HEAL 9: Local Health Planning Initiatives
Grantees

1. Allegany/Western Steuben Rural Health Network: Utilizing a strategic planning tool known as Mobilizing for Action through Planning and Partnership (MAPP), develop strategic partnerships and enhance local data to identify community health priorities, gaps in services, opportunities to restructure the delivery system, and promote best practices.

2. Catskill Hudson Area Health Education Center Inc: Develop a community-specific physician recruitment program within an 11-county region and identify community health priorities, barriers to care, and healthcare trends that impact the availability, affordability, and quality of care.

3. Center for Health Workforce Studies: Conduct a comprehensive primary care assessment of New York City by conducting small area analyses in the five New York City boroughs.

4. Chautauqua County Health Network: Align disparate public health, long term care, and hospital assessment activities to identify common local and regional health priorities. Using a combination of quantitative and qualitative data, the project will identify health priorities, benchmarks for future trending, and infrastructure issues.

5. Chenango Health Network: Coordinate planning activities around three New York State Prevention Agenda issues in order to improve the health status of Chenango County residents and prevent duplication of services.

6. Columbia County Community Healthcare Consortium Inc.: Utilize Mobilizing for Action through Planning and Partnership (MAPP) to collect data and assess access to preventive and primary care in Columbia and Greene Counties; grant will also assess the strengths and weaknesses of MAPP as a strategic planning tool.

7. Community Health Care Association of New York State: Conduct a comprehensive primary care assessment of the following New York State regions: Western, Central, Northern, Hudson Valley, and Long Island, and develop Rational Service Areas (RSAs) to determine access and barriers to primary care, as well as determine which areas face shortages and which have an excess of primary care capacity.

8. Finger Lakes Health System Agency: Produce a replicable model of health care planning through three (3) project initiatives: (i) Regionalize a high-performing health care delivery system in Rochester and the Northern Finger Lakes Region that improves community-wide access to care, avoids unnecessary hospitalization and eliminates disparities in health status; (ii) Develop an integrated system of best practice care for seniors and their families in a nine county region; (iii) Assist county health departments, hospitals and other stakeholders to identify jointly community health priorities within the nine county Finger Lakes region.

9. Fort Drum Regional Health Planning Organization: Implement an innovative and replicable Emergency Medical Services (EMS) system plan to align fragmented and unsustainable pre-hospital emergency medical care resources, under a single high-functioning, county-wide cooperative system, and eliminate unnecessary or duplicative services.

10. Healthy Capital District Initiative: Analyze and respond to data regarding the over use of emergency departments for non-urgent care in the Capital Region to understand its root causes and develop strategies for expanding use of primary and preventive care.
11. Jefferson County Public Health Service: Update data and assess rural health challenges, including primary care capacity and access to care in Jefferson and Lewis Counties; identify community health priorities; and address infrastructure and health system improvements for these two rural counties.

12. The New York and Presbyterian Hospital: Focusing on health disparities, delivery system capacity to address public health priorities, access to primary care and over-use of emergency departments, develop a standard data set for ambulatory care planning and implement a model of community of health assessment and planning within the Northern Manhattan/Western Bronx selected planning area.

13. North Shore – LIJ Health System: Create the Long Island Center for Health Policy Studies (LIHPS) to collect, analyze and disseminate healthcare information and data to formulate sustainable and cost effective strategies to meet identified community healthcare needs.

14. P2 Collaborative of Western New York: Develop a data analysis infrastructure and planning framework for specific community health improvement activities, new health delivery initiatives, and other community-driven projects within 8 counties of Western New York.

15. The Research Foundation of the State University of New York (SUNY Downstate Medical Center): Develop a comprehensive community health planning process to articulate the vision for health care in Central and Northern Brooklyn; study emergency department over-use; collect data as it pertains to high rates of ambulatory care sensitive hospital admissions; develop information reservoir that can be updated and used in the future.

16. Rockland County Department of Health: Develop comprehensive assessment of health care needs in a seven-county region focusing on access to care, chronic disease prevention and control, maternal and child health, and disparities and make recommendations for the alignment of resources with those needs. To facilitate identification and monitoring of priorities, the project will develop and implement a Regional Performance Monitoring Tool (RPMT).

17. United Hospital Fund: Evaluate the nature and causes of Emergency Department (ED) over-use by communities throughout NYC; conduct an in-depth analysis of ED over-use in two high level service communities to help determine why patients use EDs for non-emergencies.

18. Village Center for Care: Transform long-term care in downtown Manhattan; develop on the ground data including counts of seniors by block and building; develop means to identify seniors at risk; build access to needed interventions and health services.