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| **Ontario County CHIP/CSP Chart 2022-2024: Ontario County Public Health in Partnership with Finger Lakes Health (GGH), Rochester Regional Health (CSHC), and UR Thompson Health** | | | | | | | | |
| **NYSPA Priority** | **Focus Area** | **Goals** | **Objectives** | **Disparity** | **Interventions** | **Family of Measures** | **By December 2023** | **Partner** |
| Prevent Chronic Disease | Focus Area 1: Healthy eating and food security | Goal 1.0: Reduce obesity and the risk of chronic disease | Overarching Objective 1.0.1: By December 31, 2024, decrease the percentage of children with obesity (among public school students in NYS exclusive of New York City) | Low Socioeconomic Status  Partnering with childcare centers and public schools ensures children and families of all SES will be included in CHIP interventions. | URMC FF Thompson   1. Evidence-based program childhood educational programs    1. Get Up Fuel Up    2. PreK-K Puppet shows and take-home activity books for children to complete with parents 2. Determine feasibility of using a standardized tool for assessing food security in offices of affiliated medical providers. | 1. Childhood education measures    1. # of sessions    2. # of participants    3. Assess for learning post intervention       1. GUFU-Pre/Post Test       2. Puppet Show- Verbal check for understanding 2. # or % of provider offices utilizing standardized screening tool 3. Baseline # or % of patients who report food insecurity 4. % decrease in food insecure families over time 5. Student weights-NYS ED School District Weight Survey | 1. Complete two educational sessions at elementary and preschool levels. 2. Earn buy-in from affiliated practices to use standardized food insecurity assessment tool. 3. Establish baselines for food insecurity among patients at affiliated practices. | Hospital |
|  |  |  |  |  | Jim Dooley Childcare Center affiliated with Finger Lakes Health system   1. Use nutritionist-developed menus to provide breakfast, lunch, and snacks. 2. Model family style eating 3. Provide weekly farmer’s markets 4. Provide healthy tips and nutrition information to parents via center’s newsletter 5. Utilize "Rate your Plate, Eat the Rainbow” evidence-based curriculum. 6. Use raised garden beds to provide farm to table education for ages 3-12. | 1. Rate your Plate, Eat the Rainbow    1. # of sessions    2. # of participants    3. Assess for learning post intervention 2. # farmers markets held 3. # parent newsletters providing nutrition/exercise education | 1. Complete two educational sessions using Rate Your Plate. 2. Host 2 farmer's markets. 3. Include nutrition/exercise messaging to parents in 2 newsletters. | Community Based Organization (affiliated with hospital) |
|  |  |  |  |  | Finger Lakes Health System (FLH)   1. Determine feasibility of using a standardized tool for assessing food security in offices of affiliated medical providers. | 1. # or % of provider offices utilizing standardized screening tool 2. Baseline # or % of patients who report food insecurity 3. % decrease in food insecure families over time 4. Student weights-NYS ED School District Weight Survey | 1. Earn buy-in from affiliated practices to use standardized food insecurity assessment tool. 2. Establish baselines for food insecurity among patients at affiliated practices. | Hospital |
|  |  |  |  |  | Agri-Business Childcare Development Center (ABCD)   1. Nutritional meals per Child and Adult Care Food Program (CACFP) 2. Ready Rosie App Based curriculum program 3. Parent education healthy eating and movement | 1. Ready Rosie    1. # of sessions    2. # participants    3. assess for learning post intervention 2. BMI at the beginning and end of enrollment (Child Plus data) | 1. Provide two Ready Rosie sessions. 2. Provide two parent educational events (newsletters, tip sheets, in -person, etc.). 3. Establish BMI baselines. | Community-based organization |
|  |  |  |  |  | Ontario County Public Health (OCPH)   1. Assess nutrition programing in Ontario County daycares. 2. Recommend and pursue unified approach to early childhood nutrition programming in Ontario County. 3. Collect, analyze, and manage data and establish baseline rates for student weights. 4. Partner with hospitals to determine feasibility of creating a standardized process and screening tool to assess for food insecurity during visits to healthcare providers in Ontario County. 5. Report out progress to partners and the community. | 1. # of daycare centers approached re nutrition programming. 2. # of childcare centers providing nutrition education/programming. 3. Percent decrease in student weights by school survey 4. # of medical providers utilizing standardized food insecurity screening tool. 5. Baseline # or % of patients who report food insecurity. 6. % decrease in food insecure families over time. | 1. Compile a list of childcare centers in Ontario County. 2. Assess current nutrition education/programming provided at childcare centers. 3. Create a sample policy for childcare centers delineating key educational messages. 4. Advertise and promote participation in CATCH to school leaders. 5. Promote and support programming in schools and childcare centers by providing educators and curriculum, as needed. 6. Create a sample policy/tool for medical providers to assess food security at routine visits. 7. Support hospital partners as they promote standardized screening tool to affiliated practices. 8. Create, publish, and distribute a list of resources for patients for use with food insecurity screening tool. | Local health department |
|  |  |  |  |  | SNAP-ED NY (Cornell Cooperative Extension)   1. Engage eligible schools re CATCH program. 2. Provide CATCH program at eligible schools. | 1. # schools engaged 2. # of sessions held in schools 3. # students reached 4. % eligible schools trained in CATCH | 1. Engage the three Ontario County schools that qualify for the CATCH program. 2. Complete the CATCH program in three schools. | Community-based organization |
|  |  |  |  |  | Clifton Springs Hospital (CSH-Rochester Regional Health)   1. Implement food insecurity screening at well-child visits-Geneva Pediatrics. | 1. # of families screened for food Insecurity 2. # or % of families reporting food insecurity 3. % decrease in food insecure families over time | 1. Determine the feasibility of using a 2-question food insecurity survey at time of child’s visit to gather data about food insecurity among residents, ascertain need for referral to DSS (SNAP), WIC, and provide food distribution site list. | Hospital |

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| **NYSPA Priority** | **Focus Area** | **Goals** | **Objectives** | **Disparity** | **Interventions** | **Family of Measures** | **By December 2023** | **Partner** |
| Promote Well-Being and Prevent Mental and Substance Use Disorders | Focus Area 2: Prevent Mental and Substance User Disorders | Goal 2.4 Reduce the prevalence of major depressive disorders | 2.4.2 Reduce the past-year prevalence of major depressive episodes among adolescents aged 12-17 years by 10% to no more than 10.4% | Low SES-by partnering with schools, we will reach children and families of all socioeconomic status. | Council on Alcoholism and Addiction of the Finger Lakes   1. Deliver Triple P, an evidence-based program from OASAS. Consists of 1-5 individual or group sessions for parents of children and adolescents. Goals: build and strengthen, structure and consistency in family units. | 1. # of Sessions 2. # of attendees 3. Pre/post survey re confidence in parenting skills | 1. Engage 3 Ontario County schools to support Triple P programming. 2. Provide Triple P programming in at least 2 schools. | Community-based organization |
|  |  |  |  |  | University of Rochester Medical Center (URMC)/ Extension for Community Healthcare Outcomes (ECHO)   1. Partner with LHD and Ontario County School districts to increase capacity of schools to identify mental health issues in middle/high school students and refer to appropriate services, by:    1. Creation of School Mental Health Teams who will receive training.    2. Create resource guide of mental health services in Ontario County.    3. Provide Mental Health Frist Aide (YMHFA) train-the-trainer for school personnel, LHD, and SRO’s.    4. Provide referral services for schools (URMC’s READY and START programs). | 1. # of schools participating 2. % of staff trained in YMHFA (10% trained after year 1; 15% after year2). 3. # of referrals to URMC mental health programming. 4. # or % of adolescents who successfully complete READY or START program (discharged with goals met). 5. # of referrals to Psychotherapy Emergency Program (CPEP) by participating school districts. | 1. Educate administrators from 9 school districts about ECHO project. 2. Engage 5 schools in ECHO program. 3. Train 2 LHD staff in delivery of YMHFA. 4. Establish comprehensive data base of mental health services in Ontario County. 5. Collect data and share with LHD. | Hospital |
|  |  |  |  |  | Clifton Springs Hospital (CSH-Rochester Regional Health): CPEP   1. Provide data regarding adolescents served by CPEP and those referred by schools/providers for 12-17-year-olds. 2. Suicide Safer Care (SSC) training for pediatricians and family practice providers in Ontario County. 3. Track and provide # acute referrals to CSHC Behavioral Health (potential hospitalizations) for Ontario County children (by zip code). | 1. # of CPEP services provided to adolescents (decrease by 2.5%) 2. # of school referrals to CPEP (decrease by 2.5%). 3. # of providers trained in SSC. 4. # of acute referrals to CSHC. | 1. Obtain historical data and established baselines; monitor data points throughout year. | Hospital |
|  |  |  |  |  | Ontario County Public Health   1. Engage and sustain relationships with mental health providers in Ontario County. Use expertise of mental health providers to inform future CHIP efforts. 2. Act as liaison between ECHO program and school districts. Promote ECHO program to school superintendents. 3. Supplement school-based ECHO workgroups with LHD staff. 4. Assist schools with creation of policies re training of staff in YMHFA or other mental health programming. 5. Manage data provided by CSHC Behavioral Health and CPEP and report back to partners. 6. Advertise and promote Triple P program. 7. Provide mental health and suicide prevention education to adolescents during the school day    1. *It’s Real*    2. *Talk Saves Lives* | 1. # of mental health partners. 2. # of meetings held. 3. # of schools participating in ECHO. 4. # of schools engaged in Triple P. 5. # of LHD staff supporting school efforts. 6. % of school personnel and SROs trained in YMHFA or other mental health programming. 7. % of Ontario County schools with policies regarding training of staff and SRO’s in YMHFA or other mental health programming. 8. % change in referrals of children to CPEP or inpatient care. 9. # of schools offered mental health and suicide prevention education for students. 10. # of school districts allowing mental health and suicide prevention education for students. 11. # students who have received mental health and suicide prevention education during the school day. 12. % change in students experiencing depressive episodes, feelings of hopelessness, thoughts of suicide, and suicide attempts (per the Partnership for Ontario County’s Youth Risk and Protective Factor Survey). | 1. 6 meetings annually with Mental Health partners. 2. Promote ECHO program in 9 school districts. 3. Provide 2 staff members to support schools with ECHO project. 4. Train 2 LHD staff in delivery of YMHFA (train the trainer). 5. Promote and advertise Triple P Program in 9 school districts. 6. Approach school administrators in 9 districts to discuss the feasibility of creation of a school-wide policy for requiring staff members and SROs to receive training in YMHFA and/or other mental health interventions (ASIST, Talk Saves Lives, etc.). 7. Analyze and share data from the Youth Risk and Protective Factor Survey. 8. Gain permission from 4 school districts to provide “It’s Real” and/or “Talk Saves Lives” to adolescents during the school day. | Local health department |
|  |  |  |  |  | The Partnership for Ontario County   1. Deliver the Youth Risk and Protective Factor Survey. 2. Share results with LHD. | 1. % of school districts allowing students to participate. 2. # of students surveyed. 3. % of children surveyed with depressive episodes, feelings of hopelessness, thoughts of suicide, and suicide attempts. | 1. Offer Youth Risk and Protective Factor Survey to 9 school districts. 2. Perform survey in at least 5 schools. 3. Compile results. 4. Share results with LHD and OCHC partners. | Community-based Organization |
|  |  |  |  |  | Ontario County School Districts   1. Participate in ECHO program 2. Refer to Triple P program 3. Adopt policy to include mental health training in required curriculum for employees. | 1. # or % of schools participating in ECHO. 2. # or % of schools referring to Triple P. 3. # or % of schools adopting policy. 4. # students referred for CPEP services by school. | 1. Completion of ECHO program by at least 5 districts. 2. 10 referrals to Triple P originating from schools. 3. Discussion between LHD and school administrators regarding policy for mental health training of staff. | Schools |
|  |  |  |  |  | Ontario County Suicide Prevention Coalition (directed by the Partnership for Ontario County)   1. Determine the feasibility of bringing Lock and Talk, an evidence-based suicide (by firearm) prevention program to Ontario County. | 1. Lock and Talk program adopted in Ontario County.    1. 1 MOU signed    2. 1 Workplan created    3. # of businesses approached 2. % suicides by firearm | 1. Approval by Partnership for Ontario County’s Board of Directors. 2. Signed MOU to utilize program. 3. Creation of plan to roll out Lock and Talk in Ontario County. 4. At least 2 businesses participating in program. | Community-based Organization |
|  |  |  |  |  | URMC FF Thompson  Added 3/15/23   1. Provide Mental Health Frist Aide training to community members, colleges and organizations |  |  | Hospital |