OUR COMMUNITY SERVICE REPORT:
Health Improvement Plan 2022-2024

Counties covered
Albany, NY
Rensselaer, NY

Participating Hospitals/Hospital Systems
Albany Medical Center Hospital
Diane McAlpine, Assistant Vice President, Planning and Strategy
mcalpid@amc.edu

St. Peter’s Health Partners hospitals
Katherine DeRosa, Vice President of Mission & Community Health and Well-Being
Katherine.DeRosa@sphp.com

Participating Local Health Departments
Albany County Department of Health
Elizabeth Whalen MD, MPH
Commissioner of Health
Elizabeth.Whalen@albanycountyny.gov

Rensselaer County Department of Health
Mary Fran Wachunas
Rensselaer County Public Health Director
MWachunas@rensco.com

Coalition completing assessment and plan on behalf of participating counties/hospitals
Healthy Capital District Initiative
Kevin Jobin-Davis, Ph.D., Executive Director
kjobin-davis@HCDny.org
Albany Medical Center Hospital Executive Summary:

2022-2024 Community Health Needs Assessment and Community Service Plan

Coordinated through the Healthy Capital District Initiative (HCD), Albany and Rensselaer Counties implemented a joint project to engage health providers and community members in a regional health assessment and prioritization process. The work of hospitals, local health departments, and partners throughout our community sought to collaboratively identify the most pressing health challenges.

As a result of these community health planning efforts, five significant health priorities for the Albany and Rensselaer Counties were identified as focus areas for collective efforts: preventing and reducing the burdens of diabetes and obesity, mental health disease/substance abuse, and Covid-19. These support health priorities outlined in the New York State Department of Health’s Prevention Agenda 2022-2024 and fall within three of the Prevention Agenda priority areas.

Prevention Agenda Priorities
The priorities below were selected from the Prevention Agenda for the 2022-2024 period as significant health needs. While each lead partner is addressing these priorities, there is some variation among the goals. In general, local health departments will address environmental interventions and hospitals will address health interventions.

Prevent Chronic Diseases
- Focus Area: Chronic Disease Preventive Care and Management, Healthy Eating and Food Security, Physical Activity, and Tobacco Prevention
  - Diabetes and Obesity
  - Food insecurity

Promote Well-Being and Prevent Mental Health and Substance Use Disorders
- Focus Area: Mental and Substance Use Disorders Prevention

Prevent Communicable Diseases
- Focus Area: Vaccine Preventable Diseases
  - Covid-19

Data Reviewed
Albany Medical Center Hospital’s 2022-2024 Community Service Plan is based on the collaborative 2022 Capital Region Community Health Needs Assessment (CHNA), developed by the Healthy Capital District
Initiative in conjunction with local health departments, hospitals, community-based organizations, businesses, consumers, schools, and subject matter experts.

The health indicators selected for this report were based on a review of available public health data as well as additional data sources, such as Prevention Agenda Tracking Indicators, Vital Statistics, Behavioral Risk Factor Surveillance System, County Opioid Quarterly Reports, Bureau of Census, etc.

As part of the CHNA, a Capital Region health survey sought input of the community regarding the region’s health needs and challenges. Albany and Rensselaer Counties then conducted three Community Health Prioritization Meetings between November and December 2021. These meetings, through a review of data and subsequent discussions, resulted in the selection of specific health priorities.

**Partnerships**

Coordinated by the Healthy Capital District Initiative, the [2022 Capital Region Community Health Needs Assessment](#) and Albany Medical Center Hospital’s [2022-2024 Community Health Improvement Plan](#), involved the active collaboration of local health departments (Albany County Department of Health, Rensselaer County Department of Health), hospital systems (Albany Medical Center Hospital, St. Peter’s Health Partners), and community partners, health providers and public service organizations such as behavioral health providers, community-based organizations, worksites, and insurance companies, who in collaboration, developed a plan for addressing the community’s health needs and health disparities. **2022-2024 Community Health Improvement Plan** implementation will be monitored through existing regional partnerships, for example, through task forces and other collaborative efforts. These include representation from many of the region’s constituent organizations who participated in the CHNA process.

Albany Medical Center Hospital acknowledges that there are several neighborhoods that are considered high disparity communities and 2022-2024 Community Health Improvement Plan strategies will require multiple methods of implementation to best serve the diverse population within the Capital Region.

**Evidence-based Interventions, Strategies, Activities**

Objectives, interventions, strategies, and activities are detailed in [Albany Medical Center Hospital’s 2022-2024 Community Health Improvement Plan](#). Interventions selected are evidence-based and most strategies are provided per the Prevention Agenda 2019-2024 Action Plan. Each lead partner is addressing the following Prevention Agenda priorities; however, some interventions vary among us. In summary, for Albany Medical Center Hospital:

**Prevent Chronic Disease**

- Implement a combination of worksite-based physical activity policies, programs, or best practices through physical activity and/or nutrition programs.
- Promote evidence-based medical management in accordance with national guidelines.
• Increase access to self-management skills for individuals with diabetes.
• Increase food security.
• Increase support for breastfeeding.

Promote Well-Being and Prevent Mental and Substance Use Disorders

• Continue efforts to expand access and integrate behavioral health with providers.
• Increase availability of/access and linkages to medication-assisted treatment (MAT), including Buprenorphine.
• Provide resources and education to patients and providers.
  Identify and support at-risk patients through PHQ-2, PHQ-9, and ASQ screenings.

The contributions of our partner organizations in the Albany-Rensselaer Prevention Agenda Prioritization Workgroup, in collaboration with Albany Medical Center Hospital, are outlined in the Appendix starting on page 54, describing each partners’ goals and interventions.

Additional priorities selected by Albany Medical Center Hospital

Not among the top five health issues identified for Albany and Rensselaer Counties, but still health priorities in the Albany-Rensselaer region, Albany Medical Center Hospital will also report on its efforts to address tobacco cessation and asthma management, and various initiatives supporting healthy women, infants and children:

Prevent Chronic Disease – Asthma (and promote tobacco/vaping cessation)

• Improve self-management skills for individuals with chronic diseases, including asthma.
• Promote tobacco use cessation.

Promote Healthy Women, Infants and Children

• Improve perinatal and infant health.

Process Measures

Process measures are detailed in Albany Medical Center Hospital’s 2022-2024 Community Health Improvement Plan.

Albany Medical Center Hospital and each of our coalition partners have selected measures that support evidence-based and/or best practice interventions. As with prior community health improvement planning cycles, Albany Med is a lead participant in existing task forces that track progress to evaluate impact and identify successes and challenges throughout the 3-year cycle. Similar to past cycles, the task forces discuss successes and challenges, and evaluate whether corrections or changes should be
made during the course of the 2022-2024 Plan. This process supports a more successful health improvement plan for our region.

**Albany Med Health System’s regional priorities**

Albany Med Health System, which includes Albany Medical Center Hospital, Columbia Memorial Health, Glens Falls Hospital, and Saratoga Hospital, while focusing on health priorities in their immediate regions, are collectively addressing health needs across the entire Capital Region.

The Healthy Capital District Initiative (HCD) conducted a 6-county needs assessment, in which both Albany Medical Center and Columbia Memorial Hospital participated. The 6 counties were segmented into regions to address health priorities as a local level.

- Albany Medical Center Hospital is addressing jointly selected health priorities that impact residents of Albany and Rensselaer Counties, with St. Peter’s Health Partners and Albany and Rensselaer Counties’ Departments of Health.

- Similarly, Columbia Memorial Hospital is addressing jointly selected health priorities that impact residents of Columbia and Greene Counties, with Columbia and Greene Counties’ Departments of Health.

Glens Falls Hospital participated in a Community Health Needs Assessment with the Adirondack Health Institute – targeting the needs of residents of Warren and Washington Counties.

Saratoga Hospital and Saratoga County Department of Health conducted an independent, county-level community health needs assessment and will be addressing, in partnership, priorities that were jointly chosen by both organizations.
Community Health Needs Assessment and Community Service Plan 2022-2024

Introduction
Albany Med is northeastern New York’s only academic health sciences center. It incorporates the 766-bed Albany Medical Center Hospital, which offers the widest range of medical and surgical services in the region, and the Albany Medical College, which trains the next generation of doctors, scientists and other healthcare professionals, and which also includes a biomedical research enterprise and the region’s largest physicians practice with more than 500 doctors. Albany Med works with dozens of community partners to improve the region’s health and quality of life.

Albany Med is affiliated with Columbia Memorial Health, Glens Falls Hospital and Saratoga Hospital to provide the largest locally governed health system in the region. Combined, these four hospitals comprise the Albany Med Health System and offer a broad range of patient care and community service throughout the Capital Region.

Albany Med’s unique tri-partite mission of medical education, biomedical research, and patient care is also our defining role as a community health provider, ensuring access to medical and technological innovations that are traditionally found in academic medical centers - for residents of our region and beyond.

Because of our unwavering commitment, assessing the health care needs of our community is an ongoing process. We are engaged in myriad affiliations and collaborations throughout our service area, with one common goal: improving our region’s health.

- Community service and community partnerships are an integral part of our institutional strategic planning.
- We actively promote public health, health education, and conducting various health screenings, often in collaboration and partnership with organizations throughout our service area.
- Physicians, nurses, medical students and residents, and many of the staff of Albany Med volunteer their time and talents to the Capital Region community – through their involvement in community organizations, community action groups, and healthcare organizations.
- Our missions of medical education and biomedical research improve our community’s health through:
education, training, recruitment, and retention of physicians and health professionals for our community
- advancement of new discoveries through medical science

As the only academic medical center within nearly 150 miles, we provide a host of unique and/or highly specialized services to our community and to hospitals in our region – including a Level I Trauma Center and largest Emergency Department, a Level IV NICU, the only Children’s Hospital in the region, the major resource for the Medicaid population, and a provider of high-end surgical services and medical care for the acutely ill.

The following plan is not a comprehensive report of the many aforementioned programs and services offered to our community at a free or reduced-fee basis, often in partnership with other organizations. Rather, the process and resulting efforts described in this Community Service Plan are focused on several pressing health issues of our local community, and identify how Albany Medical Center Hospital – with partner organizations – is working to:

- Execute a community health improvement plan
- Promote health equity in all populations, especially those experiencing disparities
- Reduce duplication of services and costs
- Assist each other for improved efficiency and efficacy
- Collaborate to maximize available resources and assets

The information in the Healthy Capital District Initiative’s 2022 Capital Region Community Health Needs Assessment is integral to this document and is hereby incorporated by reference.
Mission, Vision and Values

Albany Med is like no other health care provider in our region, providing our community with the highest level of patient care across disciplines, while receiving regional, national and international recognition for high standards in patient care, education and biomedical research.

Mission: We are committed to improving health by attaining the highest standard of quality in care delivery, education, and research initiatives.

Vision: To best serve the needs of our communities, the Albany Med Health System will deliver its Mission by means of a structure that will be, and remain, autonomous and self-governing.

Values:

- Excellence and continuous improvement
- Integrity in every decision we make
- Compassion and respect for the dignity of every person
- A diverse, equitable, inclusive and welcoming System
- Collaboration throughout our System
- Responsiveness to the people of our communities
- Fiscal accountability
Summary of Previous Community Health Needs Assessment (CHNA)

Key findings of the 2019 CHNA included issues pertaining to behavioral health and chronic disease in Albany and Rensselaer Counties.

Coordinated through the Healthy Capital District Initiative (HCD), Albany and Rensselaer Counties implemented a joint project to engage health providers and community members in a regional health assessment and prioritization process. The overarching goals of this project were to 1) improve the health of New Yorkers, 2) reduce health disparities and 3) align with Albany Med’s Strategic Plan.

As a result of these community health planning efforts, three priorities for the Albany and Rensselaer Counties were identified as focus areas for collective efforts: preventing and reducing the burdens of diabetes, asthma, and mental health disorders/substance abuse. These supported the New York State Department of Health’s Prevention Agenda and its priorities.

The Covid-19 pandemic disrupted various health improvement efforts focused on the selected Prevention Agenda topics. Despite that, in our ongoing commitment to address these priorities Albany Medical Center Hospital and our partners saw the following results:

Prevention Agenda Priority Area – Prevent Chronic Disease

Promote tobacco and vaping cessation

The prevalence of adults with asthma in the Capital District region is increasing, and the adult smoking rate is higher than NYS. Albany Medical Center Hospital and a broad range of local partners collaborated to reduce the prevalence of asthma and smoking among the residents of Albany and Rensselaer Counties.

Measures: Albany Medical Center Hospital contributed to the reduction of asthma and smoking rates through community education sessions, smoking and vaping counseling, and efforts to reduce the number of asthma-related visits to the Emergency Department. By 2021, over 4,200 patients received smoking/vaping counseling, and the number of asthma-related visits to the Emergency declined by over 200 visits. Albany Medical Center Hospital’s Cardiorespiratory Services Team hosted a Facebook Live event about lung cancer that had over 2,500 views.

Disparities: In these initiatives, we focused on addressing populations of income and socioeconomic status disparity by targeting efforts where prevalence is higher.

Engagement: Albany Medical Center Hospital and our collaborators remained engaged in the coordination of asthma and self-management by contributing staff time, allowing for clear progress on the initiative, and offering intervention activities to identified target populations.
**Successes:** Successes experienced during the implementation of asthma and smoking cessation interventions: clear identification of the problem; defining the target population; identifying process and outcome measures to monitor progress towards reaching our goals; developing data collection methods reviewing and monitoring progress with our partners.

**Challenges:** Challenges included reaching the community to educate on asthma and smoking cessation-related information during the Covid-19 pandemic. The pandemic also resulted in decreased access to hospital services to conserve resources, limiting the number of inpatients receiving smoking and vaping counseling. Competition for funding and engaging community leaders to assist in addressing the problem posed challenges as the top priority was the pandemic.

**Related Initiatives:**

**The Albany Children’s Environmental Health Center**

In collaboration with other partners, this program specializes in asthma and asthma-related environmental issues to improve the quality of medical services for children with asthma. The Center also trains healthcare professionals to incorporate environmental health into care.

**Community Education**

Albany Medical Center Hospital’s Cardiorespiratory Services Team frequently attends community events (athletic events, fundraisers, religious events) with smoking cessation information and connects those in need of support with relevant services. Hosting such community events have been curtailed since the pandemic’s onset, but are expected to resume in the future.

**Prevention Agenda Priority Area – Prevent Chronic Disease**

*Reduce prevalence of diabetes (linked to reducing obesity in children and adults)*

The prevalence of adults with diabetes in the Capital District region is increasing as rates exceed statewide averages. Albany Medical Center Hospital and a broad range of local partners collaborated to reduce the prevalence of Type II diabetes among the residents of Albany and Rensselaer Counties.

**Measures:** With our partners, we established a strategy to increase engagement in the prevention and self-management of diabetes and related co-morbidities. Goals included increasing pre-diabetes screening, promoting diabetes self-management education, supporting breastfeeding mothers, and promoting health food & beverage choices and physical education. Annually, Albany Med had over 6,000 patients visits with Albany Medical Center Hospital’s Certified Diabetes Educators; over 3,000 Albany Med employees participated in our “Move, Learn, Health, and Eat” wellness initiatives; we participated in more than 30 clinical trials with innovative diabetes medications; and had nearly 2,300 mothers opting to breastfeed entirely or in part who were counseled by Albany Med’s lactation consultants.
**Disparities:** In these initiatives, we focused on addressing populations of income and socioeconomic status disparity by targeting efforts where prevalence is higher.

**Engagement:** Albany Medical Center Hospital and our collaborators remained engaged in the coordination of diabetes education and self-management by contributing staff time, allowing for clear progress on the initiative, and offering intervention activities to identified target populations.

**Successes:** Successes experienced during the implementation of diabetes interventions: clear identification of the problem; defining the target population; identifying process and outcome measures to monitor progress towards reaching our goals; developing data collection methods reviewing and monitoring progress with our partners.

**Challenges:** Challenges included maintaining participation in wellness initiatives and physical fitness activities during the Covid-19 pandemic. Competition for funding and engaging community leaders to assist in addressing the problem posed challenges as the top priority was the pandemic.

**Related Initiatives:**

**Diabetes prevention and education**

Our Division of Endocrinology has become a leading national force in diabetes drug research and has contributed to studies worldwide. During the period of this Plan, the director and sub-investigators of The Endocrinology Research Unit of Albany Medical Center Hospital participated in 30+ clinical trials with innovative diabetes medications to help prevent end stage kidney disease in patients with type 2 diabetes and a trial that tested whether a diabetes medication lowers the chances of heart attack, stroke and death in patients with type 2 diabetes. In addition, Albany Medical Center Hospital was the number one site in the country for the SUSTAIN 6 trial, enrolling the most patients to determine if Ozempic lowered the risk of heart attack, stroke and death in patients with type 2 diabetes. We have also been involved in studies that tested weekly insulin injections over daily injections.

Albany Medical Center Hospital provides unique diabetes support and services to our patients. Annually, we had over 6,000 patient visits with our Certified Diabetes Educates (CDE) for nutrition education, lifestyle change, and physical fitness prescriptions. All newly diagnosed diabetes patients are referred to a CDE and together they work to make health-related decisions. We also have a behavioral health therapist available at the Albany Medical Center Hospital Endocrinology sites for patients seeking behavioral counseling for emotional care and support with adherence to a diabetes regimen.

**Albany Medical Center Hospital’s wellness programs**

Albany Medical Center Hospital’s workplace health and wellness programs continue to grow in both size and scope. Our Wellness Committee promotes physical activity through free access to our on-site fitness center and other offerings made available to staff, such as yoga, meditation, HIIT and spin
classes, walking routes, etc. We also promote biking to work and encourage employee participation in CDPHP’s bike sharing program.

**Maintained commitment to provide healthier cafeteria options**

Every day our cafeteria is utilized by over 3,000 employees, patients, and visitors. The cafeteria has a variety of healthy menu options and displays nutrition information for all food items to make it easier for everyone to make healthy choices, including reduced sodium soups (by 15%), low-sodium deli meats, and healthy “on-the-go” bagged lunches and salads which are readily available. If an item has more than 900mg of sodium per sodium, it is removed from the menu. Healthy options, such as fresh fruits, are available at the checkouts and throughout the cafeteria calorie and nutrition information is made available for offerings. Preparation practices, purchasing practices, and portion sizes were changed to encourage healthier eating habits for cafeteria visitors. We also offer nutritional resources on our Intranet related to understanding nutrition labels, making healthy choices on the go, and methods to reduce added sugars.

**Prevention Agenda Priority Area – Prevent Substance Abuse**

*Prevent mental and substance use disorders*

To address the ongoing opioid crisis, more hospitals are proactively attempting to reduce the non-medical use of prescription pain medication. Mortality rates related to opioid pain relievers are high compared to other counties in the Capital Region and Emergency Department visit rates due to opioids are some of the highest in New York State.

**Measures:** Albany Medical Center Hospital contributed to the reduction of the non-medical use of prescription pain medication through community education and outreach, provider education, and participation in wide-spread initiatives. In 2021, Albany Medical Center Hospital Emergency Medicine physicians provided care to over 900 patients at our Suboxone Clinic in Rensselaer County and opened a second clinic in 2022. We also integrate numerous primary care and specialty sites with psychology and/or psychiatry services, some of which included pediatric locations.

**Disparities:** In these initiatives, we focused on addressing populations where prevalence is higher.

**Engagement:** Albany Medical Center Hospital has stayed highly engaged in addressing the opioid epidemic through community and provider education, as well as participating in initiatives that further develop strategies and advocacies.

**Successes:** Successes experienced during the implementation of interventions related to the reduction of non-medical use of prescription pain medication: Clear identification of the problem; defining the target population; identifying process and outcome measures to monitor progress towards reaching our goals; developing data collection methods reviewing and monitoring progress with our partners.
Challenges: Challenges faced with this priority include improving access for opioid-addicted patients, as there is a lack of providers who can prescribe suboxone, and the increased prevalence of substance abuse due to the Covid-19 pandemic.

Related Initiatives:

**Physician/Provider Education**

The 500+ providers with DEA registration numbers at Albany Medical Center Hospital have been trained in mandatory prescriber education in pain management, palliative care, and addiction. These providers care for hundreds of thousands of patients annually, all of whom receive education and support related to prescription pain medication.

**Community Education and Research**

Albany Medical Center Hospital assisted in training law enforcement personnel in administering Naloxone to decrease opioid overdose. Training included recognizing an opioid overdose, administering Naloxone, and providing time-sensitive medical interventions. Albany Medical Center Hospital and Albany Medical College collaborated on research finding that Naloxone products may be viable 30 years past their expiration date. These findings may reduce the financial burdens for law enforcement.

**SBIRT Training**

Screening, Brief Intervention, and Referral to Treatment (SBIRT) is an evidence-based approach to early intervention and treatment services for those with substance use disorders and those at risk for developing a substance use disorder. With this public health approach, primary care centers, hospital emergency rooms, trauma centers, and other community centers intervene with at-risk substance users before more severe consequences occur.

**Enhanced Recovery after Surgery (ERAS) Initiative**

Albany Medical Center Hospital adopted the ERAS initiative to de-emphasize the use of opioids to treat pain after surgery. This initiative focuses on patient education, a more targeted approach to anesthetics, and frequent visits from members of a patient’s surgical team, who monitor progress and encourage movements and helpful exercises during recovery. The patient-centered model coordinates a patient’s care from the decision to undergo surgery through the discharge and follow-up services. The program has improved patient satisfaction, reduced complications, and lower lengths of hospital stay across many surgical specialties.
Prevention Agenda Priority Area – Promote Mental Health

Promote well-being

Poor mental health can lead to adverse physical health outcomes, academic underachievement, homelessness, unemployment, and isolation. One in five New Yorkers experience a diagnosable mental disorder annually, while one in ten experience impaired functioning.

Measures: Goals included expanding access to behavioral health providers and increasing efforts to reduce suicide mortality. Annually, Albany Medical Center had over 7,800 visits to the Department of Psychiatry, which has psychiatrists specializing in adult and pediatric services. To expand access, behavioral health services were made available to patients at 13 primary care and specialty sites. In 2021, there was a 99% completion rate in PHQ-2 and PHQ-9 suicide screening tools that identify at-risk patients.

Disparities: In these initiatives, we focused on addressing populations where prevalence is higher.

Engagement: Albany Medical Center Hospital has stayed highly engaged in addressing mental health through the expansion of behavioral health services to our adult and pediatric populations.

Successes: Successes experienced during the implementation of interventions related to promoting mental well-being: Clear identification of the problem; defining the target population; identifying process and outcome measures to monitor progress towards reaching our goals; developing data collection methods reviewing and monitoring progress.

Challenges: Challenges faced with this priority include improving access to mental health services, especially during the Covid-19 pandemic when the demand for such services was high.

Related Initiatives:

Albany Medical Center Hospital’s wellness programs

Albany Medical Center Hospital’s Wellness Committee promotes several mental health offerings to employees – our Employee Assistance Program encourages personal well-being and provides guidance to help employees achieve work/life balance, live guided meditations are offered weekly, and the Support Our Staff program provides support to Albany Medical Center Hospital staff that are experiencing a crisis due to traumatic deaths of patients, the sudden death of a co-worker, staff burnout, etc.
2022 Community Health Needs Assessment

Community Served
The service area defined was selected by the Healthy Capital District Initiative (HCD), an independent, non-profit organization intended to improve health and reduce health disparities in the Capital Region through collaborative means.

As adopted by members of the Healthy Capital District Initiative, the communities assessed in the 2022 Capital Region Community Health Needs Assessment are the 6 counties of Albany, Rensselaer, Schenectady, Saratoga, Columbia and Greene. They form the common service area covered by the local health departments in Albany, Rensselaer, Schenectady, Saratoga, Columbia and Greene Counties and the primary patient population served by Albany Medical Center Hospital, partner hospitals Saratoga Hospital and Columbia Memorial Hospital, Ellis Hospital, and St Peter’s Health Partners, all of which are located within the six counties.

This 6-county region is also referred to as the Capital Region.

Demographic information on the population in the Capital Region is available from the 2015-2019 U.S. Census’s American Community Survey (ACS). The combined population in the Capital Region was 957,309 individuals. About 19.5% were 0-18 years of age, while 17.5% were 65 years of age or older. Approximately 10.4% were living in poverty, down from 11.1% in the 2012-2016 ACS. The race/ethnicity distribution was 83.0% White, 7.7% Black, 4.2% Asian/Pacific Islander, and 5.2% other races; 5.2% were Hispanic/Latino (any race).

Additional demographic details for the Capital Region are provided in Section III of the CHNA (2022 Capital Region Community Health Needs Assessment).

Service Areas/Regional Workgroups
HCD partners formed regional work groups to target and address health priorities specific to regions in the defined community. For example, three health priority work groups were established: Albany-Rensselaer, Columbia-Greene, and Schenectady. Albany Med Health System partner Columbia Memorial Hospital serves as a lead entity on the Columbia-Greene Work Group. Albany Med Health System partner Saratoga Hospital, with Saratoga County Department of Health, is taking the lead on aligning efforts around mutually selected priority areas. Saratoga Hospital and Saratoga County Department of Health conducted a community health needs assessment independent of the study by Healthy Capital District Initiative and will be addressing, in partnership, priorities at the county level that were jointly chosen by both organizations.

Albany Medical Center Hospital participated in the Albany-Rensselaer Work Group. Representatives, including Albany Medical Center Hospital, combined efforts to continue work on a cooperative health improvement plan for residents of these two counties.
Albany Medical Center Hospital did not define the community it serves to exclude areas from which it draws patients or that otherwise should be included based on the method it used to define its community.

Albany Medical Center Hospital’s service area was not defined to exclude medically underserved, low-income or minority populations.

Albany Medical Center Hospital provides care to all patients, regardless of their ability to pay, how much they or their insurers pay, or whether they are eligible for assistance under our hospital’s financial assistance policy.

**Demographics of the population served**

Albany County has the largest population in the Capital Region with over 300,000 residents and is the 2nd most urban county. It has the region’s lowest median age of 37.8 years. Its West End neighborhood had the largest proportion of 0–14-year-olds (24.6%). The South End neighborhood had the largest percentage of Black non-Hispanic population (59.2%), while the Delaware Ave. neighborhood had the highest percentage of Hispanic population (15.6%). The median household income ($66,252) was lower than NYS and 3rd lowest in the Capital Region. Poverty affected 11.9% of Albany County’s population in 2019, down from 12.9% in 2016, and below the rate in NYS, excl. NYC, and 2nd highest in the Capital Region. The South End/Downtown neighborhood had the highest poverty rate (46.6%) in the Capital Region, and South End (33.0%) and West End (33.4%) had the 3rd and 4th highest poverty rates. In 2019, Albany County had the 2nd lowest percent of population older than 25 with less than high school education in the Capital Region, at 7.9%, up from 2016. The 2nd, 3rd, and 4th highest rates of Capital Region adults over 25 with less than a high school education, were South End/Downtown (22.9%), West End (21.5%), and South End (18.3%).

Rensselaer County has a population of nearly 160,000 and is the 3rd most rural county in the Capital Region. This county has the 3rd lowest median age in the region at 39.9 years. 16% of the population is 14 years of age or younger, while 16.5% is 65+ years of age. About 14% of Rensselaer County’s population is non-White and 4.9% is Hispanic. The Troy/Lansingburgh neighborhood had the greatest percentage of Black non-Hispanic population (13.1%) as well as the largest Hispanic population (7.5%). 16.0% of Rensselaer’s population was aged 0-14 years, while 16.5% was aged 65+ years, with the North East neighborhood having the largest 0–14-year-old population (20.1%). Rensselaer County had the 2nd highest Median Household Income in the Capital Region ($68,991 in 2019, up from $59,959 in 2016) and the 3rd smallest percentage of population below poverty (11.7%). Within the county, Troy/Lansingburgh had the highest neighborhood poverty rate (19.1%). The Rensselaer neighborhood had the 3rd lowest percentage of population older than 25 with less than a high school education (8.1%), and the Troy/Lansingburgh neighborhood had the largest population older than 25 with less than a high school education (7.3% in 2019, down from 11.2% in 2016).
Health status of the population
Albany County:
Chronic Disease

- Albany County’s 2018 age-adjusted prevalence of adults with current asthma (11.7%), was down from 13.3% in 2016, and was higher than NYS, excl. NYC rate of 10.8%

- Albany County’s 2018 age-adjusted asthma emergency department (ED) visit rate (79.1 per 10,000) was higher than NYS, excl. NYC (64.3) but met the Prevention Agenda 2024 objective of 131.1 per 10,000

- Age-adjusted asthma hospitalization rates were 6.6 times higher among Black non-Hispanic residents (21.7), and 2.4 times higher among Hispanic residents (8.0), than White non-Hispanic residents (4.0); higher ratios than in NYS, excl. NYC

- South End (214.5 per 10,000)) and West End (212.5) neighborhoods had 5.0 times higher 2014-18 age-adjusted asthma ED rates than NYS excl. NYC (42.8)

- Albany County’s adult smoking rate (11.6%): was the Capital Region’s 2nd lowest, was lower than NYS, excl. NYC (13.9%), was above the Prevention Agenda 2024 objective of 11.0%, and decreased from 14.3% in 2016

- Lung cancer incidence (74.0) and mortality (41.9) rates, per 100,000, were higher than NYS, excl. NYC

- Lung cancer incidence increased (from 68.8) and mortality decreased (from 47.6), per 100,000, from 2012-14 to 2015-17

- Albany County’s 2016-18 age-adjusted COPD/CLRD hospitalization rate (23.8 per 10,000) was higher than NYS, excl. NYC (22.2)

- COPD/CLRD 2016-18 age-adjusted mortality rate (32.0 per 100,000) was lower than NYS, excl. NYC (35.0) and fell by 10%, from 2013-15 to 2016-18

- COPD/CLRD 2016-18 age-adjusted hospitalization rates were 3 times higher among Black (56.1 per 100,000), than White, non-Hispanic residents (18.6)

- West End (297.5 per 10,000) and South End (296.1) neighborhoods had 4.3 times higher 2014-18 age-adjusted COPD/CLRD ED visit rates than NYS, excl. NYC (68.5)

- Approximately 59,138 adults with a 2018 prevalence of 26.9%, and 6,735 school-aged children and adolescents with a 2017-19 prevalence of 16.3% were obese

- 2018 Age-adjusted adult diabetes prevalence (7.7%) was lower than NYS, excl. NYC (9.2%) and down from 9.0% in 2016
• 2016-18 diabetes short-term complication aged 18+ years hospitalization rate (5.5 per 10,000), was higher than NYS, excl. NYC, (5.1) and 3.9 times higher among Black (15.5), than White, non-Hispanic residents (4.0)

• West End (40.5 per 10,000) and South End (46.0) neighborhoods had 3.0 to 3.4 times higher 2014-18 age-adjusted diabetes hospitalization rates than NYS, excl. NYC (13.7) and 3.7 (61.5 South End) to 4.2 times (69.4 West End) higher diabetes ED visit rates, than NYS, excl. NYC (16.6)

• Albany County’s 2016-18, age-adjusted congestive heart failure mortality (18.4 per 100,000) was higher than NYS, excl. NYC, (16.7) and down from 18.7 in 2013-15

• Albany County’s 2016-18, age-adjusted stroke mortality rate (28.4 per 100,000) was higher than NYS, excl. NYC, (27.6) and up from 26.1 in 2013-15

• Albany County’s 2015-17 age-adjusted colorectal cancer incidence rate (37.4/100,000) was lower than NYS, excl. NYC (38.6), while the county’s 2015-17 age-adjusted mortality rate (12.6/100,000) was higher than NYS, excl. NYC (11.9)

• Albany County’s 2018 colorectal cancer screening rate (68.1%) was higher than NYS, excl. NYC (66.5%) and met Prevention Agenda 2024 objective of 66.3%

• Albany County’s 2015-17 age-adjusted female breast cancer incidence (157/100,000), late-stage incidence (46.0/10,000) and mortality (20.5/100,000) rates were all higher than NYS, excl. NYC (140, 42.1, and 18.3).

• Albany County’s 2018 female breast cancer screening rate (84.7%) was higher than NYS, excl. NYC, (80.9%) among women 50 to 74 years of age

Healthy and Safe Environment

• Albany County’s 2016-18 incidence rate of elevated blood lead levels (≥10 μg/dl) – 11.7 per 1,000 tested children under 6 years of age – was the Capital Region’s highest and 1.8 times higher than NYS, excl. NYC (6.5)

• Albany County’s lead screening rates for children aged 9-17 months (70.6%) and up to 36 months (53.6%) were below that of NYS, excl. NYC, (71.8% and 56.7%) and had increased slightly from 2 years prior

• Albany County had Capital Region’s highest 2017 hospitalization rates due to falls among adults aged 65+ (247.3 per 10,000) was highest in the Capital Region, higher than NYS, excl. NYC (193.5), and did not meet the PA objective (173.7)

• Albany County’s 2016-18 age-adjusted assault hospitalization rate of 4.2 per 10,000 was the highest in the Region, higher than NYS, excl. NYC (2.2) and did not meet the PA objective (3.0)
South End (19.1 per 10,000), South End/Downtown (18.3), and West End neighborhoods (13.3) had the 3 highest 2014-18 age-adjusted **assault** hospitalization rates in the Capital Region, each 5.9 to 8.5 times higher than NYS, excl. NYC (2.2)

South End (184.1 per 10,000), West End (180.1), and South End/Downtown (149.1) neighborhoods had the 2nd, 3rd, and 4th highest 2014-18 age-adjusted **assault** ED visit rates in the Capital Region, each 4.3 to 5.3 times higher than NYS, excl. NYC (34.4)

**Healthy Women, Infants and Children**

- The 2016-18 Albany County **infant mortality** rate was 4.2 per 1,000 live births, lower than NYS, excl. NYC (4.9) but did not meet the PA objective (4.0)
- The 2016-18 **infant mortality** rates were 5 times higher among Black (11.2), than White (2.2), non-Hispanic residents
- South End/Downtown neighborhood had the Capital Region’s highest 2016-18 rates of births with **late or no prenatal care** (13.6%), 3.2 times higher than NYS, excl. NYC (4.3%), and **neonatal mortality** (14.9 per 1,000 births) which was about 4.5 times higher than NYS, excl. NYC (3.3)
- South End/Downtown neighborhood had the Capital Region’s 2nd highest rate of **infant mortality** (14.9 per 1,000), 3 times higher than NYS, excl. NYC (4.9)
- Albany County’s 2016-18 rate of **premature births** (9.6%) was higher than NYS excl. NYC (9.0%) and did not meet the PA objective (8.3%).
- For 2016-16, Center Square/Arbor Hill neighborhood had the Capital Region’s highest rate of **premature births** (15.7%), 1.9 times higher than NYS, excl. NYC (8.3%)
- Center Square/Arbor Hill neighborhood’s 2016-18 **teen pregnancy** rate (78.8 per 1,000 females aged 15-19 years) was 4 times higher than NYS, excl. NYC (19.6). and decreased by 45%, from 2007-09 to 2016-18

**Mental Health and Substance Use Disorder**

- Albany County’s 2016-18 age-adjusted **mental diseases and disorders** (primary diagnosis) ED visit (161.8 per 10,000 vs 156.7) and hospitalization rates (78.5 vs 72.3) were slightly higher than NYS, excl. NYC
- South End/Downtown neighborhood had the Capital Region’s highest age-adjusted 2014-18 ED visit rate due to **mental diseases and disorders** (primary diagnosis) (1296.0/10,000), about 8.3 times higher than NYS, excl. NYC (156.7)
• South End neighborhood had the Capital Region’s 3rd highest 2014-18 age-adjusted hospitalization rate due to **mental diseases and disorders** (primary diagnosis) (219.7 per 10,000), about 3 times higher than NYS, excl. NYC (72.3)

• Albany County had the Capital Region’s 3rd highest rate of 2016-18 age-adjusted ED visits (9.6/10,000) due to **self-inflicted injuries**, which was about 70% higher than NYS, excl. NYC (5.6)

• New Scotland Avenue neighborhood had the Capital Region’s highest 2014-18 age-adjusted ED visit rate (30.5/10,000) and 2nd highest hospitalization rate (10.0/10,000) for **self-inflicted injuries**, which were 5.4 and 3.0 times higher than NYS, excl. NYC (5.6 and 3.3/10,000)

• Albany’s 2016-18 age-adjusted **suicide** mortality rate of 9.7 per 100,000 was slightly lower than NYS, excl. NYC (9.9), but did not meet the PA objective (7.0)

• Albany’s 2018 age-adjusted adult **binge drinking** rate of 19.2% was higher than NYS, excl. NYC (18.4%) and did not meet the PA objective (16.4%)

• Albany’s 2018 age-adjusted **opioid ED visit** rate of 64.7 per 100,000 was lower than NYS, excl. NYC, but did not meet the PA objective (53.3)

• South End and South End/Downtown neighborhoods had the Capital Region’s 1st and 2nd highest rates, per 10,000, of 2014-18 age-adjusted ED visits (355.3 and 1,268.1) and hospitalizations (177.9 and 159.6) due to **drug abuse**, which were each 4.8 to 17.4 times higher than NYS, excl. NYC (72.7 and 33.1)

**Infectious Disease**

• Coeymans Hollow ZIP code had the Capital Region’s lowest rate of **COVID-19** complete series vaccination (32.6%), as of 11/14/21, which was lower than NYS, excl. NYC (65.7%)

• Albany County’s 2016-18 **HIV** case rate of 9.2/100,000 was the Capital Region’s highest, higher than NYS, excl. NYC, (6.1), increased from 8.5 in 2013-15, and did not meet the PA objective (5.2)

• Albany County’s 2016-18 **gonorrhea** diagnosis rate of 153.0/100,000: was the Capital Region’s 2nd highest, was higher than NYS, excl. NYC, (101.0), and increased by 61% from 94.9 in 2013-15

• Albany County’s 2016-18 **chlamydia** diagnosis rate of 521/100,000: was the Capital Region’s 2nd highest, was higher than NYS, excl. NYC, (420), and increased by 17% from 446 in 2013-15

• Albany County’s 2016-18 **early syphilis** diagnosis rate of 21.1/100,000: was the Capital Region’s highest, was 2.0 times higher than NYS, excl. NYC, (10.5), and increased by 97% from 10.7 in 2013-15
Rensselaer County:

Chronic Disease

- Rensselaer County’s 2018 age-adjusted prevalence of adults with current asthma (13.1%), was up from 11.7% in 2016, and was higher than the NYS, excl. NYC rate of 10.8%

- Rensselaer County’s 2018 age-adjusted asthma emergency department (ED) visit rate of 52.6 per 10,000 was lower than NYS, excl. NYC (64.3) and met the Prevention Agenda 2024 objective of 131.1 per 10,000

- Rensselaer County’s 2016-18 age-adjusted asthma hospitalization rate (4.8 per 10,000) was lower than NYS, excl. NYC (6.8)

- 2016-18 age-adjusted asthma hospitalization rates were 4.8 times higher among Black non-Hispanic residents (18.0/10,000), and 2.5 times higher among Hispanic residents (9.1), than White non-Hispanic residents (4.0); higher ratios than in NYS, excl. NYC

- Troy/Lansingburgh neighborhood (97.5/10,000) had 1.5 times higher 2014-18 age-adjusted asthma ED rates than NYS excl. NYC (42.8)

- Rensselaer County’s 2018 adult smoking rate (17.3%) was the Capital Region’s 2nd highest, was above NYS, excl. NYC (13.9%), was above the Prevention Agenda 2024 objective of 11.0%, but decreased from 18.7% in 2016

- Rensselaer County’s 2015-17 age adjusted lung cancer incidence (81.0 /100,000) and mortality (45.1) were higher than NYS, excl. NYC (66.1, 37.4)

- Rensselaer County’s 2016-18 age-adjusted COPD/CLRD hospitalization rate (23.3 per 10,000) was slightly higher than NYS, excl. NYC (22.7)

- The 2016-18 age-adjusted COPD/CLRD mortality rate (48.2/100,000) was the Capital Region’s highest, higher than NYS, excl. NYC (35.0), but fell by 11%, from 2013-15 to 2016-18

- Rensselaer County’s 2016-18 age-adjusted COPD/CLRD hospitalization rate were 2.5 times higher among Black (51.6/10,000), than White, non-Hispanic (20.8) residents

- Troy/Lansingburgh neighborhood (136.5/10,000) had a 2.0 times higher 2014-18 age-adjusted COPD/CLRD ED visit rate than NYS excl. NYC (68.5)

- In 2018, approximately 36,004 Rensselaer County adults were obese, a prevalence rate of 30.9%, higher than NYS, excl. NYC (29.1%) and did not meet the PA objective (24.2)

- During 2015-17, 4,263 school-aged children and adolescents (18.7%) were obese, a rate higher than NYS, excl. NYC (17.3%) and did not meet the PA objective (16.4%)

- The 2018 age-adjusted adult diabetes prevalence (10.1%) was higher than NYS, excl. NYC (9.2%) and up from 6.8% in 2016
• Rensselaer County’s 2016-18 **diabetes** short-term complication hospitalization rate of 6.4 per 10,000 aged 18+ years), was higher than NYS, excl. NYC, (5.1) and 5.9 times higher among Black (28.4)), than White, non-Hispanic (4.8) residents

• Troy/Lansingburgh neighborhood (136.5 /10,000) had 8 times higher 2014-18 age-adjusted **diabetes** ED visit rates than NYS excl. NYC (16.6)

• Rensselaer County’s 2016-18 age-adjusted **congestive heart failure** mortality rate of19.4 per 100,000, was higher than NYS, excl. NYC, (16.7) but down from 20.7 in 2013-15

• Rensselaer County’s 2016-18 age-adjusted rate **stroke** mortality rate of 28.6 per 100,000 was higher than NYS, excl. NYC, (27.6) and up from 27.0 in 2013-15

• Rensselaer County’s 2015-17 age-adjusted **colorectal cancer** incidence rate (38.5/100,000) was similar to NYS, excl. NYC (38.6), while the county’s 2015-17 age-adjusted mortality rate (12.9/100,000) was higher than NYS, excl. NYC (11.9)

• Rensselaer County’s **colorectal cancer** screening rate (75.4%) was higher than NYS, excl. NYC (66.5%) and met the Prevention Agenda 2024 objective of 66.3%

• Rensselaer County’s 2017-17 age-adjusted **female breast cancer** incidence (135/100,000 ) and late-stage incidence (39.3) rates, were lower than NYS, excl. NYC (140 and 42.1), while mortality was higher (20.5 vs. 18.3)

• Rensselaer County’s **female breast cancer** screening rate (83.1%) was higher than NYS, excl. NYC, (80.9%) among women 50 to 74 years of age

**Healthy and Safe Environment**

• Rensselaer County’s 2016-18 incidence rate of **elevated blood lead levels** (≥10 μg/dl), 10.8 per 1,000 tested children under 6 years of age, was the Capital Region’s 2nd highest and 1.7 times higher than NYS, excl. NYC (6.5)

• Rensselaer County’s **lead screening rates** for children aged 9-17 months (72.9%) and two screenings by 36 months (57.6%) were higher than NYS, excl. NYC, (71.8% and 56.7%)

• Rensselaer County had the Capital Region’s highest 2016-18 age-adjusted **homicide mortality** rate of 3.2 per 100,000, higher than NYS, excl. NYC (2.9)

**Healthy Women, Infants, and Children**

• Rensselaer County had the Capital Region’s highest 2016-18 **infant mortality** rates at 6.8 per 1,000 births, and higher than NYS, excl. NYC (4.9)
• **Infant mortality** rates were 8.1 times higher among Hispanic (26.8) residents and 6.8 times higher among Black non-Hispanic (11.2) residents, compared to White non-Hispanic (3.3) residents, in Rensselaer County

• North East neighborhood had the county’s highest 2016-18 neonatal and infant mortality rates (13.8/1000), as well as county’s highest premature birth rate (12.4%)

• North East neighborhood had the Region’s highest rate of 2016-18 low birth weight births (14.4%) and the County’s highest rate of births with late or no prenatal care (8.8%), both 1.9 to 2 times higher than in NYS, excl. NYC

• Rensselaer County had the Regions highest 2016-18 % preterm birth rate at 9.7%, higher than NYS, excl. NYC (9.0) and did not meet the PA objective (8.3)

• Rensselaer County’s 2016-18 teen pregnancy rate of 21.2 per 1,000 females aged 15-19 years was higher than NYS, excl. NYC, (19.6) and has decreased by 57% from 2009 to 2018

• Troy/Lansingburgh neighborhood had the county’s highest 2016-18 teen pregnancy rate (26.0/1,000), 1.3 times higher than NYS, excl. NYC (19.6)

**Mental Health and Substance Use Disorder**

• Rensselaer County had the Capital Region’s 3rd highest 2014-18 age-adjusted ED visit (163.7/10,000) and hospitalizations (90.8) rates due to mental diseases and disorders (primary diagnosis); the hospitalizations rate about 1.3 times higher than NYS, excl. NYC (72.3)

• Rensselaer County had the Capital Region’s highest rate of 2014-18 age-adjusted ED visits due to self-inflicted injuries (9.9/10,000), which was about 76% higher than NYS, excl. NYC (5.6)

• Rensselaer County’s 2016-18 age-adjusted suicide mortality rate of 11.8 per 100,000 was higher than NYS, excl. NYC (9.9) and did not meet the PA objective (8.0)

• Rensselaer County had the Capital Region’s highest 2018 age-adjusted rate of adult binge drinking (23.5%); higher than NYS, excl. NYC (18.4%)

• Rensselaer County had the Capital Region’s 2nd highest 2018 age-adjusted opioid overdose ED visit rate (74.1/100,000), slightly higher than NYS, excl. NYC, (71.9), and did not meet the PA objective (53.3)

• Rensselaer’s 2017-19 age-adjusted opioid analgesic prescription rate of 460 per 1,000 was higher than NYS, excl. NYC (413) and did not meet the PA objective (350)
Infectious Disease

- While Rensselaer County’s 2018-19 HPV vaccination rate of 30.1% was similar to NYS, excl. NYC, it did not meet the PA objective (37.4%)

- Rensselaer County had the Capital Region’s 2nd lowest rates of COVID-19 vaccination (67.3% with at least 1 dose and 62.1% with complete series), as of 11/14/21, which were lower than NYS, excl. NYC (72.6% & 65.7%)

- Rensselaer County’s 2016-18 age-adjusted gonorrhea diagnosis rate of 124.4/100,000 was higher than NYS, excl. NYC, (101.0), and doubled from 61.8 in 2013-15

- Rensselaer County’s 2016-18 age-adjusted chlamydia diagnosis rate of 459/100,000 was higher than NYS, excl. NYC, (420), and increased by 17% from 393 in 2013-15 Rensselaer County’s 2016-18 age-adjusted early syphilis diagnosis rate of 12.4/100,000 was higher than NYS, excl. NYC (10.5), and increased by 165% from 4.7 in 2013-15

- Rensselaer County’s 2016-18 Lyme disease incidence rate of 311.3/100,000 was the 4th highest rate of all NYS counties

Additional details regarding the demographics and health status of the Albany-Rensselaer Counties region can be found in the HCD 2022 Capital Region Community Health Needs Assessment.
Process and methods used to conduct CHNA
The 2022 Capital Region Community Health Needs Assessment and its full report follow the 2019 Capital Region Community Health Profile as the sixth data analysis of health needs in the region.

The structure of this report is based upon the 2019-2024 Prevention Agenda of New York State. Utilizing the Prevention Agenda framework for examining public health data aligns our analysis with that of the New York State Department of Health, creating opportunities to compare the Capital Region to other Upstate counties and New York State goals.

The health indicators selected for this report were based on a review of available public health data and New York State priorities promulgated through the Prevention Agenda for a Healthier New York. The collection and management of this data has been supported by the state for an extended period and are likely to continue to be supported. This provides reliable and comparable data over time and across the state. These measures, when complemented by the Expanded Behavioral Risk Factor Surveillance System and Prevention Quality Indicators, provide health indicators that can be potentially impacted in the short-term.

The Common Ground Health provided Statewide Planning and Research Cooperative System (SPARCS) (hospitalizations and ED visits) and Vital Statistics Data Portals that were utilized to generate county and ZIP code level analyses of mortality, hospitalizations, and emergency room utilization, for all residents, by gender, race and ethnicity. The time frames used for the ZIP code analyses were 2012-2016 Vital Statistics and 2014-2018 SPARCS data. The 5-year period establishes more reliable rates when looking at small geographic areas or minority populations.

Additional data was examined from a wide variety of sources, which can be found on page 8 of the 2022 Capital Region Community Health Needs Assessment.

These data sources were supplemented by a Capital Region Community Health Survey. The 2021 Community Health Survey was conducted in September-October 2021 by HCD with the assistance of the Albany, Columbia, Greene, Rensselaer and Schenectady health departments, and Albany Medical Center Hospital, Columbia Memorial Health, Ellis Hospital, and St. Peters Health Partners hospitals. The survey was a convenience sample of adult (18+ years) residents of the Capital Region. The survey included 2,104 total responses. This consumer survey was conducted to learn about the health needs, barriers, and concerns of residents in the Capital Region. The Appendix (2021 Capital Region Community Health Survey) contains a detailed summary of the findings, as well as the questionnaire used.

Local data were compiled from these data sources and draft sections were prepared by health condition for inclusion in this community health needs assessment. Drafts were reviewed for accuracy and thoroughness by two staff with specialized health data knowledge: Michael Medvesky, M.P.H. Director, Health Analytics, Healthy Capital District Initiative (HCD), and John Lake, M.S, Public Health Data Analyst, HCD. The 2022 Capital Region Community Health Needs Assessment draft was sent to local subject matter experts for review in the health departments of Albany, Rensselaer, Schenectady, Saratoga, Columbia, and Greene Counties and in St. Peter’s Health Partners, Albany Medical Center Hospital and
its health system partner Columbia Memorial Health, and Ellis Hospital, as well as being placed on the HCD website for public review and comment. Comments were addressed and changes were incorporated into the final document.
Collaborative Partners, Community Input

Albany Medical Center Hospital’s partnership with the Healthy Capital District Initiative (HCD) has enabled us to track the public health issues of the residents of Albany and Rensselaer Counties, and to meet those needs in a collaborative manner. Other HCD member organizations have been tracking and working together to address significant health priorities in the remaining Capital Region counties.

Engaging the community in the health needs assessment process was a priority of Albany Medical Center Hospital, HCD, and all stakeholders. Broad community engagement began with participation in the community health survey. The 2021 Capital Region Community Health Survey collected over 2,100 responses from a convenient sample of Capital Region adults from September 13, 2021, to November 3, 2021. The survey aimed to identify the major needs, gaps, and priorities facing Capital Region residents regarding public health priorities, social determinants of health, healthcare access and barriers, mental health, substance use disorder, COVID-19 vaccination, and prevention strategies. Public health priority results were used to rank health issues in the prioritization process described in Section II.

The convenience sample underrepresented males, Latinos, residents aged under 35 or over 64 years, and those with a household income under $25,000.

The process also considered input from local health departments, hospitals, and scores of organizations across the Capital Region representing the interests and needs of the medically underserved, low-income and minority populations in the community. They assisted with:

- Identifying and prioritizing significant health needs
- Identifying resources potentially available to address those health needs

Other participants in the process comprised community voices through representatives of consumers; advocacy groups; employers; providers, hospitals; and health insurers.

Albany Medical Center Hospital (and partner HCD members) received input from all required sources from which it requested feedback and insight. Participants were encouraged to share data of their own and to advocate for the needs of their constituents.

These representatives were actively engaged, and many participated in all the prioritization meetings. They provided comments, data, and helped identify critical health resources within the Capital Region.

Coordinated through the Healthy Capital District Initiative (HCD), the counties of Albany and Rensselaer implemented a Prioritization Work Group, a joint project to engage health providers and community members in a regional health assessment and prioritization process.

Accordingly, Prioritization Work Groups were established for the Columbia-Greene and Schenectady regions. Albany Med Health System partner Columbia Memorial Hospital serves as lead entity for its region’s work group.

A summary of each Capital Region Prevention Agenda Prioritization Work Group and a list of partner organizations can be found in Section II of the 2022 Capital Region Community Health Needs Assessment.
Health Priority Selection Process

The health indicators selected for this analysis were based on a review of available public health data and New York State priorities promulgated through the Prevention Agenda for a Healthier New York. Upon examination of these key resources, identification of additional indicators of importance with data available, and discussion with public health and health care professionals in the Capital Region, it was decided that building upon the 2019-2024 Prevention Agenda would provide the most comprehensive analysis of available public health needs and behaviors for the Region.

Albany Medical Center Hospital’s partnership with Healthy Capital District Initiative (HCD), St. Peter’s Health Partners, Albany County Department of Health, and Rensselaer County Department of Health has enabled us to assess the public health issues of the residents of Albany and Rensselaer Counties, and to meet those needs in a collaborative manner through the development of a Prevention Agenda Prioritization Workgroup. The CHNA document benefited from the review and input of the members of the Prevention Agenda Workgroup of the HCD. These individuals are subject matter experts from county public health departments and each of the hospitals in Albany and Rensselaer Counties.

Selection of the top health priorities for the Capital Region was facilitated by a new Public Health Issue Scoring Sheet (see next page) created by HCD, which built upon progress made during the 2019-2021 Prioritization Cycle. This scoring and ranking method was, again, based on a modified version of the Hanlon Method for Prioritizing Health Problems. The Scoring Sheet quantified considerations regarding both the need to address each health issue and the opportunity to make a positive impact. Opportunity considerations were based on guidance documents from the American Hospital Association, the National Association of County and City Health Officials as well as other industry resources. Need considerations included those used in the 2018 Prioritization Process, as well as a community priority score derived directly from the contributions of over 2,000 local residents in the 2021 Capital Region Community Health Survey (see appendix). The Scoring Sheet also included “other considerations,” for need and opportunity to address any additional factors and capture the knowledge- and experience-based input of local community partners.

In Fall of 2021, HCD staff reviewed approximately 700 public health measures across the five Prevention Agenda priority areas and categorized about 150 of the key indicators into 25 public health issues. Health issues were identified by reviewing the present New York State Department of Health Prevention Agenda Focus Areas, as well as health issues incorporated in the last Prioritization Process in 2018. The 25 health issues were initially ranked twice for each of the three hospital and health department prioritization groups. Health issues were first ranked according to their five data-based need scores, then, again, with the additional consideration of their survey-based community priority score. These initial rankings were used to select a shorter list of ten to sixteen issues for participating partners to score, before final priorities were selected.

Scores for opportunity considerations were self-assessed by hospitals and health departments and were based on criteria including their ability to devote resources, garner support, and make a measurable impact. Community partners also contributed their own consideration scores based on their observations and the information they have access to. The Scoring Sheet, in short, was based on
organizational data and community partner considerations regarding the need to address – and opportunity to impact – each issue.

A Prevention Agenda Work Group met in Fall 2021 to review the Public Health Issue Score Sheet and ranking methodology and to provide oversight and guidance during the prioritization process. The Prevention Agenda Work Group included participation from local health departments of Albany, Columbia, Greene, Rensselaer, and Schenectady counties as well as St. Peter’s Health Partners, Ellis Medicine, Albany Medical Center Hospital, and Columbia Memorial Hospital. Local Prevention Agenda Prioritization Work Groups were formed to review the top ten health measure counts, rates, trends, and disparities, as well as the data analyses and quantitative rankings prepared by HCD. The Work Groups then selected ten to sixteen issues to be assessed and scored organizationally and by community partners.

After organizational scores were collected, the local Prevention Agenda Prioritization Work Groups held virtual public meetings to present progress to – and collect input from – local community-based organizations, academic researchers, and members of the public. After presenting a comparison of data-based and organizational consideration scores and health issue ranking, for each public health issue, a discussion was held to answer any questions, and for individuals to share their professional understanding and recent observations of the current situation. Participants were provided an online survey to record their need and opportunity consideration scores as a measurement of the discussion as well as their input on the local experience, community value, and potential opportunity regarding each health issue. Group discussion most often peaked around mental health, behavioral health, and chronic disease issues, as community partners said these problems have been noticeably exacerbated by the current COVID-19 pandemic.

A comprehensive overview of the prioritization process, for each county, can be found on the HCD website www.healthycapitaldistrict.org by going to “Explore Health Data,” then “Explore by County,” then selecting a county and locating the materials in the “Prevention Agenda 2023-2025” section. The initial data- and survey-based scoring and ranking methodology can be found in the “Data & Methods” presentation, while the final scores and rankings for each of the top health issues can be found in the “Prioritization Summary” presentation.

Albany-Rensselaer Prevention Agenda Prioritization Workgroup
The Albany-Rensselaer Prevention Agenda Prioritization Work Group was led by the Albany County Department of Health, the Rensselaer County Department of Health, Albany Medical Center Hospital, and St. Peter’s Health Partners. It was decided a joint county Albany-Rensselaer Prevention Agenda Prioritization Work Group was appropriate, as the hospitals’ catchment areas cover both counties. The first meeting was held on November 9, 2021, at which HCD presented data on the heath issues and facilitated discussions. The Prevention Agenda Prioritization Work Group then selected the top sixteen health issues, based on data- and survey-based scoring, and provided organizational scoring along with contributing factors. In the second meeting, held on November 23, 2021, Prioritization Work Group members were briefed on the results of their organizational scoring. The third Prevention Agenda
Prioritization Work Group meeting, held on December 7, 2021, was open to the public and hosted community partners to orient them to the Prioritization Process, update them on the progress of the Work Group, and collect their input and scores for each of the 16 health issues.

Attendance during the third prioritization meeting consisted of 52 participants representing health care providers, academic institutions, and community-based and public service organizations. Participants were engaged in the data presentations, raised many questions, and offered their perspectives as service providers and researchers. The presentations used during these meetings were made available to the Work Group and the public on the HCD website (Albany County, Rensselaer County).

With the assistance of these participating community-based organizations, businesses, consumers and schools, the following was completed:

- Identifying and prioritizing significant health needs
- Identifying resources potentially available to address those health needs

Over the course of these sessions, the top health indicators identified, in order of priority include:

1. Covid-19
2. Obesity
3. Diabetes
4. Drug misuse
5. Mental illness including suicide
6. Heart disease
7. Social determinants of health
8. Tobacco use
9. Stroke
10. Asthma
Significant Health Priorities Selected

Covid-19, chronic disease, and mental health initiatives received the greatest number of votes during the prioritization process due to their impact on many people in the most significant ways, both directly and indirectly, and through their influence on other health conditions. Among these initiatives, many aspects are largely preventable and contribute significantly to the cost of health care.

The group’s priorities also reflect the participating entities’ abilities to effectively align resources to make the most positive impact on the Albany-Rensselaer County community.

The Albany-Rensselaer Prevention Agenda Prioritization Work Group selected the five public health issues with the highest total priority scores and grouped them into the three following Prevention Agenda Priority Areas. These public health issues ranked as the most significant, prioritized health needs:

**PRIORITY AREA: Prevent Chronic Diseases**
- Focus Area: Chronic Disease Preventive Care and Management, Healthy Eating and Food Security, Physical Activity, and Tobacco Prevention
  - Diabetes and Obesity

**PRIORITY AREA: Promote Well-Being and Prevent Mental and Substance Use Disorders**
- Focus Area: Mental and Substance Use Disorders Prevention

**PRIORITY AREA: Prevent Communicable Diseases**
- Focus Area: Vaccine Preventable Diseases
  - COVID-19
Why these priorities were selected

Diabetes/Obesity

- Short-term complications hospitalization rates from diabetes were high in Rensselaer County.
- Emergency department visit rates for diabetes were high in Rensselaer County.
- Hospitalization rates for diabetes were high in Rensselaer County.
- Across the Capital Region, short-term complications hospitalization rates, hospitalization rates, and mortality rates were higher among Black non-Hispanic residents than White non-Hispanic residents.
- Rensselaer County (10.1%) exceeded the NYS (excluding NYC) rate for the percentage of age-adjusted adults with diabetes (9.2%).
- The diabetes hospitalization rate per 10,000 people (age-adjusted) was higher among Whites, Blacks and Hispanics than the NYS excluding NYC rates for both Albany and Rensselaer Counties.
- Obesity rates were higher than the Prevention Agenda objective in every Capital Region county, including Albany and Rensselaer.
- In addition, obesity rates increased in Albany and Rensselaer Counties between 2016 and 2018.
- Albany and Rensselaer Counties’ 2018 adult obesity rates for individuals with an income less than $25,000/year were higher than in New York State, excluding NYC.
- Neither Albany (13.3%) nor Rensselaer County (13.8%) met the NYSDOH Prevention Agenda objective of 13.0% for WIC enrollment. However, both counties’ 2015-2017 rates were lower than in 2012-2014.
- Rensselaer County’s rate of obese children and adolescents (18.7%) was higher than the PA goal of 16.4%.

Mental Health and Substance Use Disorders

- Albany County met the Prevention Agenda 2024 objective for frequent mental distress.
- Rensselaer County had the highest rate in the Capital Region for self-inflicted injury ED visits.
- Albany (161.8) and Rensselaer (163.7) Counties had higher mental disease and disorders ED visit than NYS excl. NYC (156.7).
- Albany (78.6) and Rensselaer (90.8) Counties had higher mental disease and disorders hospitalization rates than NYS excl. NYC (72.3).
• Albany (9.6) and Rensselaer (9.9) Counties had higher self-inflicted injury hospitalization rates than NYS excl. NYC (5.6).

• Albany (3.7) and Rensselaer (3.4) Counties had higher self-inflicted injury ED visit rates than NYS excl. NYC (3.3).

• Neither Albany (9.7) nor Rensselaer (11.8) Counties met the Prevention Agenda 2024 objective of 7.0 per 100,000 population for age-adjusted suicide mortality.

• While Albany and Rensselaer Counties were below the NYS excl. NYC rate for overdose deaths involving opioids, both counties were above the state average for patients receiving at least one buprenorphine prescription for opioid use disorder.

• As a predictor for heroin use, opioid prescriptions for pain have declined in New York State between 2014-16 and 2017-19. Albany County met the Prevention Agenda goal for prescriptions per 1,000 population, but Rensselaer County did not – although their rate declined between the 2 periods.

• The rate of opioid overdose ED visits per 100,000 exceeded the Prevention Agenda goal in both Albany and Rensselaer Counties.

Covid-19
In March 2020, the WHO declared COVID-19 a worldwide pandemic, and the U.S. declared a State of Emergency due to COVID. By May 2020, the US had over 100,000 deaths due to COVID, and in mid-June, the U.S. surpassed one million cases.

Covid-19 not only negatively impacted the population’s physical and mental health, but other aspects of life, including economic and employment.

Since the onset of the Covid-19 pandemic, health experts have been collecting and reporting data on testing, positive cases, hospitalizations, deaths, and vaccination rates. Among them is New York State Department of Health, which continues to monitor trends of its 19.4 million residents.

New York State and the Capital Region have experienced peaks in the number of COVID-19 cases, rates, and hospitalizations. As of early December 2022, more than 6.4 million coronavirus cases and 74,217 resulting deaths have been reported in New York State.

In 2021, New York State appointed 10 regional health care systems to oversee vaccine distribution. Albany Medical Center Hospital was selected to lead the Capital Region Vaccine Network, charged with efficient and equitable vaccine distribution across Albany, Columbia, Greene, Rensselaer, Saratoga, Schenectady, Warren, and Washington counties.

The vaccine network quickly convened a task force of local leaders in health care, business, and the community to pool resources and strategize distribution. Within the network was also formed a Health Equity Task Force to focus on outreach, education, and distribution to at-risk and historically
underserved populations. Data suggests minority populations have greater concerns about the vaccine and face physical obstacles to receive it. As of December 2022, 15.3 million (76.1%) of the state’s population have been vaccinated with the primary series.

Work continues across the Capital Region to educate residents on the importance of vaccination, its safety, and to make booster shots available to all.

Key points, to date, for Albany and Rensselaer Counties include:

- 75,394 positive Covid-19 cases have been reported in Albany County (as of Dec. 2022).
- 40,398 positive Covid-19 cases have been reported in Rensselaer County (as of Dec. 2022).
- 75.9% of Albany County’s residents have been vaccinated with the primary series; this rate is among the highest in New York (as of Dec. 2022).
- 69.7% of Rensselaer County’s residents have been vaccinated with the primary series (as of Dec. 2022).
- Although vaccination rates were high in Albany and Rensselaer Counties overall, the following undervaccinated areas have been reported through November 2021:
  - Albany County: rural South Albany zip codes of Coeymans Hollow (32.6%), Medusa (43.5%), South Bethlehem (46.6%), Preston Hollow (51.7%), Berne (53.0%), and West Hill in the City of Albany (50.6%).
  - Rensselaer County: rural East Zip codes of Stephentown (49.5%), Petersburgh (50.7%), and Cropseyville (55.7%), rural Northeast Johnsonville (50.6%), Southwest Schodack Landing (51.1%), and Northwest Valley Falls (55.0%).

The significant community health needs identified by the Columbia-Greene and Schenectady Work Groups can be found in the [2022 Capital Region Community Health Needs Assessment](#).
Assets and Resources
A complete list of assets and resources were compiled by the Healthy Capital District Initiative, as organizations supporting the selected Prevention Agenda priorities in Albany and Rensselaer Counties.

The list can be found on pages 257-283, “Albany and Rensselaer County Assets and Resources”, within the 2022 Capital Region Community Health Needs Assessment.
Community Health Implementation Plan

How needs are being addressed
Regional Health Improvement Task Forces have identified best known practices for intervention, and resources available in the community to address these concerns.

Albany Medical Center Hospital, a member of existing task forces, is engaged in many of the activities outlined by the task forces, which aim to collaboratively improve efforts related to disease prevention and management through a process that includes:

- An over-arching goal
- Measurable objectives
- Specific strategies
- Tactics and partnerships to support strategies

Existing task forces will modify their scopes or establish new task forces to develop and implement Community Health Improvement Plan interventions for each of the priority areas selected. For example, the existing Obesity-Diabetes Task Force will review and revise their efforts to prevent obesity and type 2 diabetes, to ensure they align with Prevention Agenda objectives.

Addressing mental health will require collaboration with both Albany and Rensselaer Counties’ Departments of Mental Health as well as local hospitals.

Covid-19 will be addressed in a collaborative effort by Albany and Rensselaer Counties (and the full Capital Region) through continued promotion of vaccination to improve vaccine rates. This will be achieved through equitable access, outreach, and education.

Selected Health Priorities: Albany-Rensselaer Counties
Albany Medical Center Hospital will provide the staff, facilities, resources, and budget necessary to carry out our initiatives as outlined on the following pages.

Chronic Disease: Obesity/Diabetes
Focus areas:
- Preventive care and management
- Physical activity
- Healthy eating and food security
Goals:
- Promote evidence-based care to prevent and manage chronic diseases such as obesity, pre-diabetes, and diabetes
- Promote school, childcare and worksite environments that increase physical activity
- Increasing breast feeding rates
- Reduce obesity and the risk of chronic diseases
- Increase food security

Objectives:
- Decrease the percentage of adults in Albany and Rensselaer Counties with obesity by 2%.
- Increase the percentage of WIC infants breastfed by 2% in Albany and Rensselaer Counties.
- Decrease the percentage of adults with diabetes whose most recent HbA1c level indicated poor control (>9%).
- Screen all adult and pediatric primary care patients for food insecurity as well as other social determinants of health.

<table>
<thead>
<tr>
<th>Strategies</th>
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<th>Albany Medical Center Hospital Role</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Implement a combination of worksite-based physical activity policies, programs, or best practices through physical activity and/or nutrition programs.</td>
<td># of employees enrolled at Albany Medical Center Hospital's Fitness Center</td>
<td>Promote healthy living and wellness through Albany Medical Center Hospital's 4-pronged wellness program including healthy nutrition education, physical and emotional wellness, and employee education activities.</td>
<td>NA</td>
</tr>
<tr>
<td>Implement a combination of worksite-based physical activity policies, programs, or best practices through physical</td>
<td># of Albany Medical Center Hospital’s Wellness Fair attendees</td>
<td>Promote healthy living and wellness through Albany Medical Center Hospital's 4-pronged wellness program including healthy</td>
<td>Various external organizations support, promote, and enhance Albany Medical Center Hospital's worksite wellness initiatives and physical activity programs</td>
</tr>
<tr>
<td>activity and/or nutrition programs.</td>
<td>nutrition education, physical and emotional wellness, and employee education activities.</td>
<td>Implement a combination of worksite-based physical activity policies, programs, or best practices through physical activity and/or nutrition programs.</td>
<td># of participants in Albany Medical Center Hospital's &quot;Move, Learn, Heal, Eat&quot; initiatives</td>
</tr>
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</tr>
<tr>
<td>Increase access to professional support, peer support, and formal education to change behavior and outcomes.</td>
<td>The Albany Medical Center Hospital WIC Program has been recognized for exceptional breastfeeding services by USDA. Breastfeeding support by counselors plays a key role in empowering WIC mothers toward self-sufficiency.</td>
<td>Provides healthy foods for growth and development, encourages regular health care, and promotes food nutrition through education. WIC benefits for food are provided free of charge to pregnant, postpartum, or nursing women, infants, and children.</td>
<td># of WIC mothers receiving breastfeeding counseling/education</td>
</tr>
<tr>
<td>Increase access to professional support, peer support, and formal education to change behavior and outcomes.</td>
<td>Albany Medical Center Hospital promotes breastfeeding as the clinical standard for infant feeding.</td>
<td>Albany Medical Center Hospital promotes equity in breastfeeding through multiple initiatives including Mothers Own Milk Initiative, which through education, increases the number of low birthrate and NICU babies that are breastfed, and Kangaroo Care, a</td>
<td># of moms with low birthweight babies who opted to breastfeed in total or in part</td>
</tr>
<tr>
<td>Increase access to professional support, peer support, and formal education to change behavior and outcomes.</td>
<td># of moms who opted to breastfeed in total or in part, who were counseled/trained by Albany Medical Center Hospital's lactation consultants</td>
<td>Albany Medical Center Hospital's lactation consultants provide trainings and classes to moms-to-be.</td>
<td>Albany Med’s Kangaroo Care initiative, mentioned above, is an equitable breastfeeding method that involves skin-to-skin contact and is shown to encourage mothers of all newborns to breastfeed.</td>
</tr>
<tr>
<td>Screen for food insecurity, facilitate, and actively support referrals</td>
<td># Primary Care patients screened for food insecurity</td>
<td>Albany Medical Center Hospital’s adult and pediatric primary care providers screen all patients for food insecurity as well as other social determinants of health.</td>
<td>Albany Medical Center Hospital primary care providers refer patients who screen positive for food insecurity to various organizations throughout the Capital Region.</td>
</tr>
<tr>
<td>Promote evidence-based medical management in accordance with national guidelines.</td>
<td># of patient referrals to Albany Medical Center Hospital’s Certified Diabetes Educators</td>
<td>Albany Medical Center Hospital employs six full-time Certified Diabetes Educators for our patients with diabetes and prediabetes.</td>
<td>Albany Medical Center Hospital endocrinologists, obstetrics/gynecologists, and primary care physicians refer patients newly diagnosed with prediabetes or diabetes to our CDEs</td>
</tr>
<tr>
<td>Promote evidence-based medical management in accordance with national guidelines.</td>
<td># of patients given a lifestyle prescription by Certified Diabetes Educators</td>
<td>Albany Medical Center Hospital providers work with patients with diabetes to develop a self-care plan to meet each individual's needs.</td>
<td>NA</td>
</tr>
</tbody>
</table>
**Promote Well-Being and Prevent Mental and Substance Use Disorders**

**Focus Area:**
- Promote well-being

**Goals:**
- Strengthen opportunities to build well-being and resilience across the lifespan
- Prevent suicides

**Objectives:**
- Increase access to inpatient and outpatient services across the Behavioral Health spectrum for all ages.
- Reduce the age-adjusted suicide mortality rate by 2%.

<table>
<thead>
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<tr>
<td>Continue efforts to expand access to behavioral health providers.</td>
<td># of pediatric and adult visits to the Albany Medical Center Hospital's Psychiatry providers</td>
<td>Albany Med employs adult and pediatric behavioral health providers to provide mental health services and support to our patients.</td>
<td>Referrals to Albany Med's pediatric and adult behavioral health providers</td>
</tr>
<tr>
<td>Continue efforts to expand access and integrate behavioral health with providers.</td>
<td># Albany Medical Center Hospital sites with behavioral health services</td>
<td>Aside from its department of Psychiatry, Albany Med currently integrates behavioral health care into a number of its primary care and specialty sites to improve access for our patients.</td>
<td>NA</td>
</tr>
<tr>
<td>Identify and support at-risk patients through PHQ-2, PHQ-9, and ASQ screenings.</td>
<td># of patients screened</td>
<td>Several Albany Med Physicians Group office sites screen for depression using PHQ-2 screenings. If screening is deemed positive, the PHQ-9 suicide screening is rendered. Albany Medical Center Hospital’s Emergency Department and</td>
<td>Identify at-risk patients for depression and suicide. Positive screenings are referred to treatment.</td>
</tr>
</tbody>
</table>
Promote Well-Being and Prevent Mental and Substance Use Disorders

Focus Area:
- Prevent mental and substance use disorders

Goal:
- Prevent opioid overdose deaths

Objectives:
- Reduce opioid-related ED visits by 2%.

<table>
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<tr>
<td>Increase availability of/access and linkages to medication-assisted treatment (MAT) including Buprenorphine.</td>
<td># of visits to Albany Medical Center Hospital’s Suboxone Clinics (Albany and Columbia Counties)</td>
<td>Care for opioid-addicted patients clinics in Albany and Columbia Counties by Albany Med providers trained in emergency medicine and medical toxicology, licensed to prescribe buprenorphine.</td>
<td>Catholic Charities provides social services for patients, including counseling, harm reduction; Albany Med refers patients who are in need of intensive therapy to St. Peter's SPARC as well as other organizations</td>
</tr>
<tr>
<td>Provide resources and education to patients and providers.</td>
<td>Provider and Community Education</td>
<td>Host and/or co-host public education forums re: opioid use disorder. Albany Med participants include emergency medicine physicians, one of whom also serves as the Regional EMS Medical Director.</td>
<td>New York State Department of Health - supplier of naloxone leave-behind kits; Regional Emergency Management Organization - partner in leave-behind efforts; Local Sheriffs - hosts and co-hosts of community education conferences; local governments and other local agencies also co-hosts</td>
</tr>
</tbody>
</table>
**Communicable diseases: Covid-19**

**Focus Area:**
- Vaccine preventable diseases

**Goals:**
- Improve vaccination rates
- Reduce vaccine coverage disparities

**Objectives:**
- Increase vaccination rate for all populations in the Capital Region, both for first-time vaccines, as well as boosters.
- Educate Capital Region population on the importance of Covid-19 vaccinations and therapies.

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<tr>
<td>Offer and publicize COVID-19 vaccines in locations and hours that are convenient to the public including pharmacies, vaccine only clinics, and other easily accessible sites.</td>
<td># Website visits to CapRegionvax.org, the website established specifically for residents of the Capital Region which provides information about vaccines, vaccine locations, and related health information</td>
<td>Albany Medical Center Hospital promotes vaccine administration and works to improve vaccination rates through a variety of access, outreach, and education efforts.</td>
<td>Continue to promote vaccine administration, access and education through key partnerships with organizations throughout the Capital Region, including New York State DOH, Albany County DOH, Rensselaer County DOH, Columbia Memorial Hospital, Glens Falls Hospital, Saratoga Hospital, St. Peter’s Health Partners, and many other entities.</td>
</tr>
</tbody>
</table>

**Albany-Rensselaer Community Health Improvement Plan**

For information related to how partner organizations in the Albany-Rensselaer Prevention Agenda Workgroup, with Albany Medical Center Hospital, will address each focus area, goal, and objective, see the Appendix beginning on page 54.
**Additional significant health priorities chosen by Albany Medical Center Hospital**
Albany Med will also report on its efforts to address tobacco cessation and asthma management, and various equity initiatives supporting healthy women, infants, and children.

**Promote tobacco and vaping cessation**

**Focus Area:**
- Tobacco and vaping prevention

**Goal:**
- Promote tobacco use and vaping cessation
- Promote evidence-based care to prevent and manage chronic diseases including asthma and other chronic diseases

**Objectives:**
- Decrease the prevalence of cigarette smoking and vaping by adults ages 18 years and older (among adults) by 2%
- Decrease the Asthma ED visit rate per 10,000 for those aged 0-4, 0-17, and all age groups

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<tr>
<td>Prevent use of tobacco, combustible tobacco, and electronic vaping products</td>
<td># community education sessions led or co-led by Albany Medical Center Hospital's respiratory therapy team</td>
<td>Albany Medical Center Hospital advocates for smoke-free environments by providing tobacco cessation services for patients, their families, and employees and links individuals who desire to quit with local community resources.</td>
<td>Local organizations host tobacco and vaping cessation educational events for the community</td>
</tr>
</tbody>
</table>
## Prevent use of tobacco, combustible tobacco, and electronic vaping products

### # of inpatients receiving smoking cessation or vaping counseling

Albany Medical Center Hospital advocates for smoke-free environments by providing tobacco cessation services for patients and their families, and links individuals who desire to quit with local community resources.

Local resources provide guidance and assistance to smokers and vapers who are seeking cessation services.

### # community education sessions led or co-led by Albany Medical Center Hospital’s respiratory therapy team

Albany Medical Center Hospital advocates for smoke-free environments by providing tobacco cessation services for patients, their families, and employees and links individuals who desire to quit with local community resources.

Local organizations host tobacco and vaping cessation educational events for the community.

## Promote healthy women, infants and children

### Focus Area:

- Perinatal & infant health

### Goal:

- Engage in strategies to improve the health of children

### Objectives:

- Ensure all low-income mother-child pairs are referred to the First 1,000 Days program
- Ensure equitable care for pregnant, birthing, and postpartum mothers and their infants
Engage in strategies to improve the health of children in their first two years

# mother-child pairs referred to the First 1,000 Days program

Albany Medical Center Hospital advocates for equitable perinatal and infant health by offering mothers and their children support in breastfeeding, primary care, initiatives promoting skin-to-skin contact, and community-based health services.

Albany Medical Center Hospital promotes the First 1,000 Days program, engaging primary care and behavioral health providers with community-based health services, such as WIC, to follow mother-child pairs from the mother’s first prenatal visit until the child’s second birthday.

Engage in strategies to ensure equitable care for pregnant, birthing, and postpartum mothers

Initiatives connected to birth equity

Albany Medical Center is an active participant in the New York State Birth Equity Improvement Project, aimed at reducing morbidity and mortality among women of color, and providing an equitable experience for all pregnant, birthing and postpartum mothers.

Numerous efforts are underway, for example - Albany Medical College is developing curriculum around this subject, and monthly maternal morbidity reviews are conducted by Albany Medical Center Hospital.

A summary for each Capital Region Health Priority Work Group can be found in the 2022 Capital Region Community Health Needs Assessment.

Other Health Needs
While not addressed through existing Regional Health Task Forces, below are examples of Albany Medical Center Hospital’s programs and initiatives that address other prioritized health needs for residents of the Albany-Rensselaer County region as identified through the CHNA.

Heart Disease: A leading cause of death in the U.S. and NYS, residents of New York State are 25% more likely to die from coronary heart disease than from the next leading cause of death. Albany County’s 2016-18, age-adjusted congestive heart failure mortality (18.4 per 100,000) was higher than NYS, excl. NYC, (16.7) but down from 18.7 in 2013-15. Rensselaer County’s 2016-18 age-adjusted congestive heart...
failure mortality rate of 19.4 per 100,000, was higher than NYS, excl. NYC, (16.7) but down from 20.7 in 2013-15. Additionally, the rate of heart attack hospitalizations (14.6) was above the Capital Region average of 13.5 per 10,000 population.

- Albany Medical Center Hospital provides a wide range of excellent care for adult and pediatric patients with conditions affecting the heart and vascular system, such as coronary artery disease, congenital heart disease, occluded heart vessels, and valvular heart disease.
- Albany Medical Center Hospital’s cardiac team works across disciplines to ensure patients receive the newest and most advanced cardiac services and treatments.
- Interventional procedures often eliminate the need for surgery while providing better results than medication alone. Our team of interventional cardiologists and staff educate patients and their families about each procedure and why it makes sense in a particular patient’s case.
- When necessary, our cardiac experts use the latest leading-edge surgical procedures to address routine and complex medical issues.
- Albany Medical Center Hospital has approximately one dozen locations to improve access to cardiac care for our patients.

Social Determinants of Health: Economic and social conditions that influence individual and group differences in health status comprise the social determinants of health. These include factors such as income, education, job insecurity, working life conditions, housing, and food insecurity.

Food insecurity is not only related to healthy foods, but individuals’ or families’ abilities to afford and secure such foods. About 47 million Americans or 14.5% of the population were food insecure in the past year. In NYS, approximately 11.1% of the population were food insecure. For the Capital Region, 9.6%, or 92,000 residents, experienced food insecurity. In Albany County, the rate was 10.2%, and in Rensselaer County, it was 10.3%.

- Albany Medical Center Hospital’s adult and pediatric primary care providers screen for all social determinants of health, including food insecurity, and refer patients who screen positive to its network of community-based resources for assistance.
- Albany Medical Center Hospital provides care to all patients, regardless of ability to pay.
- Albany Medical Center Hospital is often the sole provider of pediatric services for young patients of this region. More than half of pediatric patients cared for are from low income, underinsured, or uninsured families.
- Children from low-income households and those who live in housing built before 1978 are at the greatest risk of lead exposure. Our providers screen pediatric patients for lead levels. In addition, various pediatricians at Albany Med are trained in subspecialty areas, one of which is lead poisoning. Annually from 2016 to 2018, an average of 139 children under the age of six living in the Capital Region were found to have blood lead levels at, or above, 10 μg/dl. Albany County had the highest incidence rate of elevated blood lead levels with 11.7/1,000 children tested, followed by Rensselaer County with a rate of 10.8/1,000 children tested.

Stroke: The fifth leading cause of death in the U.S., stroke is a major cause of adult disability. In the U.S., someone has a stroke every forty seconds and dies from a stroke every four minutes. Locally, the
stroke hospitalization rate per 10,000 for Albany and Rensselaer Counties was higher than the rates for the Capital Region and NYS excl. NYC. Additionally, Albany County’s 2016-18 age-adjusted stroke mortality rate (28.4 per 100,000) was higher than NYS excl. NYC (27.6), and up from 26.1 in 2013-15. Rensselaer County’s 2016-18 age-adjusted rate stroke mortality rate of 28.6 was also higher than NYS excl. NYC and up from 27.0 in 2013-15.

- As the region's most advanced stroke hospital, Albany Medical Center Hospital’s expert stroke team is ready 24/7 to provide patients with leading-edge treatments they need to improve their chances of a successful recovery.
- Albany Medical Center Hospital is the only hospital in the region that can provide the mechanical thrombectomy procedure to patients, which has been shown to improve patient outcomes and increase the chances of the patient living without disability after having a stroke.
- With full-time, fellowship-trained neurosurgeons and advanced technology bi-plane rooms, multiple procedures can be performed simultaneously, and at any time of day or night.
- Albany Medical Center Hospital’s stroke team is led by a multidisciplinary team of neurologists, neuro-radiologists, neurosurgeons, vascular surgeons, nurse practitioners, rehabilitation specialists, and nurses and residents with specialized training in diagnosis and treatment of stroke, making the hospital a resource for other hospitals in a 25-county area that transfer patients to Albany Med for treatment.
- New, cutting-edge software (2021) allows Albany Med Health System to streamline stroke care across its four hospitals. We are the first in northeast New York to apply a computer-aided triage system, which helps facilitate early access to the most advanced stroke care for patients at our hospitals. Stroke specialists throughout the Albany Med Health System to securely communicate in order to synchronize care and determine the optimal treatment decision for the patient, potentially saving critical time in the triage, diagnosis and treatment of stroke, resulting in improved outcomes for our patients.
- Albany Medical Center Hospital is routinely awarded advanced certification for comprehensive stroke centers by The Joint Commission and the American Heart Association / American Stroke Association.
Regional health needs identified in the 2022 CHNA that will not be addressed in Albany Medical Center Hospital’s Implementation Strategy

During the prioritization process, many health needs were selected by the Prioritization Workgroups as important to address. While there was commonality among many of the pressing health needs, there were also some regional differences.

These health priorities of Columbia, Greene, Saratoga, and Schenectady Counties are being addressed largely by hospitals, local health departments, and other organizations in their communities.

Columbia and Greene Counties
Albany Med Health System partner Columbia Memorial Hospital, with Greene County Public Health and Columbia County Department of Health, is taking the lead on aligning efforts around mutually selected priority areas. Prevention Agenda priorities selected:

- Obesity/Diabetes
- Behavioral Health and Substance Use Disorders
- Covid-19

When feasible, Albany Medical Center Hospital will assist with the implementation of the Columbia-Greene Workgroup’s initiatives.

Saratoga County
Albany Med Health System partner Saratoga Hospital, with Saratoga County Department of Health, is taking the lead on aligning efforts around mutually selected priority areas. Saratoga Hospital and Saratoga County Department of Health conducted a community health needs assessment independent of the study by Healthy Capital District Initiative and will jointly be addressing priorities, in partnership, at the county level. Prevention Agenda priorities selected:

- Obesity/Diabetes
- Behavioral Health and Substance Use Disorders
- Heart Disease

When feasible, Albany Medical Center Hospital will assist with the implementation of Saratoga County’s selected initiatives.

Schenectady County
Schenectady County Public Health Services, Ellis Medicine and Sunnyview Rehabilitation Hospital are taking the lead to address the priority areas selected for this region. They have also been working closely with other Schenectady partners through the Schenectady Coalition for Healthcare Access (SCHA). Prevention Agenda priorities include:

- Covid-19
- Prevention of Sexually Transmitted Infections
- Behavioral Health and Substance Use Disorders
When feasible, Albany Medical Center Hospital will assist with the implementation of the Schenectady County Workgroup’s initiatives.

**Albany Med Health System**

Albany Med Health System, which includes Albany Medical Center, Columbia Memorial, Glens Falls, and Saratoga Hospitals, while focusing on health priorities in their immediate regions, are collectively addressing health needs across the entire Capital Region.

Glens Falls Hospital’s geographic region extended beyond the needs assessment conducted by HCDI. Accordingly, they participated in a Community Health Needs Assessment with the Adirondack Health Institute – targeting the needs of residents of Warren and Washington Counties.

Glens Falls Hospital will be addressing the following Prevention Agenda priorities in Warren and Washington Counties, in collaboration with the Adirondack Health Institute:

- Healthy Eating and Food Security
- Physical Activity
- Tobacco Cessation
- Chronic Disease Prevention & Management
- Antibiotic Resistance & Healthcare-Associated Infections
- Behavioral Health and Substance Use Disorders
- Covid-19

When feasible, Albany Medical Center Hospital will assist with the implementation of the selected initiatives for Warren and Washington Counties.
Evaluation of impact of actions taken since preceding CHNA
Throughout 2019-2022, the time period of the previous CHNA and related Community Service Plan, quarterly task force meetings, coordinated by the Health Capital District Initiative (HCD) assessed the progress of strategies and tactics for the selected behavioral health and chronic disease goals.

The Prevention Agenda Work Group Committee of the Healthy Capital District Initiative, in which Albany Medical Center Hospital participates, also served as an oversight group to determine successes and challenges related to the implementation of the community health strategies.

It was determined that while many tactics were successful, others were difficult to execute – and all tactics were adversely affected due to the unanticipated Covid-19 pandemic. This in turn impacted resources and funding which supported numerous tactics.

The impact was evaluated by which tactics were executed, and if the deliverables were met.

In addition, other than County Health Rankings, current public health data is not available to allow for a full evaluation of the tactics of the task forces. Most of the public health data available is historical.

The task forces, using the results of the 2022 CHNA to confirm pressing health priorities, agreed that the work of the Obesity/Diabetes would continue; and an existing Behavioral Health Task Force would be repurposed to focus on opioid use disorders, well-being, and suicide prevention. With behavioral health priorities and opioid use disorder ranking as significant health needs in Albany and Rensselaer Counties, various entities, including Albany Medical Center Hospital, St. Peter’s Health Partners, Albany County Department of Health, and Rensselaer County Department of Health, will provide regular updates to the Healthy Capital District Initiative to evaluate progress of these behavioral health initiatives. Similarly, Covid-19 will be evaluated by Albany Medical Center Hospital, St. Peter’s Health Partners, Albany County Department of Health, and Rensselaer County Department of Health, and regular updates will be provided to Healthy Capital District Initiative.

Health Capital District Initiative will coordinate regularly scheduled meetings to monitor development and modify work plans, if needed.
Approvals

Adoption of Community Health Needs Assessment and Community Service Plan

On November 22, 2022 the Albany Medical Center Hospital Board of Governors approved and recommended approval of Albany Medical Center Hospital’s Community Health Needs Assessment (“CHNA”), Implementation Strategy and Community Service Plan (CSP). On December 14, 2022 the Albany Med Health System Board approved the CHNA and CSP.
Making CSP widely available to the public

As in past years, Albany Medical Center Hospital’s Community Service Plan will be publicized through various outlets.

These include:

- Our website (www.amc.edu)
  - Our CHNA will remain posted on our site for 2 subsequent CHNA cycles
- “The Story”, Albany Med Health System’s quarterly newsletter (for staff and for public)
- “Board of Directors” newsletter (for Albany Med Health System’s governance)
- Printed copies will also be made available upon request.

Additionally:

- Active engagement in a broad range of community organizations provides a platform for sharing information about our Community Service Plan and our health promotion priorities.
- We maximize the use of free media to promote information about our community health initiatives (such as free screenings, classes, seminars, etc.) through social media platforms and, on occasion, through print media.
Community Health Needs Assessment
A complete report of the Health Needs Assessment can be found by accessing this link: 2022 Capital Region Community Health Needs Assessment.
Appendix

Community Health Improvement Plan

Albany & Rensselaer Counties
## Albany & Rensselaer Counties’ Community Health Improvement Plan

### Prevent Chronic Diseases

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

**Goal 1.1:** Increase access to healthy and affordable foods and beverages (i.e. worksite nutrition and physical activity programs designed to improve health behaviors and results)

**Target County:** Albany & Rensselaer Counties

**Target Population:** Adults

**Objective 1.4:** By December 2024, decrease the percentage of adults in Albany and Rensselaer Counties ages 18 years and older with obesity (among all adults) by 2%.

<table>
<thead>
<tr>
<th>Interventions</th>
<th>Partner Resources</th>
<th>Partner Roles</th>
<th>Measures</th>
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<tbody>
<tr>
<td>Intervention 1.0.3</td>
<td>Albany County Department of Health: Albany County Strategic Alliance for Health specifically targets poor nutrition, lack of physical activity, and tobacco use the underlying risk factors for a variety of chronic diseases (including diabetes, obesity, and cardiovascular disease). Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community.</td>
<td>Albany County Department of Health: Provide technical assistance in designing and implementing nutrition and beverage standards. <strong>Rensselaer County Department of Health:</strong> • Promote NDPP at SPHP • Conduct public health detailing on prediabetes to local medical providers (screening, prevention, etc.) <strong>Capital District YMCA, SPHP Medical Associates; other certified providers</strong> • Conduct NDPP classes. <strong>SPHP</strong> • Increase availability of NDPP and conduct NDPP classes. • Increase prediabetes awareness by SPHP providers and Promote prediabetes screening, testing, and referral. <strong>HCD</strong> • Number of organizations that adopt and implement nutrition and beverage standards (e.g. healthy meeting and events policies, healthy vending policies, applicable worksite wellness programs) including number of persons impacted by standards. <strong>Rensselaer County Department of Health:</strong> • Number of participants enrolled in NDPP. • To the extent possible, number and percentage of NDPP participants that complete</td>
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</table>
| **St. Peter’s Health Partners (SPHP)** | Hospital(s) with primary care, endocrinology, outpatient nutrition counseling, and certified diabetes education services. Also provides NDPP in collaboration with Price Chopper Pharmacies of the Capital District and PharmaSmart; embed Prediabetes Risk Assessment will be integrated into PharmaSmart Machines to provide direct referrals to NDPP programs, for individuals identified as prediabetic.  

**Healthy Capital District Initiative (HCDI):** Provides access to coverage and care, health planning expertise, and supports health prevention programs across the Capital Region. Facilitates the Albany-Rensselaer Obesity Task Force.  

- Promote NDPP, review and update Capital District Diabetes Education and Support Services Guide, review alternative lifestyle change programs.  

- To the extent possible, measure NDPP participant outcomes (e.g. average weekly physical activity minutes, percent weight loss, Hb1c changes). |
| Promote evidence-based medical management in accordance with national guidelines | **Albany Medical Center (AMC) Hospital:**
Albany Med’s primary care, endocrinology, outpatient nutrition counseling, and certified diabetes education services are facets of a patient-centered, multi-disciplinary approach to diagnosing, assessing, educating, and managing care for patients with diabetes.  
**Healthy Capital District Initiative (HCDI):**
Provides access to coverage and care, health planning expertise, and supports health prevention programs across the Capital Region. Facilitates the Albany-Rensselaer Obesity Task Force.

| AMC: |
- AMC endocrinologists, obstetrics/gynecologists, and primary care physicians refer patients newly diagnosed with prediabetes or diabetes to certified diabetes education services. AMC provides patients a self-care plan to meet each individual’s needs  
- **HCD:** Promote self-management materials and review and update Capital District Diabetes Education and Support Services Guide

| AMC: |
- Number Patient referrals to AMC certified Diabetes Educators |
<table>
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<tr>
<th>Increase food security</th>
<th>Rensselaer County Department of Health:</th>
<th>Rensselaer County Department of Health: Work collaboratively with community partners, to increase food security. Facilitate the Rensselaer County Health &amp; Wellness Coalition.</th>
<th>SPHP:</th>
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</thead>
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<tr>
<td><strong>Rensselaer County Department of Health:</strong> Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community. <strong>St. Peter’s Health Partners (SPHP):</strong> Develop a process to screen patients of SPHP for food insecurity and provide appropriate referrals, as necessary, via a closed loop process. Host Social influencers of health food insecurity steering committee. <strong>Albany Medical Center (AMC):</strong> Included in efforts to screen for social determinants of health across its primary care settings, Albany Med screens for food insecurity, and facilitates and actively supports referrals. <strong>Healthy Capital District Initiative (HCDI):</strong> Provides access to coverage and care, health-planning expertise and supports health prevention programs across the Capital Region. Facilitates the Albany-Rensselaer County Department of Health: Work collaboratively with community partners, to increase food security. Facilitate the Rensselaer County Health &amp; Wellness Coalition. <strong>SPHP:</strong> Implement food insecurity screening, facilitate and actively support closed loop food assistance referrals within SPHP acute and ambulatory settings. Hosts Social Influencers of health food insecurity steering committee. <strong>AMC:</strong> Albany Med primary care providers referrals to patients who screen positive for food insecurity to various organizations throughout the Capital Region. <strong>HCD:</strong> Promote &amp; provide support for outreach activities in Albany and Rensselaer counties.</td>
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<td></td>
<td><strong>Rensselaer County Department of Health:</strong> Work collaboratively with community partners, to increase food security. Facilitate the Rensselaer County Health &amp; Wellness Coalition.</td>
<td><strong>SPHP:</strong> Implement food insecurity screening, facilitate and actively support closed loop food assistance referrals within SPHP acute and ambulatory settings. Hosts Social Influencers of health food insecurity steering committee.</td>
<td><strong>SPHP:</strong></td>
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<tr>
<td></td>
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<td><strong>AMC:</strong> Albany Med primary care providers referrals to patients who screen positive for food insecurity to various organizations throughout the Capital Region.</td>
<td><strong>AMC:</strong></td>
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<td></td>
<td></td>
<td><strong>HCD:</strong> Promote &amp; provide support for outreach activities in Albany and Rensselaer counties.</td>
<td><strong>AMC:</strong></td>
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</table>

**SPHP:**
- Number of practices that screen, Number of patients screened, # who screened positive, number of closed loop referrals, # of fresh produce access points created by SPHP

**AMC:**
- Number of Primary Care patients screened for food insecurity
**Prevent Chronic Diseases**

**Focus Area 2: Physical Activity**

**Goal 2.1**

Improve community environments that support active transportation and recreational physical activity for people of all ages and abilities

**Target County:** Albany & Rensselaer Counties

**Target Population:** Adults and Children

**Objectives:**

Objective 1.1 By December 31, Objective 1.1 Decrease the percentage of children with obesity (among WIC children ages 2-4 years) by 2%

Objective 1.2 By December 31, 2024, decrease the percentage of children with obesity by 2%

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<tr>
<td>Implement new or improved pedestrian, bicycle, or transit transportation system components (Intervention 2.1.1)</td>
<td>Albany County Department of Health: Albany County Strategic Alliance for Health specifically targets poor nutrition, lack of physical activity, and tobacco use the underlying risk factors for a variety of chronic diseases (including diabetes, obesity, and cardiovascular disease). Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among</td>
<td>Albany County Department of Health: • Provide technical assistance in promoting physical activity in community venues. Rensselaer County Department of Health: • Implement worksite wellness initiatives to promote healthy lifestyle and mindfulness among Rensselaer County staff. AMC: • Promote healthy living and wellness through AMC’s 4 pronged wellness program including healthy nutrition education, physical and emotional wellness, and</td>
<td>Albany County Department of Health: • Number of plans adopted or opportunities available promoting physical activity (e.g. Complete Streets policies, joint use agreements) Rensselaer County Department of Health:</td>
</tr>
<tr>
<td>Organizations in the community.</td>
<td>Employee education activities</td>
<td>Nutrition, physical activity policies and practices (including number of persons impacted by standards and improvements in worksite wellness).</td>
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</table>
| **Albany Medical Center (AMC)**: Hospital(s) with primary care, outpatient nutrition counseling, and certified diabetes education services | **SPHP**: Promote worksite wellness programs via Employee Wellness Committee | **AMC**: Number of employees enrolled at AMC’s fitness center  
• Number of AMC Wellness fair attendees  
• Number of participants in AMC’s “Move, Learn, Heal, Eat” initiatives |
| **St. Peter's Health Partners (SPHP)**: Hospital(s) with primary care, outpatient nutrition counseling, and certified diabetes education services Adopted a health and wellness policy that impacts patients and employees | **HCD**: Promote & provide support to outreach activities in Albany and Rensselaer counties. |  |
| **Healthy Capital District (HCD)**: Provides access to coverage and care, health-planning expertise and supports health prevention programs across the Capital Region. |  |  |

| School-based obesity prevention | **St. Peter’s Health Partners (SPHP)**: Awarded the Creating Healthy Schools and Communities grant from NYS Department of Health that seeks to increase opportunities for physical activity and improve nutritious foods in both the community and school districts. Provides funding to evidence based physical activity and healthy lifestyle | **SPHP**: Provides technical assistance in developing implementation strategies for health and wellness policies within school districts.  
Rensselaer County Department of Health:  
• Conduct public health education at local school  
• Number of school districts that adopt strong wellness policies, # school districts that improve nutrition policies and practices (Well SAT 2.0 to measure wellness policy implementation), # school districts | **SPHP**: Number of school districts that adopt strong wellness policies, # school districts that improve nutrition policies and practices (Well SAT 2.0 to measure wellness policy implementation), # school districts |
| Increase support for breastfeeding in the workplace. | **Albany Medical Center (AMC)**: Local WIC agency with a longstanding commitment to assisting mothers with breastfeeding education, nutrition services, and promotion of regular health care.  
**St. Peter’s Health Partners (SPHP)**: Creating Breastfeeding Friendly Communities Grant. St. Peter’s Hospital awarded Baby Friendly designation by Baby Friendly USA, Increase access to peer and professional breastfeeding support within the community. Created worksite lactation policies. | **AMC**:  
- Increase access to peer and professional breastfeeding support through Women, Infants, and Children program (providing access to healthy foods for growth and development and promotes food nutrition through education) and lactation counseling.  
- Number of WIC mothers receiving breastfeeding counseling/education  
- Number of moms who opted to breastfeed in total, or in part, who were counseled/trained by Albany Med’s lactation consultants. | **AMC**:  
- Increase access to school breakfast  
- Number of Children participating in Soccer for success  
- Number of schools attended for public health education on nutrition/physical activity/healthy lifestyle  
- Increase support for breastfeeding in the workplace.  
- Number of Baby Café’s (breastfeeding support drop-in centers) established  
- Number and percentage of engaged worksites that improve their policies and/or practices to support breastfeeding. |
**Prevent Chronic Diseases**

**Focus Area 3: Tobacco Prevention**

**Goal 2.1:** Prevent initiation of tobacco use, including combustible tobacco and electronic vaping products

**Target County:** Albany & Rensselaer Counties

**Target Population:** Adults and Children

**Objectives:** By December 31, 2024, decrease the prevalence of any tobacco use by high school students by 22.4% (25.4% to 19.7%)

By December 31, 2024, decrease the prevalence of vaping product use by high school students by 22.8% (20.6% to 15.9%)

By December 31, 2024, decrease the prevalence of combustible cigarette use by young adults age 18-24 years by 22.2% (11.7% to 9.1%)

By December 31, 2024, decrease the prevalence of vaping product use by young adults age 18-24 years by 23.1% (9.1% to 7.0%)

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<th>Partner Resources</th>
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<tr>
<td>Preventing use of tobacco, combustible tobacco, and electronic vaping products</td>
<td><strong>Rensselaer County Department of Health:</strong> Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community. <strong>Albany Medical Center (AMC):</strong> Albany Med promotes wellness among its patients and employees. This includes smoking and vaping cessation education through initiatives aimed at</td>
<td><strong>Rensselaer County Department of Health:</strong> • Provide vaping education within schools and at other community events (PowerPoints, Informationals) <strong>AMC:</strong> • Albany Med will collaborate with local organizations to host or co-host tobacco and vaping cessation educational</td>
<td><strong>Rensselaer County Department of Health:</strong> • Number of school education events • Number of community events with vaping information provided <strong>AMC:</strong> • Number of Health &amp; Wellness Coalition Meetings <strong>AMC:</strong> • Number of community education sessions</td>
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encouraging and supporting individuals who want to stop smoking or vaping.

programming for the community led or co-led by Albany Med
- Number of inpatients receiving smoking cessation or vaping counseling

Prevent Chronic Diseases

Focus Area 4: Preventative Care and Management

Goals 4.1: Increase cancer screening rates for breast cancer, cervical, and colorectal

Target County: Rensselaer County

Target Population: Adults (ages according to recent guidelines for breast, cervical and colorectal cancer screening)

Objectives: By December 31, 2024, increase the percentage of women with an annual household income less than $25,000 who receive a breast cancer screening based on most recent guidelines (women aged 50 to 74 years who have received a mammogram in the past two years) by 5% (75.9% to 79.7%)

By December 31, 2024, increase the percentage of women with an annual household income less than $25,000 who receive a cervical cancer screening based on the most recent guidelines (women ages 21 to 65 years who have received a Pap test within the past three years or women ages 30 to 65 years who have received a Pap and HPV co-test within the past five years) by 5% (76.1% to 80%)

By December 31, 2024, increase the percentage of adults who receive a colorectal cancer screening based on the most recent guidelines (adults ages 50 to 75 years who received either a blood stool test within the past year, or a sigmoidoscopy within the past 5 years and a blood stool test within the past 3 years, or a colonoscopy within the past 10 years) by 17% (68.5% to 80%)

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<tr>
<td>Educate on the benefits of cancer screening for breast, cervical, and colorectal</td>
<td>Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being</td>
<td>Rensselaer County Department of Health: • Provide public health education at local community</td>
<td>Rensselaer County Department of Health: • Number of community events</td>
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Prevent Chronic Diseases

Focus Area 4: Preventative Care and Management

Goal 4.2: Increase early detection of cardiovascular disease, diabetes, prediabetes, and obesity

Target County: Rensselaer County

Target Population: Adults

Objectives: By December 31, 2024, increase the percentage of adults 45+ who had a test for high blood sugar or diabetes within the past three years by 5% (68.3% to 71.7%)

By December 31, 2024, increase the percentage of low-income (<$25,000) adults 45+ who had a test for high blood sugar or diabetes within the past three years by 5% (64.2% to 67.4%)

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<tr>
<td>Engage medical providers to educate their patients on prediabetes prevention</td>
<td>Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals</td>
<td>Rensselaer County Department of Health: • Conduct Public Health Detailing in Rensselaer County by targeting medical providers (PCPs) and educating best practices for prediabetes prevention.</td>
<td>Rensselaer County Department of Health: • Number of Primary Care Providers visited with Public Health Detailing</td>
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<td>Health &amp; Wellness Coalition</td>
<td>Rensselaer County Department of Health:</td>
<td>Rensselaer County Department of Health:</td>
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| among organizations in the community. | Rensselaer County Department of Health:  
Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community.  

• Provide public health education at local community events and at local schools (nutrition, physical activity, healthy lifestyle). | Rensselaer County Department of Health:  
• Number of community events  
• Number of schools attended to conduct healthy lifestyle/nutrition/physical activity public health education |

| Educate public on the benefits of early detection and strategies to prevent cardiovascular disease, diabetes, prediabetes, and obesity | Rensselaer County Department of Health:  
• To replace the Wellness Coalition; focuses on collaborative partnerships to create more equitable access to health services and wellness activities. In addition, incorporate public health | Rensselaer County Department of Health:  
• Number of meetings conducted |
Prevent Chronic Diseases

Focus Area 4: Preventative Care and Management

Goal 4.4: Improve self-management skills for individuals with chronic conditions

Target County: Albany & Rensselaer Counties

Target Population: Individuals with chronic conditions

Objectives: By December 31, 2024, increase the 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 by 5% (10.10% to 10.60%)

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<th>Measures</th>
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<tr>
<td>Increase access to self-management skills for individuals with diabetes</td>
<td><strong>Rensselaer County Department of Health:</strong> Rensselaer County Department of Health is committed to increasing access to self-management skills through partnerships and unified goals with community partners</td>
<td>• <strong>Rensselaer County Department of Health:</strong> Promote the National Diabetes Prevention Program (NDPP) program offered through SPHP.</td>
<td><strong>Rensselaer County Department of Health:</strong></td>
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<tr>
<td>Expand access to evidence-based self-management interventions for individuals with chronic disease</td>
<td><strong>Rensselaer County Department of Health:</strong> Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of</td>
<td><strong>Rensselaer County Department of Health:</strong></td>
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<td><strong>AMC:</strong> Provide Diabetes Self-management support and education services</td>
<td>• Conduct public health detailing to provider’s on prediabetic patients.</td>
<td><strong>Rensselaer County Department of Health:</strong></td>
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<td><strong>SPHP:</strong></td>
<td><strong>AMC:</strong></td>
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<td>Number of providers provided with public health detailing</td>
<td><strong>Rensselaer County Department of Health:</strong></td>
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<td>Number of participants in other (i.e. non-NDPP) chronic disease self-management</td>
<td><strong>Rensselaer County Department of Health:</strong></td>
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<tr>
<td>Partnership</td>
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<tr>
<td><strong>Albany Medical Center (AMC):</strong></td>
<td>Albany Med’s primary care, endocrinology, outpatient nutrition counseling, and certified diabetes education services are facets of a patient-centered, multi-disciplinary approach to diagnosing, assessing, educating, and managing care for patients with diabetes.</td>
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<td><strong>St. Peter’s Health Partners (SPHP):</strong></td>
<td>Hospital(s) with primary care, endocrinology, outpatient nutrition counseling, and certified diabetes education services</td>
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<td><strong>Healthy Capital (HCD):</strong></td>
<td>Provides access to coverage and care, health planning expertise, and supports health prevention programs across the Capital Region.</td>
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<tr>
<th>Program</th>
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<tr>
<td><strong>HCD:</strong></td>
<td>- Provide Diabetes Self-Management Support and Education services</td>
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<td></td>
<td>- Promote and share Health Promotion best practices/resources and support collaboration</td>
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<td><strong>SPHP:</strong></td>
<td>- Number of Patients provides with self-management education resources</td>
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<td>- Programs that support Lifestyle Change via a Lifestyle Prescription (e.g. Blood Pressure Self-Monitoring, Diabetes Self-Management Support and Education aka DSMS/E).</td>
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**Promote Well-Being and Prevent Mental and Substance Use Disorders**

**Focus Area 1: Promote Well-Being**

**Goal 1.1:** Strengthen opportunities to build well-being and resilience across the lifespan

**Target County:** Albany & Rensselaer Counties
**Target Population:** Adults & children

**Objectives:** By December 31, 2024, increase access to inpatient and outpatient services across the Behavioral Health spectrum for all ages

**Interventions**

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Partner Resources</th>
<th>Partner Roles</th>
<th>Measures</th>
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<tbody>
<tr>
<td>Continue efforts to expand access to behavioral health providers</td>
<td>Albany Medical Center: AMC is committed to increasing access to inpatient and outpatient behavioral health services for all ages.</td>
<td>• AMC: Referrals to Albany Med’s pediatric and adult behavioral health providers</td>
<td>• Number of pediatric and adult visit to Albany Med’s Psychiatry providers • Number of Albany Med sites with behavioral health services</td>
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</table>

**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

**Target County:** Albany & Rensselaer Counties

**Target Population:** Individuals combatting opioid and other substance misuse

**Objectives:** By December 31, 2024, reduce the age-adjusted rate of overdose deaths involving any opioids by 7% (14.3 per 100,000 to 15.4 per 100,000)

**Interventions**

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<tr>
<td>2.2.2 Increase availability of/access to overdose reversal (Naloxone) trainings to prescribers, pharmacists, and consumers</td>
<td>Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County thru the Naloxone Now program Rensselaer County and Albany County Departments of Health: Provide facilities for New York State Opioid</td>
<td>Rensselaer County Department of Health: • Promote and manage the Naloxone Now program (by texting “NARCAN” to 21000, RCDOH staff will deliver Narcan, contact-free, to the</td>
<td>Rensselaer and Albany County Departments of Health: • Number of Community Narcan Trainings conducted • Number of individuals trained AMC:</td>
</tr>
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</table>
| Overdose Prevention Training.  
**Albany Medical Center (AMC):** Provide Naloxone resources and education to patients and providers.  
**St. Peter's Health Partners (SPHP):** refer individuals, as appropriate, to NYS Opioid Overdose Prevention Training Catholic Charities? | requestee).  
Promote N-CAP at community events and during the Community Narcan Training.  
**AMC**  
- New York State Department of Health - supplier of naloxone leave-behind kits;  
- Regional Emergency Management Organization - partner in leave-behind efforts;  
- Local Sheriffs - hosts and co-hosts of community education conferences; local governments and other local agencies: also co-hosts |  
- Number of visits to Albany Med’s Suboxone Clinics in Albany and Columbia Counties  
- Number of Provider and Community Education events |
2.2.4 Build support systems to care for opioid users or at risk of an overdose

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<tr>
<th>Rensselaer County Department of Health:</th>
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<tbody>
<tr>
<td>Increase the number of public trained to administer Narcan.</td>
<td>Conduct virtual and in-person Narcan trainings (if COVID protocols allow) within the community (i.e., colleges, local jail, community events)</td>
<td>Number of Heroin Coalition meetings held</td>
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<tr>
<td>Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community.</td>
<td>Rensselaer County Department of Health: Conduct the Heroin Coalition on a monthly basis to encourage cross-sector collaboration to address the opioid epidemic within Rensselaer County.</td>
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<tr>
<td>Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by preventing overdose among opioid users through the monthly Heroin Coalition which provides information and direct contacts with for opioid use prevention, opioid treatment and recovery services, and thru peer support.</td>
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Rensselaer County Department of Health:
Rensselaer County Department of Health is committed to educating the public on the impact of opioids and other substance misuse within our county by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community.

Rensselaer County Department of Health:
Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing a Recovery Help Line.

Albany Department of Health:
Disseminate public health information regarding substance use disorder.

Albany County Department of Mental Health: per 2020 Local Service Plan for Mental Hygiene Services:
Conducts assessment of mental hygiene and associated issues; Disseminates public health information regarding heroin and opioid addiction; and Provides and/or coordinates substance use disorder prevention, peer support, treatment & recovery services.

Albany Department of Health:

Rensselaer County Department of Health: Conduct public health education at local community events.

Rensselaer County Department of Health:
Promote the Recovery Helpline to create more equitable access to treatment/recovery services.

Albany Department of Health:
- Implement the use of data to improve overdose monitoring and response.
- Promote use of medicated assisted treatment (MAT)
- Provide peer support services including Mobile Outreach Treatment Overdose Response (M.O.T.O.R.)

AMC: Increase referrals and linkages to MAT

SPHP:
- Provide treatment for OUD; inpatient and outpatient settings
- Increase the number of “X” licensed providers
- Attendance and collaboration at substance use coalitions in both Albany and Rensselaer counties

Catholic Charities
HCD: Provide evidence-based resources and materials, disseminate partner materials, and host professional development workshops

AMC:
- Number of visits to Albany Med’s Suboxone Clinic

SPHP:
- Number of opioid use disorder individuals provided with Naloxone
- Number of opioid use disorder individuals receiving medication assisted treatment

HCD:
- Number of attendees
- Number of professional development events
<table>
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<tr>
<th>Disseminate public health information regarding substance use disorder.</th>
<th>Supply post-event overdose response kits.</th>
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</thead>
<tbody>
<tr>
<td>● Disseminates public health information regarding heroin and opioid addiction; and</td>
<td>● Provides and/or coordinates substance use disorder prevention, peer support, treatment &amp; recovery services.</td>
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</table>

**Albany Medical Center (AMC):** Increase availability of/access and linkages to medication-assisted treatment (MAT) including Buprenorphine.

**St. Peter’s Health Partners (SPHP):**
Provide an evidence-based model to expand access to treatment for opioid use disorders
Provides and/or coordinates substance use disorder prevention, peer support, treatment & recovery services

**Healthy Capital District (HCD):** Increase Professional Development support and training opportunities for peers, sharing of SUD

- Number of recovery resource guides disseminated
Promote Well-Being and Prevent Mental and Substance Use Disorders

Focus Area 2: Mental and Substance Use Disorders Prevention

Goal 2.5: Prevent suicides by cross-sector collaboration

Target County: Albany & Rensselaer Counties

Target Population: Individuals experiencing suicidal tendencies or thoughts

Objectives:

2.5.1 By December 31, 2024, reduce suicide attempts by New York adolescents (youth grades 9 to 12) who attempted suicide one or more times in the past year by 10% (10% to 9.1%)

2.5.2 By December 31, 2024, reduce the age-adjusted suicide mortality rate by 10% (7.8 per 100,000 to 7 per 100,000)

Interventions

<table>
<thead>
<tr>
<th>Interventions</th>
<th>Partner Resources</th>
<th>Partner Roles</th>
<th>Measures</th>
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<tbody>
<tr>
<td>2.5.5 Promote connectedness, teach coping and problem-solving skills: social emotional learning, parenting and family relationship programs, peer norm program</td>
<td>Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community. Albany Medical Center (AMC): Will promote well-being among patients and screen for</td>
<td>Rensselaer County Health: Participate in the Rensselaer County Suicide Prevention Task Force on a monthly basis and provide current data AMC: Identify and support at-risk patients through PHQ–2 and PHQ-9 screenings.</td>
<td>Rensselaer DOH: Number of Suicide Prevention Task Force meetings attended AMC: Number of patients screened</td>
</tr>
</tbody>
</table>
suicide and depression within Emergency Department and physician office settings.

| 2.5.2 Strengthen access and delivery of suicide care - Zero Suicide. | Albany County Department of Children, Youth and Families:  
- Coordinate services and supports for children and youth with emotional, behavioral and developmental concerns.  
- Member, Albany County Suicide Prevention and Education Committee (SPEC).  
Albany Department of Health: Member, Albany County Suicide Prevention and Education Committee (SPEC).  
Albany County Department of Mental Health: per 2020 Local Service Plan for Mental Hygiene Services:  
- Conducts assessment of mental hygiene and associated issues; and  
- Albany County Suicide and Education SPEC).  
St. Peter’s Health Partners (SPHP): | Albany County Department of Children, Youth and Families:  
- Provide crisis support, evaluation, services, and community referrals including:  
  - Children’s Mental Health Clinic  
  - Single Point of Access (SPOA)  
  - Case Management Services  
  - Promote community wide suicide awareness, education and prevention.  
Albany Department of Health:  
- Percent of patients who were formally screened (or screened with an evidenced-based screening tool) for suicide during reporting period  
SPHP:  
- Number of individual patients engaged in collaborative care  
- Percent of patients who were formally screened (or screened with an evidenced-based screening tool) for suicide during reporting period  
- Number of staff members completing mental health first aid course  
- Number of opioid use disorder individuals provided with peer support services (including, but not limited to, engagement, assessment, Leave Behind naloxone, post-event overdose response kits, referral to treatment). | Albany Department of Health:  
- Percent of patients who were formally screened (or screened with an evidenced-based screening tool) for suicide during reporting period  
SPHP:  
- Number of individual patients engaged in collaborative care  
- Percent of patients who were formally screened (or screened with an evidenced-based screening tool) for suicide during reporting period  
- Number of staff members completing mental health first aid course  
- Number of opioid use disorder individuals provided with peer support services (including, but not limited to, engagement, assessment, Leave Behind naloxone, post-event overdose response kits, referral to treatment). |
Coordinate services and supports for adults with emotional, behavioral, and mental health concerns. coordinates prevention, intervention, clinical, recovery, and support services; and

- Promote community wide suicide awareness, education, and prevention.

**SPHP:** Expand efforts to implement a collaborative care approach in primary care settings which integrates behavioral health within a primary care setting

Promote mental health First Aid to community members

Offer Mental Health First Aid to staff, including Community Health Workers, Care Managers and Social Work Service Line

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**Prevent Communicable Diseases**

**Focus Area 1: Vaccine-Preventable Diseases**

**Goal 1.2:** Reduce vaccination coverage disparities

**Target County:** Rensselaer County
**Target Population:** Adults & Children

**Objectives:** By December 31, 2024, reduce the difference in HPV vaccine series completion between NYS adolescent boys and girls by 50% (11% to 5.50%)

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<th>Measures</th>
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<tbody>
<tr>
<td>Educate the adolescents and parents on HPV vaccine</td>
<td>Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by disseminating HPV information at County-wide events and thru cross-collaborations</td>
<td>Rensselaer County Department of Health: Conduct public health education at local community events to provide information on the benefits of the HPV vaccine series and to address any questions about said series</td>
<td>Number of community events</td>
</tr>
</tbody>
</table>

**Prevent Communicable Diseases**

**Focus Area 1: Vaccine-Preventable Diseases**

**Goal 1.1:** Improve (COVID-19) vaccination rates.

**Target County:** Albany County

**Target Population:** Adults & Children

**Objectives:** By December 31, 2025, increase the percentage of people with at least one COVID-19 vaccine dose by 3% to 85.0% (from 82.5% on August 24, 2022)

<table>
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<tr>
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<th>Partner Role</th>
<th>Process Measures</th>
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</table>
| Offer COVID-19 vaccines in locations and hours that are convenient to the public including pharmacies, vaccine only clinics, and other easily accessible sites. | Albany Department of Health:  
  - COVID-19 surveillance  
  - COVID-19 public health information  
  - COVID-19 vaccine  
  Albany Medical Center (AMC): Increase number of Covid-19 vaccines among the Capital Region, both for first-time vaccines as well as boosters  
  St. Peter’s Health Partners (SPHP): | Albany Department of Health:  
  - Conduct COVID-19 vaccination clinics  
  - Coordinates COVID-19 vaccinations to those that are homebound  
  - Reallocates COVID-19 vaccine to community partners.  
  - Provides COVID-19 public information | Albany DOH:  
  - Percentage of population with at least one (1) COVID-19 vaccine dose. |
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<tr>
<td><strong>Focus Area 3: Sexually Transmitted Infections (STIs)</strong></td>
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<tr>
<td><strong>Goal 3.1:</strong> Reduce the annual rate of growth for STIs</td>
</tr>
<tr>
<td><strong>Target County:</strong> Rensselaer County</td>
</tr>
<tr>
<td><strong>Target Population:</strong> General Population</td>
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Objectives:  
By December 31, 2024, reduce the annual rate of growth for early syphilis by 50% (20% to 10%)  
By December 31, 2024, reduce the annual rate of growth for gonorrhea by 50% (8% to 4%)  
By December 31, 2024, reduce the annual rate of growth for chlamydia by 50% (2% to 1%)  

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| Community Outreach for STI Prevention | Rensselaer County Department of Health: Rensselaer County Department of Health is committed to enhancing the health and well-being of Rensselaer County by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community. | Rensselaer County Department of Health:  
  - Conduct public health education and community outreach at local community events to provide information about prevention of STIs and to promote the accessibility of the RCDOH STD Clinic | Rensselaer County Department of Health:  
  - Number of community events |