

COVER PAGE - Putnam County Department of Health (DOH) CHA and CHIP

1. Putnam County

2. Putnam Hospital Center

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3. HealthQuest (now Nuvance Health)

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4. Community Health Assessment completed in collaboration with the Hudson Valley PHIP, seven local health departments and seventeen local hospitals

HealthConnections

## Executive Summary

For more than a decade, the Putnam County DOH has worked in close alliance with the county's only hospital, Putnam Hospital Center. This well-established relationship serves as the foundation for the partnerships across the entire local public health system (LPHS). Efforts toward health improvement planning have been most effective when approached through cooperative work.

Since 2012, the New York State DOH has required local health departments to work with local hospitals and community partners on development of the Community Health Assessment (CHA) and a Community Health Improvement Plan (CHIP). Currently, the basis of these plans is the state's own health improvement plan, the 2019-2024 *Prevention Agenda*.

### **How were priorities chosen?**

The Putnam County DOH initiated and continues to facilitate the Mobilizing for Action through Planning and Partnerships (MAPP) strategic planning process with community partners in order to develop these assessments and plans. The MAPP process uses four unique assessments to determine community priorities: Community Themes and Strengths, Community Health Status, Local Public Health System and Forces of Change. This community health assessment also includes a regional collaboration with the six Mid-Hudson local health departments, seventeen local hospitals and HealtheConnections in the creation of a Mid-Hudson Region CHA. These assessments inform the development of the CHIP. During Phase Four of the MAPP process the partners in the local public health system identified the most important issues facing the community based on data gathered from the assessments and discussed during coalition meetings.

### **What priorities were chosen and what strategies are being implemented to address the priority areas?**

Through the MAPP process two overarching priorities were identified and served as a foundation for developing the Putnam County CHIP. Specific goals and interventions were selected and are listed below.

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

##### Focus Area 2: Mental and Substance Use Disorders Prevention

**Goal 2.2:** Prevent opioid and other substance misuse and deaths

*Intervention 2.2.1: Increase availability of/access and linkages to medication-assisted treatment (MAT)*

*including Buprenorphine*

Prevention Agenda source: Promote Well-Being and Prevent Mental and Substance Use Disorders Action Plan

Health disparity addressed: Behavioral health equity stems from the notion of health equity and directs specific attention to those impacted by mental health and substance use conditions and disorders

## **II - Priority Area: Prevent Chronic Diseases**

### Focus Area 1: Healthy Eating and Food Security

**Goal 1.1:** Increase access to healthy and affordable foods and beverages

**Goal 1.3:** Increase food security

*Intervention 1.0.6:* Screen for food insecurity, facilitate and actively support referral

Prevention Agenda source: Prevent Chronic Diseases Action Plan

Health disparity addressed: Low socio-economic status; food insecure; and asset limited, income constrained, employed individuals

Through discussions with community partners, three additional prevention agenda priorities were also added to the CHIP:

## **III - Priority Area: Prevent Chronic Diseases**

### Focus Area 3: Tobacco Prevention

**Goal 3.2:** Promote tobacco use cessation

*Intervention 3.2.1:* Assist medical and behavioral health care organizations and provider groups in establishing policies, procedures and workflows to facilitate the delivery of tobacco dependence treatment

*Intervention 3.2.3:* Use health communications targeting health care providers to encourage their involvement in their patients' quit attempts encouraging use of evidence-based quitting, increasing awareness of available cessation benefits

*Local Intervention:* School districts, local agencies and coalitions have identified tobacco cessation as a priority, and in addition to expanding existing evidence-based tobacco cessation programs, plans are underway to incorporate vaping prevention and cessation programs

Prevention Agenda source: Prevent Chronic Diseases Action Plan

## **IV - Promote Healthy Women, Infants and Children**

### Focus Area 2: Perinatal and Infant Health

**Goal 2.2:** Increase Breastfeeding

*Intervention 2.2.8:* Increase access to peer and professional breastfeeding support by creating drop-in centers in faith-based, community-based or health care organizations in communities

Prevention Agenda source: Promote Healthy Women, Infants & Children Action Plan

**V - Promote a Healthy and Safe Environment**

Focus Area 4: Water Quality

**Goal 4.2:** Protect vulnerable waterbodies to reduce potential public health risks associated with exposure to recreational water

*Intervention 4.2.1:* Enhance the public's accessibility to real-time water quality information for recreational waters including beach status (open, closed) and other information

*Intervention 4.2.2:* Adopt and implement best management practice to reduce nutrient loading through resource conservation, wastewater, and storm water infrastructure improvement

*Local Intervention:* Putnam County DOH has begun developing partnerships with academia, state and local agencies to address the occurrences of HABs (Harmful Algal Blooms) in local waterbodies in Putnam

Prevention Agenda source: Promote a Healthy and Safe Environment Action Plan

**Who is involved and how can the broader community be involved?**

Established partnerships that are integral to community health planning include the: Community Resource Group, Community Health Needs Committee, Live Healthy Putnam Coalition, Mental Health Provider Group, Fall Prevention Task Force, Putnam Communities That Care Coalition, and the Suicide Prevention Task Force.

Each organization or coalition brings a particular agenda and strength to the collective; all work in concert with the ultimate goal of improving the health of the community. These partnerships form the basis for reaching out to individuals both at the organizational and personal level who want to participate in the MAPP planning process. The annual Public Health Summits have also provided an excellent platform to present and discuss data, review existing strategies and select priorities to concentrate on in the upcoming year.

The annual Public Health Summits bring together a broad representation of community health partners and encourage participation in the identification of priorities. Additionally, the broader community is encouraged to participate in public health needs assessments and planning through a variety of forums and surveys.

**How is progress and improvement being tracked?**

Formal CHIP Action Plans have been developed to cover work through 2022. All strategies and activities related to these priorities are being addressed through the lens of health equity. Throughout the process, progress and improvement are being tracked through collective reporting.

Short-term process indicators and long-term outcome indicators are gathered at the local level by collecting and analyzing primary data, obtaining qualitative feedback from partners, customers and residents and through the use of secondary data generally provided by the New York State DOH.

Progress is tracked through quarterly reports composed of information gathered from partners. Partners are identified and tasked with tracking and reporting data to the appropriate coalition. Putnam County DOH staff compiles the data and reports it to the New York State DOH on an annual basis. During coalition meetings, the data are reviewed and adjustments made as needed. For detailed information on the evidence-based strategies being implemented and how they are being tracked, see the grids located in Phase Five on pages 58 and 59.