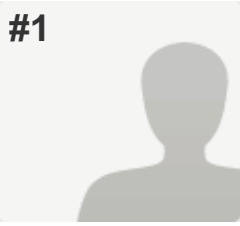


#1



COMPLETE

Collector: PA_Progress_Report (Web Link)

Started: Tuesday, December 02, 2014 11:40:31 AM

Last Modified: Friday, December 12, 2014 12:04:27 PM

Time Spent: Over a week

IP Address: 69.74.115.3

PAGE 2: First Prevention Agenda Priority Area

Q1: What is the first Prevention Agenda Priority Area you are reporting on? Select only one

Prevent Chronic Diseases

PAGE 3: Preventing Chronic Diseases

Q2: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area

Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings.

Q3: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.

Other (please specify)
Kingsbrook has adopted the NCQA 's Patient-Centered Medical Home (PCMH) module, an innovative program for improving primary care; especially as it pertains to our chronic disease treatment, via a set of standards that describe clear and specific criteria, the program gives practices information about organizing care around patients, working in teams and coordinating and tracking care over time. Chronic disease focuses include: comprehensive diabetes care: blood pressure/nephropathy monitoring/HbA1c control/, monitoring colorectal cancer screenings, MU tobacco use/smoking cessation, cervical cancer screening, MU breast cancer screening, post specialty care visits/wait times, referrals & inadequate documentation.

<p>Q4: What process measures are being used to monitor progress on this intervention? Choose all that apply.</p>	<p>Number of municipalities, community-based organizations, worksites and hospitals that develop and adopt policies to implement nutrition standards (cafeterias, snack bars, vending)</p> <p>,</p>
	<p>Number of cancer screening events held in partnership with community providers</p> <p>,</p>
	<p>Number of individuals navigated to and/or through cancer screening</p> <p>,</p>
	<p>Other (please specify) PCMH: blood pressure/nephropathy monitoring/HbA1c control/, monitoring colorectal cancer screenings, MU tobacco use/smoking cessation, cervical cancer screening, MU breast cancer screening, post specialty care visits/wait times, referrals & inadequate documentation.</p>

PAGE 4: Promote a Healthy and Safe Environment

<p>Q5: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area</p>	<p><i>Respondent skipped this question</i></p>
<p>Q6: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.</p>	<p><i>Respondent skipped this question</i></p>
<p>Q7: What process measures are being used to monitor progress on this intervention? Choose all that apply.</p>	<p><i>Respondent skipped this question</i></p>

PAGE 5: Promote Healthy Women, Infants and Children

<p>Q8: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area</p>	<p><i>Respondent skipped this question</i></p>
<p>Q9: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.</p>	<p><i>Respondent skipped this question</i></p>

Prevention Agenda Annual Progress Report - December 2014

Q10: What process measures are being used to monitor progress on this intervention? Choose all that apply

Respondent skipped this question

PAGE 6: Promote Mental Health and Prevent Substance Abuse

Q11: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area

Respondent skipped this question

Q12: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.

Respondent skipped this question

Q13: What process measures are being used to monitor progress on this intervention?

Respondent skipped this question

PAGE 7: HIV, STDs, Vaccine-Preventable Diseases and Healthcare Associated Infections

Q14: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area

Respondent skipped this question

Q15: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.

Respondent skipped this question

Q16: What process measures are being used to monitor progress on this intervention?

Respondent skipped this question

PAGE 8: Intervention detail

Q17: Describe the target population (e.g., problem/burden affecting this population, demographics, geographical locations, etc.)

The region of Central Brooklyn including: 11203 (Flatbush), 11213 (Crown Heights), 11212 (Brownsville), 11236 (Canarsie):

RACE DEMOGRAPHICS HEALTH PROFILE

Black Non-Hispanic 80.0% Asthma 5%
 Hispanic 11.0% Diabetes 12%
 White Non-Hispanic 5.0% HIV 23.4%
 Asian Non-Hispanic 1.0% Obesity 29%
 All Others 3.0% Depression 5%
 Hypertension 32%
 Cholesterol 26%

Q18: What is the expected number of people to be reached by end of 2014 or the end of the first year of activities?

136,000

Q19: How many people have you actually reached toward this target?

123,846

Q20: Are you addressing a disparity with this intervention?

Yes

PAGE 9: Disparities

Q21: Which of the following types of disparities are you addressing? Check all that apply

Income/SES, Race/ethnicity

Q22: How are you working with the target populations addressed by the intervention? Check all that apply

The intervention is focused within specific neighborhoods

The program screens and offers services to high-need participants

The program takes into consideration specific cultural needs (please specify)

PAGE 10: Baseline data

Q23: Were baseline data collected for the process measures selected? Select only one

Yes, for some of them

PAGE 11: Periodicity of data collection

Q24: On average, how often are you collecting data for your intervention? Check all that apply	Quarterly
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PAGE 12: Status of Implementation Effort

Q25: What is the current status of your implementation efforts related to this intervention? Select only one	On track with implementation schedule
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PAGE 13: Partnership Development

Q26: Who are the current partners involved in the implementation of the intervention just described? Check all that apply	Government or community-based organization - Mental and Behavioral Health (including Substance Abuse) , Faith-based organization, Health Insurance Plan, Community health center/Federally Qualified Health Center , Hospital
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PAGE 14: Partner Engagement

Q27: What is the role of partners in this intervention? Check all that apply.	Allows/sponsors access to the site or population
Q28: Overall, how would you rate the level of engagement of your partners/members in the implementation of this intervention? Select only one	Engaged
Q29: Describe any successes in engaging partners to actively work on this intervention: Check all that apply	Enables us to offer intervention activities to a target population
Q30: Describe any challenges in keeping members of your partnerships engaged and/or actively participating in the implementation of this intervention. Check all that apply	Challenging to offer programs to target population

Q31: Do you need help developing or sustaining partnerships with certain sectors? Yes

PAGE 15: Strengthening Partnerships

Q32: What types of partnerships do you need help with? Check all that apply

Hospital,
Community health center/Federally Qualified Health Center
,
Health Insurance Plan, College/University,
Faith-based organization,
Government or community-based organization - Mental and Behavioral Health (including Substance Abuse)
,
Government or community-based organization - Social Services

PAGE 16: Overall Successes and Challenges of Implementation of Intervention Strategies

Q33: What have been the successes in implementing the intervention you described? Mark all that apply

Reviewing and monitoring progress with partners
,
Establishing clear implementation timelines/milestones
,
Developing data collection methods,
Identifying process and outcome measures to monitor progress toward reaching goals
,
Researching evidence-based interventions to address problem among target population
,
Establishing clear goals,
Defining target population,
Educating the community about the problem

Prevention Agenda Annual Progress Report - December 2014

Q34: What challenges are you facing in the implementation of the intervention? Mark all that apply

Educating the community about the problem,
Engaging community leaders to address problem

PAGE 17: Second Prevention Agenda Priority Area

Q35: What is the second Prevention Agenda Priority Area you are reporting on? Select only one

Prevent HIV/STDs, Vaccine-Preventable Disease, and Healthcare-Associated Infections

PAGE 18: Preventing Chronic Diseases

Q36: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area

Respondent skipped this question

Q37: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.

Respondent skipped this question

Q38: What process measures are being used to monitor progress on this intervention? Choose all that apply.

Respondent skipped this question

PAGE 19: Promote a Healthy and Safe Environment

Q39: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area

Respondent skipped this question

Q40: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.

Respondent skipped this question

Q41: What process measures are being used to monitor progress on this intervention? Choose all that apply.

Respondent skipped this question

PAGE 20: Promote Healthy Women, Infants and Children

Prevention Agenda Annual Progress Report - December 2014

<p>Q42: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area</p>	<p><i>Respondent skipped this question</i></p>
<p>Q43: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.</p>	<p><i>Respondent skipped this question</i></p>
<p>Q44: What process measures are being used to monitor progress on this intervention? Choose all that apply</p>	<p><i>Respondent skipped this question</i></p>

PAGE 21: Promote Mental Health and Prevent Substance Abuse

<p>Q45: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area</p>	<p><i>Respondent skipped this question</i></p>
<p>Q46: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.</p>	<p><i>Respondent skipped this question</i></p>
<p>Q47: What process measures are being used to monitor progress on this intervention</p>	<p><i>Respondent skipped this question</i></p>

PAGE 22: HIV, STDs, Vaccine-Preventable Diseases and Healthcare Associated Infection

<p>Q48: Within this Prevention Agenda priority area, which Focus Area are you reporting on? Select one Focus Area</p>	<p>Prevent HIV and STDs</p>
<p>Q49: Please select one intervention from this Focus Area to report on. If there are multiple interventions, select the one that is furthest along in implementation.</p>	<p>Include at least two cofactors that drive the HIV virus, such as homelessness, substance use, history of incarceration and mental health, in community interventions</p>
<p>Q50: What process measures are being used to monitor progress on this intervention?</p>	<p>Number of primary care clinicians trained in treatment and diagnosis of STDs , Protocols and supplies for preferred testing modalities according to current CDC treatment guidelines for syphilis, gonorrhea and chlamydia beyond government clinics</p>

PAGE 23: Intervention detail

Q51: Describe the target population (e.g., problem/burden affecting this population, demographics, geographical locations, etc.)

The region of Central Brooklyn including: 11203 (Flatbush), 11213 (Crown Heights), 11212 (Brownsville), 11236 (Canarsie).

Central Brooklyn Breakdown (317,300)
11213 (Crown Heights), 11212 (Brownsville)

RACE DEMOGRAPHICS HEALTH PROFILE
 Black Non-Hispanic 80.0% Asthma 5%
 Hispanic 11.0% Diabetes 12%
 White Non-Hispanic 5.0% HIV 23.4%
 Asian Non-Hispanic 1.0% Obesity 29%
 All Others 3.0% Depression 5%
 Hypertension 32%
 Cholesterol `` 26%

Q52: What is the expected number of people to be reached by the end of 2014, or the end of the first year of activities? 4,000

Q53: How many people have you actually reached toward this target? 4,175

Q54: Are you addressing a disparity with this intervention? Yes

PAGE 24: Disparities

Q55: Which of the following types of disparities are you addressing? Check all that apply Race/ethnicity, Income/SES, Age

Q56: How are you working with the target populations addressed by the intervention? Check all that apply

The intervention is focused within specific neighborhoods
,

The program screens and offers services to high-need participants
,

The program takes into consideration specific cultural needs (please specify)

PAGE 25: Baseline data

Q57: Were baseline data collected for the process measures selected? Select only one

Yes, for all of them

PAGE 26: Periodicity of data collection

Q58: On average, how often are you collecting data on these process measures? Check all that apply

Monthly

PAGE 27: Status of Implementation Effort

Q59: What is the current status of your implementation efforts related to this intervention? Select only one

On track with implementation schedule

PAGE 28: Partnership Development

Q60: Who are the current partners involved in the implementation of the intervention just described? Check all that apply

Government or community- based organization -
Transportation

,

Government or community-based organization -
Social Services

,

Government or community-based organization -
Mental and Behavioral Health (including
Substance Abuse)

,

Government or community-based organization -
Housing

,

Health Insurance Plan

PAGE 29: Partner Engagement

Q61: What is the role of partners in this intervention? Check all that apply.

Assist with advocacy, Provides a health service,
Conducts educational activities,
Coordinate intervention

Prevention Agenda Annual Progress Report - December 2014

Q62: Overall, how would you rate the level of engagement of your partners/members in the implementation of this intervention? Select only one	Engaged
Q63: Describe any successes in engaging partners to actively work on this intervention: Check all that apply	Helps with training coalition members, Enables us to offer intervention activities to a target population
Q64: Describe any challenges in keeping members of your partnerships engaged and/or actively participating in the implementation of this intervention. Check all that apply	Challenging to offer programs to target population.
Q65: Do you need help developing or sustaining partnerships with certain sectors?	Yes

PAGE 30: Strengthening Partnerships

Q66: What types of partnerships do you need help with? Check all that apply	Hospital, Community health center/Federally Qualified Health Center , Health Insurance Plan
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PAGE 31: Overall Successes and Challenges of Implementation of Intervention Strategies

Q67: What have been the successes in implementing the intervention you described? Mark all that apply	Establishing clear implementation timelines/milestones , Developing data collection methods, Identifying process and outcome measures to monitor progress toward reaching goals , Establishing clear goals, Defining target population, Engaging community leaders to address problem , Educating the community about the problem, Identifying burden/problem to be addressed
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Q68: What challenges are you facing in the implementation of the intervention? Mark all that apply	Reviewing and monitoring progress with partners
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PAGE 32: Location

Q69: In what county is your hospital or local health department (LHD) located?	New York City (all counties)
Q70: Are you reporting from a LHD or hospital? Select one	Hospital

PAGE 33: LHD Contact Information Verification

Q71: Please review contact information for your LHD liaison at: http://www.health.ny.gov/prevention/prevention_agenda/contact_list.htm and provide correction if needed.	<i>Respondent skipped this question</i>
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PAGE 34: LHD Liaison

Q72: LHD liaison Please provide the name, title, phone (with area code) and email contact of your CHA-CHIP liaison.	<i>Respondent skipped this question</i>
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PAGE 35: Hospital Name

Q73: Please select hospital(s) that you are reporting on: (Choose all that apply)	Kingsbrook Jewish Medical Center
Q74: Hospital liaison Please provide the name, title, phone (with area code) and email contact of your CSP liaison.	
Name of Hospital CSP Liaison	Enid Dillard
Title	Director of Marketing and Public Affairs
Phone (with area code)	718-604-5201
Email Contact	edillard@kingsbrook.org
Q75: If reporting for a hospital, are any of your Prevention Agenda activities incorporated in your DSRIP application? Select only one	No

Q76: Are the two interventions you provided detail on this report described as a community benefit in the Schedule H tax form? Select only one Unsure

PAGE 36: Review Summary of Plan

Q77: Please review the summary of your CHIP/CSP attached. Does this accurately reflect the priorities, focus areas, goals, and interventions from the plan you submitted in 2013? Please note, these documents can also be downloaded off the commerce site. (1) You will need to sign into the commerce site at <https://commerce.health.state.ny.us>; (2) After you are signed in, paste the url <http://tinyurl.com/summary-chip-csp> on the address line. No, a revised description needs to be submitted. Please send changes to prevention@health.ny.gov with "Progress Report" in the Subject line.

PAGE 37: Needs and Comments

Q78: What tools, support, or resources do you need to fully implement your plan?

Improved Quality Reporting Systems for Chronic Disease and HIV Care/Management.

Q79: Is there anything else you would like us to know or any other information you would like to share?

Respondent skipped this question

PAGE 38: Final Page

Q80: Are ready to submit your survey? Changes can no longer be made after you click "done". Yes