Westchester County
George Latimer, County Executive
Sherlita Amler, MD, Commissioner
Department of Health

COMMUNITY CONVERSATIONS HEALTH SUMMIT

Summary Report

November 2023

Prepared by Marie Roth

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Message from the Commissioner

I want to extend a sincere thank you to all those who took time from their busy schedules to attend the Westchester County Department of Health's (WCDH) second **Community Conversations Health Summit**. It was encouraging to see so many professionals from our partner agencies participate in the event and discussions. Your organizations are so important in the lives of Westchester residents. You provide both compassion and valuable resources to many of our most vulnerable community members. As trusted service providers and messengers, you have earned the public's respect and have the ability to guide people in a positive direction.

Those of us at the WCDH acknowledge that the COVID-19 pandemic illuminated Westchester County's strengths, revealed our weaknesses, amplified the existing challenges and even created whole new sets of challenges, both at the organizational level and at the systems level. Knowing what we know, it seems transformation is the only way forward.

As an organization, WCDH has begun an organizational change process in order to better serve the residents of Westchester and our hardworking staff. We are updating our strategic plan and have made two important commitments. The first commitment is to pursue national accreditation. The process for becoming an accredited health department requires assessing, meeting and continually measuring the health departments' performance against a set of national standards. These standards provide assurance that we as a health department have the Foundational Capabilities necessary to serve our community.

Another one of our commitments is to work towards becoming a trauma-responsive organization. Trauma-responsive organizations and systems of care are anchored around six guiding principles of resiliency, that increases staff well-being and benefit clients, families, staff, service providers and whole communities.

As we all know, change takes time and it also takes a village, which is why we are focused on providing a forum to convene the vast number of Westchester-based organizations to foster the development of a shared vision and impactful collaborations. I'm so pleased that we are continuing the conversation we began earlier this year at our virtual event, and taking the next steps to dive into the priority matters that were identified. These sessions allow us to strengthen our relationships and open up a dialogue that will enable us to work together to promote health and well-being, advance health equity and expand health care literacy and access to health care services for all.

With gratitude,

Sherlita Amler MD

Sherlita Amler, MD
Commissioner of Health

Participating Organizations

Alzheimer's Association- Hudson Valley Chapter

American Lung Association

Andrus

Cancer Services Program of the Hudson Valley

Cancer Support team

City of Mount Vernon

City of Yonkers

City of Yonkers- Office of Aging

Coordinated Care Services Inc. (CCSI)

Feeding Westchester

Lifting Up Westchester

Memorial Sloan Kettering Cancer Center

Mental Health Association of Westchester (MHA)

New York Presbyterian Hospital

Open Door Family Medical Center

Peekskill NAACP Health Committee

People USA

Phelps Hospital Northwell Health

POW'R Against Tobacco

Sister to Sister International

SPEAK

Participating Organizations

St. John's Riverside Hospital

Student Assistance Services Corporation

United Way of Westchester and Putnam

Urban League of Westchester (Syringe Exchange)

Volunteer New York!

Westchester Children's Association

Westchester County Board of Legislators

Westchester County Dept of Community Mental Health

Westchester County Dept of Senior Programs and Services

Westchester County Executive Office

Westchester Institute for Human Development

Westchester Women's Agenda

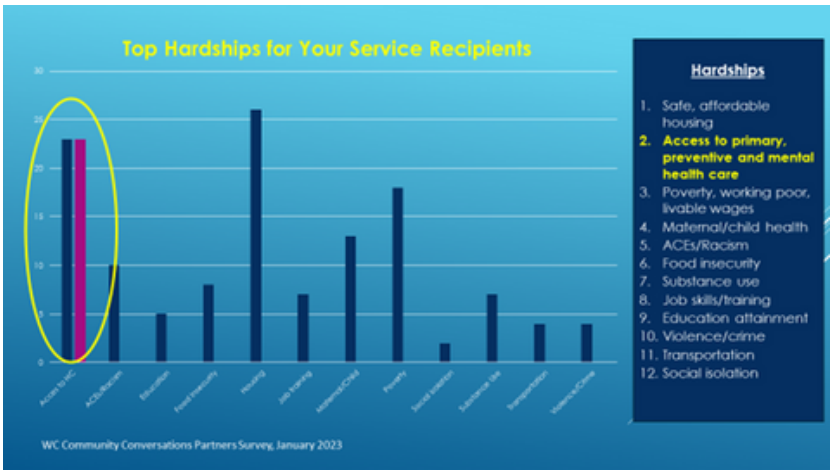
White Plains Hospital

White Plains Youth Bureau

Introduction: Setting the Stage

To set the stage and provide some background for the October 2023 Health Summit agenda, which is centered around improving access to primary care, I would like to bring you back to some of the sobering findings from the 2022 Community Health Assessment (CHA) that we shared in the January 2023 Health Summit.

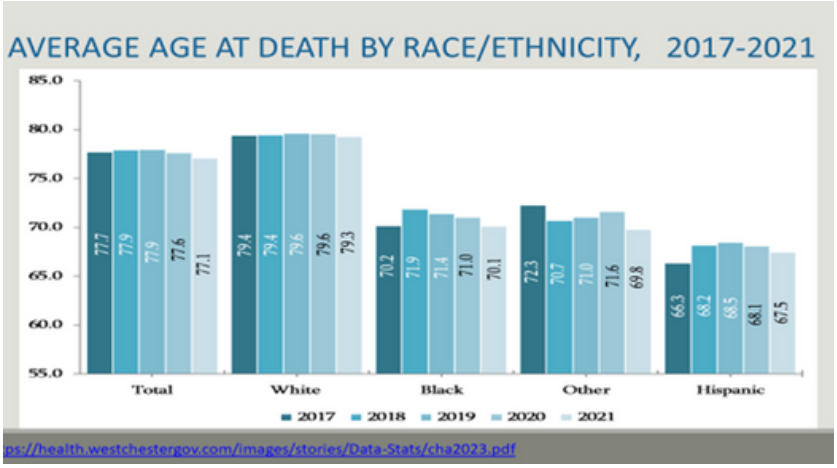
The COVID-19 pandemic magnified the disparities that exist here in Westchester County, especially for certain populations. During our previous summit, we asked you, our partners, in a survey to list the top three hardships your clients and communities were facing. What 83 respondents from 64 organizations told us, as you can see (below), was that safe, affordable housing is the number one hardship, with access to primary and preventive care and access to mental health care tying for the number two spot.



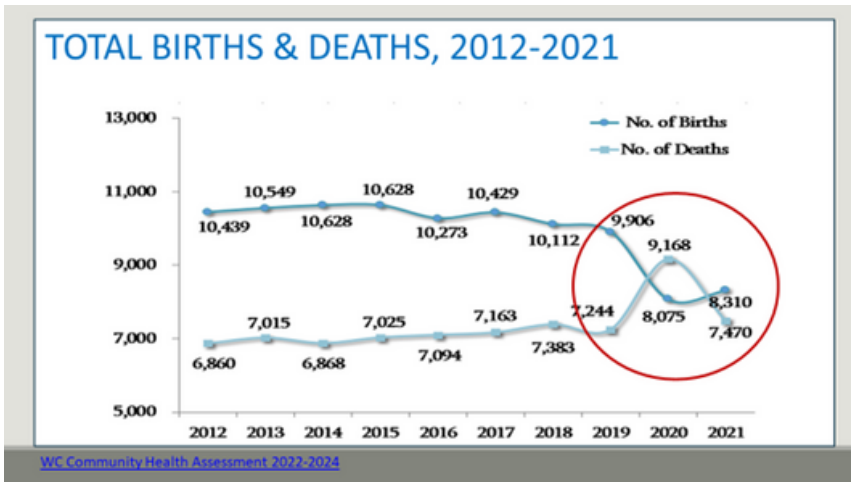
As we planned for the event, we went back to the feedback you provided during the January Summit (remember those polls), and we reviewed the findings from the CHA. The group reporting the greatest challenge to accessing primary and preventive healthcare is non-white Hispanics. Here are a few stark highlights to summarize the data.

In our CHA survey, when we asked about use of the emergency room for non-emergencies, we see that blacks and particularly Hispanics had a higher use for non- emergency purposes.

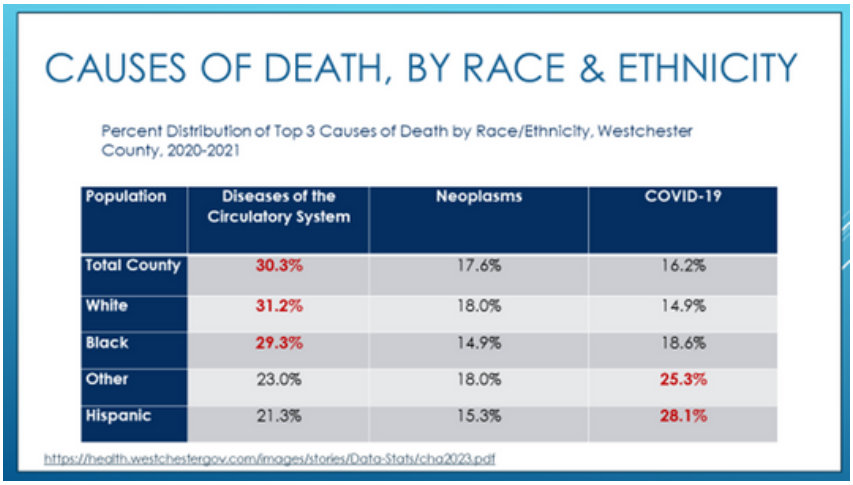
Some of the most sobering and disheartening data is the difference in the average age of death by race and ethnicity. Blacks and Hispanics have nine and twelve less years, respectively when compared to their White counterparts.



Specifically related to COVID-19, for the first time, as far back as I can remember, the number of deaths outnumbered the number of births.



But, for me and my staff, the most eye opening and shocking finding from the CHA was seeing COVID-19 as the leading cause of death among Hispanics, surpassing both heart disease and cancer.

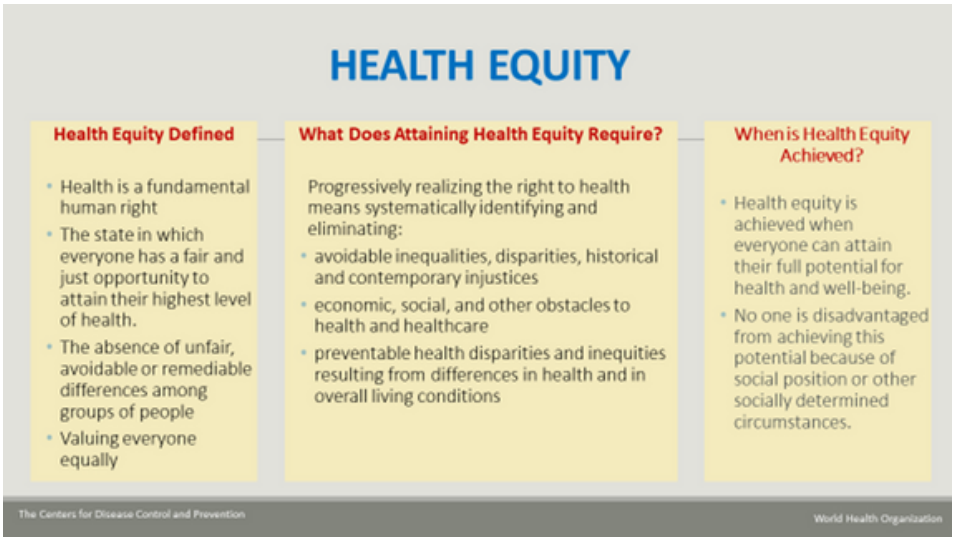


Population	Diseases of the Circulatory System	Neoplasms	COVID-19
Total County	30.3%	17.6%	16.2%
White	31.2%	18.0%	14.9%
Black	29.3%	14.9%	18.6%
Other	23.0%	18.0%	25.3%
Hispanic	21.3%	15.3%	28.1%

When I shared this information in January, one of the partners asked, “WCDH, what are you going to do to prevent this?” In the moment, we shared what our response efforts had been-- mainly setting up testing sites and bringing services into the communities of need, such as pop-up vaccine clinics,

and working with trusted messengers to reduce vaccine hesitancy. However, that question has haunted me and my staff and has become a major catalyst for making health equity a top priority.

Pulling from both the CDC and WHO definitions of health equity, we have highlighted what we believe health equity is, some of the requirements for attaining it and when we will know when it is achieved. Figuring out the "**HOW**" will take all of us!



As part of our commitment to health equity, WCDH is thrilled the County supported our hiring a new team member who has been charged with overseeing health equity, population health and data initiatives. This supports our goal of taking a leadership role in convening "the village" of partners, serving as a collector and disseminator of helpful information, establishing shared visions and goals, strengthening collaborations and identifying other potential strategies to drive sustainable change and progress. As we work towards these goals, and others, we will need your input, feedback, insights, support and engagement.

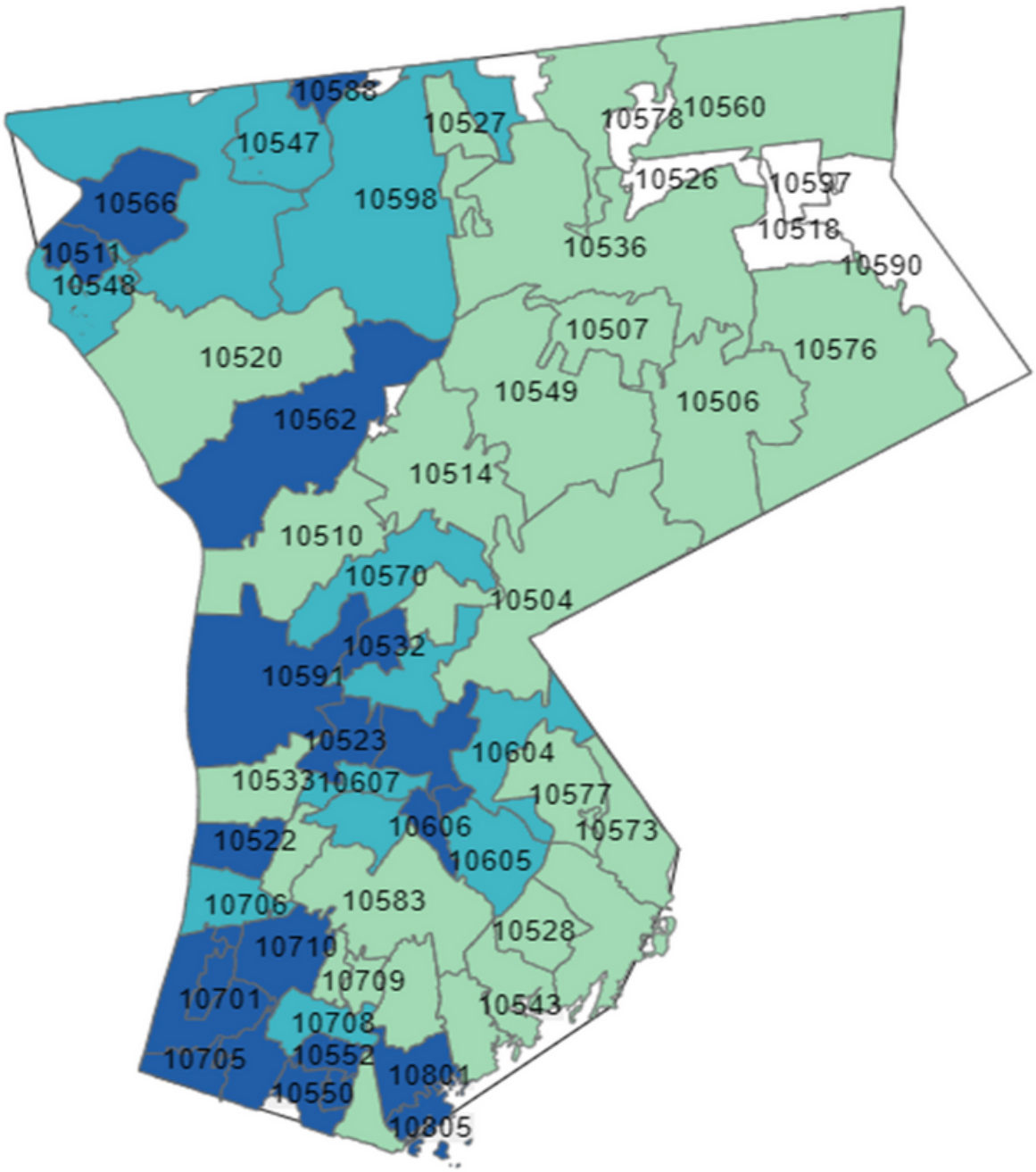
It is our hope that these forums spark the necessary cross-sector conversations to develop real solutions that lead to greater health equity and health outcomes for ALL in our community.

Hopefully yours,

Renee Recchia

Renee Recchia, MPH
First Deputy Commissioner of Health

Updates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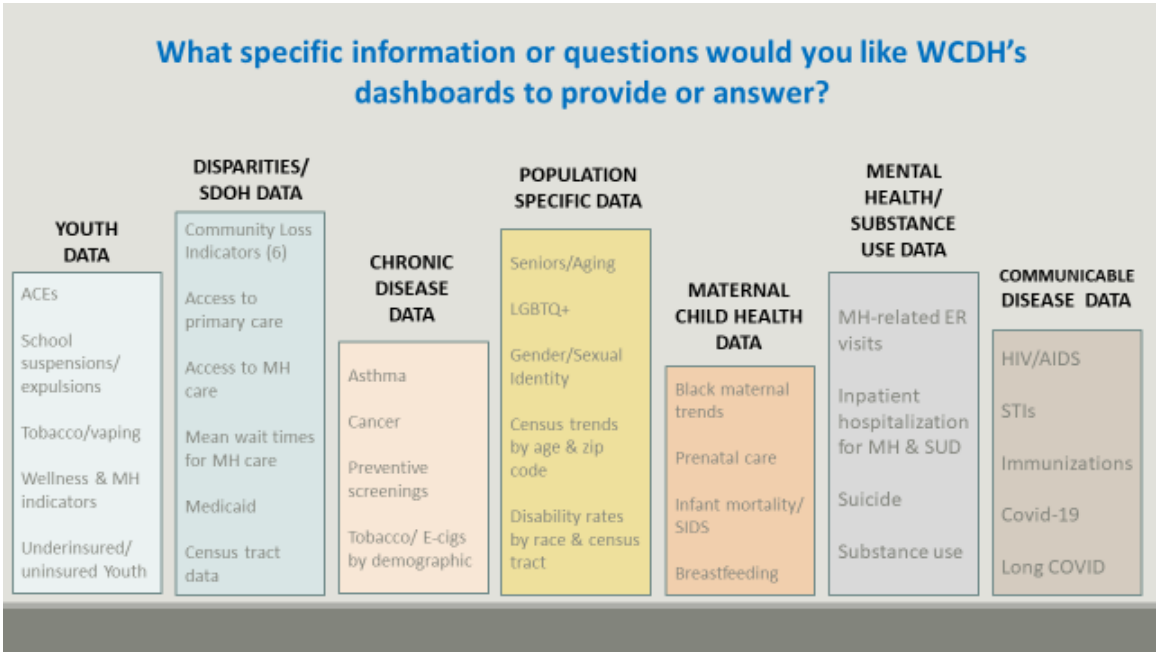
Data & Dashboards

To address population health and health disparities, we need to harness rich and diverse multidisciplinary networks well beyond the medical system, and we must use data and evidence to put resources and efforts into high impact programs. This work necessitates close collaboration and partnership. We believe strongly in letting the numbers and evidence guide programs, while recognizing numbers alone can never tell the full story.

We have been learning a great deal about data visualization over the last year. Many of you are familiar with this concept, but for those who are not, it is developing dashboards and other visual representations which help us to better understand the context of the data we are seeing. It allows us to visualize health outcomes, while also examining contributing variables and looking at geospatial factors like built environment, allowing us to break down outcomes by location, race, insurance status, or other variables. It allows us to share health data in a way that is more accessible than static tables and charts for our own staff, for our partners and for the general public.

After a thorough exploration of various data visualization tools, Westchester County has selected **Microsoft Power BI** as its data tool and will be working to create dashboards. The first dashboard we plan to publish will be focused on maternal, infant, child health.

Below is a summary of the types of county and sub-county level data our community partners would like to access in a more timely fashion. Partner input is valuable and will be taken into account as we develop priorities for the WCDOH data visualization initiative. We do have datasets at the county and state level available to address some of these areas, though there are limitations in the timeliness of the data. That being said, observing trends in data over a period of time can be



helpful as we think about gaps and areas for intervention. For those areas where we have limitations or incomplete data, we will continue to explore how we can gain access to existing data sets from our government and nonprofit partners, as well as begin to explore opportunities for data collection in collaboration with our community partners. These goals will take time, collaboration and some level of standardization.

In the meantime, WCDH is working to create **a centralized location for the most recent and relevant state and county-level data sources and reports**. This includes the current CHA Report, CHIP Report and links to the NY State Prevention Agenda Dashboard, the New York State 2021 Health Equity Report series, and other data sources and reports.

Westchester-based agencies, organizations and coalitions are invited to submit reports they generate, or links to the report(s), to be housed on WCDH's website. This will increase the access and amount of pertinent information and data among community partners.

The **CHA Report** contains informative and useful data and graphs. The CHA is a compilation of new and existing data sources that collectively capture our community health profile, The CHA and the New York State Prevention Agenda are used to inform the CHIP priorities, objectives and activities to improve populations health and address health disparities.

The **Health Equity Reports** present data on health outcomes, demographics, and other community characteristics for cities and towns with a 40% or greater non-White population. Each town or city specific report contains data associated with the priority areas of the 2019-2024 Prevention Agenda (New York State's Health Improvement Plan), as well as social determinant indicators such as housing, educational attainment and insurance coverage. Nine of the thirty-seven Health Equity Reports are for communities in Westchester County.

Additionally, the New York State Department of Health has been renovating its Tableau platform to make the **Prevention Agenda Dashboard** more user friendly and improve its interactive functionality.

THE NY STATE PREVENTION AGENDA

PURPOSE

The NYS Prevention Agenda asks that hospitals, local health departments, and health care and community partners to work together to bring about measurable progress toward mutually established priorities and goals.

KEY PH PRIORITIES

- ❑ Access to Quality Health Care & SDOH
- ❑ Healthy Mothers, Babies & Children
- ❑ Physical Activity & Nutrition
- ❑ Unintentional Injury & Comm Violence
- ❑ Chronic Disease Prevention & Mngt
- ❑ Tobacco Use Prevention & Cessation
- ❑ Healthy Environment (Air, Water, Food)
- ❑ Community Preparedness
- ❑ Mental Health & Substance Abuse
- ❑ Infectious Disease (STIs, HIV, HCV)

GOAL

Promote collaborations to better meet the needs of the community while avoiding duplicative efforts and achieving economies of scale.

The **NY State Dashboard homepage** provides a quick view of the most currently available data and the 2024 objectives for nearly **one-hundred tracking indicators** (n=99). Indicators are grouped by priority area and the most current data are compared to the previous data period to assess the annual progress for each indicator.

The New York State Prevention Agenda Dashboard

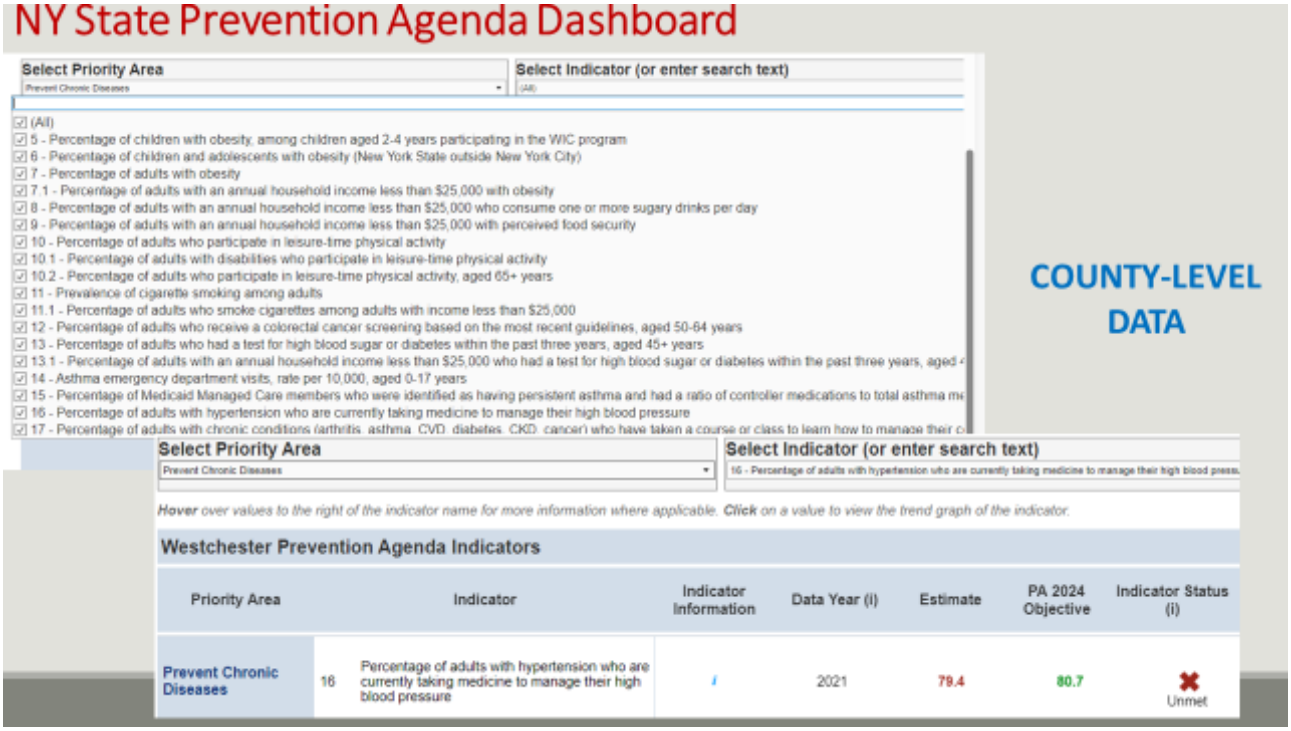
Prevention Agenda Dashboard Overview

- **Landing page**
  - State dashboard
  - County dashboard
  - Export files
  - Methodology and indicator descriptions
  - Links to other dashboards
- State Dashboard
  - Main page – with link to trend
  - Socio-Demographics
    - Annual View
    - Trend View
- County Dashboard
  - Main page – with link to trend
  - County/region comparison table
  - Map, bar chart, table
  - Sub-County

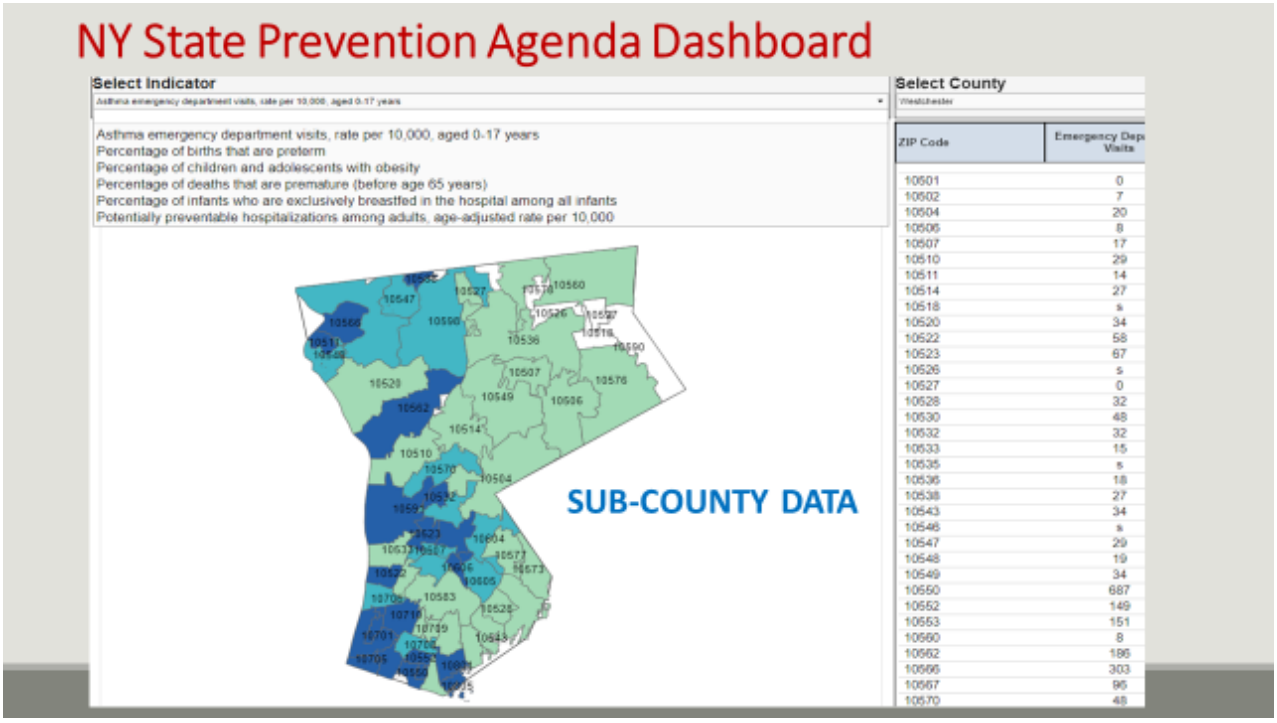
NEW YORK STATE OF OPPORTUNITY. Department of Health

https://apps.health.ny.gov/public/tabvis/PHIG_Public/pa/#reports

The C**ounty Dashboard** includes the most current data available for **70 tracking indicators**, again grouped by priority area. Each county in the state has its own dashboard homepage. County maps and graphs and comparison across counties are available.



Data at **sub-county level**, including ZIP Code, School District, and Minor Civil Division/ Community District, are available for **six indicators.**



Westchester County Navigator Program

Under The Public Health Emergency, the continuous coverage requirement began in March 18, 2020, automatically extending coverage for Medicaid, Child Health Plus and Essential Plan recipients. This continued until the Consolidated Appropriations Act of 2023 required states to begin the process of redetermining enrollees in April 2023. This is known as the "**unwind**."

Consumers with Medicaid, Child Health Plus and Essential Plan whose coverage ended on 4/30/23 and 5/30/23 were extended another 12 months. Those whose coverage ended on 6/30/23 and subsequent months **must renew on time**.

Child Health Plus and Essential Plan consumers may renew through the end of the following month. However, CHP consumers have to pay for any retroactive month owed for premium payments.

During the Public Health Emergency most new and existing enrollees had their eligibility determined regardless of:

- Data sources not matching information
- Outstanding verification requests
- Having undeliverable mailing address
- The consumer not paying their premium for EP or CHP

Starting July 1st, 2023 all new and renewal applications have to comply with Pre-Public Health Emergency eligibility rules.

The **initial renewal cohorts** for the month of July, August and September have yielded an overall above 70% renewal rate both county and state-wide. Please note: because New York permits late renewal, data in this report does not provide final outcomes for the September 2023 Cohort.

Renewal Cohort	July	August	September
Westchester County	66%	77%	77%
New York State	68%	78%	77%

Although an incredible amount of outreach and targeted mailings have been directed to consumers to remind them of the upcoming renewal, there are several factors why they may not have renewed their health coverage:

- Some consumers now have employer sponsor health insurance
- Moved out of NYS
- Aged out of Program
- Pending updated status documentation
- Auto-Renewal expectation
- Communication overload

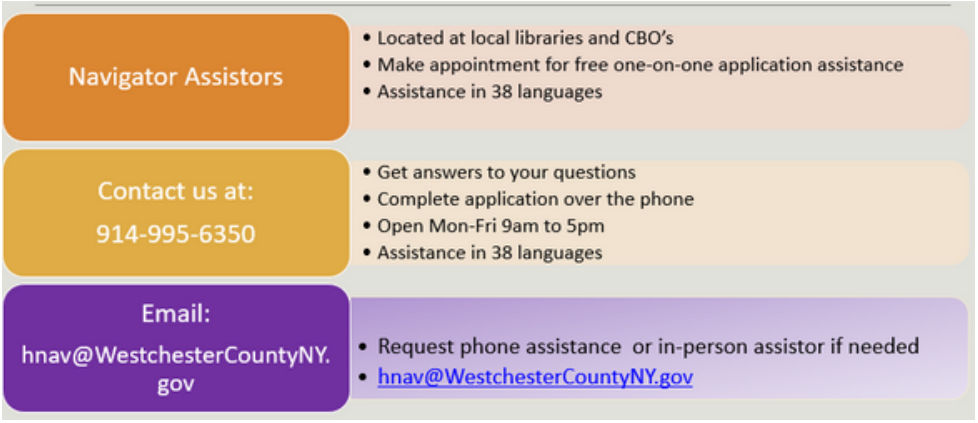
A number of consumers reported delayed work authorization renewals having an impact on their health coverage renewal. While others, particularly asylum seekers with an I-862 Notice to Appear and/or an unexpired foreign passport **may be eligible for emergency Medicaid and Children for Child Health Plus.** Pregnant individuals may be eligible for Medicaid.

If the individual presents with an I-862 and has applied for asylum or has been granted parole since entering the country, the individual would be considered to be Permanently Residing Under Color of Law (PRUCOL) and **potentially eligible for Medicaid or Essential Plan coverage.**

As we near the next open enrollment season and consumers begin to assimilate to the new renewal/application process, we will begin to see increased coverage renewal rates in upcoming cohorts. Navigators and assistors are back at the familiar sites and continue to provide over the phone assistance and participate in many community events to raise awareness that we are here to assist with the renewal or application of health coverage. In addition, NYSoH's Renewal Outreach Campaign has included:

- Virtual bilingual renewal workshops
- Redesign of renewal mailing packets
- Phone outreach campaigns
- TV and radio ads
- Partnerships with pharmacies and supermarkets
- Posters, flyers, and postcards

Please contact our Navigators if you or your clients need professional assistance applying for health insurance.



WCDH's Community Health Improvement Plan 2022-2024

The Community Health Improvement Plan (CHIP) builds on WCDH's current programs, funding streams, and collaborative relationships to address some of the unmet needs and health inequities identified through the CHA. The activities outlined in the CHIP fall into one of three priority areas in alignment with the NYS 2019-2024 Prevention Agenda:

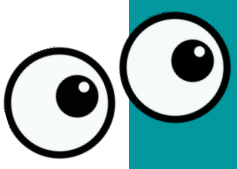
- Prevent Chronic Disease: Tobacco Prevention and Cessation
- Promote Healthy Women Infants and Children
- Promote Well-Being and Prevent Mental & Substance Use Disorder

CHIP PRIORITY:

TOBACCO PREVENTION & CESSATION

T**he Adolescent Tobacco Use Prevention Act (ATUPA)** regulates the sale of tobacco and vaping products to restrict their access by youth and young adults. ATUPA violations can result in civil penalties or retailer registration suspension or revocation.

WCDH has increased the number of ATUPA program staff so that they can increase the number of compliance inspections and increase enforcement. We have also collaborated with Public Safety Park Ranger Cadets who are under 21 to help with these undercover compliance checks.



YOU CAN HELP WITH ENFORCEMENT!

If you see or know of a vendor selling to minors

FILE A COMPLAINT AT:

hweb@westchestercounty ny.gov

Or call: 914-813-5000

WCDH is also taking a community-based approach to smoking prevention and cessation by contracting with **nine partner organization** to support the County Executive's recently launched **Tobacco Free** program.

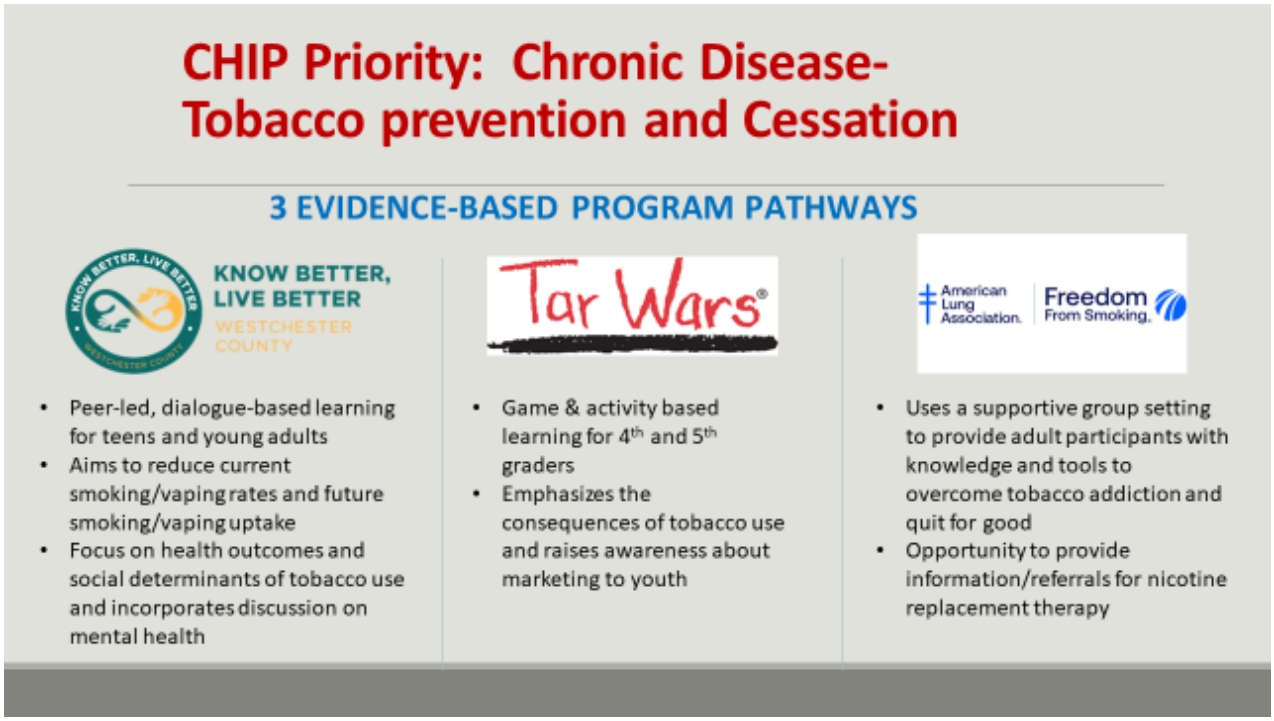
Our partners include social service organizations, a Federally Qualified Health Center, a school district, an alumni network, faith-based institutions, and an LGBTQ+ organization. Each organization serves a community that experiences disproportionately high social vulnerability and/or high rates of tobacco use.

Each organization that we are partnering with has the opportunity to choose one or more of three evidence-based pathways:

- **Know Better, Live Better (KBLB)** aims to engage youth and young adults in open conversation about health and well-being. The program will be peer-led and dialogue-based, with the goal to reduce current smoking/vaping rates and reduce future smoking/vaping uptake in young people. There will be a focus on health outcomes and social determinants of tobacco use, along with mental health.

- **Tar Wars** is an evidence-based curriculum developed by the American Academy of Family Physicians. This is a game/activity-based program designed for 4th and 5th graders and it emphasizes the consequences of tobacco use and raises awareness about predatory marketing of tobacco to youth.

- **Freedom from Smoking** is a seven-week smoking cessation program developed by the American Lung Association. It is designed to provide adult smokers who are ready to quit with the knowledge and tools necessary to overcome tobacco addiction for good.



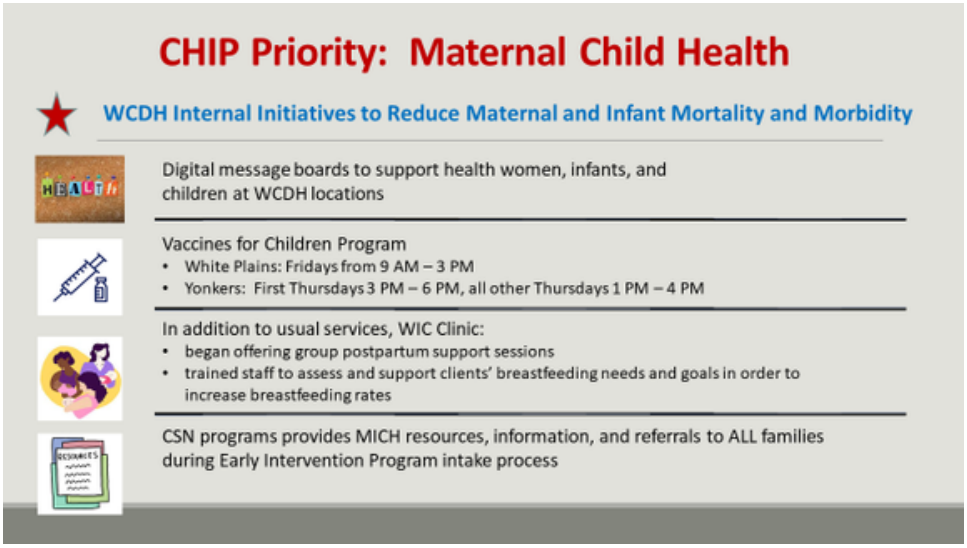
CHIP PRIORITY:
MATERNAL INFANT CHILD HEALTH

Our focus for this priority area is **reducing racial disparities in maternal and infant mortality and morbidity.** Internally, WCDH is:

- Using **digital message boards** at WCDH locations to deliver health messages and promote resources that center around health women, infants, and children
- Offering the **Vaccines for Children Program** for uninsured children at our WCDH clinics in White Plains and Yonkers
- Offering group **postpartum support** sessions and training WIC staff to better assess and support clients' **breastfeeding** needs and goals in order to increase breastfeeding rates
- **Providing resources, information, and referrals** to ALL families during Early Intervention Program intake process at our Children with Special Needs division

We have also contracted with **three partner organizations** who have already been leading the charge and doing great work in this space. These contracts are supporting a variety of activities aimed at increasing health equity and improving the quality of care of birthing people and their families.

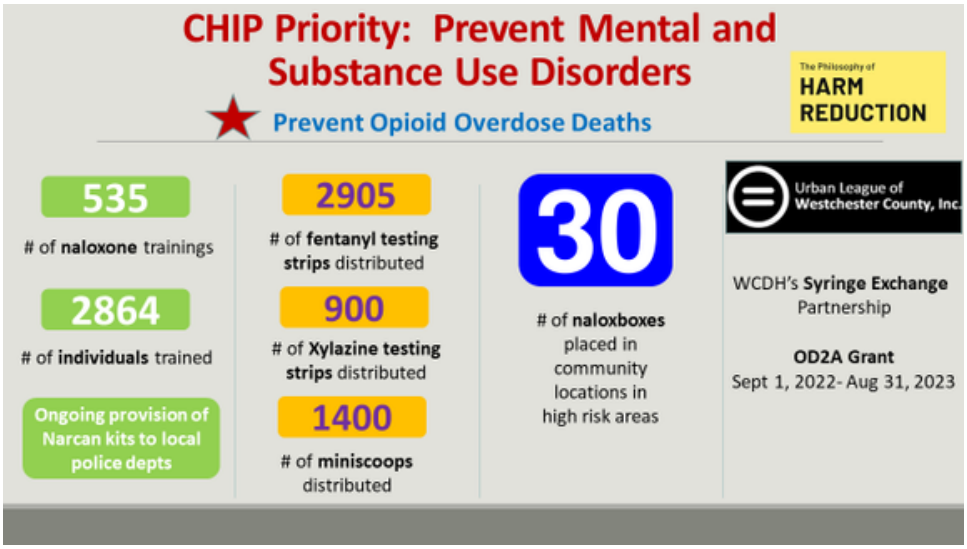
- **St. John's Riverside Hospital** is improving data collection and analysis, instituting policy and process revisions, and offering robust implicit bias training for maternity providers, staff, and medical students
- **Children's Health and Research Foundation** is expanding its Community Health Worker Home Visiting Program for pregnant and postpartum women and their families and is also expanding their community-based lactation support
- **Birth from the Earth** is expanding access to holistic, culturally competent care for women & their families through birth worker training, homebirth midwifery services, prenatal education/birth prep courses, & new mom/lactation support groups.



CHIP PRIORITY: PROMOTE WELL-BEING AND PREVENT MENTAL & SUBSTANCE USE DISORDERS

In partnership with the Urban League of Westchester, under the Overdose Data 2 Action (OD2A) Grant, 535 **naloxone trainings** were held and 2864 people were trained between September 1, 2022 and August 31, 2023. WCDH continues to provide many police departments with Narcan kits.

From November 2022 through present, 2905 **Fentanyl Testing Strips**, 900 **Xylazine Testing Strips** and 1400 miniscoops have been distributed through street outreach programs, community partners, university/colleges and shelters. Twenty-one **Naloxboxes** have already been placed in the community and another 9 are in the process of being placed. If you have innovative strategies or specific sites for getting these lifesaving items into the hands of those who need them most, please reach out and share them with us.



To strengthen opportunities to build well-being and resilience among our clients, community and staff, we are taking three important actions:

- Our WIC staff conducts education and support sessions for adult participants on topics such as postpartum depression, substance misuse and breastfeeding.

- WCDH is promoting **Breath, Body, Mind (BBM) Fundamentals Course and Level 1 Teacher Training** among its staff. BBM offers evidence-based mind-body practices to quickly relieve stress and anxiety & strengthen resiliency. Thus far, we have 14 staff members who have completed the fundamentals training.

- WCDH is about eight months into a two-year department-wide **trauma-informed organizational change initiative,** focused on embedding the values, principles and practices of trauma-informed care into our culture and operations. We realize the benefits of trauma-responsive environments for clients, staff and communities.

Westchester County Hospitals

COMMUNITY SERVICE PLANS

The New York State Prevention Agenda asks that hospitals, local health departments, and health care and community partners work together to bring about measurable progress toward mutually established goals to address public health priorities. The overall goal is the development of a collaborative approach among community partners focused on meeting the needs of their community, while avoiding duplicative efforts and achieving economies of scale. Health departments and hospitals are required to conduct a needs assessment and submit comprehensive plans to the state every three years. The following page highlights the priority areas of each hospital systems. You can find the hospitals' full Community Service Plans (CSP) on their websites.

Westchester County is fortunate to have numerous hospital systems within its borders. Historically, WCDH has worked closely with the hospitals on both the Community Health Assessment (CHA) and aligning our Community Health Improvement Plan (CHIP) with the hospitals' CSPs.

White Plains Hospital

NewYork-Presbyterian

St. John's Riverside Hospital 150+ Years Strong

Montefiore

Northwell Health

Saint Joseph's Medical Center

Memorial Sloan Kettering Cancer Center

Blythedale children's hospital

HOSPITAL COMMUNITY SERVICE PLANS

	WP HOSPITAL	ST. JOHN'S RIVERSIDE	MONTEFIORE	NYPH	NYP HVH	ST JOSEPH'S	NORTHWELL	MSKCC	BLYTHEDALE
CHRONIC DISEASE	Increase cancer screens	Increase cancer screens	Increase cancer screens	Healthy eating & food security; Tobacco	Healthy eating & food security	Increase cancer screens	Healthy eating & food security; Phys Activity; Tobacco; cancer screens	Increase cancer screens; Tobacco	Healthy eating & food security
HEALTHY & SAFE ENVIR	Reduce falls						Reduce violence; Human trafficking		
HEALTHY WOMEN, INFANTS & CHILDREN	Increase breast feeding	Reduce cesareans & health disparities in maternal health	Child & adolescent health; special HC needs	Child & adolescent health; ↓ Maternal health disparities	Reduce health disparities in maternal health outcomes		Maternal health disparities; Maternal morbidity & mortality		Child & adolescent health (dental caries/special HC needs)
WELL-BEING & MENTAL/ SUB USE DIS				Strengthen WB & resilience; ↓MDD & SUD	Strengthen WB & resilience	Prevent suicides	Reduce MH stigma; Substance misuse screens & intervention		
COMM DISEASES				HIV					

This shows the five NY State Prevention Agenda Priority areas (vertically in blue) and the activities and goals that each of the hospital systems are focusing on within that area for this cycle. As you can see, there is a lot of activity centered around chronic disease and maternal child health.

Community Surveys

LONG-COVID STUDY

WCDH is conducting a survey to better understand the impact of Long-COVID on diverse populations within Westchester County, with a heightened focus on residents of Greenburgh, Mount Kisco, Mount Vernon, New Rochelle, Ossining, Peekskill, Rye, White Plains and Yonkers.
This project is being funded by the New York State Office of Minority Health and Health Disparities Prevention.

Minority residents, especially Hispanics, were among the hardest hit by COVID-19 infection and COVID-related deaths. The information gathered will help healthcare providers, public health policy makers and other stakeholders better understand the prevalence and hardships of Long COVID and work to develop strategies to help mitigate these challenges.

Please assist us with our survey collection efforts by emailing our flyer to your listservs or distributing them to staff and clients. If you would like to receive hard copies of the flyer, please contact Ashley Hardesty-DePietro at **aqhj@westchestercountyny.gov**.

TRANSPORTATION & FOOD ACCESS STUDY

Headed by Westchester County Department of Planning, WCDH is assisting in the outreach and collection of surveys of residents. The goal of the study is to develop effective strategies to increase Westchester County resident access to affordable, quality food, with the goal of decreasing food insecurity, improving health outcomes, and increasing the quality of life in Westchester. The study will include a county-wide analysis, as well as a more detailed examination of a yet to be determined smaller study area.

Some of the issues that will be explored include: Improving transit, pedestrian and bicycle connection to existing food sources; improving food distribution and delivery options; and changes to zoning, land use and other municipal policies to increase the availability of groceries.

Survey collection has come to a close, but the results of the survey will be analyzed alongside targeted stakeholder outreach and available data focused on existing challenges related to food access in Westchester County.

Read the Press Release Here

Breakout Sessions

The goal of the breakout session was to take a deep dive and have rich discussions focused on the unique strengths, challenges and opportunities here in Westchester County that can be explored to improve access to both primary care in different populations, including Hispanics, women, infants and children and for persons with chronic diseases. It is important to acknowledge that the breakout groups we selected for discussion today are by no means all the people or groups who absolutely struggle or have existing barriers accessing primary care. It is our hope that this is just the start of our conversation and that we continue to collaboratively and collectively work to identify issues and real solutions to create greater health equity for ALL in our community.

ACTIVITY

Group Brainstorm:
Strengths, Challenges & Opportunities
related to Access to Care

Group Discussion:
Identify themes, top THREE strengths and high impact, actionable opportunities for improving Access to Care

Breakout Sessions

MATERNAL, INFANT, CHILD HEALTH

Top 3 Strengths

Existing coalitions, collaborations & partnerships
Relatively rich in resources
Access to navigation services

Top 3 Challenges

Continuity of care
Cost of living & childcare
Implicit biases & trauma-informed frameworks underutilized

High Impact, Actionable Opportunities

Referral networks and resources
Incorporating lived experience in policy development & decisions
Increase awareness and accessibility of navigator assistance

Breakout Sessions

HISPANIC/LATINO HEALTH

Top 3 Strengths

Many mission-driven organizations with common goals
Relatively rich in resources
Collaborations

Top 3 Challenges

Language barriers
Health literacy
Lack of trust

High Impact, Actionable Opportunities

Shared directory of organizations and services
Greater utilization of the Trust Messenger Model
Creating a Westchester Health Collaborative

Breakout Sessions

INDIVIDUALS/POPULATIONS MANAGING CHRONIC DISEASE CONDITIONS

Top 3 Strengths

Large number of non-profits and diverse services
Information, education and data sources
Visibility and accessibility to policy makers

Top 3 Challenges

Social Determinants of Health
Cultural responsiveness
Barriers to access- Cost & continuity of care

High Impact, Actionable Opportunities

Sharing data and enhanced data-driven planning
Focus on addressing Social Determinants of Health collectively
Better coordination of resources, services and activities

Partner Polls & Survey Data

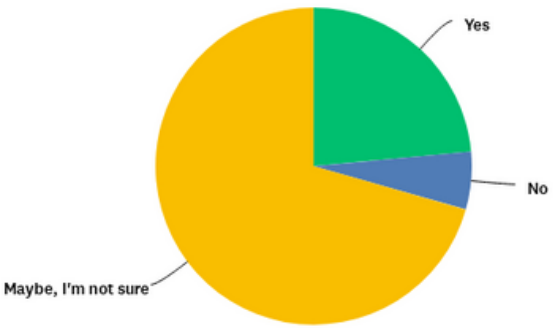
COALITIONS

WCDH is currently working to compile a list of active coalitions and task forces in the County with the goal of creating a directory of each groups mission/purpose, goals, lead coordinator(s) and other relevant information. We hope to have this project completed to share with you by our next Community Conversations Health Summit.

DATA SHARING

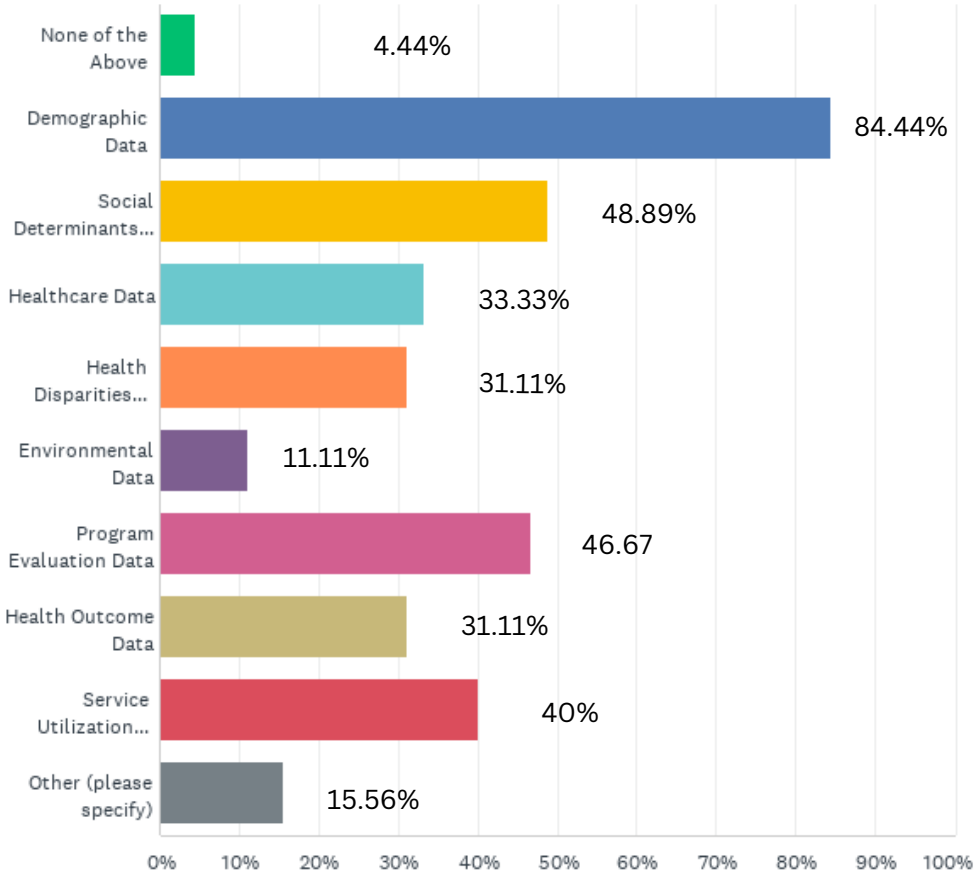
The slides below indicate there are limitations and concerns about sharing data, and rightfully so. There are many factors, standards and precautions to consider. While there is potential and a need for building a robust data lake from the data sets already being collected by local organizations, there are many challenges related to this endeavor. We look forward to working with partners to explore opportunities and ways to share data.

Q13 Would your organization be willing to share its de-identified, aggregate data with local organizations and partners?



Q14 What types of data does your organization collect? Check all that apply.

Answered: 45 Skipped: 40



Other:

- Opinions & attitudes towards tobacco policy
- Mental health, homelessness, domestic violence
- Food pantry usage
- Volunteerism information in older adult community
- Mobile crisis response data

What is the role of WCDH in improving access to healthcare in the county?

Wordcloud Poll 113 responses 52 participants

slido

What role can your organization play in improving access to healthcare in the county?

Wordcloud Poll 101 responses 48 participants

slido

Next Steps

This is a pinnacle time in our organizations, communities, county and country. There is no way around the issues we face—our only option is through. Together, we must work through the many complex issues and inequities, and stay focused on real transformation by identifying and targeting the systemic levers. Focus requires developing shared visions, goals and action plans that lead to increasing our individual, organizational and collective capacity and capabilities to move forward on the journey.

According to the **Institute for Diversity & Health Equity**, the leading health equity strategies cut across six major areas. It is up to all of us to push on these levers of transformation in all of the arenas we enter—from coalition and task force agendas to Board meetings. We cannot afford to shy away from the difficult conversations. It is the Health Department's aim to help sustain the collective focus and to drive, coordinate, facilitate and support the ongoing process.

It will not happen overnight, but for every one-degree pivot or step we each take within the many arenas we work in or enter, we cause a ripple effect, we shift the culture, we make a difference and we move a little bit closer to our vision. WDCH is in it for the long haul. Our hope is that you will join us on this journey, participate in our semi-annual Health Summits and inform and collaborate on key complex issues.

In the meantime, please reach out to us for assistance or support, to collaborate on initiatives and programs, to share innovative approaches for improving populations health, or to learn more about our programs and services. We are here to serve the residents in the County, as well as the community organizations.

THANK YOU