Ellenville Regional Hospital Community Health Needs Assessment 2022-2024



10 Healthy Way

Ellenville, NY 12428

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Ellenville Regional Hospital

Community Health Needs Assessment

2022-2024

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Ellenville Regional Hospital

Community Health Needs Assessment

2022-2024

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Executive Summary

Every three years, the New York State (NYS) Department of Health (DOH) requires local health departments (LHD) to submit Community Health Assessments (CHA) and hospitals to submit Community Health Needs Assessments (CHNA). LHDs and hospitals collaborate with community partners and residents to create Community Health Improvement Plans (CHIP) and Community Service Plans (CSP), respectively. These assessments and plans are meant to meet several requirements from NYS Public Health Law and the Affordable Care Act. In recent years, the NYSDOH has encouraged LHDs and hospitals to collaborate in the creation of these documents to better serve their communities.

In 2017, the seven LHDs of the Mid-Hudson Region (M-H Region), including Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, and Westchester Counties, created the Local Health Department Prevention Agenda Collaborative with the goal of conducting regional resident and provider surveys, creating a regional CHA, and collaborating on common CHIP priorities. This regional approach was continued for the 2022 CHA, CHIP, and CSP cycle, with the collaborative being renamed the Hudson Valley Public Health Collaborative (HVPHC).

A CHA depicts a comprehensive review of a community's current health status, factors contributing to higher health risks or poor health outcomes, and community resources available to improve health. When conducting the Regional CHA, the HVPHC gathers data and information from as many sources as possible so that a comprehensive assessment can be completed.1 The CHA can then inform the community to make decisions and develop plans to improve the health of the region.

The LHDs in the HVPHC used Epidemiology and Laboratory Capacity COVID-19 funds, along with partial funding from Garnett Health to contract with Siena College Research Institute (SCRI) to conduct a regional community health survey as a component of the Regional CHA. To further supplement the data collected, members of the HVPHC held focus groups and conducted a survey of community partners to understand the needs of specific communities and populations and the barriers they face to achieving optimal health. Along with the primary data collected through the surveys and focus groups, secondary data were compiled to display health indicators for the M-H Region. Each health indicator was narrated to contextualize the data and outline how each indicator relates.

This document was written by the HVPHC and is intended to serve as a reference for key health information for all stakeholders within the M-H Region and assist them in identifying and prioritizing the health needs of the region and the communities. An additional goal of this project is to initiate collaboration to address key health issues in the region and to inform the CHIPs of each county and the CSPs of non-profits 501(c)(3) hospitals. (Mid-Hudson Region Community Health Assessment, 2022).

ERH, with its service area composed predominantly of the Town of Wawarsing (population 12,814), and the surrounding areas, has through the health assessment process, identified cancer and substance use disorder as two health conditions resulting in premature death and disparate impact in the service area. In Ulster County, the rate of cancer diagnoses is like that of New York State (468 per 100k in UC vs 484.8 per 100k in NYS), however cancer mortality rates are far higher in Ulster County (153.3 per 100k in UC vs. 138.4 per 100k in NYS). This indicates a need

for earlier screenings to detect these cancer diagnoses and increase survival rates. Substance use has had an immediate impact on the rate of premature death in Ulster County, with 68 overdose fatalities in 2021.

Mission & Vision

Ellenville Regional Hospital (ERH) provides exceptional health care services to all people who live, work, and visit the surrounding communities. This health care is delivered with compassion and respect based on our commitment to improving our community health through excellence, innovation, and state-of-the- art technologies.

Description of the Community Served

Ulster County is located in the southeast part of NYS, south of Albany and immediately west of the Hudson River. Bordered by Greene County to the north, Delaware County to the northwest, Sullivan County to the southwest, Orange County to the south, and Dutchess County across the Hudson River to the east, much of Ulster County can be characterized as suburban and semi-rural. The county has only one major urban area, the city of Kingston, located in the eastern central portion of the county, and encompassing just 7.4 square miles of the county's total area. The rest of the county is comprised of 20 towns and three villages. Ulster County is home to nine school districts and two colleges and universities within its 1,161-square mile area (Mid-Hudson Region Community Health Assessment, 2022).

ERH is a 25-bed rural critical access hospital that is also a teaching facility, located in the Village of Ellenville in the Town of Wawarsing in Ulster County NY. In terms of hospital patient volume, the Emergency Department has approximately 13,000 - 15,000 visits annually. In 2021, the hospital served a total of 11,681 unique patients who made 28,278 visits. Located within Ulster County, the Town of Wawarsing is situated in the Mid-Hudson Valley, approximately 90 miles northwest of New York City. The Town of Wawarsing has a population of 12,814, of which 4,209 reside within the Village of Ellenville, the largest population center (2017-2021 American Community Survey 5-Year Estimates). The ERH's service area includes the top ten zip codes serviced by the hospital. There has been no major change to the parameters of the Ellenville Regional Hospital Service Area since the 2021 CSP update was submitted.

Demographics		
	Town of	Village of
	Wawarsing	Elleville
Race/Ethnicity		
White	66.4%	53.4%
Black or African America	10.1%	7.5%
American Indian & Alaska	0.3%	0
Native		
Asian	0.9%	1.0%
other races	0.9%	14.0%
Two or more races	9.3%	24.1%
Hispanic of any race	12.9%	44.2%

Median Age	25.9%	30.9 years
Age 62 or older	42years	21.9%
Median Household income	\$54,111	\$53,846
Income below poverty	17.9%	18.9%

ERH"s catchment area includes an impoverished population borne out by some of the statistics listed above. For example, Ellenville and Wawarsing have median household incomes (shown in chart) that are substantially lower than the Ulster County median household income of \$78,938 and the NYS median household income of \$74,314 (ACS 2017-2021). In addition, the Town of Wawarsing is designated a Medically Underserved Population (MUA/P) (78828). Both factors create a significant barrier for the uninsured and under-insured to be able to access quality healthcare, other than by utilizing those health care services available through ERH. Compared to 2021 statistics for the overall population of Ulster

County (5.5% Black or African American and 11.1% Hispanic or Latino), Ellenville and Wawarsing (statistics shown in chart) stand out as diverse rural communities made up of markedly higher percentages of African American and Hispanic residents.

When looking at the health of the community in the Ellenville/Warwarsing area, it is important to note that the Ellenville Family Health Center (IFH), a primary care health center which is operated by The Institute for Family Health, one of the largest Federally Qualified Health Centers (FQHC) in New York State, is also located on the ERH campus. The Institute is committed to providing high-quality, affordable health care for all. It strives for excellence at each of its 26 practices, while accepting all patients regardless of their ability to pay. The Ellenville IFH offers primary care, mental health care, dental, and social work services, along with many other health services for patients of all ages. As part of a federally qualified community health center network, it meets national standards for affordable, accessible, and comprehensive health care services. The Center is accredited by the Joint Commission and recognized by the National Committee for Quality Assurance as a Level 3 patient-centered medical home: the highest recognition available. The IFH sees approximately 3,600 patients per year and offers same-day appointments. According to the Institute of Family Health, a Federally Qualified Healthcare Center's Ellenville Site data, nearly 59% of health center patients residing in the 12428-zip code receive Medicaid or other public insurance, and 7.6% are uninsured. Furthermore, roughly 10% of adults in the zip code have no usual source of care. The same percentage of adults have delayed or not sought care due to high cost.

Wawarsing and the Village of Ellenville were previously home to several manufacturing businesses, including Imperial Schrade and Hydro Aluminum, which employed many residents. The surrounding area also boasted several large resort hotels. However, since the mid-1990's, the Ellenville community has lost over 2,000 jobs, due in part to these businesses closing their doors and a significant decline in the tourist industry in the area. The Town and Village struggle with the issues that accompany poverty and unemployment in rural areas. Over 12% of residents in the Village are unemployed and major employers that continue to support the residents of the region are the NYS Department of Corrections, Ellenville Central School District, and Ellenville Regional Hospital.

An affordable Senior Housing project, which is a joint venture between the hospital and Warwick Properties, Inc., is located on the Ellenville Regional Hospital campus. All three phases of the project remain fully occupied, with approximately 156 senior citizens living independently in one- bedroom apartments. Funding was secured for the project from the New York State Division of Housing's Community Renewal Housing Trust Fund. The Partnership sponsoring the housing project is developing plans to build additional affordable housing close to the hospital, targeting seniors, special needs populations and possibly returning Vets.

Public Participation

To engage the community in the selection of health priorities for 2022-2024, the Ulster County Department of Health (UCDOH) took the lead, with partners Health Alliance of the Hudson Valley and Ellenville Regional Hospital, in the organization and execution of a county-wide Community Health Assessment (CHA) as UCDOH did in 2018. A Community Health Needs Assessment Survey was used to confirm existing priorities and to help develop new evidence-based strategies. Conducted by Siena College Research Institute, a 13-minute, random dial survey (70% landline, 30% cell) was conducted across the seven counties of the Hudson valley. In Ulster County, 647 individuals were surveyed, with Spanish speaking interviewers available. The three organizations (UCDOH, HA, and ERH) continued to meet throughout 2022, with additional representatives from organizations in the county including the Institute for Family Health, Cornell Cooperative Extension of Ulster County, and staff from other County departments, to continue the conversation around health priorities and initiatives to be included in the CHIP/CSP.

Ellenville Regional Rural Health Network (ERRHN), a newly formed department of Ellenville Regional Hospital (2017), worked on a project around senior health and access to healthcare throughout the survey period of the CHA. Through this project, additional surveying was done specifically with seniors in Wawarsing, and their attitudes towards telehealth and telehealth hub sites (attachment 2). The information gathered helped in the process of coordinating up to three Telehealth Hub Sites that will be dispersed throughout the hospitals service area. A plan for a potential pilot site in Wawarsing is still being conducted. In addition to these extra surveys, the ERRHN, along with its partners, also completed a senior focused gaps analysis for Wawarsing (attachment 3).

Additionally, the Healthy Ulster Council, a broad-based coalition formed by representatives from a variety of organizations and agencies in 2010, has been ongoing in its work of focusing on health problems in Ulster County and ways to improve health outcomes. Regular meetings of the Coalition, along with presentations and discussions, have kept the larger community, including Ellenville and the Town of Warwarsing, involved in the process of tracking health concerns and solutions.

Assessment and Selection of Public Health Priorities

A work group made up of key staff from UCDOH, Health Alliance of the Hudson Valley and Ellenville Regional Hospital met regularly to review local health data in conjunction with the existing Community Health Improvement Plan and the Community Service Plans for the two hospitals. This work group reviewed the status of existing community.

interventions and best practices, analyzed the results of the UC Community Health Needs Assessment, and presented findings to the three main community coalitions working in these priority areas. Following these efforts, the work group elected to continue working towards the two previously selected Priority Areas (PAs): Prevent Chronic Disease and Promote Well-Being and Prevent Mental and Substance Use Disorders for the next 2022-2024 years. The specific interventions selected for each hospital system will be jointly monitored by the work group and the larger coalitions.

With an emphasis on these two PAs, the partners are closely watching the upward trends in suicide rates, opioid overdose rates, adult smoking rates, exposure to secondhand smoke, tobacco marketing to youth, child poverty rates, food insecurity, teen pregnancy rates, child and adult obesity rates, hypertension rates, premature death rates, and preventable hospitalizations. At the same time, many positive programs to promote health are being developed or expanded by the partners, while they are also working on interventions and programs to prevent the development of chronic diseases.

For ERH specifically, the Focus Areas chosen within the two Prevention Agenda Priorities for the years 2022-2024 are to

- 1) Prevent Chronic Diseases Focus Area 4: Preventive care and management
- 2) Promote Well-Being and Prevent Mental and Substance Use Disorders Focus Area 2:

The Emergency Department (ED) has historically been a critical point of access for emergent trauma, overdoses, and other medical crises. In 2021, the total number of opioid related ED visits at ERH was 192, and overdoses accounted for 49 of those visits. Ellenville First Aid and Rescue Squad transported 93 of these patients to ERH. As per the recent New York State County Opioid Quarterly Report (October 2022), Ulster County experienced 166 opioid overdose ED visits in 2021. Ulster County Medical Examiner data shows that there were 66 fatal opioid overdoses in 2020, and 71 in 2021, the County's highest on record. Since the start of the COVID-19 Pandemic in 2020, both the raw number of overdoses and the number of opioid fatalities has increased.

The burden of impact the community has experienced because of the opioid crisis, highlighted by the data presented, lead to the selection of preventing substance overdose and fatality as the second focus area.

Priority Area #1: Preventing Chronic Diseases

Focus Area 4: Preventive care and management.

Goal 4.1: Increase cancer screening rates.

<u>Intervention 1 Summary:</u> ERH is working to identify patients that are newly eligible for certain cancer screenings including lung cancer, colorectal cancer, breast cancer, and cervical cancer. Those that are eligible will receive education regarding the importance of these screenings, assistance with scheduling

appointments, and assistance with overcoming barriers such as lack of insurance or transportation. All of this is done with the goal of early detection, treatment, and prevention.

<u>Intervention 2 Summary:</u> ERH is working to identify and recruit individuals who are interested in learning more about preventive care or cancer prevention. These individuals can actively work with a community health worker to practice healthy goal setting, increasing physical activity and building motivation. These individuals can also actively work with a nutritionist to help make lasting healthy lifestyle changes. All these activities are provided at no direct cost and have a common goal of decreasing risk of developing some cancers or chronic diseases.

<u>Intervention 3 Summary:</u> ERH is working to identify current tobacco users to provide tobacco cessation counseling in an individual or group setting. This service is provided at no direct cost with a goal of decreasing risk of developing some cancers or chronic diseases.

Priority Area #2: Promote the Well-being and Prevent Mental Health and Substance Use Disorders Focus Area 2:

Mental Health and Substance Use Disfunction

Goal 2.2: Prevent opioid overdose deaths.

Intervention 1 Summary: Implement Project RESCUE, a collaborative partnership between ERH and Catholic Charities of Orange, Sullivan, and Ulster. Medication Assisted Recovery (MAR) (Buprenorphine) will be available in the ED for induction 24/7 (with assessment for withdrawal symptoms) with a warm hand off to a certified recovery peer advocate (CRPA) and a referral to start treatment. MAR is available for up to three days in the ED, with a guaranteed treatment start day with partnering agencies of day four. Continue to link inducted patients to the MAT Care Manager, as necessary.

<u>Intervention 2 Summary:</u> Provide necessary harm reduction supplies and guidance to prevent fatal overdoses and the occurrence, and transmission of infectious complications (i.e., Hep C, HIV, Endocarditis).

<u>Intervention 3 Summary:</u> Support Ulster County Sheriff's Project ORACLE to facilitate law enforcement assisted diversion for substance use disorder by participating in the county wide "High-Risk Mitigation Team," a carecoordination model that aims to reduce rates of relapse, overdose, and death.

Attachments

Attachment 1: Community Survey

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_____from the Siena College Research Institute. We are working with local Hello, this is health departments and hospital systems to survey Hudson Valley residents to better understand the health status and health-related values of people who live in the community. Are you 18 years of age or older? IF DIALING LANDLINE: May I speak with the youngest person in the household age 18 or older? IF NEEDED: You've been selected at random to be included in this survey. Your individual responses are confidential and no identifiable information about you will be shared with anyone-all responses are grouped together. The questions I am going to ask you relate to your health and to your thoughts about health-related resources in your community. Again, your responses may really help to strengthen health policies and services. IF NEEDED: In total, the survey takes approximately 10 minutes to complete and you may refuse to answer any question that you do not want to answer. Are you able to help us with this important project? Continue with survey...... OK Soft Refusal81 Hard Refusal 82 **CELLPHONE:**

Have I reached you on a cell phone?

SAFE:

STATE2:

BUSCELL:

Is the cell phone I have reached you on used only for personal use, only for business use, or used for both personal and business use?

COUNTY2:

What county in New York State do you live in? [DO NOT READ L.]	[ST]
Albany	001
Allegany	003
Bronx	005
Broome	007
Cattaraugus	009
Cayuga	011
Chautauqua	013
Chemung	015
Chenango	017
Clinton	019
Columbia	021
Cortland	023
Delaware	025
Dutchess	027
Erie	029
Essex	031
Franklin	033
Fulton	035
Genesee	037
Greene	039
Hamilton	041
Herkimer	043
Jefferson	045
Kings – Brooklyn	047
Lewis	049
Livingston	051
Madison	053
Monroe	055
Montgomery	057
Nassau	059
New York – Manhattan	061
Niagara	063
Oneida	065
Onondaga	067
Ontario	
Orange	071
Orleans	073
Oswego	075
Otsego	077
Putnam	
Queens	
Rensselaer	
Richmond - Staten Island	
Rockland	

St. Lawrence
Saratoga
Schenectady
Schoharie
Schuyler
Seneca
Steuben
Suffolk 103
Sullivan
Tioga
Tompkins
Ulster
Warren
Washington
Wayne 117
Westchester
Wyoming
Yates
Don't know/Refused
ZIPC:
What is your zip code? [ENTER 5 DIGIT ZIP CODE IN BOX AT BOTTOM OF SCREEN]
[DO NOT READ] Don't know/Refused99999
Q4:
How long have you lived in <county2> County?</county2>
Less than 1 year
At least 1 year but less than 2 years
At least 2 years but less than 5 years
5 years or more
[DO NOT READ] Don't know/Refused
O5KEY:
I'm going to read you a series of statements that some people make about the area around where they
live, that is, their community. For each, tell me if that statement is completely true of your
community, somewhat true, not very true or not at all true for your community.
Continue
Q5A:
There are enough jobs that pay a living wage.[IF NEEDED: Tell me if that statement is completely
true of your community, somewhat true, not very true or not at all true for your community.]
Completely true
Somewhat true
Not very true
Not at all true4
[DO NOT READ] Don't know
[DO NOT READ] Refused

Q5B:
Most people are able
that statement is com

e to access affordable food that is healthy and nutritious. [IF NEEDED: Tell me if npletely true of your community, somewhat true, not very true or not at all true for your community.] **O5C**: People may have a hard time finding a quality place to live due to the high cost of housing.[IF NEEDED: Tell me if that statement is completely true of your community, somewhat true, not very true or not at all true for your community.] Not at all true4 **O5D:** Parents struggle to find affordable, quality childcare.[IF NEEDED: Tell me if that statement is completely true of your community, somewhat true, not very true or not at all true for your community.] Not at all true ______4 **O5E**: There are sufficient, quality mental health providers.[IF NEEDED: Tell me if that statement is completely true of your community, somewhat true, not very true or not at all true for your community.]

Q5F:

Local government and/or local health departments, do a good job keeping citizens aware of potential
public health threats.[IF NEEDED: Tell me if that statement is completely true of your community,
omewhat true, not very true or not at all true for your community.]
Completely true
Somewhat true
Not very true
Not at all true4
DO NOT READ] Don't know 8
DO NOT READ] Refused
Q5G:
There are places in this community where people just don't feel safe.[IF NEEDED: Tell me if that
tatement is completely true of your community, somewhat true, not very true or not at all true for
our community.]
Completely true
Somewhat true
Not very true
Not at all true4
DO NOT READ] Don't know 8
DO NOT READ] Refused
Q5H:
People can get to where they need using public transportation.[IF NEEDED: Tell me if that statement
s completely true of your community, somewhat true, not very true or not at all true for your
community.]
Completely true
Somewhat true
Not very true
Not at all true
DO NOT READ] Don't know
DO NOT READ] Boilt know
26:
Overall, how would you rate the quality of information you receive from county agencies during
bublic emergencies, such as weather events or disease outbreaks? Would you say it is excellent,
good, fair or poor?
Excellent 1
Good2
Fair
Poor
DO NOT READ] Don't know
DO NOT READ] Refused

Q7:
In general, how would you rate your physical health? Would you say that your physical health is
excellent, good, fair or poor?
Excellent
Good
Fair
Poor4
[DO NOT READ] Don't know 8
[DO NOT READ] Refused
Q8:
Mental health involves emotional, psychological and social wellbeing. How would you rate your
overall mental health? Would you say that your mental health is excellent, good, fair or poor? [IF
NEEDED: including things like hopefulness, level of anxiety and depression.]
Excellent
Good
Fair
Poor4
[DO NOT READ] Don't know
[DO NOT READ] Refused
O9KEY:
Thinking back over the past 12 months, for each of the following statements I read, tell me how
many days in an AVERAGE WEEK you did each.
Continue
Q9A:
Over the past 12 months how many days in an average week did you eat a balanced, healthy diet?
0 days
1 to 3 days
4 to 6 days
All 7 days 4
[DO NOT READ] Don't know
[DO NOT READ] Refused
Q9B:
Over the past 12 months how many days in an average week did you exercise for 30 minutes or more
a day?
0 days 1
1 to 3 days
4 to 6 days
All 7 days
[DO NOT READ] Don't know 8
[DO NOT READ] Refused9

Q9C:
Over the past 12 months how many days in an average week did you get 7 to 9 hours of sleep in a
night?
0 days 1
1 to 3 days
4 to 6 days
All 7 days4
[DO NOT READ] Don't know 8
[DO NOT READ] Refused9
Q10:
On an average day, how stressed do you feel?[IF NEEDED: Stress is when someone feels tense,
nervous, anxious, or can't sleep at night because their mind is troubled.]
Not at all stressed
Not very stressed
Somewhat stressed
Very stressed4
[DO NOT READ] Don't know 8
[DO NOT READ] Refused9
Q11:
In your everyday life, how often do you feel that you have quality encounters with friends, family,
and neighbors that make you feel that people care about you?[IF NEEDED: For example, talking to
friends on the phone, visiting friends or family, going to church or club meetings]
Less than once a week
1 to 2 times a week
3 to 5 times a week
More than 5 times a week
[DO NOT READ] Don't know
[DO NOT READ] Refused9
Q12:
How frequently in the past year, on average, did you drink alcohol?[READ LIST]
Never
Less than once per month
More than once per month, but less than weekly
More than once per week, but less than daily4
Daily
[DO NOT READ] Don't know
[DO NOT READ] Refused9

Q13:
Do you currently drink alcohol less often than you did before the COVID-19 pandemic, more often
than you did before the pandemic or about as often as you did before the pandemic?
Less often than you did
More often that you did
About as often as you did
[DO NOT READ] Don't know
[DO NOT READ] Refused9
Q14:
How frequently in the past year have you used a drug whether it was a prescription medication or
not, for non-medical reasons?
Never
Less than once per month
More than once per month, but less than weekly
More than once per week, but less than daily4
Daily 5
[DO NOT READ] Don't know
[DO NOT READ] Refused9
Q15:
Do you currently use any type of drug less often than you did before the COVID-19 pandemic, more
often than you did before the pandemic or about as often as you did before the pandemic?
Less often than you did
More often that you did
About as often as you did
[DO NOT READ] Don't know
[DO NOT READ] Refused9
Q16KEY:
In the past 12 months, have you or any other member of your household been unable to get any of the
following when it was really needed? Please answer yes or no for each item.
Continue
Q16A:
Food [IF NEEDED: Have you or any other member of your household been unable to get any of the
following when it was really needed?]
Yes
No
[DO NOT READ] Don't know
[DO NOT READ] Refused 9

Q10B:
Utilities, including heat and electric [IF NEEDED: Have you or any other member of your household
been unable to get any of the following when it was really needed?]
Yes
No
DO NOT READ] Don't know 8
DO NOT READ] Refused
Q16C:
Medicine [IF NEEDED: Have you or any other member of your household been unable to get any of
the following when it was really needed?]
Yes 1
No2
DO NOT READ] Don't know 8
DO NOT READ] Refused9
Q16D:
Any healthcare, including dental or vision [IF NEEDED: Have you or any other member of your
nousehold been unable to get any of the following when it was really needed?]
Yes1
No
[DO NOT READ] Don't know
DO NOT READ] Refused
Q16E:
Phone [IF NEEDED: Have you or any other member of your household been unable to get any of the
following when it was really needed?]
Yes1
No
DO NOT READ] Don't know 8
DO NOT READ] Refused
016F:
Fransportation [IF NEEDED: Have you or any other member of your household been unable to get
any of the following when it was really needed?]
Yes 1
No
DO NOT READ] Don't know 8
DO NOT READ] Refused9
Q16G:
Housing [IF NEEDED: Have you or any other member of your household been unable to get any of
he following when it was really needed?]
Yes
No
DO NOT READ] Don't know 8
DO NOT PEADI Pagusad

\$16H:
Childcare [IF NEEDED: Have you or any other member of your household been unable to get any of
he following when it was really needed?]
Yes 1
No
DO NOT READ] Don't know 8
DO NOT READ] Refused9
Q16I:
Access to the internet [IF NEEDED: Have you or any other member of your household been unable
o get any of the following when it was really needed?]
Yes 1
No
DO NOT READ] Don't know 8
DO NOT READ] Refused
Q17:
Have you visited a primary care physician for a routine physical or checkup within the last 12
months?
Yes 1
No
DO NOT READ] Don't know 8
DO NOT READ] Refused9
Q18:
n the last 12 months, were any of the following reasons that you did not visit a primary care provider
for a routine physical or checkup? INTERVIEWER: Read each choice and get a Yes or No response
For each
did not have insurance
did not have enough money [IF NEEDED: For things like co-payments, medications, etc] 02
did not have transportation
did not have time
chose not to go due to concerns over COVID
chose not to go for another reason
couldn't get an appointment for a routine physical or checkup 07
DO NOT READ] Other (specify)
DO NOT READ] Don't know
DO NOT READ] Refused
Q19:
Have you visited a dentist for a routine check-up or cleaning within the last 12 months?
Yes 1
No
DO NOT READ] Don't know 8
DO NOT READ1 Refused

O20: In the last 12 months, were any of the following reasons that you did not visit a dentist for a routine check-up or cleaning? INTERVIEWER: Read each choice and get a Yes or No response for each I did not have enough money [IF NEEDED: For things like co-payments, medications, etc] 02 I couldn't get an appointment for a routine check-up or cleaning....... 07 **Q21:** Sometimes people visit the emergency room for medical conditions or illnesses that are not emergencies; that is, for health-related issues that may be treatable in a doctor's office. Have you visited an emergency room for a medical issue that was not an emergency in the last 12 months? **O22:** In the last 12 months, for which of the following reasons did you visit the emergency room for a nonhealth emergency rather than a doctor's office? INTERVIEWER: Read each choice and get a Yes or No response for each The emergency room was more convenient because of location 02 The emergency room was more convenient because of hours of operation..04 At the time I thought it was a health-related emergency, though I later learned it was NOT an emergency......05 **O23**: Have you visited a mental health provider, such as a psychiatrist, psychologist, social worker, therapist for 1-on-1 appointments or group-sessions (either in-person or online), etc. within the last 12 months? Yes 1

Q24:

In the last 12 months, were any of the following reasons that you did not visit a mental health
provider? [READ LIST]INTERVIEWER: Read each choice and get a Yes or No response for each
I did not have a need for mental health services
I did not have insurance
I did not have enough money [IF NEEDED: For things like co-payments, medications, etc] 03
I did not have transportation
I did not have time
I chose not to go
A mental health provider was not available due to COVID
[DO NOT READ] Other (specify)
[DO NOT READ] Don't know
[DO NOT READ] Refused
Q25:
During COVID, have you had a tele-health appointment with any healthcare provider?
Yes
No
[DO NOT READ] Don't know
[DO NOT READ] Refused9
Q26:
Which of the following were reasons that you did not have a tele-health appointment?
I did not have a need for tele-health services
My doctor did not offer tele-health
I don't have access to the internet
I didn't know how to set up or participate in a tele-health appointment.04
I prefer in person so I didn't set up a tele-health appointment 05
I put off all medical care during the pandemic
[DO NOT READ] Other (specify)
[DO NOT READ] Don't know
[DO NOT READ] Refused
Q27:
Have you ever had COVID?
Yes 1
No
[DO NOT READ] Not sure
[DO NOT READ] Refused9

228:
And what about the other members of your household, has any other member of your household had
COVID?
Yes 1
No
DO NOT READ] Don't have any other household members 7
DO NOT READ] Not sure
DO NOT READ] Refused9
Q29:
Have you or any other household member had ongoing COVID symptoms that have lasted more than
our weeks - otherwise known as long-COVID?
Yes 1
No
DO NOT READ] Don't know 8
DO NOT READ] Refused
O30KEY:
Consider the impact of COVID on each of the following and indicate whether it has improved over
he course of the pandemic, worsened or stayed the same?
Continue
O30A:
Your physical health [IF NEEDED: Has this improved over the course of the pandemic, worsened or
tayed the same?
mproved
Worsened 2
Stayed the same
DO NOT READ] Don't know
DO NOT READ] Refused
330B:
Your mental health [IF NEEDED: Has this improved over the course of the pandemic, worsened or
tayed the same?
mproved
Worsened2
Stayed the same
DO NOT READ] Don't know
DO NOT READ] Don't know
Q30C: Your ability to obtain affordable food that is nutritious [IF NEEDED: Has this improved over the
▼
course of the pandemic, worsened or stayed the same?]
mproved1
Worsened
Stayed the same
DO NOT READ] Don't know
DO NOT READ] Refused

O30D: Your ability to maintain employment that pays at least a living wage [IF NEEDED: Has this improved over the course of the pandemic, worsened or stayed the same?] Improved 1 Your ability to afford housing [IF NEEDED: Has this improved over the course of the pandemic, worsened or stayed the same?] **O30F:** Your ability to find available, quality childcare [IF NEEDED: Has this improved over the course of the pandemic, worsened or stayed the same?] Q30G: Your ability to obtain care or to care for any member of your household that has a disability or chronic illness [IF NEEDED: Has this improved over the course of the pandemic, worsened or stayed the same?1 **O31:** Have you been vaccinated for COVID?

O32: Thinking back to when you get vaccinated, did you get it as soon as you were eligible or were you somewhat hesitant to get the COVID vaccine? [DO NOT READ] Refused9 **O33**: Why did you end up getting the vaccine? INTERVIEWER: Read all choices and get a yes or no to each response. **CELLLL:** Is there at least one telephone INSIDE your home that is currently working and is not a cell phone? LLCELL: Do you have a working cell phone? [DO NOT READ] Refused9 PHONETYP: Landline or Cell Phone Landline Only......1

HISP: Are you of Hispanic origin or descent, such as Mexican, Dominican, Puerto Rican, Cuban, or some other Spanish background? RACE: Would you consider yourself: [IF "Biracial" or "Multi-racial" ask: "What races would that be?"] BYR2: In what year were you born? INTERVIEWER: ENTER ALL FOUR DIGITS OF THE RESPONDENT'S BIRTH YEAR IN BOX AT BOTTOM OF SCREEN[IF NEEDED: This is just used to compute your age.] REFUSAL.....RF OWN: What is your living arrangement? Do you... **EMPLOY:** Which of the following categories best describes your current employment situation?[IF selfemployed: "Would that be full-time or part-time?"]

CHILD:	
Are there children under the age of 18 living in your household?	
Yes	
No	
[DO NOT READ] Refused9	
MILITARY:	
Are you or anyone in your household a veteran or a member of active duty military service?	
Yes	
No	
[DO NOT READ] Refused9	
DISABILITY:	
Do you or anyone in your household have a disability?	
Yes	
No	
[DO NOT READ] Refused9	
INCOME:	
About how much is your total household income, before any taxes? Include your own income, as	
well as your spouse or partner, or any other income you may receive, such as through government	t
benefit programs.[IF NEEDED: "I just want to remind you that you are completely anonymous. V	Ve
only use this information in aggregate form to ensure we have a representative group of New	
Yorkers."]	
Less than \$25,000	
\$25,000 to just under \$50,000	
\$50,000 to just under \$100,000	
\$100,000 to just under \$150,000	
\$150,000 or more	
[DO NOT READ] Refused9	
GENDER:	
How do you describe your gender? Do you?	
Identify as a man	
Identify as a woman	
Identify as gender queer, gender nonconforming or non-binary 3	
Identify as transgender, man	
Identify as transgender, woman	
Identify as transgender, gender non-conforming 6	
Identify as another Gender not listed, please specify7	
IDO NOT READIDon't know/Refused	

Attachment 2: Senior Focused Survey

Telewellness Hub (TWH) Survey

We are conducting this survey to collect information on telewellness hubs and the impact they have on the community. Telewellness Hubs are any easily accessible location where health or wellness services can be easily accessed virtually, through either phone or video conferencing with a healthcare provider. Ellenville Regional Hospital Rural Health Network is specifically focusing on community members who reside in the towns of Wawarsing, Mamakating, and Crawford. If you do not live in any of these areas, please do not fill out this survey. Thank you for your anticipated participation!

Wawarsing, Mamakating, and Crawford. If you do not live in any of these areas, please do not fill out this survey. Thank you for your anticipated participation!			
Have you ever heard of a Telewellness Hub (TWH)/Telehealth Hub site?			
☐ Yes ☐ No			
Please indicate your zip code in the following areas:			
□ Wawarsing (12420, 12428, 12435, 12446, 12458, 12483, 12489, 12566, 12740)			
 Mamakating (10940, 12483, 12566, 12721, 12722, 12763, 12769, 12777, 12781, 12785, 12790) 			
□ Crawford (10915, 10919, 10941, 10985, 12549, 12566, 12586, 12589, 12721)			
Other: *You do not need to complete this survey if you do not live in the above areas*			
What age group do you fall into?			
□ 18-24			
□ 25-34			
□ 35-44			
□ 35-44 □ 45-54			
□ 45-54			
□ 45-54 □ 55-64			
 45-54 55-64 65 and over Have you ever utilized a Telewellness Hub? If so, please write the location you used 			

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Why h	naven't you used a Telewellness Hub?				
	□ I don't know of any				
☐ I don't think I could use the technology					
	☐ I didn't know if I could afford it				
☐ I don't have transportation to get to one					
	Other:				
	you feel that using a TWH would be more time efficient than coming in person? I				
no,	please explain: ☐ Yes ☐No				
_					
Comn	nent:				
Do	you think that using technology for a virtual visit would be challenging for you?				
	☐ Yes ☐No				
If yes,	why?				
Would with it	d you be open to using a Telewellness Hub if there were staff available to help you				
WICH	□ Yes □ No				
_					
Comn	nent:				
	services would you be comfortable receiving at a Telewellness Hub? (Select all				
that a					
	□ Primary Care				
	☐ Mental Health ☐ Counseling				
П	☐ Counseling ☐ General Health/Wellness				
	Other:				
How f	ar do you travel to see your Primary Care Physician (PCP)?				
	☐ Less than 30 min.				

	More than 1 Hour				
How do you currently get to your appointments?					
	☐ I drive myself				
	I walk myself				
	☐ Rely on a friend or family member to drive me				
	Use public transportation				
	o you see a doctor (Primary/Specialty) for appointments ellness/Treatments/Nonemergent) per year?				
	0-1 times per year				
	1-3 times per year				
	More than 5 times a year				
	Other:				
I would follo	w up more with my provider if I had the option to do it virtually:				
	True				
	False				
Comment:					
Would havin follow up vis	g a Telewellness Hub make it more or less likely that you would attend its?				
	More likely				
	Less likely				
I think TWH (Select all th	in more rural areas would be beneficial to the following target populations: at apply):				
	Seniors				
	Adults				
	Adolescents/Children				

	□ Disabled		
	LGBTQ Community		
Comment:			
Any other su	ggestions or comments about Telewellness Hub Services:		

Thank you for your feedback, this information will be utilized in a project planning grant to help implement more Telewellness Hubs in rural areas in the future.

Attachment 3: Senior Focused Gaps Analysis

Area of Consideration	Number of adults aged 55+ that visit their Primary Care Physician (PCP) for a routine check-up at least once every 12 months. We are <u>not</u> considering number of adults aged 55+ who visited an urgent care or emergency room in the last 12 months.		
Current State	Desired State	Action Steps Notes	
1. 89% of all Ulster County residents reports 89% of adults aged 55+ answered yes. - Siena survey	1. 95% of Ellenville/Wawarsing residents' reports 95% of adults aged 55+ answered yes Siena survey	1. Education on the importance of visiting PCP yearly 2. Improving access to PCP's through telehealth 3. Improving number of seniors enrolled in Medicare and therefore able to afford routine visits 4. Improving education on The Institute for Family Health's "sliding scale" payment system for PCP appointments 4. IFH's "sliding scale" payment system allows patients to adjust their bill based on their income, creating more affordability for the patient	

Area of Consideration	Percentage of adults aged 65+ with annual influenza and pneumonia immunizations. We are <u>not</u> considering COVID vaccinations.			
Current State	Desired State	Action Steps	Notes	
1. 69.2% of Ulster County residents aged 65+ got flu shots within the past year. - Ulster County Indicators For Tracking Public Health Priority Areas (NYSDOH - Ulster County Indicators For Tracking Prevention Agenda Priority Areas (ny.gov))	1. 90% - Prevention Agenda 2013 Objective. 2. 90% - Prevention Agenda 2013 Objective.	1. Education on the importance of immunizations and disease prevention/severity 2. Improving access to education and immunization resources at TeleWellness Hubs 3. Increasing number of seniors enrolled in Medicare for immunization coverage	4.UCDOH offers seasonal influenza/pneumonia vaccination clinics	

2. 63.5% of Ulster County	Increase awareness of
residents aged 65+ had	Ulster County
pneumonia vaccine in	Department of Health
the past year.	seasonal flu and
- Ulster County	pneumonia vaccination
Indicators For	clinics
Tracking Public	5. Have UCDOH utilize TWH
Health Priority Areas	sites for clinics.
(NYSDOH - Ulster	
County Indicators	
For Tracking	
Prevention Agenda	
Priority Areas	
<u>(ny.gov)</u>)	

Area of Consideration	Percentage of adults 65+ who	participate in leisure-time physica	al activity.
Current State	Desired State	Action Steps	Notes
73.0% of Ulster County adults aged 65+ participate in leisure-time physical activity. NYS Prevention Agenda Dashboard – County Level: Ulster County (New York State Prevention Agenda Dashboard (ny.gov))	75.9% Prevention Agenda 2024 Objective	1. Education on importance of participating in leisure-time physical activity. 2. Improving access to education and resources at TeleWellness Hubs (TWH). 3. Making physical activity more easily accessible for Ulster County residents.	3.Offer physical activity classes at TWH sites or at more areas throughout the county.

Area of Consideration	Percentage of adults aged 45+ who had a test for high blood pressure or diabetes within the past three years. We are not considering those who are already diagnosed with HTN or diabetes.		
Current State	Desired State	Action Steps	Notes
57.4% of Ulster County adults aged 45+ have had a test for high blood pressure or diabetes within the past three years.	71.7% Prevention Agenda 2024 Objective	Education on importance of testing for high blood pressure and diabetes. Education on disease prevention/severity.	3.Care Connection for Aging Services in Osceola, Warsaw, and Wheatland, MO has TWH spaces

- NYS Prevention Agenda	 Improving access to which include
Dashboard – County	testing for high blood instruments to
Level: Ulster County	pressure and diabetes at measure vital signs
(New York State	TWH sites. (blood pressure,
Prevention Agenda	4. Improving access to PCP's oxygen level, heart
Dashboard (ny.gov))	through telehealth for rate, and weight).
	routine health screenings. Could also include
	blood glucose
	meters in our sites.

Area of Consideration	Percentage of premature deaths (before age 65 years).		
Current State	Desired State	Action Steps	Notes
 29.7% of premature deaths (before 65 years) in Wawarsing. NYS Prevention Agenda Dashboard – County Level: Ulster County (New York State Prevention Agenda Dashboard (ny.gov)) 	22.1% of premature deaths (before 65 years) in Ulster County. NYS Prevention Agenda Dashboard – County Level: Ulster County (New York State Prevention Agenda Dashboard (ny.gov))	1. Improving access to education and resources for achieving optimal health and preventing chronic disease at TWH sites. 2. Improving access to PCP's through telehealth for routine health screenings. 3. Improving number of people enrolled in insurance plans to cover cost of medical bills. 4. Offer wellness classes at TWH sites to promote optimal health. 5. Identify those who are eligible for cancer screenings and refer to PSS to assist with making appointments for early detection.	5.Current QI grant

Area of Consideration	Percentage of adults with chronic conditions (arthritis, asthma, CVD, diabetes, CKD, cancer) who have taken a course or class to learn how to manage their condition.		
Current State	Desired State	Action Steps	Notes
10.2% of adults with chronic conditions in Ulster County have taken a course or class to learn how to manage their condition. NYS Prevention Agenda Dashboard – County Level: Ulster County (New York State Prevention Agenda Dashboard (ny.gov))	1. 10.6% - Prevention Agenda 2024 Goal	1. Improving access to disease management resources 2. Offer disease management courses at TWH sites 3. Improving access to testing for high blood pressure and diabetes management at TWH sites. 4. Improving access to PCP's and specialists through telehealth for routine health screenings and disease management appointments.	1.Chronic Disease Self-Management Programs 3.Care Connection for Aging Services in Osceola, Warsaw, and Wheatland, MO has TWH spaces which include instruments to measure vital signs (blood pressure, oxygen level, heart rate, and weight). Could also include blood glucose meters in our sites. 3. Host events at TWH sites with ERH staff to screen for chronic conditions.

Area of	Knowledge of mental health providers in Ulster County.		
Consideration			
Current State	Desired State	Action Steps	Notes
13.6% of adults in Ulster County reporting 14 or more days with poor mental health in last month. - Ulster County Indicators For Tracking Public Health Priority Areas (NYSDOH - Ulster County Indicators For	7.8% of adults in Ulster County reporting 14 or more days with poor mental health in last month. Prevention Agenda 2013 Objective 24% 55+ Ulster County residents	Increase community knowledge of mental health resources in Ulster County. Offer mental wellness programs in TWH sites.	52% in Ulster County think access to MH providers is a top- rated issue that affects health. Community Health Survey (most recent) MH partners in HAC UCDOMH trainings

Tracking Prevention Agenda Priority Areas (ny.gov)) 2. 32% 55+ Ellenville residents think that there aren't a sufficient, quality amount	think that there aren't a sufficient, quality amount of MH providers - Siena Community	Improve access to mental health providers through telehealth. Offer mental health	Mobile Mental Health, Suicide Prevention Lifeline, NAMI Mid- Hudson, etc.
of MH providers - Siena Community	Survey	support services via TWH	Healthy People 2030 focuses on prevention,
Survey		5. Increase the proportion of PCP visits where adults screened for depression. 6. Promote partners programs (MHA support groups, IFH	screening, assessment, and treatment of mental disorders and behavioral conditions. Ulster County actively has 115 Mental Health Counselors, 6
		therapists)	Psychoanalysts
			Orange County has 125 MH Counselors from op.nysef.gov

Area of Consideration	Fall-related hospitalizations age 65+ years (per 10,000). We are <u>not</u> considering fall-related hospitalizations <65 years.		
Current State	Desired State	Action Steps	Notes
211.5 in Ulster County Ulster County Indicators For Tracking Public Health Priority Areas (NYSDOH - <u>Ulster County Indicators For Tracking Prevention Agenda Priority Areas (ny.gov)</u>)	1. 155.0 - Prevention Agenda 2013 Objective	1. Improving access to education and resources related to fall prevention at TWH sites. 2. Improving access to PCP's through telehealth for routine health screenings. 3. Offer wellness classes at TWH sites to promote optimal health and prevent falls. 4. Provide home visits to assess for fall risk.	CHW home visits Lecture "Prevent Future Falls"

Area of Consideration	Percentage of adults with obesity. We are <u>not</u> considering those with obesity <18.		
Current State	Desired State	Action Steps	Notes
28.2% obese adults in Ulster County. NYS Prevention Agenda Dashboard – County Level: Ulster County (New York State Prevention Agenda Dashboard (ny.gov))	24.2% Prevention Agenda 2024 Goal	1. Improving access to healthy food options 2. Improving access to education and resources related to obesity prevention and nutritious food sources 3. Offer nutrition consultations at TWH sites and at outside sites 4. Offer physical activity classed at TWH sites. 5. Improving access to PCP's through telehealth for routine health screenings and obesity prevention.	1.Farm-acy, FVRx program w/ CCE. 2.Ulster county food pantries and other resources.

Reference:

Mid-Hudson Region Community Assessment (2022) https://www.dutchessny.gov/Departments/DBCH/Docs/2022-2024-Mid-Hudson-Region-Community-Health-Assessment.pdf