**2018 Year-2 Update Summary**

Since the 2016 Community Health Needs Assessment, NewYork-Presbyterian Brooklyn Methodist Hospital (NYPBMH) has undertaken several key initiatives to improve the health needs of the communities we serve. A list of initiatives can be found on our website at the following link: nyp.org/documents/brooklyn/community-service-plan/csp-2016-2018.pdf. In 2018, we shifted one of our priorities from Prevent Chronic Disease: focus on childhood obesity/promoting healthy women infants and children to Prevent Chronic Disease: focus on increasing access to high-quality chronic disease preventive care and management in clinical and community settings. We had set out to provide exercise classes as an intervention with our original priority area, but space in a high-need neighborhood became hard to secure, so we shifted to an area where we could achieve measurable outcomes while still addressing chronic diseases in vulnerable communities.

**Prevent Chronic Disease: focus on diabetes**

In terms of our progress to date with our focus on diabetes, we have successfully hosted two evidence-based Diabetes Self-Management Education (DSME) workshops, with our partners at IPRO’s Everyone with Diabetes Counts initiative. To date, 46 people have completed the (DSME) class sessions and the majority reported more confidence in managing their diabetes. We encountered some challenges in offering a Spanish-language class; we didn’t have enough interest, so we were unable to host the Spanish class. In November of 2018, two hospital staff members received Master-Level training in Chronic Disease Self-Management (CDSM) and Diabetes Self-Management Education (DSME). These employees will be training approximately 20 NYP hospital staff members in January 2019, as well as offering classes to community members. We anticipate that we will be able to offer DSME classes to hundreds among the vast and diverse populations that NYP’s hospitals serve.

**Changed Prevent Chronic Disease: focus on childhood obesity/promoting healthy women infants and children**

While we did receive a 5K Grant from Investors Bank Foundation, we’ve had a difficult time securing a location for the classes which targeted adults and children. We did have some discussions with Brooklyn Children’s Museum and had intended to partner with their afterschool program, but the partnership never came to fruition. We had also considered Brooklyn Public Library in Prospect Heights as a location, but ideally, we wanted to host something in the Bedford-Stuyvesant neighborhood as that is an area of high-need and one which responded with interest in the classes. Considering the many challenges we encountered with this intervention, we changed our focus to increasing access to high-quality chronic disease preventive care and management in clinical and community settings.

**New Prevent Chronic Disease: focus on increasing access to high-quality chronic disease preventive care and management in clinical and community settings**

Through a connection made with NYP Columbia’s evidence-based HeartSmarts program, we were able to recruit two of our partner churches for the training. Members from St. George’s Episcopal Church in Crown Heights and Pleasant Grove Tabernacle, in Bedford Stuyvesant were trained to offer HeartSmarts’ faith-based curriculum to teach their congregation members how to reduce hypertension and adopt healthier habits. Both churches hosted classes in Q4 of 2018, and both sustained steady class attendance. St. George’s graduated 25 participants and Pleasant Grove had 35 graduates. We are in the process of scheduling nutrition workshops at both churches in 2019, because those were areas of the curriculum that participants struggled the most with. We will continue to recruit churches and CBOs for HeartSmarts and other evidence-based classes in chronic disease management in 2019.

**Promote a Healthy and Safe Environment; reducing fall risk among the most vulnerable populations**

We have been successful in conducting the SAFE (Survey of Adult Falls Evaluation) questionnaire in the Emergency Department. To date, we have collected 967 survey responses and have given out 200 Senior Home Safety kits. While we were able to train 4 staff members to conduct evidence-based classes in Fall Prevention,
two members of the staff transitioned to new posts. Also in 2017, the hospital experienced some difficulties with our collaborating partner, in that we were not able to use their data tracking software and therefore could not implement any classes in 2017. The hospital has instead decided to collect the data manually. One Stepping On class was hosted in the fall of 2018, for which 8 seniors were trained by physical therapists and other health professionals in fall prevention. All participants had better mobility and increased self-confidence. While the course curriculum was well-received, the format was not conducive to being repeated by staff members whose roles are not dedicated to this type of work. We will revisit other evidence-based interventions for fall prevention in 2019, such as Tai Chi for Arthritis.

**Promote Healthy Women, Infants and Children: focus on increasing exclusive breastfeeding rates**

NYPBMH is now in the Dissemination Stage (Stage 3 of 4) of our Baby-Friendly USA Journey. Almost 100 Maternal Child Health staff members have completed the 15-hour (nursing) or 3-hour (MD) breastfeeding educational training. NYPBMH has increased exclusive breastfeeding rates by over 13% since 2013, however our rates hover between 37-40%. Our goal is to get our exclusive breastfeeding rates above 39.7% upon discharge. WIC representatives are ready to come educate in clinics and hospital, but our major referring WIC office is a Brooklyn Hospital affiliate, which poses an issue with credentialing in our hospital. There is a new opportunity to host an NYPBMH-run Breastfeeding Support Group at Brooklyn Children’s Museum in Crown Heights, which we are exploring.

**Next Steps**

NYPBMH will continue to support and monitor progress made on the Community Service Plan and its aim of addressing the community needs identified in the 2016 Comprehensive Needs Assessment. These updates will be submitted to the Department of Health on or before December 28, 2018.