Track the number of “Baby Basics” books distributed, especially to first-time moms, during the patient’s first pre-natal visit to the Women’s Health Center. In 2014 and 2015, 100% of first-time mothers will receive the book. Track attendance during the monthly “Baby Basics” programs and interview new moms to evaluate if the information provided was helpful.

The overall goal with this initiative is to provide new mothers and their partners with the confidence and skills for a positive birthing experience. The classes will include specific instruction to prevent illness or injury of their newborn as well as a comprehensive overview of the birthing experience, how to care for a newborn baby, and a discussion of community resources. This is especially important for first-time moms, many of whom are socio-economically challenged, very young themselves, and are unfamiliar with the resources to help with newborns and young children.

There will be an emphasis on lactation. Breast milk provides the ideal nutrition for infants. It has a nearly perfect mix of vitamins, protein, and fat -- everything the baby needs to grow. Breast milk contains antibodies that help the baby fight off viruses and bacteria. Breastfeeding lowers the baby's risk of having asthma or allergies. Plus, babies who are breastfed exclusively for the first 6 months, without any formula, have fewer ear infections, respiratory illnesses, and bouts of diarrhea. They also have fewer hospitalizations and trips to the doctor.

The Chenango County Department of Health will discuss numerous resources and programs in the community that the socio-economically challenged mothers can tap into for help. These resources will include Women, Infants & Children (WIC) and Catholic Charities. Public Health will also discuss immunizations, lead poisoning, crib safety and similar topics. By the end of the last class, moms will know about the community resources available should the need arise.

As mentioned earlier, the collaboration of the Chenango County Department of Public Health, UHS Chenango Memorial Hospital and other agencies is the strongest aspect in executing this plan. Our challenge will be to get people to participate, especially the low socio-economic population who don’t consider these types of programs a high priority because they don’t think they need the information or they think they get it from other sources, i.e. friends and the internet.

UHS Chenango Memorial Hospital and the Chenango County Department of Health in collaboration with other community agencies are working with the resources we have available to achieve these initiatives. Additional funding from the state targeted toward community health initiatives would bolster everyone’s ability to address the health issues in this area.

## **Maintaining Engagement with Local Partners**

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

UHS Chenango Memorial Hospital  
Women's Health Center Site Manager  
Nurse Manager – Obstetrics  
Director of Special Projects  
Chenango County Department of Health  
Supervising Public Health Nurse  
Director of Nursing

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

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

## **Other NYS Prevention Agenda Initiatives**

In addition to the targeted priorities mentioned above, UHS Chenango Memorial Hospital will continue to work on the health-related initiatives listed below. These initiatives were not as high on the priority list due to lack of financial and human resources to address them and measure outcomes. We chose instead to focus our efforts and resources on the targeted priorities mentioned above to achieve the greatest impact. That being said, the initiatives listed below are still important in Chenango County and we continue to work on them at UHS Chenango Memorial Hospital:

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

### **Dissemination of the Plan to the Public**

The Community Health Needs Assessment is made available to the public through a link on our website <http://www.uhs.net> in our “About Us” section. The report is downloadable in Adobe Acrobat format (PDF) and information is provided regarding how to obtain free hard copy. A free paper copy will also be available at the Office of the President, Patient Registration as well as in the Community Relations Department.