Genesee, Orleans and Wyoming
Combined

Community Health Needs Assessment

2019-2021
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### Hospital and Health Department Representation 2019

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### Community Partners 2019

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<tbody>
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Genesee, Orleans, and Wyoming County Combined
Community Health Needs Assessment and Improvement Plan
Executive Summary 2019-2021

Local hospitals including Rochester Regional Health at United Memorial Medical Center (UMMC), Orleans Community Health (OCH), and Wyoming County Community Health System (WCCHS) along with the Genesee, Orleans, and Wyoming (GOW) County Departments of Public Health are committed to working collaboratively with the residents and institutions of the GOW Counties to improve the health of our community. Every three years, through a process mandated by the Affordable Care Act and the New York State Department of Health, non-profit hospitals and the local health departments conduct a Community Health Needs Assessment (CHNA) to determine areas of community health concern. In the GOW region, the Community Health Improvement Workgroup (CHIW) brings together leaders from hospitals, health departments, and community agencies to prioritize community health needs and develop a Community Health Improvement Plan (CHIP) for addressing the needs of our counties.

Data analysis for the Community Health Needs Assessment
For the GOW 2019 CHNA, regional, state, county, and sub-county data were analyzed to review trends and compare each county’s health indicators to national goals, state goals and local averages. With the help of the local health departments, the CHIW reviewed data from many resources, including by not limited to;

- Keys to Health. Genesee County, Orleans County and Wyoming County.
- Healthy People 2020 Topics and Objectives.
- County Health Rankings and Roadmaps. Genesee County, Orleans County and Wyoming County, 2019.
• New York State Department of Health (NYSDOH) (2018). NYS Prevention Agenda Dashboard - County Level: Genesee County, Orleans County, Wyoming County.

• New York State Community Health Indicator Reports – County Level (2008-2017). Genesee County, Orleans County and Wyoming County.


• 2019 Genesee, Orleans and Wyoming Community Health Needs Assessment Surveys.

• 2019 Genesee, Orleans and Wyoming Community Conversations.

The needs were then prioritized based on established criteria that included: need among vulnerable populations; ability to have a measurable impact; ability to intervene at the prevention level; community capacity and willingness to act; and importance of the problem to community members. Based on these criteria, as well as several meetings of group discussion among the CHIW, and after meeting with several community groups the focus areas were identified: Prevent Chronic Diseases and Promote Well-Being and Prevent Mental and Substance Use Disorders.

Community Partners and Resources

The CHIW is comprised of representatives from the three hospitals in the GOW region (UMMC, OCH, and WCCHS) and the local health departments in the GOW counties. Local community and government groups are represented on the CHIW including: Lake Plains Community Care Network, Independent Living of the Genesee Region, Population Health Collaborative, Oak Orchard Health, and many other partners. The CHIW meets quarterly to discuss implementation of the improvement plan and to assess how the evaluation metrics for improvement are being met. Each hospital, health department and several community agencies have specific roles in implementation of the improvement plan, and each hospital board has voted to approve the CHIP, committing to its implementation. Community members are instrumental for success in the planning and implementation of the Improvement Plan. Leaders from the
CHIW have met with several community agencies throughout the needs assessment process, and will continue to seek feedback throughout the implementation timeframe and beyond.

**Prevention Agenda Priority Areas, Evidence-Informed Interventions, and Disparities to Address**

<table>
<thead>
<tr>
<th>Focus Goal 1: Prevention Chronic Diseases</th>
</tr>
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<tbody>
<tr>
<td><strong>Objective 3.2</strong>: The GOW Hospitals and Local Health Departments will utilize Refer-to-Quit or Opt-to-Quit programs in an aim to increase the percentage of smokers who are referred to the NYS Quitline by 13.1% across the GOW region by December 31, 2024.</td>
</tr>
<tr>
<td>Evidence Based Interventions</td>
</tr>
<tr>
<td>-------------------------------</td>
</tr>
<tr>
<td>• UMMC, OCH, WCCHS will implement/maintain a smoking cessation policy and utilize the Electronic Medical Record (EMR) platform for direct referral process to NYS Smokers Quitline for those self-reporting tobacco/nicotine use.</td>
</tr>
<tr>
<td>• Genesee and Orleans Departments of Health will continue implementation of the 'Tobacco Dependence Treatment/Smoking Cessation Program: Refer-to-Quit Policy' adopted in 2017.</td>
</tr>
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</table>

<p>| Objective 4.1: Increase the percentage of women, with an annual household income less than $25,000 receiving breast cancer screening based on most recent guidelines, by 5% by December 31, 2024. |</p>
<table>
<thead>
<tr>
<th>Evidence Based Interventions</th>
<th>Measures of Success</th>
</tr>
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<tbody>
<tr>
<td>• Conduct one-on-one (phone or in-person) and group education (presentation or other interactive session) in a church, home, senior center or other setting; with a focus on communities where zip codes reflect under/uninsured and/or low screening rates.</td>
<td>• Percentage of compliant patients screened quarterly.</td>
</tr>
<tr>
<td>• Remove barriers to cancer screening by offering flexible clinic hours, cancer screenings in non-clinical settings (mobile mammography, flu clinics), on-site translation, transportation, patient navigation and other administrative services.</td>
<td>• Percentage of non-compliant patients contacted and educated tracked quarterly.</td>
</tr>
<tr>
<td>• Report Number of uninsured / underinsured clients in the tri-county region who accessed Cancer Services Program for mammography each quarter. Record attendance and location of education sessions, clinics and mobile mammography events.</td>
<td>• Report non-traditional hours for mammography offered at UMMC, OCH, and WCCHS.</td>
</tr>
</tbody>
</table>

<p>| Objective 4.4: The GOW Hospitals and Local Health Departments will collaborate to increase participation in Stanford University’s Diabetes Self-Management Program (DSMP) and the CDC’s Diabetes Prevention Program (DPP) by 5% by December 31, 2024. |</p>
<table>
<thead>
<tr>
<th>Evidence Based Interventions</th>
<th>Measures of Success</th>
</tr>
</thead>
</table>

12/31/2019
- The GOW Hospitals and Local Health Departments will expand access to evidence-based self-management interventions for individuals with chronic disease whose condition(s) is not well controlled with guidelines-based medical intervention alone. (i.e. arthritis, asthma, cardiovascular disease, diabetes, prediabetes, and obesity).

- Number of individuals and/or support persons attending evidence based Diabetes Self-Management or Chronic Disease self-management classes.

- Number of Individuals attending Diabetes Prevention Programs.

**Focus Goal 2: Promote Well-Being to Prevent Mental and Substance Use Disorders**

**Objective 2.2:** Decrease the rate in opioid overdose deaths by 7% by 2021.

<table>
<thead>
<tr>
<th>Evidence Based Interventions</th>
<th>Measures of Success</th>
</tr>
</thead>
</table>
| Support the Public Health Model for the Prevention of Drug Overdose. Model components may include: coalition building, prescriber education, supply reduction, pain patient services/drug safety, drug treatment, pharmaceutical interventions, community based prevention education, and evaluation. | - # of organizations represented on Opioid Prevention Task Force.  
- # of individuals receiving treatment in tri-county region.  
- # of pounds of drugs / sharps disposed of at permanent drug drop sites and / or National Drug Take Back Day events.  
- # of referrals to Peer helpline and services.  
- 150 people trained in Narcan each year. |

**Tracking Evaluation and Sustainability**

The CHIW will continue to meet quarterly during the implementation period of the 2019-2021 CHIP, gather partners and content experts around our focus areas, with continuous feedback from stakeholders within the hospital systems and the community. At each meeting, progress metrics will be reviewed to prompt robust conversation around quality improvement, including identification of barriers and sharing best practices. We will submit annual reports to New York State and progress updates to the websites where the CHNA and CHIP documents are posted in order to be transparent and accessible to the community.
Community Health Needs Assessment

This Community Health Needs Assessment (CHNA) is conducted by the hospitals and local health departments that serve Genesee, Orleans and Wyoming Counties (GOW), New York which includes the City of Batavia and several surrounding communities in the Western New York Region. The GOW counties provide remarkable examples of how leaders from hospitals and the community can collaborate to improve the health of the population. There are three primary hospital systems in the region with one hospital operating in each county. Rochester Regional Health (RRH) operates United Memorial Medical Center (UMMC) located in Batavia, NY within Genesee County. Orleans Community Health operates Medina Memorial Hospital located in Medina, NY within Orleans County. Wyoming County operates Wyoming County Community Health System (WCCHS) located in Warsaw, NY within Wyoming County. Rochester Regional Health at UMMC and Orleans Community Health have been filing a joint community service plan since 2013, and continue this process together with Genesee, Orleans and Wyoming County Health Departments to submit one CHNA and Community Health Improvement Plan (CHIP) for these respective counties for 2019-2021. Also instrumental in the CHNA and CHIP process are community partners, which include Lake Plains Community Care Network, Independent Living of the Genesee Region, Population Health Collaborative, Oak Orchard Health, and many others described in this report.
Community Description: Genesee County

The tri-county region of Genesee, Orleans and Wyoming Counties is located mid-way between two major New York State cities: Buffalo to the west and Rochester to the east. The population of Genesee County according to the 2018 Census population estimate is 57,511.¹ The City of Batavia has an estimated population of 14,491 in 2018 according to the U.S. Census population estimates and is the only city located in the tri-county region.¹ The city population is down 15,465 residents compared to 2010.¹ In addition to the City of Batavia, which is the county seat, Genesee County includes 13 towns, and six villages spanning across 493 square miles with a population density of 122 persons per square mile.¹,²

Genesee County is 50.3% female with 18.7% of the population over the age of 65.¹ The county is 93.0% White, 3.2% Black or African American, 1.2% American Indian or Alaska Native, and 0.7% Asian, with 3.4% of the population identifying as Hispanic or Latino.¹ In contrast, the City of Batavia is 87.4% White and 6.8% Black or African American.¹ According to the 2013-2017 American Community Survey 5-Year Data Profiles from the Unites States Census Bureau, English is the primary language spoken by 96.5% of the population, followed by Spanish (1.8%), other Indo-European languages (1.3%), Asian/Pacific Islander languages (0.3%) and other languages listed at 0.1%.³ Within Genesee County, there are differences in the demographics and social structures and health outcomes between the City of Batavia and the other municipalities.
Socioeconomic Factors

The Genesee County workforce is made up of approximately 29,386 people. The median income (in 2017 dollars) for a household (one or more people in a dwelling) in Genesee County is $54,033. The leading industries of the Genesee County workforce include: educational service, health care and social assistance at 23.5%; manufacturing at 15.4%; and retail trade at 11.1%. Since 2015 the unemployment rate has been less than 6.8% and is currently 3.1% as of September 2019, lower than the state and national level of 3.8%.

In Genesee County, the poverty rate is significantly higher in the City of Batavia: an estimated 21.8% of the total population of the city live below the poverty level, while the percentage is 10.8% for the county overall. Furthermore, the percentage of children in the city below 18 years old living under the poverty level is 27.8%, and the rate for those under 5 years old is 27.2%. In comparison, children under 18 in Genesee County overall have a poverty rate of 17.5% and children under 5 have a rate of 23.5% below the poverty level. Families that have a female head of household with no husband present are even more likely to live at or below the poverty line. Within this subgroup of the population, there are significantly higher rates of poverty in the City of Batavia and Genesee County overall as compared to the NYS.

As shown in the Selected Economic Characteristics from the 2013-2017 American Community Survey 5-Year Data Profiles from the United States Census Bureau the following chart shows the percent of families and people whose income in the past 12 months is below the poverty level;

<table>
<thead>
<tr>
<th>FAMILIES WITH FEMALE HOUSEHOLDER, NO HUSBAND PRESENT&lt;sup&gt;3&lt;/sup&gt;</th>
<th>City of Batavia</th>
<th>Genesee County</th>
<th>New York State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families with female householder, no husband present</td>
<td>35.9%</td>
<td>27.7%</td>
<td>26.9%</td>
</tr>
<tr>
<td>With related children under 18 years</td>
<td>47.1%</td>
<td>41.3%</td>
<td>37.4%</td>
</tr>
<tr>
<td>With related children under 5 years only</td>
<td>82.5%</td>
<td>67.0%</td>
<td>37.7%</td>
</tr>
</tbody>
</table>
There is also disparity in family income status as shown here:

Family Income:

<table>
<thead>
<tr>
<th>Families</th>
<th>Genesee County</th>
<th>City of Batavia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Families</td>
<td>11,477</td>
<td>3,104</td>
</tr>
<tr>
<td>Median Family Income</td>
<td>$69,370</td>
<td>$57,886</td>
</tr>
<tr>
<td>Mean Family Income</td>
<td>$78,910</td>
<td>$68,011</td>
</tr>
<tr>
<td>Per Capita Income</td>
<td>$27,499</td>
<td>$23,700</td>
</tr>
</tbody>
</table>

“Family income has been shown to affect a child’s well-being in numerous studies. Compared to their peers, children in poverty are more likely to have physical health problems like low birth weight or lead poisoning, and are also more likely to have behavioral and emotional problems. Children in poverty also tend to exhibit cognitive difficulties, as shown in achievement test scores, and are less likely to complete basic education.”

Homeownership and rentership rates also differ between the county overall and the city. For Genesee County, 72.5% of occupied housing units are owner occupied, while 27.5% are renter occupied. In the City of Batavia, 49.7% are owner-occupied, while 50.3% are renter occupied.

**Environmental Factors**

Depending on where a resident resides in Genesee County, their source of drinking water is either treated by the City of Batavia Water Treatment Plant, LeRoy Water Treatment Plant, Corfu Water Treatment Plant, Monroe County Water Authority or the Erie County Water Authority. In 2016, the Genesee County Water System was operating at its supply capacity and it became apparent that the county could be in a water supply shortage by approximately 2019. In December 2017, Genesee County commissioned a feasibility study or “Master Plan” to evaluate the technical and financial feasibility of increasing the overall water supply throughout the county. The County’s goal is to provide water supply adequate for the needs and opportunities. County water system stakeholders have deemed it imperative that “Water Pay for Water”. Meaning, water revenues need to cover the costs for required and desired water system improvements.
Genesee County is undergoing changes to become a safer and more accessible rural landscape. The *Genesee County Transportation and Mobility Focus Group* exists to identify priorities, barriers and successes on an annual basis regarding the efficiency, safety, livability, economy, and asset management around these areas.\(^6\) The focus group is comprised of various stakeholders including: NYS Department of Transportation; County Highway; County Office for the Aging; County Department of Planning; City of Batavia Public Works; Town of Batavia Highway; Oakfield Highway Department; Genesee/Finger Lakes Regional Planning Council; Genesee Transportation Council; RTS Genesee; The Arc of Genesee and Orleans; and Independent Living of the Genesee Region.\(^6\) Priorities include: pursuing funding to address road and bridge maintenance issues; having all transportation agencies involved in the planning process of local comprehensive plans including complete street designs; the need to adopt a county Road Safety Plan; and enact recommendations from walkability audits.\(^6\) This focus group, as well as the Genesee County Economic & Workforce Development Focus Group and Genesee County Community Wellness Focus Group have all identified that investment in the aging infrastructure as a priority and/or challenge.\(^6\) Funding sources, including grants, is not enough. Currently, 50% the county bridges are classified as below average and the county projects that $125 million worth of infrastructure repair is needed in the next 10 years.\(^6\) Recent successes in this area include:

- Genesee RTS providing transportation services on Friday nights and Sundays while the Genesee Community College is in session.\(^6\)
- Maintenance completed on Stroh Road Bridge in Alexander after years not receiving state or federal funding.\(^6\) County funds from the sale of the Genesee County Nursing Home were used to complete this project.\(^6\)
- A pedestrian light was erected at Route 63 and Main Street after the Genesee Transportation Council completed a Vulnerable Users Roadway Safety Audit in Batavia.\(^6\)
- The City of Batavia completed work on Healthy Routes to School.\(^6\)
- The City of Batavia has adopted complete streets guidance as part of its comprehensive plan.\(^6\)
- The 4.8 mile Ellicott Trail Project in the City of Batavia is expected to be completed in late 2019.\(^6\)
Special Populations: Tonawanda Reservation & Migrant and Seasonal Farmworkers

Tonawanda Reservation

The majority of the Tonawanda Reservation lies within Genesee County, with small portions of the reservation located in Erie and Niagara counties. The Tonawanda Reservation is federally recognized and inhabited by the Tonawanda Band of Senecas. Seneca or Onondowahgah means “People of the Great Hill.” The Senecas are also known as “Keeper of the Western Door” since they are the westernmost nation in the Haudenosaunee territory, who were traditionally responsible for defending the western boundaries of this territory.

The reservation is comprised of 5,759 acres and the Tonawanda Creek flows through the reservation to the Niagara River. According to the 2000 Census, the population was 517 with a median age of 36.3. Approximately 74% of reservation residents have earned a high school degree or higher. This is significantly lower than the Genesee County average of 91.1%.

Migrant and Seasonal Farmworkers (MSW)

The soils in Genesee County are well suited for a wide variety of farm uses. According to the 2012 Census of Agriculture, approximately 76% of land in Genesee County is designated cropland. Genesee County cropland acreage is primarily used to grow hay/greenchop, corn for grain, corn for silage, vegetables and soybeans. The MSW population is the main agricultural workforce, providing the necessary labor for planting, field maintenance and harvesting of seasonal crops. The Genesee County Department of Health (GCDOH) estimates that approximately 784 MSW reside here annually. Historically, this population has received inadequate health care because of their transient nature, poverty, and other barriers to access such as language, culture, transportation and county borders. To help bridge this gap, continued funding is requested from the New York State Department of Health to enhance and maintain ongoing service coordination between the Orleans County Department of Health (OCDOH), GCDOH, Oak Orchard Health (OOH) and the Genesee & Orleans Council on Alcohol and Substance Abuse (GCASA) and other partnering agencies to provide the Genesee-Orleans (G-O) Migrant and Seasonal Worker (MSW) Program. The G-O MSW Program and partners provide a variety of health services to MSW population.
General Health Status of the Population

Consistent with national and state trends, cancer and heart disease are the leading causes of death in Genesee County followed by injury, chronic lower respiratory disease (CLRD), and stroke.¹⁰

![Leading Cause of Death, Genesee County and NYS Exclusive of NYC, 2016¹⁰](image)

Consistent with national and state trends, cancer and heart disease are the leading causes of death in Genesee County followed by injury, chronic lower respiratory disease (CLRD), and stroke.¹⁰

Examining the underlying behaviors and risk factors associated with cancer and heart disease reveal similar disparities and unequal distribution throughout the county. Adult behaviors are most easily studied through the results of the Behavior Risk Factor Survey (BRFSS). The NYSDOH publishes county specific Behavioral Risk Factor Survey results. Smoking, poor nutrition and other unhealthy behaviors are linked to adverse health outcomes. Rates in Genesee County are higher than those of NYS (exclusive of NYC) for these behaviors.
In October 2017, President Trump declared the opioid crisis a public health emergency. Ever since, the Trump Administration has applied an all-of-Government approach to the epidemic, taking an extraordinary range of actions that reflect the President’s commitment to stopping the crisis in its tracks. Although the opioid crisis used to be thought of as an inner city problem, data has proven this to be wrong. According to the NYSDOH Vital Statistics Report, in 2016 there were 23.9 opioid related deaths per 100,000 in Genesee County, compared 15.5 in NYS (exc. NYC).

### Risk Factors and Behaviors

<table>
<thead>
<tr>
<th>Health Condition</th>
<th>Genesee County</th>
<th>NYS (excluding NYC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>38.7</td>
<td>27.4</td>
</tr>
<tr>
<td>Obese or Overweight</td>
<td>72.1</td>
<td>63.7</td>
</tr>
<tr>
<td>Consume one or more sugary drinks daily</td>
<td>34.9</td>
<td>23.3</td>
</tr>
<tr>
<td>Consume less than 1 fruit or vegetable per day</td>
<td>33.3</td>
<td>28.7</td>
</tr>
<tr>
<td>Current Smoking</td>
<td>24.4</td>
<td>16.2</td>
</tr>
<tr>
<td>Did not participate in leisure time physical activity in the past 30 days</td>
<td>29.6</td>
<td>25.4</td>
</tr>
<tr>
<td>Engage in binge drinking in the past 30 days</td>
<td>12.9</td>
<td>17.7</td>
</tr>
</tbody>
</table>

### Overdose Deaths Involving Any Opioid

Genesee County and NYS Exclusive of NYC, 2016

[Graph showing overdose deaths involving any opioid in Genesee County and NYS exclusive of NYC from 2010 to 2016]
Emergency department visits – including outpatients and admitted patients – involving any opioid overdose was 97.5 per 100,000 in Genesee County and 74.9 in NYS (exc. NYC).\textsuperscript{14} The opioid burden; which includes outpatient ED visits and hospital discharges for non-fatal opioid overdose, abuse, dependence, and unspecified use; and opioid overdose deaths in Genesee County was 338.6 per 100,000.\textsuperscript{15} Again, this rate was higher than the NYS rate of 300.3 per 100,000. Sadly the rural county of Genesee has endured its fairshare of the opioid crisis that has been haunting the nation.

\textbf{Health Insurance}

According to the County Health Rankings and Roadmaps for 2018, Genesee County’s uninsured rate is at 5%, surpassing the state and national trends\textsuperscript{17}. According to the American Community Survey (ACS) 2013-2017 5-year estimates, the number of insured individuals (noninstitutionalized, 18+) with health insurance in Genesee County was 55,099, and the uninsured estimate was 2,980. Of those with insurance, 21,852 (37.6\%) received at least some public coverage.\textsuperscript{18}

For the City of Batavia, 13,748 individuals (noninstitutionalized, 18+) received health insurance, while 702 (4.9\%) remained uninsured. Of those with insurance in the City 6,775 (46.9\%) received public coverage.\textsuperscript{18}
Genesee County, NY References


Community Description: Orleans County

Orleans County is a small agricultural community located approximately midway between Rochester in Monroe County and Buffalo in Erie County. Orleans County sits north of both Genesee County and Wyoming County and boarders Lake Ontario. There are ten townships in Orleans County and four villages with the county seat located in the Village of Albion, that span slightly over 390 square miles with an average of approximately 109.6 people per square mile. The U.S. Census Bureau classifies Orleans County as rural due to having a density of less than 500 persons per square mile.

![Map of Orleans County](image)

According to the 2018 United States Census Bureau estimates, the population of Orleans County is 40,612 with 50.1% of the population being female.¹⁹ These values differ slightly from the 2010 Census data, which reported a total population of 42,883, with 50.8% being female. 19.3% of the total county population is under the age of 18 years old, while 17.9% is 65 years or older. Population declines can stimulate changes in population characteristics, which in turn, may be associated with shifts in tax bases, poverty rates and levels of educational attainment. These factors have implications for the need, availability, and delivery of health services among certain demographics.

According to the 2013-2017 American Community Survey, the median age of citizens living within Orleans County is 40.8, compared to New York State's median age of 38.0 years old.²⁰ According to the latter mentioned source, Orleans County has a male median age of 35.8 years old and a female median age of 38.5, compared to the New York State average age of males at 36.3 years.
of age and females of 39.4 years of age.\textsuperscript{20} The 2013-2017 American Community Survey reported that 26.1% of all households have one person or more under the age of 18 years, while 11.6% of all households have one or more persons 65 years of age or older. The distribution of genders in the county is approximately equal overall.\textsuperscript{20}

The Orleans County population is fairly homogeneous in race with 90.0% of its citizens being white, 6.6% black or African-American, 4.9% Hispanic or Latino.\textsuperscript{19} The remaining population consists of 1.9% declaring two or more races, 0.8% American Indian and Alaskan Native, and 0.6% Asian.\textsuperscript{19} According to the 2013-2017 American Community Survey 5-Year Data Profiles from the United States Census Bureau, English is the primary language spoken by 94.2% of the population, followed by Spanish (3.1%), other Indo-European languages (2.2%), Asian/Pacific Islander languages (0.3%) and other languages not listed at 0.2%.\textsuperscript{20} In 2018, the approximate population of Native Hawaiian and other Pacific Islander groups in Orleans County was equal to a value greater than zero but less than half of the unit of Census data measurement.\textsuperscript{19}

\textbf{Socioeconomic Factors}

Approximately 15.2\% of the total county population is living at or below the Federal Poverty Level.\textsuperscript{20} 15\% of related children under the age of 18 are living in poverty, as well as 7\% of those aged 65 years or older.\textsuperscript{20} 10\% of families and 34\% of female-headed households with no husband present had incomes below the Federal Poverty Level from 2013-2017.\textsuperscript{20} In 2013-2017, there were approximately 488 new births, 33.6\% of those births being to unmarried mothers (widowed, divorced, or never married).\textsuperscript{20} Approximately 47.7\% of Orleans County residents are active members of the workforce, with about 0.01\% of Orleans County being members of the Armed Forces.\textsuperscript{20} In 2017, there was a 5.8\% unemployment rate in the county.\textsuperscript{20} Orleans County has 13 schools within 5 public school districts, and 2 faith-based / private schools. Holley and Kendall school districts associate with the Monroe-Orleans Boards of Cooperative Educational Services of New York State (BOCES) system and Albion, Medina and Lyndonville school districts associate with the Niagara-Orleans BOCES system. Two of the five districts have restructured with each closing one of their buildings due to lower enrollments and for cost savings. Medina and Lyndonville school districts are also sharing some school sports, music and drama programs. Orleans County residents can access public library services from 4 libraries in the Nioga Library Systems, (a non-profit cooperative library system) which includes libraries in Niagara, Genesee
and Orleans Counties, however, resources are geographically sparse and hours of operation are limited. The fifth library is an outreach of the Kendall School system to provide limited library services to their residents and is not affiliated with NIOGA.

Orleans County residents have diverse educational backgrounds. As of 2017, 5.6% of residents had attained a graduate or professional degree, 15.9% had earned a bachelor’s degree, and 10.2% have earned an associate’s degree. A large portion of the Orleans County population (86.9%) has received a high school diploma or equivalent. Currently, approximately 10.8% of students are enrolled in high school. Orleans County is also home to the Iroquois Job Corps, a nationally acclaimed residential career training and education center.

**Housing, Income and Workforce**

There are approximately 18,598 housing units within Orleans County with 75.0% of the county population owning their home. The average number of individuals per household is 2.38 people with a median household income of $49,223 and a mean household income of $56,732.

As shown in the Selected Economic Characteristics from the 2013-2017 American Community Survey 5-Year Data Profiles from the United States Census Bureau the following chart shows the percent of families and people whose income in the past 12 months is below the poverty level:

<table>
<thead>
<tr>
<th>FAMILIES WITH FEMALE HOUSEHOLDER, NO HUSBAND PRESENT(^{20})</th>
<th>Village of Albion</th>
<th>Orleans County</th>
<th>New York State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families with female householder, no husband present</td>
<td>48.5%</td>
<td>33.8%</td>
<td>26.9%</td>
</tr>
<tr>
<td>With related children under 18 years</td>
<td>69.5%</td>
<td>46.0%</td>
<td>37.4%</td>
</tr>
<tr>
<td>With related children under 5 years only</td>
<td>N/A</td>
<td>53.9%</td>
<td>37.7%</td>
</tr>
</tbody>
</table>
From the same source noted about, there is also disparity in family income status as shown here:

Family income:\textsuperscript{20}:

<table>
<thead>
<tr>
<th>Families</th>
<th>Orleans County</th>
<th>Village of Albion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Families</td>
<td>10,763</td>
<td>1,469</td>
</tr>
<tr>
<td>Median Family Income</td>
<td>$57,601</td>
<td>$38,021</td>
</tr>
<tr>
<td>Mean Family Income</td>
<td>$70,277</td>
<td>$70,059</td>
</tr>
<tr>
<td>Per Capita Income</td>
<td>$23,929</td>
<td>$23,705</td>
</tr>
</tbody>
</table>

**Environmental Factors**

In 1978, lead-based paint was banned in New York State. In 2013-2017, there were still approximately 13,513 homes built before 1978 in Orleans County.\textsuperscript{20} These houses potentially have old layers of lead paint that could put children at risk of lead poisoning. According to the Orleans County Department of Health (OCDOH), the majority of public water from Orleans County is surface water which comes from Lake Ontario. The Lyndonville Municipal Water Treatment Plant provides water to the Town of Yates and Village of Lyndonville. A portion of the Town of Yates receives water from Niagara County Water. According to the OCDOH, the Albion Municipal Water Treatment Plant located in the town of Carlton, also surface water from Lake Ontario, provides water for the towns of Carlton, Kent, Gaines, Albion and Barre as well as the village of Albion and portions of the towns of Murray and Kendall. The Village of Holley provides ground source water and the towns of Clarendon, parts of Murray and parts of Kendall are provided by the Monroe County water district. The towns of Ridgeway and Shelby and the village of Medina receives water from Niagara County Water District. There have not been any issues with Orleans County water treatment plants in treating the water for the county as reported by the OCDOH Senior Sanitarian. As stated in the 2019 County Health Rankings, Orleans County improved the physical environment ranking to 21 out of 62 counties as compared to 32 in 2018. Orleans County can be accessed via New York State Routes 18, 31, 63, 98, 104 and the Lake Ontario State Parkway.
Limited public transportation is available in Orleans County, provided by the Rochester Genesee Regional Transportation Authority. Most transit routes only operate Monday through Friday until 6:00pm in more highly populated areas, which creates unique challenges for working families trying to access resources throughout the county.

**Special Populations: Mennonite and Amish Communities & Migrant and Seasonal Farmworkers**

**Mennonite and Amish Communities**

According to anecdotal population data collected from an OCDOH Public Health Nurse, who has provided services for Mennonite and Amish community members, there are approximately 30 Mennonite families and approximately 30 Old Order Amish in Orleans County. Amish communities are organized in many ways. One way is by districts. There are currently at least two Old Order Amish districts in Western Orleans County. Both the Amish and Mennonite population provide various services in Western Orleans County, including, but not limited to, bulk stores, general stores, woodworking, construction, farming, and farm stands. According to an OCDOH Public Health Nurse, population growth in these communities fluctuates based on Mennonite and Amish community members purchasing local farm properties or moving to other areas within New York or outside the state.

**Migrant and Seasonal Farmworkers (MSW)**

According to the 2019 OCDOH Active Migrant Farmwork Housing report (includes Health Department inspected housing beds available, to qualify the housing unit must be for 5 or more residents), approximately 1,299 migrant or seasonal farm workers move to Orleans County during the growing season, departing at the completion of the harvest season. There are an estimated 69 camps for Migrant and Seasonal Farm workers located in Orleans County. In the 2018-2019 Migrant and Seasonal Farmworker Health Program Annual Report the OCDOH Public Health Nurses provided care for 533 unduplicated patients via 784 encounters. Between January and September of 2019, there had been approximately 732 encounters with migrant and seasonal farm workers through case management services and/or home/camp visits. MSW continues to be one of our counties most vulnerable populations. Historically, this population has received inadequate health care because of their transient nature, poverty, and barriers to access such as language,
culture, transportation and county boarders. To help bridge this gap, continued funding is requested from the NYSDOH to enhance and maintain ongoing service coordination between the Orleans County Department of Health (OCDOH), Genesee County Department of Health (GCDOH), Oak Orchard Health (OOH), and the Genesee & Orleans Council on Alcohol and Substance Abuse (GCASA) and other partnering agencies to provide services and referrals to the Genesee-Orleans (G-O) Migrant and Seasonal Worker (MSW) Program.

**General Health Status of the Population**

Examining the underlying behaviors and risk factors associated with cancer and heart disease reveal similar disparities and unequal distribution throughout the country. Adult behaviors are most easily studied through results of the Behavior Risk Factor Survey (BRFSS). The NYSDOH publishes county specific Behavioral Risk Factor Survey results. Smoking, poor nutrition and other unhealthy behaviors are linked to adverse health outcomes.\(^{21}\)

![Leading Cause of Death, Orleans County and NYS Exclusive of NYC, 2016\(^{21}\)](chart)
<table>
<thead>
<tr>
<th>Risk Factors and Behaviors (crude rate percent number of people with health condition per reported region/county)(^{22})</th>
<th>Orleans County</th>
<th>NYS (excluding NYC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>34.2</td>
<td>27.4</td>
</tr>
<tr>
<td>Obese or Overweight</td>
<td>66.8</td>
<td>63.7</td>
</tr>
<tr>
<td>Consume one or more sugary drinks daily</td>
<td>31.6</td>
<td>23.3</td>
</tr>
<tr>
<td>Consume less than 1 fruit or vegetable per day</td>
<td>32.6</td>
<td>28.7</td>
</tr>
<tr>
<td>Current Smoking</td>
<td>28.6</td>
<td>16.2</td>
</tr>
<tr>
<td>Did not participate in leisure time physical activity in the past 30 days</td>
<td>28.7</td>
<td>25.4</td>
</tr>
<tr>
<td>Engage in binge drinking in the past 30 days</td>
<td>16.5</td>
<td>17.7</td>
</tr>
</tbody>
</table>

In October 2017, President Trump declared the opioid crisis a public health emergency. Ever since, the Trump Administration has applied an all-of-Government approach to the epidemic, taking an extraordinary range of actions that reflect the President’s commitment to stopping the crisis in its tracks.\(^{23}\) Although the opioid crisis used to be thought of as an inner city problem, data has proven this to be wrong. According to the NYSDOH Vital Statistics Report, in 2016 there were 14.5 opioid related deaths per 100,000 in Orleans County, compared 18.2 in NYS (exc. NYC).\(^{24}\) Emergency department visits – including outpatients and admitted patients – involving any opioid overdose was 91.9 per 100,000 in Orleans County and 74.9 in NYS (exc. NYC).\(^{24}\) The opioid burden; which includes outpatient ED visits and hospital discharges for non-fatal opioid overdose, abuse, dependence, and unspecified use; and opioid overdose deaths in Orleans County was 268.5 per 100,000.\(^{24}\) Although this rate was lower than the NYS rate of 300.3 per 100,000, this small rural county is devastated by the loss of life and quality of life resulting from drug addiction.

According to the Genesee-Orleans-Wyoming Opioid Task Force, in previous years the number of overdose deaths were fairly steady in Orleans County, but now the numbers for overdose deaths involving any opioid are starting to increase gradually starting in 2016 which had 9 opioid overdose deaths, in 2017 there were 7 and in 2018 there were 12 as noted by the GOW Opioid Task Force.\(^{25}\) The numbers may change due to a delay in final toxicology reports.

12/31/2019
Health Insurance

According to the County Health Rankings and Roadmaps for 2019, Orleans County's uninsured rate is at 6%, surpassing the state and national trends. According to the American Community Survey (ACS) 2013-2017 5-year estimates, the number of the number of insured individuals (noninstitutionalized, 19 to 64 years) with health insurance in Orleans County was 36,466, and the uninsured estimate was 2,505. Of those with insurance, 16,985 (43.6%) received public coverage.
Orleans County, NY References


Community Description: Wyoming County

Wyoming County is a small rural county of approximately 592.75 square miles, with 71.1 persons per square mile, located in Western New York State.\textsuperscript{27} Wyoming County is roughly equidistant from the urban centers of Rochester in Monroe County and Buffalo in Erie County, and 25 miles south of the city of Batavia in Genesee County. There are sixteen townships and five villages in Wyoming County. The majority of the county population is concentrated in four centers: Warsaw, which is the location of the county seat, Attica to the northwest, Arcade to the southwest and Perry to the east.

The vast geographic area of the county coupled with the sparse population scattered throughout the rural terrain lends itself to a variety of access and transportation issues. Warsaw, Attica, Arcade and Perry are accessible by public transportation during limited hours, Monday through Friday. Residents of other areas in the county experience a series of unique challenges in attempts to access resources throughout the county.

According to the 2018 QuickFacts, the United States Census Bureau estimates, the population of Wyoming County is 40,085 with 45.7\% of the population being female.\textsuperscript{27} These values reflect a slight decline since the 2010 Census when the population was 42,150.\textsuperscript{27} Wyoming County has 17.9\% of the population over the age of 65.\textsuperscript{27} The county is 92.2\% White, 5.6\% Black or African American, 0.4\% American Indian and Alaska Native, 0.6\% Asian, and 3.3\% of the population identifying as Hispanic or Latino.\textsuperscript{27}

The median age of citizens living within Wyoming County is 41.8, compared to New York State’s median age of 38.0 years old.\textsuperscript{28} The 2013-2017 American Community Survey reported that 28.3\% of all households have one person or more under the age of 18 years, while 29.6\% of all households have one or more person 65 years of age or older.\textsuperscript{28}
Socioeconomic Factors

The Wyoming County workforce is made up of approximately 19,647 civilians.\(^{27}\) The median income (in 2017 inflation - adjusted dollars) for a household (one or more people in a dwelling) in Wyoming County is $55,459.\(^{28}\) The largest industries of Wyoming County workforce include: health care & social assistance 20.5%, manufacturing 14.5%, and retail trade 9.7%.\(^{28}\) The unemployment rate is currently 3.7% as of August 2019, lower than the state level of 4.2% and national level of 3.8%.\(^{28}\)

In Wyoming County, the poverty rate is 11.4% for the county overall.\(^{28}\) Furthermore, the percentage of children under 18 living under the poverty level is 17.2% and the rate for those under 5 is 17.5%.\(^{28}\) Families with female householder with no husband present are more likely to live below poverty at a rate of 26.6%.\(^{28}\)

<table>
<thead>
<tr>
<th>FAMILIES WITH FEMALE HOUSEHOLDER, NO HUSBAND PRESENT(^{28})</th>
<th>Wyoming County</th>
<th>New York State</th>
</tr>
</thead>
<tbody>
<tr>
<td>With related children under 18 years</td>
<td>39.1%</td>
<td>37.4%</td>
</tr>
<tr>
<td>With related children under 5 years only</td>
<td>49.6%</td>
<td>37.7%</td>
</tr>
</tbody>
</table>

There is also disparity in family income status as shown here:

Family income\(^{28}\):

<table>
<thead>
<tr>
<th>Families</th>
<th>Wyoming County</th>
<th>New York State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Families</td>
<td>10,400</td>
<td>4,633,030</td>
</tr>
<tr>
<td>Median Income</td>
<td>$66,597</td>
<td>$77,141</td>
</tr>
<tr>
<td>Mean Family Income</td>
<td>$75,388</td>
<td>$109,230</td>
</tr>
<tr>
<td>Per Capita Income</td>
<td>$25,635</td>
<td>$35,752</td>
</tr>
</tbody>
</table>

There are approximately 18,282 housing units in Wyoming County with 75.8% of the county owning their home. The average number of individuals per household is 2.39.\(^{27}\)
Environmental Factors

In 1978, lead-based paint was banned in New York State. In 2013-2017, there were still about 13,827 homes built before 1978 in Wyoming County. These houses potentially have old layers of lead paint that could put children at risk of lead poisoning.

The Wyoming County Water Resource Agency (WCWRA) is currently planning for future water needs. The WCWRA Board of Directors is currently developing long range plans for the potential expansion of public water service areas within Wyoming County. They are reviewing areas of the county that would benefit with the installation or expansion of public water supplies to address public health and safety concerns and/or to aid in economic development.

The Wyoming County Environmental Department is part of a committee looking at the possibility of dredging the north end of Silver Lake, including the inlet and outlet. Also on this committee are the Towns of Castile & Perry, the Villages of Perry and Mt. Morris, Wyoming County Economic Development and IDA, Clark Patterson Lee Engineering, Wyoming County Highway and Wyoming County Soil & Water. The dredging project would help to improve the overall lake and drinking water quality.

Wyoming County is the #1 county in New York State in total agricultural production and milk production. With 729 active farms, agriculture is extremely important to the economic and social fabric of the County. According to the 2017 Census of Agriculture, approximately 71% of land in Wyoming County is designated as cropland. In Wyoming County Cropland acreage is primarily used to grow grains, oilseeds, dry beans, dry peas, vegetables, melons, potatoes, hay, along with other crops.
General Health Status of the Population

Consistent with state trends, Heart Disease and Cancer are the leading cause of death in Wyoming County. Examining the underlying behaviors and risk factors associated with cancer and heart disease reveal similar disparities and unequal distribution throughout the country.

![Leading Cause of Death, Wyoming County and NYS Exclusive of NYC, 2016](image)

Leading cause of Premature Mortality in Wyoming County by Gender.

<table>
<thead>
<tr>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cancer: 96.2 per 100,000</td>
<td>1. Cancer: 83.6 per 100,000</td>
</tr>
<tr>
<td>2. Heart Disease: 68.6 per 100,000</td>
<td>2. Unintentional Injury: 32.3 per 100,000</td>
</tr>
<tr>
<td>3. Unintentional Injury: 35.0 per 100,000</td>
<td>3. CLRD: 19.1 per 100,000</td>
</tr>
<tr>
<td>4. CLRD: 28.1 per 100,000</td>
<td>4. Heart Disease: 18.9 per 100,000</td>
</tr>
<tr>
<td>5. Suicide: 22.2 per 100,000</td>
<td>5. Diabetes: 13.6 per 100,000</td>
</tr>
</tbody>
</table>
Adult behaviors are most easily studied through results of the Behavioral Risk Factor Survey (BRFSS). The NYSDOH publishes county specific Behavioral Risk Factor Survey results. Smoking, poor nutrition and other unhealthy behaviors are linked to adverse health outcomes.

<table>
<thead>
<tr>
<th>Risk Factors and Behaviors (crude rate percent number of people with health condition per reported region/county)(^{23})</th>
<th>Wyoming County</th>
<th>NYS (excluding NYC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>38.7</td>
<td>27.4</td>
</tr>
<tr>
<td>Obese or Overweight</td>
<td>66.1</td>
<td>63.7</td>
</tr>
<tr>
<td>Consume one or more sugary drinks daily</td>
<td>30.2</td>
<td>23.3</td>
</tr>
<tr>
<td>Current Smoking</td>
<td>25.0</td>
<td>16.2</td>
</tr>
<tr>
<td>Did not participate in leisure time physical activity in the past 30 days</td>
<td>25.2</td>
<td>25.4</td>
</tr>
<tr>
<td>Engaged in binge drinking in the past 30 days</td>
<td>16.6</td>
<td>17.7</td>
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<tr>
<td>Consume less than 1 fruit or vegetable per day</td>
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In October 2017, President Trump declared the opioid crisis a public health emergency. Ever since, the Trump Administration has applied an all-of-Government approach to the epidemic, taking an extraordinary range of actions that reflect the President’s commitment to stopping the crisis in its tracks.\(^{31}\) Although the opioid crisis used to be thought of as an inner city problem, data has proven this to be wrong. According to the NYSDOH Vital Statistics Report, in 2016 there were 17.2 (crude rate per 100,000 population) opioid related deaths in Wyoming County, compared 15.5 in NYS (exc. NYC).\(^{32}\) Emergency department visits – including outpatients and admitted patients – involving any opioid overdose was 78.4, crude rate per 100,000 population, in Wyoming County and 74.9 in NYS (exc. NYC).\(^{33}\) The opioid burden; which includes outpatient ED visits and hospital discharges for non-fatal opioid overdose, abuse, dependence, and unspecified use; and opioid overdose deaths in Wyoming County was 213.3 (crude rate per 100,000 population).\(^{34}\) Sadly the rural county of Wyoming has endured its fairshare of the opioid crisis that has been haunting the nation.
Health Insurance

According to the County Health Rankings and Roadmaps for 2019, Wyoming County’s uninsured rate is at 5% surpassing the state and national trends\textsuperscript{31}. According to the American Community Survey (ACS) 2013-2017 5-year estimates, the number of insured individuals (noninstitutionalized, 18+) with health insurance in Wyoming County was 37,617, and the uninsured estimate was 1,843. Of those with insurance, 13,858 (36.8\%) received at least some public coverage.\textsuperscript{32}
Wyoming County, NY References


Genesee – Orleans – Wyoming (GOW) Assets and Resources Available to Address Health Issues Identified

The not-for-profit hospitals, local public health departments, and community partners who are engaged in the Community Health Improvement Workgroup (CHIW) for this process are instrumental assets for addressing the health needs in Genesee, Orleans and Wyoming Counties.

Rochester Regional Health - United Memorial Medical Center

Rochester Regional Health is a leading provider of comprehensive care for Western New York and the Finger Lakes region. Formed in 2014 with the joining of Rochester General and Unity Health systems, now, as one organization, Rochester Regional Health brings to its mission a broad spectrum of resources, ability to advocate for better care, a commitment to innovation, and an abiding dedication to caring for the community. The system includes five hospitals and serves communities as a truly integrated health services organization. Our network includes hospitals and physicians, ElderONE/PACE (Program for All-Inclusive Care for the Elderly) and home health programs, outpatient laboratories, rehabilitation programs, surgical centers, independent and assisted living centers, and skilled nursing facilities.

United Memorial Medical Center is a 133-bed community hospital in Batavia, NY that provides medical, surgical, and rehabilitation services. United Memorial Medical Center offers a broad range of specialty services, including Lipson Cancer Institute, Wound Care and Hyperbaric Medicine, Sands-Constellation Heart Institute, Hope Haven Center inpatient alcohol and chemical dependency rehabilitation, and more. Its primary care, women’s care, and orthopedic offices serve communities across Genesee, Orleans, and Wyoming counties. UMMC also supports the health of the Tonawanda Seneca Nation through a contract with the New York State Department of Health to manage the Tonawanda Family Care Center. UMMC is one of the largest employers in Genesee County, with 940 full, part-time and per diem employees.

In 2018 UMMC treated over 22,000 emergency room visitors and more than 8,000 urgent care patients. Clinical teams cared for nearly 5,000 inpatients and delivered over 500 babies, while UMMC’s outpatient medical practices had over 104,000 visits. Accolades in 2018 include: The Joint Commission Joint Center of Excellence reaccreditation, Stroke Silver Plus Award from the American Heart Association, and Healthgrades five-star recognition for total hip replacement and vaginal deliveries.

12/31/2019
Orleans Community Health (OCH)

Mission Statement: Orleans Community Health exists to improve the health of the communities we serve by providing equal access to quality health care services at the right time, in the right place, with the most efficient use of resources. OCH is a full-service community health provider serving 43,000 residents in Orleans, eastern Niagara and northern Genesee counties. It is the only full-service, acute care system in Orleans County. The health services provided include Medina Memorial Hospital which is a designated Critical Access Hospital with a 24/7 ER, medical surgical unit, surgical services, imaging services including (MRI, CT Scan, digital mammography, ultrasonography, echocardiography and general x-rays), a transitional care unit, a wound care unit, podiatry, urology; and a 30 bed skilled nursing home. They have a Community Partners Wellness Department that provides a comprehensive variety of health and wellness programs including nutrition, diabetes and pre-diabetes education, lead poisoning prevention, etc. They also offer services through the Cancer Services Program and assistance for enrolling in the NYS Health Exchange. There are two renal dialysis centers located in Medina and Batavia; a primary care and walk-in care health center in Albion, with x-ray, lab, PT, OT, speech and Occupational Health and two additional lab sites in Medina and Middleport. Orleans Community Health treats nearly 15,000 emergency room patients, has over 6,000 primary and walk-in care visits and over 400 hospital discharges annually. OCH employs approximately 300 staff members.

Wyoming County Community Hospital System (WCCHS)

Wyoming County Community Health System has been serving Wyoming County and the surrounding area for over 100 years and continues its commitment of providing outstanding healthcare services for our rural community. WCCHS, a full service, County-owned health system comprised of a 62-bed acute-care hospital with a 138 bed Skilled Nursing Facility in Warsaw, NY, provides 24-hour emergency care as well as a full range of specialty health care. Services include family medicine, orthopedics, women’s health, general surgery, mental health, neurology, ENT, and a variety of other specialty services. WCCHS is the areas first hospital to be nationally certified for advanced total hip and total knee replacement surgery and is accredited by The Joint Commission and the American College of Radiology. WCCHS has outpatient offices in Arcade, NY that also offers a wide range of specialist clinics, diagnostics and treatment services.
Genesee County Department of Health and Orleans County Department of Health
(G-O Health)

The mission of G-O Health is to work collaboratively ensuring conditions that promote optimal
of health for individuals and the communities we serve.

G-O Health established a cross-jurisdictional relationship in 2013, allowing the departments a level
sharing that has increased effectiveness and services. The departments now share a Medical
Director, have a joint Board of Health and Quality Improvement/Quality Assurance Committee;
select staff and management staff that are shared; as well as combined policies and procedures.
The departments still maintain separate budgets and locations. The departments are approximately
30 miles apart with Genesee County Department of Health located in Batavia and the Orleans
County Department of Health located in Albion.

G-O Health provides direct services designed to protect the public from health risks, disease, and
environmental hazards, and community leadership to ensure improved health status of individuals,
families, and the environment. Services include education, preventive services, direct patient care,
and enforcement of health codes and medical policies. Each department is comprised of the
following teams.

- The Community Health Services team protects and promotes the health of the community
  through support, education, empowerment, and direct nursing care services. Programs and
  services include immunizations, tuberculosis control, lead poisoning prevention, maternal and
  child health, communicable disease investigations, HIV and Hepatitis C screening and
  treatment.

- The Children with Special Needs team includes the Early Intervention (EI) Program, which
  assists children (Birth – age 2) who are at risk of developmental delays and the Pre-School
  Special Education Program which serves children ages 3-5 who have delays that may affect
  their education. The Children with Special Health Care Needs (CSHCN) program is also
  included under this umbrella. CSHCN is a referral program for families with children birth – 21
  years old who have been diagnosed or may have a serious or chronic health condition or
disability. Referrals to insurance, health services and community resources for help in meeting
the child’s medical needs can be made. CSHCN helps families navigate patient care options to
obtain access to care.
• The Environmental Health team promotes the health of the community by providing information and education; inspection of facilities or conditions that affect public health and the environment; enforcement of provisions of the Public Health Law, the New York State Sanitary Code, and the Genesee and Orleans County Sanitary Codes; emergency response to incidents that threaten public health and the environment; and coordination of planning for activities that protect public health and the environment. As of 2018, each county’s Director of Weights and Measures became included under the Environmental Health Team umbrella. Weights and Measures is responsible for enforcing all applicable laws, regulations, rules, and ordinances prescribed by the New York State Department of Agriculture and Markets. The program’s mission is to promote equity in the marketplace. Commercial weighing and measuring devices throughout the counties are tested for compliance and accuracy in order to protect consumers, businesses, and manufacturers from unfair practices.

• The Public Health Education team supports all programs provided by the Health Departments through education, training, resource, referral and promotes the mission of the departments. Services include, but are not limited to, the promotion of health, safety and healthy lifestyles through public presentations, programs, trainings and free literature on numerous health concerns geared to all ages and literacy levels. The team also publishes community health assessments, develops community health improvement plans with input from stakeholders, and provides public health data for community organizations to utilize for grant writing, education and policy development.

• The Public Health Preparedness Team builds preparedness, response and recovery capacity to respond to existing and emerging threats to public health. Guided by specific deliverables established by the CDC’s annual Public Health Emergency Preparedness Cooperative Agreement, activities include coordinated planning, drills/exercises, training, education, and other protective measures coordinated by the Public Health Emergency Preparedness Coordinator in collaboration with local, regional, state and federal partners. VALOR (Volunteer Alliance Linking Our Resources) Medical Reserve Corps has been created to augment the public health workforce to respond to emergencies. This all-volunteer medical and non-medical corps will help fill the gap in personnel support during time of need.

• There are four elected Coroners in each county who perform their duties on a part-time basis. As a County Coroner, the officials are responsible for responding to the scene of an
unattended/suspicious death to perform the preliminary investigation surrounding the cause of
death and refer the case to the Monroe County Medical Examiner (ME) for comprehensive
medicolegal death investigation services including autopsy and post-mortem toxicology, if
applicable.

**Wyoming County Health Department**
The department’s mission is to ensure the optimal health of the community through promoting
physical and mental health and preventing disease, injury and disability through on-going
surveillance and dedication to excellence and value in the provision of community-based services.
This mission is achieved through the efforts of Public Health Nursing, Environmental Health
services, the Immunization Clinic, Livingston-Wyoming Cancer Services Partnership, Men's and
Women's Reproductive Health Services Clinic, and the Emergency Preparedness Division.
Wyoming County also has a comprehensive Mental Health Department, providing resources to
residents in the areas of alcoholism and substance abuse, developmental disabilities, and suicide
prevention.

- The Public Health Nursing Staff is responsible for disease surveillance, and follow up, disease
  and injury prevention, health education, evidenced based programing, and some direct services
  such as immunization, lead testing, and well-baby visits to the residents of Wyoming County.
The activities support our mission for optimal health for our community.

- Public Health Education supports all programs provided by the Health Departments through
  education, training, resource, referral and promotes the mission of the departments. Services
  include, but are not limited to, the promotion of health, safety and healthy lifestyles through
  public presentations, programs, trainings and free literature on numerous health concerns
  geared to all ages and literacy levels. The Health Educator publishes community health
  assessments, develops community health improvement plans with input from stakeholders, and
  provides public health data for community organizations to utilize for grant writing, education and
  policy development.

- Reproductive health care at Men’s and Women’s Health Services is delivered through health
  assessment, physical examination, counseling and education on health/social risk factors, the
  clients’ Reproductive Life Plan (desire for and timing of children), contraceptive options and
prevention/treatment of STD’s, as well as Hepatitis-C testing in cooperation with Public Health Nursing.

- The Environmental Health Division is obligated to educate, guide, review and enforce the regulations as outlined in the New York State Sanitary Code and the Sanitary Code of Wyoming County. Assists other State Agencies such as NYS Department of Conservation (Public Water Supplies, Air Quality, Ground & Surface Water Contamination, Spills), and NYS Agriculture and Markets (Initial Retail Store Complaints/Investigations, Facility Water Supply Protection). Along with assisting State Agency’s the Environmental Health Division assists other County Departments regularly: Wyoming County Building & Fire Codes (Water/Sewage System Requirements, Complaints, and Fire & Safety Inspections), Wyoming County Soil & Water and WC Water Resource Agency.

- Emergency preparedness and response is the capability of the public health and health care systems, communities, and individuals, to prevent, protect against, quickly respond to, and recover from health emergencies, particularly those whose scale, timing, or unpredictability threatens to overwhelm routine capabilities. Preparedness involves a coordinated and continuous process of planning and implementation that relies on measuring performance and taking corrective action. Emergency planning has become increasingly important in the United States due to changing and often unpredictable weather patterns, new disease threats, and the rise of global terrorism.

- When an unattended/suspicious death occurs, a Coroner is dispatched by the Wyoming County Sheriff’s Department to the scene, to conduct an investigation for determination of the cause and manner of death. Coroners are assigned a geographic quadrant of Wyoming County. If cause and manner can be reasonably determined, and a physician will sign the death certificate, the decedent is released to a Funeral Home and required paperwork is completed by the Coroner to file a death certificate. If cause and manner of death cannot be determined, the case is referred to the Medical Examiner for autopsy. Wyoming County contracts with the Monroe County Medical Examiner (MCME) for these services.
Independent Living of the Genesee Region
Is a multi-cultural, grassroots, peer directed, and civil rights organization serving Genesee, Orleans and Wyoming Counties that provides a full range of assistance, programs and services to enhance the quality of life for all individuals with disabilities. Independent Living assists persons with disabilities to realize their life choices through information and referral, independent living skills, community and systems advocacy and peer counseling. This agency facilitates Stanford University’s evidence-based Chronic Disease Self-Management Program (CSDMP) and Diabetes Self-Management Program (DSMP) to public members free of cost.

Lake Plains Community Care Network, Inc. (LPCCN)
Is a Rural Health Network serving Orleans, Genesee and Wyoming Counties. LPCCN is a 501(c)(3) organization formally established in 1997 from a network of employers, providers and community service representatives that had been collaborating since 1993. LPCCN is a publicly-owned entity governed by a voluntary Board of Directors, coming from the three counties we operate within. Local stakeholder representation on this Board includes, among others: business leaders, governmental officials, practitioners, public health administrators and hospital executives. LPCCN’s mission is to improve access to appropriate rural health services in Genesee, Orleans, and Wyoming counties and facilitates resource development at the local level through an integrated community services network.

The overall vision is to have the healthiest communities with full access to appropriate care, accountability, and a seamless continuum of services.

Oak Orchard Health
Oak Orchard Health (OOH) is a Federally Qualified Health Center and a trusted health partner. Serving patients in Monroe, Orleans, Wyoming, Steuben, and surrounding counties, our health centers continue to set a high standard for patient-centered health and wellness. From family health and routine physicals to state-of-the-art facilities and treatments, OOH is there to ensure our patients, neighbors, and communities have access to high quality healthcare, regardless of their circumstances.

- Family Medicine
OOH provides patients with a comprehensive team-based health care. Promoting wellness and prevention by encouraging and supporting patients to be active participants in their health with their Care Team of doctors, nurse practitioners, physician assistants, and clinical staff.

- **Pediatrics**
  OOH is committed to playing an integral and involved role in the health and vitality of our infant, child, and teen patients. As part of OOH, we have the unique ability to provide our patients and their busy parents with high quality health care services available during evening and weekend hours.

- **Vision**
  OOH’s Vision Care team is committed to providing you with friendly and professional care. The highly trained staff is experienced with children, adults, and persons with special needs. Patients receive courteous and respectful service in a positive atmosphere. Accepting patients ages four and up.

- **Behavioral Health**
  In the Albion, Brockport and Hornell health centers, OOH offers comprehensive screening, assessment, and treatment for mental health concerns; including depression, anxiety, stress, addictions, and post-traumatic stress disorder. OOH’s behavioral health care team includes licensed psychologists, social workers, and mental health counselors. Treating adult, adolescent, and child patients in a variety of modalities including individual therapy, couples therapy, family therapy, and group therapy. Therapies provided include supportive therapy, cognitive behavior therapy, motivational interviewing, problem solving therapy, and behavioral activation therapy.

- **Patient Engagement Services**
  The Patient Engagement team is passionate about connecting our entire patient population to the resources they need in order to receive the healthcare they deserve. OOH has been serving the health care needs of this area’s agriculture workers since 1966. For over four decades, OOH has provided comprehensive, culturally aware, integrative health services to the farmworkers and their families living and working in the community. The providers are uniquely qualified to deliver this high-quality care as they are fully aware of and understand the health and safety needs of these patients. OOH offers health screenings for high blood
pressure, high blood sugar, colorectal cancer and HIV. Also, staff can assess simple complaints such as back pain, indigestion and athlete’s foot and provide the appropriate health care for these minor injuries and illnesses right in the field. Our patient engagement professionals can make the appropriate arrangements for these patients to get any necessary, more comprehensive medical care in our office locations. Additionally, they will assist with translation, transportation, navigation of insurance and sliding scale payment plans.

**Population Health Collaborative**

Connects diverse groups of people to align resources and expertise to actively work towards improving population health in Western New York.
Specific 2019-2021 Community Health Needs Assessment
Process and Methods for Identifying and Prioritizing Community Health Needs

The Community Health Improvement Workgroup (CHIW) representing each hospital, each health department and aforementioned community partners, began meeting regularly in the summer of 2018 to plan the completion of the 2019-2021 Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP).

In the summer/fall of 2018, the CHIW focused on determining the questions to be included in the 2019 CHNA survey and a distribution plan. The goal of the CHNA survey was to learn about the health of the individual completing it, with the target population being residents residing in the GOW Counties. The survey was available in English and Spanish. A new initiative included in the survey process was a small group of questions selected to be included in every CHNA survey version distributed across Western New York by each county’s respective CHIWs. This initiative is expected to continue in the future to aid in identifying health trends among the Western New York counties. In 2019, this initiative was facilitated by Population Health Collaborative who worked with CHIWs in the GOW Counties, Cattaraugus County, Chautauqua County, Allegany County, Erie County and Niagara County.

From January – May 2019 the CHIW focused on distributing the CHNA survey, facilitating Community Conversations, as well as compiling and analyzing health data from reputable secondary and tertiary health sources. Each CHIW member was involved in distributing the survey to their clients, to various locations in the tri-county region, via press releases, social media, and email. The combined effort resulted in over 2,000 surveys being collected with each county achieving the goal of having ≥ 1% of their respective population complete the survey. In addition, 12 Community Conversations were facilitated by health departments and/or hospitals. The goal of such a conversation is to meet with willing community groups to learn what they feel are the greatest health concerns or issues in their community and thoughts on how they can be improved.
<table>
<thead>
<tr>
<th></th>
<th>CHNA Surveys completed</th>
<th>Community Conversations held</th>
</tr>
</thead>
<tbody>
<tr>
<td>Genesee County residents</td>
<td>903</td>
<td>4</td>
</tr>
<tr>
<td>Orleans County residents</td>
<td>596</td>
<td>5</td>
</tr>
<tr>
<td>Wyoming County residents</td>
<td>474</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>97</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>2,070</td>
<td>12</td>
</tr>
</tbody>
</table>

In spring/summer 2019, several sources of data were examined to determine the top community health needs for the GOW Counties as a combined region and individually. The health departments were instrumental in updating, analyzing and sharing data for the CHIW to examine. Several sources of data were used including but not limited to:

- Keys to Health. Genesee County, Orleans County and Wyoming County.
- Healthy People 2020 Topics and Objectives.
- County Health Rankings and Roadmaps. Genesee County, Orleans County and Wyoming County, 2019.
- New York State Community Health Indicator Reports – County Level (2008-2017). Genesee County, Orleans County and Wyoming County.
• 2019 Genesee, Orleans and Wyoming Community Health Needs Assessment Surveys. Tri-county, Genesee County, Orleans County, Wyoming County.

• 2019 Genesee, Orleans and Wyoming Community Conversations.

Several areas of concern were identified and listed during this time of data review, consistent with each hospital’s needs, as well as the prioritization criteria. In order to determine which areas of need and disparity among vulnerable populations were most in line with New York’s community health goals, the Prevention Agenda Dashboard goals were examined.

The following displays the main areas of concern for community health in Genesee County, Orleans County and Wyoming County. The CHIW identified areas where there was a demonstrated health need, especially among vulnerable populations. These are areas where Genesee County and/or Orleans County and/or Wyoming County;

• Fell short of the state goal for the Prevention Agenda
• Faces significant disparity in race, ethnicity, geography or socioeconomic status
• County’s position was identified as ‘Middle Risk’ or ‘Higher Risk’ by the state Prevention Agenda Dashboard
Areas of Significant Need for Genesee County, 
based on the NYS Prevention Agenda

<table>
<thead>
<tr>
<th>Improve Health Status and Reduce Disparities</th>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal(^{37})</th>
<th>Healthy People 2020 Target</th>
<th>Genesee County(^{37})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morbidity</td>
<td>Percentage of premature deaths (before age 65)</td>
<td>21.8</td>
<td>n/a</td>
<td>23.6</td>
</tr>
<tr>
<td></td>
<td>Premature deaths: Ratio of Hispanics to White non-Hispanics</td>
<td>1.86</td>
<td>n/a</td>
<td>2.12</td>
</tr>
<tr>
<td>Hospitalizations</td>
<td>Preventable hospitalizations: Ratio of Hispanics to White non-Hispanics</td>
<td>1.38</td>
<td>n/a</td>
<td>2.57</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Promote a Healthy and Safe Environment</th>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal(^{37})</th>
<th>Healthy People 2020 Target</th>
<th>Genesee County(^{37})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injury and Violence</td>
<td>Assault-related hospitalizations: Ratio of Black non-Hispanics to White non-Hispanics</td>
<td>6.69</td>
<td>n/a</td>
<td>19.74</td>
</tr>
<tr>
<td></td>
<td>Rate of occupational injuries treated in ED per 10,000 adolescents – Aged 15-19 years</td>
<td>33.0</td>
<td>n/a</td>
<td>54.8</td>
</tr>
<tr>
<td>Transportation</td>
<td>Percentage of employed civilian workers age 16 and over who use alternate mode of transportation to work or work from home</td>
<td>49.2</td>
<td>n/a</td>
<td>16.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prevent Chronic Diseases</th>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal(^{37})</th>
<th>Healthy People 2020 Target</th>
<th>Genesee County(^{37})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>Percentage of adults who are obese</td>
<td>23.2</td>
<td>30.5(^{38})</td>
<td>38.7</td>
</tr>
<tr>
<td></td>
<td>Percentage of children and adolescents who are obese</td>
<td>16.7</td>
<td>14.5(^{38})</td>
<td>20.0</td>
</tr>
<tr>
<td>Nicotine Use</td>
<td>Percentage of cigarette smoking among adults</td>
<td>12.3</td>
<td>12.0(^{39})</td>
<td>24.4</td>
</tr>
<tr>
<td>Cancer Screening</td>
<td>Percentage of adults who received a colorectal cancer screening based on the most recent guidelines - Aged 50-75 years</td>
<td>80.0</td>
<td>70.5(^{40})</td>
<td>64.7</td>
</tr>
<tr>
<td>Hospitalizations</td>
<td>Age-adjusted heart attack hospitalization rate per 10,000 population</td>
<td>14.0</td>
<td>n/a</td>
<td>19.2</td>
</tr>
<tr>
<td></td>
<td>Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6-17</td>
<td>3.06</td>
<td>n/a</td>
<td>3.46</td>
</tr>
<tr>
<td>Prevent HIV/STDs, Vaccine Preventable Diseases and Healthcare-Associated Infections</td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal&lt;sup&gt;37&lt;/sup&gt;</td>
<td>Healthy People 2020 Target</td>
<td>Genesee County&lt;sup&gt;37&lt;/sup&gt;</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Vaccinations</td>
<td>Percentage of children with 4:3:1:3:1:4 immunization series – Aged 19-35 months</td>
<td>80.0</td>
<td>80.0</td>
<td>58.6</td>
</tr>
<tr>
<td><strong>Promote Healthy Women, Infants, and Children</strong></td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal&lt;sup&gt;37&lt;/sup&gt;</td>
<td>Healthy People 2020 Target</td>
<td>Genesee County&lt;sup&gt;37&lt;/sup&gt;</td>
</tr>
<tr>
<td>Premature Births</td>
<td>Percentage of preterm births</td>
<td>10.2</td>
<td>9.4&lt;sup&gt;41&lt;/sup&gt;</td>
<td>10.5</td>
</tr>
<tr>
<td></td>
<td>Premature births: Ratio of Medicaid births to non-Medicaid births</td>
<td>1.00</td>
<td>n/a</td>
<td>2.03</td>
</tr>
<tr>
<td>Dental Hygiene</td>
<td>Percentage of third-grade children with evidence of untreated tooth decay</td>
<td>21.6</td>
<td>n/a</td>
<td>26.7</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>Percentage of live births that occur within 24 months of a previous pregnancy</td>
<td>17.0</td>
<td>n/a</td>
<td>24.1</td>
</tr>
<tr>
<td><strong>Promote Mental Health and Prevent Substance Abuse</strong></td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal&lt;sup&gt;37&lt;/sup&gt;</td>
<td>Healthy People 2020 Target</td>
<td>Genesee County&lt;sup&gt;37&lt;/sup&gt;</td>
</tr>
<tr>
<td>Well Being</td>
<td>Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month</td>
<td>10.1</td>
<td>n/a</td>
<td>16.6</td>
</tr>
<tr>
<td></td>
<td>Age-adjusted suicide death rate per 100,000 population</td>
<td>5.9</td>
<td>10.2&lt;sup&gt;42&lt;/sup&gt;</td>
<td>11.6</td>
</tr>
</tbody>
</table>
## Areas of Significant Need for Orleans County, based on the NYS Prevention Agenda

<table>
<thead>
<tr>
<th>Improve Health Status and Reduce Disparities</th>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal(^{43})</th>
<th>Healthy People 2020 Target</th>
<th>Orleans County(^{43})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morbidity</td>
<td>Percentage of premature deaths (before age 65)</td>
<td>21.8</td>
<td>n/a</td>
<td>25.4</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>Percentage of adults (aged 18-64) with health insurance</td>
<td>100.0</td>
<td>n/a</td>
<td>92.6</td>
</tr>
<tr>
<td>Promote a Healthy and Safe Environment</td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal(^ {43})</td>
<td>Healthy People 2020 Target</td>
<td>Orleans County(^ {43})</td>
</tr>
<tr>
<td>Transportation</td>
<td>Percentage of employed civilian workers age 16 and over who use alternate mode of transportation to work or work from home</td>
<td>49.2</td>
<td>n/a</td>
<td>17.0</td>
</tr>
<tr>
<td>Access to nutritious food</td>
<td>Percentage of population with low-income and low access to a supermarket or large grocery</td>
<td>2.24</td>
<td>n/a</td>
<td>5.73</td>
</tr>
<tr>
<td>Prevent Chronic Diseases</td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal(^ {43})</td>
<td>Healthy People 2020 Target</td>
<td>Orleans County(^ {43})</td>
</tr>
<tr>
<td>Obesity</td>
<td>Percentage of adults who are obese</td>
<td>23.2</td>
<td>30.5(^{38})</td>
<td>34.2</td>
</tr>
<tr>
<td>Obesity</td>
<td>Percentage of children and adolescents who are obese</td>
<td>16.7</td>
<td>14.5(^{38})</td>
<td>21.4</td>
</tr>
<tr>
<td>Nicotine Use</td>
<td>Percentage of cigarette smoking among adults</td>
<td>12.3</td>
<td>12.0(^{39})</td>
<td>28.6</td>
</tr>
<tr>
<td>Cancer Screening</td>
<td>Percentage of adults who received a colorectal cancer screening based on the most recent guidelines - Aged 50-75 years</td>
<td>80.0</td>
<td>70.5(^{40})</td>
<td>65.6</td>
</tr>
<tr>
<td>Hospitalizations</td>
<td>Age-adjusted heart attack hospitalization rate per 10,000 population</td>
<td>14.0</td>
<td>n/a</td>
<td>30.5</td>
</tr>
<tr>
<td>Hospitalizations</td>
<td>Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6-17</td>
<td>3.06</td>
<td>n/a</td>
<td>4.33</td>
</tr>
<tr>
<td>Prevent HIV/STDs, Vaccine Preventable Diseases and Healthcare-Associated Infections</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------</td>
<td>----------------</td>
<td>----------------</td>
<td></td>
</tr>
<tr>
<td><strong>Vaccinations</strong></td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal</td>
<td>Healthy People 2020 Target</td>
<td>Orleans County</td>
</tr>
<tr>
<td></td>
<td>Percentage of children with 4:3:1:3:1:4 immunization series – Aged 19-35 months</td>
<td>80.0</td>
<td>80.0&lt;sup&gt;44&lt;/sup&gt;</td>
<td>69.8</td>
</tr>
<tr>
<td></td>
<td>Percentage of adolescent females that received 3 or more doses of the HPV vaccine – Aged 13-17 years</td>
<td>50.0</td>
<td>n/a</td>
<td>37.1</td>
</tr>
<tr>
<td><strong>Promote Healthy Women, Infants, and Children</strong></td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal</td>
<td>Healthy People 2020 Target</td>
<td>Orleans County</td>
</tr>
<tr>
<td><strong>Premature Births</strong></td>
<td>Premature births: Ratio of Black non-Hispanics to White non-Hispanics</td>
<td>1.42</td>
<td>n/a</td>
<td>2.03</td>
</tr>
<tr>
<td><strong>Breastfeeding</strong></td>
<td>Exclusively breastfed: Ratio of Medicaid births to non-Medicaid births</td>
<td>0.66</td>
<td>n/a</td>
<td>0.65</td>
</tr>
<tr>
<td><strong>Well Child Visits</strong></td>
<td>Percentage of children who have had the recommended number of well child visits in government sponsored insurance programs</td>
<td>76.9</td>
<td>n/a</td>
<td>66.3</td>
</tr>
<tr>
<td></td>
<td>Percentage of children aged 0-15 months who have had the recommended number of well child visits in government sponsored insurance programs</td>
<td>91.3</td>
<td>n/a</td>
<td>84.8</td>
</tr>
<tr>
<td></td>
<td>Percentage of children 3-6 years who have had the recommended number of well child visits in government sponsored insurance programs</td>
<td>91.3</td>
<td>n/a</td>
<td>78.4</td>
</tr>
<tr>
<td></td>
<td>Percentage of children 12-21 years who have had the recommended number of well child visits in government sponsored insurance programs</td>
<td>67.1</td>
<td>n/a</td>
<td>58.3</td>
</tr>
<tr>
<td><strong>Health Insurance</strong></td>
<td>Percentage of children (aged under 19 years) with health insurance</td>
<td>100.0</td>
<td>n/a</td>
<td>96.5</td>
</tr>
<tr>
<td></td>
<td>Percentage of women (aged 18-64) with health insurance</td>
<td>100.0</td>
<td>n/a</td>
<td>93.8</td>
</tr>
<tr>
<td><strong>Pregnancy</strong></td>
<td>Percentage of unintended pregnancy among live births</td>
<td>23.8</td>
<td>n/a</td>
<td>28.8</td>
</tr>
<tr>
<td></td>
<td>Percentage of live births that occur within 24 months of a previous pregnancy</td>
<td>17.0</td>
<td>n/a</td>
<td>26.4</td>
</tr>
<tr>
<td>Promote Mental Health and Prevent Substance Abuse</td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal\textsuperscript{43}</td>
<td>Healthy People 2020 Target</td>
<td>Orleans County\textsuperscript{43}</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>-----------</td>
<td>---------------------------------</td>
<td>--------------------------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>Well Being</td>
<td>Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month</td>
<td>10.1</td>
<td>n/a</td>
<td>14.1</td>
</tr>
<tr>
<td>Substance Use</td>
<td>Age-adjusted percentage of adults binge drinking during the past month</td>
<td>18.4</td>
<td>24.2\textsuperscript{45}</td>
<td>19.2</td>
</tr>
</tbody>
</table>
### Areas of Significant Need for Wyoming County, based on the NYS Prevention Agenda

#### Improve Health Status and Reduce Disparities

<table>
<thead>
<tr>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal</th>
<th>Healthy People 2020 Target</th>
<th>Wyoming County</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Morbidity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of premature deaths (before age 65)</td>
<td>21.8</td>
<td>n/a</td>
<td>24.9</td>
</tr>
<tr>
<td>Premature deaths: Ratio of Hispanics to White non-Hispanics</td>
<td>1.87</td>
<td>n/a</td>
<td>31.0</td>
</tr>
<tr>
<td>Premature deaths: Ratio of Hispanics to White non-Hispanics</td>
<td>1.86</td>
<td>n/a</td>
<td>2.17</td>
</tr>
</tbody>
</table>

#### Promote a Healthy and Safe Environment

<table>
<thead>
<tr>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal</th>
<th>Healthy People 2020 Target</th>
<th>Wyoming County</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Injury and Violence</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault-related hospitalization: Ratio of Black non-Hispanics to White non-Hispanics</td>
<td>6.69</td>
<td>n/a</td>
<td>12.93</td>
</tr>
<tr>
<td>Rate of occupational injuries treated in ED per 10,000 adolescents – Aged 15-19 years</td>
<td>33.0</td>
<td>n/a</td>
<td>122.2</td>
</tr>
<tr>
<td><strong>Transportation</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of employed civilian workers age 16 and over who use alternate mode of transportation to work or work from home</td>
<td>49.2</td>
<td>n/a</td>
<td>16.2</td>
</tr>
<tr>
<td><strong>Access to nutritious food</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of population with low-income and low access to a supermarket or large grocery</td>
<td>2.24</td>
<td>n/a</td>
<td>6.24</td>
</tr>
</tbody>
</table>

#### Prevent Chronic Diseases

<table>
<thead>
<tr>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal</th>
<th>Healthy People 2020 Target</th>
<th>Wyoming County</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Obesity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of adults who are obese</td>
<td>23.2</td>
<td>30.5&lt;sup&gt;38&lt;/sup&gt;</td>
<td>38.7</td>
</tr>
<tr>
<td><strong>Nicotine Use</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of cigarette smoking among adults</td>
<td>12.3</td>
<td>12.0&lt;sup&gt;39&lt;/sup&gt;</td>
<td>25.0</td>
</tr>
<tr>
<td><strong>Cancer Screening</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of adults who received a colorectal cancer screening based on the most recent guidelines - Aged 50-75 years</td>
<td>80.0</td>
<td>70.5&lt;sup&gt;40&lt;/sup&gt;</td>
<td>64.6</td>
</tr>
<tr>
<td><strong>Hospitalizations</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age-adjusted heart attack hospitalization rate per 10,000 population</td>
<td>14.0</td>
<td>n/a</td>
<td>15.5</td>
</tr>
<tr>
<td>Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6-17</td>
<td>3.06</td>
<td>n/a</td>
<td>7.12</td>
</tr>
<tr>
<td>Promote Healthy Women, Infants, and Children</td>
<td>Indicator</td>
<td>NYS Prevention Agenda Goal$^{46}$</td>
<td>Healthy People 2020 Target</td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>-----------------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>Percentage of children (aged under 19 years) with health insurance</td>
<td>100.0</td>
<td>n/a</td>
</tr>
<tr>
<td>Dental Hygiene</td>
<td>Tooth decay: Ratio of low-income children to non-low-income children</td>
<td>2.21</td>
<td>n/a</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Promote Mental Health and Prevent Substance Abuse</th>
<th>Indicator</th>
<th>NYS Prevention Agenda Goal$^{46}$</th>
<th>Healthy People 2020 Target</th>
<th>Wyoming County$^{46}$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well Being</td>
<td>Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month</td>
<td>10.1</td>
<td>n/a</td>
<td>17.8</td>
</tr>
<tr>
<td></td>
<td>Age-adjusted suicide rate per 100,000 population</td>
<td>5.9</td>
<td>10.2$^{42}$</td>
<td>13.9</td>
</tr>
</tbody>
</table>
‘Areas of Significant Need’ References


In Summary

The 2019 needs assessment is based on several sources of local, state and national data including the American Community Survey, Healthy People 2020, Census, Behavioral Risk Factor Surveillance Survey, NYS Prevention Agenda dashboards, SPARCS data, Vital Records, as well as the most recent CHNA Survey and Community Conversations. Several areas of concern were noted and are organized in the chart below, according to the state Prevention Agenda Priority Areas. Highlighted areas are of particular concern for the GOW Counties.

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>Focus Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevent Chronic Diseases</td>
<td>1. Healthy Eating and Food Security (access to food, skills/knowledge, food security)</td>
</tr>
<tr>
<td></td>
<td>2. Physical Activity (active transportation, environments, increased access)</td>
</tr>
<tr>
<td></td>
<td>3. Tobacco Prevention (cessation, secondhand smoke).</td>
</tr>
<tr>
<td></td>
<td>4. Chronic Disease Preventative Care and Management (cancer screening, early detection of CVD/Diabetes, evidence-based care, self-management)</td>
</tr>
<tr>
<td>Promote a Healthy and Safe Environment</td>
<td>1. Injuries, Violence and Occupational Health (falls, violence prevention, traffic injuries)</td>
</tr>
<tr>
<td></td>
<td>2. Outdoor Air Quality (outdoor air pollutants)</td>
</tr>
<tr>
<td></td>
<td>3. Built and Indoor Environments (improve design and maintenance, healthy home/school)</td>
</tr>
<tr>
<td></td>
<td>4. Water Quality ( protect water sources, protect vulnerable waterbodies)</td>
</tr>
<tr>
<td></td>
<td>5. Food and Consumer Products (reduce exposure of chemical, food safety)</td>
</tr>
<tr>
<td>Promote Healthy Women, Infants, and Children</td>
<td>1. Maternal and Women’s Health (use of preventative services, maternal mortality)</td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>2. Perinatal and Infant Health (infant mortality, breastfeeding)</td>
</tr>
<tr>
<td></td>
<td>3. Child and Adolescent Health (social-emotional development, special needs, dental)</td>
</tr>
<tr>
<td></td>
<td>4. Cross Cutting Healthy Women, Infants, and Children (health equity in health outcomes)</td>
</tr>
<tr>
<td>Promote Well-being and Prevent Mental and Substance Use Disorders</td>
<td>1. Promote Well-Being (build well-being and resilience, supportive environments)</td>
</tr>
<tr>
<td></td>
<td>2. Prevent Mental and Substance Use Disorders (drinking, opioids, ACES, depression, suicide, mortality gap for mental illness)</td>
</tr>
<tr>
<td>Prevent Communicable Diseases</td>
<td>1. Vaccine-Preventable Illness (vaccine rates, vaccine disparities)</td>
</tr>
<tr>
<td></td>
<td>2. HIV (decrease morbidity, increase viral suppression)</td>
</tr>
<tr>
<td></td>
<td>3. Sexually Transmitted Infections (STIs) (rate of growth)</td>
</tr>
<tr>
<td></td>
<td>4. Hepatitis C Virus (treatment, prevent among drug injectors)</td>
</tr>
<tr>
<td></td>
<td>5. Antibiotic Resistance and Healthcare Associated Infections (infection rate, antibiotic use)</td>
</tr>
</tbody>
</table>

The needs were then prioritized based on established criteria that included: Need among vulnerable populations; ability to have a measurable impact; ability to intervene at the prevention level; community capacity and willingness to act; and importance of the problem to community members. Based on these criteria, as well as several meetings of group discussion among the CHIW, and after meeting with several community groups there were three focus areas identified.
Community Conversations conducted with:

- Staff and clients of Independent Living of the Genesee Region
- High school students from Leroy Central School District (2 classes)
- Family, Loves Ones and Allies Work Group associated with the GOW Opioid Task Force
- Human Services Council representing a variety of human service based agencies serving Orleans County
- Albion Rotary
- Medina Area Association of Churches
- Orleans County Office for the Aging Long Term Care Council
- Orleans County Office for the Aging Advisory Committee
- Wyoming County Office for the Aging Meal Site at Pine Lounge
- Clients of Varysburg Clothes Closest & Food Pantry
- Volunteers of the Sheldon Fire Department
GOW 2019-2021 Community Health Improvement Plan

Prevent Chronic Disease Action Plan:

New York State Prevention Agenda
Focus Area 3: Tobacco Prevention
Goal 3.2: Promote Tobacco Use Cessation

Objective: GOW Hospitals and Local Health Departments will utilize Refer-to-Quit or Opt-to-Quit programs in an aim to increase the percentage of tobacco/nicotine users who are referred to the New York State State’s Smokers Quitline by 4% across the region by December 31, 2021.

**Intervention 1:** Beginning in February 2020, United Memorial Medical Center to utilize the Opt-to-Quit program to refer patients who self-report tobacco/nicotine use to the New York State Smoker’s Quitline.

**Intervention 1.2:** Orleans Community Health to maintain utilizing the Opt-to-Quit program at the Albion Healthcare Center for patients who self-report tobacco/nicotine use to the New York State Smoker’s Quitline.

**Intervention 1.3:** Orleans Community Health to implement the Opt-to-Quit program at Medina Memorial Hospital for patients who self-report tobacco/nicotine use to the New York State Smoker’s Quitline by the end of 2020.

**Intervention 1.4:** Wyoming County Community Hospital to implement the Opt-to-Quit program for patients who self-report tobacco/nicotine use to the New York State Smoker’s Quitline by the end of 2020.

**Intervention 1.5:** Beginning in 2020, hospitals in the GOW region will distribute a minimum of 200 nicotine cessation information packets annually to hospital departments and outpatient providers for patients who self-report tobacco/nicotine use.
**Intervention 1.6:** The GOW Health Departments to implement/maintain a ‘Tobacco Dependence Treatment/Smoking Cessation Program: Refer to Quit Policy.’ Patient’s nicotine use is screened and upon consent a referral is e-mailed/faxed to the New York State Smoker’s Quitline. Referrals to increase 1% annually through 2021.

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### New York State Prevention Agenda

**Focus Area 4: Chronic Disease Preventative Care and Management**

**Goal 4.1: Increase Cancer Screening Rates**

Objective: Increase the percentage of women, with an annual household income less than $25,000 receiving breast cancer screening based on most recent guidelines, by 5% by December 31, 2021.

**Intervention 1:** From 2020-2021, the Genesee, Orleans, Wyoming and Niagara (GOWN) Cancer Services Program (CSP) operated by United Memorial Medical Center will conduct three group and/or one-on-one educational sessions per quarter (12 annually). This initiative will focus on communities across the GOW region where zip codes reflect a high number of persons that are un/underinsured and/or have low screening rates.

**Intervention 1.2:** The GOWN CSP will collaborate with two unique health care offices/providers to offer patient navigation services to improve patient screening compliance by 8% by December 31, 2021.

**Intervention 1.3:** Each year United Memorial Medical Center, Orleans Community Health and Wyoming County Community Health System will offer non-traditional hours of operation for mammography screening.

**Intervention 1.4:** A minimum of three mobile mammography events to be held in the GOW region annually; to include the Tonawanda Reservation.
New York State Prevention Agenda
Focus Area 4: Chronic Disease Preventative Care and Management
Goal 4.4: In the community setting, improve self-management skills for individuals with chronic diseases, including asthma, arthritis, cardiovascular disease, diabetes, prediabetes and obesity

Objective: The GOW Hospitals and Local Health Departments will collaborate to increase participation in Stanford University’s Diabetes Self-Management Program (DSMP), Chronic Disease Self-Management Program (CDSMP), and the CDC’s Diabetes Prevention Program (DPP) by 5% by December 31, 2021.

Intervention 1: Each respective Hospital and Local Health Department within the GOW region will initiate conversations with hospital department and practice leaders to develop a referral system for DSMP, CDSMP and DPP.

Intervention 1.2: In 2019, at least one DPP and CSMP or Stanford University’s Chronic Disease Self-Management program (CDSMP) to be offered in the GOW region.

Intervention 1.3: In 2020, United Memorial Medical Center to develop contracts and billing mechanism for Medicare Part B, Medicaid, and other insurance providers to increase referral and participation of insured participants in the DPP.

Intervention 1.4: In 2020, United Memorial Medical Center to build relationships with Tonawanda Reservation leaders and health clinic staff about training (2) residents and/or professional DPP Lifestyle Coaches to service their community.

Intervention 1.5: In 2021, United Memorial Medical to work with Tonawanda Reservation partners to examine the possibility of implementing the DPP specific to Native American populations.

Intervention 1.6: In 2021, a minimum of one DSMP or CDSMP class will be held each month within the GOW region.

Intervention 1.7: In 2021, United Memorial Medical Center will create a self-pay fee schedule with approximate discounts for participants without insurance coverage.

12/31/2019
Promote Well-Being and Prevent Mental and Substance Use Disorders Action Plan:

New York State Prevention Agenda

Focus Area 2: Mental Health and Substance Use Disorders Prevention

Goal 2.2: Prevent Opioid and Other Substance Misuse and Deaths

Objective: Decrease the rate of opioid overdose deaths in the GOW Region by 7% by December 31, 2021.

**Intervention 1:** The GOW Opioid Task Force - Naloxone Work Group (GOW Health Departments are members) to provide Narcan trainings to 150 persons annually.

**Intervention 1.2:** GOW region to maintain 13 permanent drug drop box locations.

**Intervention 1.3:** GOW region to participate in two ‘DEA National Prescription Drug Take Back Days’ annually.

The following interventions are driven by a three year grant provided by the Greater Rochester Health Foundation to the Genesee/Orleans Council on Alcohol and Substance Abuse (GCASA) to support the GOW Opioid Task Force. The grant period is 05/01/2018 – 04/30/2021. The GOW Opioid Task force has over 350 members including all local Health Departments and Hospitals.

**Intervention 1.4:** GCASA to continue to deploy Peer Support Providers/Recovery Coaches when contacted by Emergency Departments at Rochester Regional Health United Memorial Medical Center, Medina Hospital, and Wyoming County Community Health System for 90% of patients who arrive at the hospital due to an opioid-related health complication(s) and consent to have a peer called. Peer services are billable to health insurance companies which ensures sustainability of the intervention.

**Intervention 1.5:** The GOW Opioid Task Force will address the identified knowledge gap of what a peer is and how a peer can provide help by working with a marketing firm to produce a Peer Awareness/Education Campaign targeted for the area emergency departments and the community by April 20, 2021.
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Appendices
Appendix A:

Community Health Assessment – Survey Template – English

12/31/2019
Genesee-Orleans-Wyoming Community Health Assessment

The Genesee, Orleans and Wyoming County Health Departments and Hospitals are currently working with community partners to gather information from residents to help with public health planning for the next three to four (3-4) years.

We want to know what you think! Please take a few minutes to fill out this survey, your responses will help us identify services in our communities that are working and ones that need to be improved. We can then use this information to review existing plans and to fill gaps and address the needs going forward.

Please be assured your responses are completely anonymous.

This survey will take about 15 minutes to complete.

Thank you for your time and help with this effort.

Please only take this survey ONCE (1 time) either online or on paper.

Starred (*) questions are required.

* 1. What county do you live in?
   - Genesee
   - Orleans
   - Wyoming
   - Other (please specify)

* 2. What zip code do you live in?
* 3. What is your age?
- Under 18
- 18-29
- 30-39
- 40-49
- 50-59
- 60-69
- 70 and over

* 4. What is your current gender identity?
- Female
- Male
- Female to male transgender
- Male to female transgender
- Prefer not to answer
- Other (please specify)

* 5. Which one or more of the following would you say is your race? Select all that apply
- American Indian
- White / Caucasian
- Hispanic or Latino
- Asian / Pacific Islander
- Black / African American
- Prefer not to answer
- Other (please specify)

* 6. What is the highest grade or year of school you completed?
- Never attended school or only attended Kindergarten
- Associate's Degree
- Grades 1 through 8 (Elementary)
- Bachelor's Degree
- Grades 9 through 11 (Some High School)
- Master's Degree
- Grade 12 or GED (High School/ GED Graduate)
- More than a Master's Degree
- Some college or technical school
* 7. What is your annual household income from all sources

- $10,000-$15,000
- $15,000-$20,000
- $20,000-$25,000
- $25,000-$35,000
- $35,000-$50,000
- $50,000-$75,000
- $75,000 +
- Prefer not to answer

* 8. What is your current employment status?

- Employed for wages
- A Homemaker
- Self-employed
- A Student
- Other (please specify)
- Out of work for less than 1 year
- Out of work for 1 year or more
- Retired
- Unable to work

* 9. In regards to high-speed internet, please check the following statements that apply to your household:

- We do not have high-speed internet
- We have dial-up access only
- We only have a regular telephone line
- We have cell phone(s) with spotty coverage
- I only have a smartphone which provides high-speed internet, coverage is spotty
- I have a MiFi service
- We have a computer/tablet/iPad that we have high-speed access to the internet (Spectrum, Verizon, etc.)
- We have smart phones with strong internet coverage

* 10. Do you have any kind of health care coverage or health insurance?

- Yes
- No
- Used to, but don't have any now
- Don't know

Comment
* 11. How do you pay for your Health Care? Check all that apply

D I have health insurance through my employer
O I have Medicare
D I use Medicaid
O I am covered by the VA
D Other (please specify)

12. Where do you get most of your health information? (Select up to three (3) choices)

D Doctor or Medical Provider
D Library
D Newspaper or Magazine
D School Nurse SchoolHealth Educator Teacher
D Computer or Internet
D Social Media (Facebook, Twitter, Instagram, etc.)
D Television (TV) or Radio
D Other (please specify)

13. How often do you see your primary care provider (doctor)?

O Several times a year
O For a yearly check-up
O Only when I am sick
O I didn't go see my primary care provider
O I don't have a primary care provider

Comment:
14. In the past year, was there any time that you needed medical care but could not, or did not, get it? If no, skip to #16.

Yes
No
If yes, how many times?

15. What were the main reasons you did not get the medical care you needed? Please choose all that apply.

Cost - Without insurance, it was too expensive
Cost - Even with insurance, it was too expensive
Transportation - it was too hard to get there
Hours - They weren't open when I could get there
I cannot get access to a doctor / doctor shortage
I couldn't get time off from work
Some other reason, please explain

16. Have you used video conferencing / telemedicine or webcam to interact with a healthcare provider?

Yes
No

17. Have you used video conferencing / telemedicine or webcam to interact with a behavioral health / mental health provider?

Yes
No
18. If you have NOT used video conferencing / telemedicine to interact with a provider, please select the answer(s) that most closely describe the reason. Check all that apply.

- I do not know what video conferencing / telemedicine is, as it relates with a provider
- It is too costly/not covered by my health insurance
- I don’t know where to find a provider via video conferencing / telemedicine
- My provider does not use video conferencing / telemedicine
- Other (please specify)

19. Which of the following would motivate you to use video conferencing / telemedicine for an interaction with a provider? Please select all that apply.

- Would prefer to use telemedicine instead of an office visit
- I prefer to speak with a provider in-person
- I have concerns about privacy online
- I do not have access to high speed internet at my home
- I would like to avoid travel time
- My provider has limited availability
- Needed a prescription and/or refills due to schedule conflicts or travel time involved
- Other (please specify)

20. Has a doctor or a nurse ever told you any of the following? Please select all that apply.

- You have blood sugar problems, prediabetes, or diabetes?
- You have high blood pressure, or hypertension?
- You have high cholesterol?
- You have asthma, COPD, or other breathing issues?
- You have extreme overweight or obesity?
- You have heart disease?
- You should get a cancer screening (e.g. breast, colorectal, prostate, cervical)
- None of the above

- Other (please specify)
21. When you think about your own health or the health of your community, which of the following issues are you most concerned about? Please select three (3).

<table>
<thead>
<tr>
<th>Issue</th>
<th>1.</th>
<th>2.</th>
<th>3.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to affordable health care</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to healthy food</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol and/or substance use or addiction</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma/COPD</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cancer</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child abuse/neglect</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental Health</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prediabetes</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family planning (pregnancy prevention)</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Farm-related injuries</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Firearm-related injuries</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food/water safety and quality</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart-related issues (high blood pressure, heart disease, or stroke)</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homicide</td>
<td>D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (please specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

22. Would you say that your physical health is now excellent, very good, good, fair, or poor?

- Excellent
- Very good
- Good
- Fair
- Poor

23. Would you say your mental or emotional health - is excellent, very good, good, fair or poor?

- Excellent
- Very good
- Good
- Fair
- Poor

12/31/2019
24. Do you use any of the following nicotine products? Please select all that apply:

D I do not smoke or use nicotine products

D Cigarettes (e.g. Marlboro, Camel, Newport, Pall Mall, Winston, generic brands, etc.)

D Electronic cigarettes (e-cigarette, JUUL, etc.)

D Vape

D Smokeless tobacco (e.g. chewing tobacco, snuff, snus, etc.)

D Other (please specify)

25. How often, if ever, do you now smoke or use any nicotine products?

O Never

O Most days

O Only occasionally

O All days

O Some days

O Other (please specify)

26. Do you use e-cigarette now to quit smoking?

O Yes

O No

O I don’t use any type of nicotine product

O Comment:
27. How often do you participate in physical activity or exercise? (e.g. walking, tennis, jogging/running, basketball, football, soccer, swimming, gym equipment, etc.)

O 5-7 times per week for at least 30 minutes each time
O 2-4 times per week for at least 30 minutes each time
O 0-1 times per week for at least 30 minutes each time
O Comment:

28. Which, if any, of the following, would help you become more active? Check all that apply

O Transportation to park
O Discounts for exercise programs or gym memberships
O Groups to participate
O Improved health
O Workshops for classes about exercise
O A friend to exercise with
O Safe place to walk or exercise
O Activities you can do with your children
O Individual instruction/personal trainer
O Information about local school exercise opportunities (e.g. walking trails, access to gyms, etc.)
O Information about exercise programs or gym memberships
O None of the above
O Other (please specify)

29. What keeps you from eating more fruits and vegetables every day? Select all that apply.

O Time it takes to prepare
O My family does not like to eat healthy
O Cost
O I am not sure how to cook/prepare fresh fruits and vegetables
O The stores near me don't sell fresh fruits and vegetables
O I DO eat fresh fruits and vegetables
O I don't like to eat healthy food
O I DO NOT know what fruits and vegetables are
O I prefer to eat other foods, e.g. I like fruits I vegetables but often I am not in the mood and prefer to choose 'junk food,'
O Other (please specify)
30. During the past 7 days, how many times did you drink a bottle or glass of water? Count tap, bottled, and unflavored sparkling water, no sweeteners added.

- I did not drink water during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- Other (please specify)

31. What is your drink of choice on most days? Check all that apply.

- Water
- Milk
- Pop or Soda
- Coffee (hot or iced)
- Tea (hot or iced)
- 100% Juice
- Juice Drinks
- Energy Drinks (Monster, Amp, Red Bull, etc.)
- Sports Drinks (Gatorade, Powerade, etc.)
- Kool-Aid, Crystal Light, Other drink mixes
- Beer, Wine, Liquor
- Other (please specify)

32. Most days, I would consider my mood to be:

- Happy
- Sad
- Angry
- Depressed (difficult to do daily activities because of low mood)
- Other (please specify)
33. Have you needed treatment for a mental/behavioral health condition in the past year? (e.g. depression, anxiety, bipolar disorder, psychosis, etc.) - If No, please skip to question 35.

- Yes
- No

34. If yes, what were the main reasons you did not get help for mental or behavioral health problems?
Please choose all that apply:

- I received treatment in a timely manner
- Cost - Without insurance, it was too expensive
- Cost- Even with insurance, it was too expensive
- Transportation - It was too hard to get there
- Hours- They weren't open when I could get there
- I cannot get access to a provider - mental/behavioral healthcare provider shortage
- I couldn't get time off from work
- Some other reason (please explain)

35. If you have alcoholic drinks, how often do you have 4 or more drinks in a row

- Never - I don't drink or never drink that much
- Monthly
- Weekly
- Other (please specify)

36. Do you use drugs recreationally, with the intent of getting high? Please be honest, we guarantee your anonymity.

- Yes
- No
- Other (please specify)
37. If you do use drugs, for purposes other than as intended, what do you use (Please be honest, we guarantee your anonymity)? Check all that apply.

- [ ] I never use drugs recreationally
- [ ] Anxiety medication
- [ ] Over-the-counter medications (e.g. Robitussin, Coricidin, NyQuil, Sudafed, etc.)
- [ ] Hallucinogens (e.g. Mushrooms, LSD, PCP, etc.)
- [ ] Marijuana
- [ ] Other (please specify)

---

38. In the past month, have you used Narcan (to reverse opioid overdose) on your family member, loved one, or friends?

- [ ] Yes
- [ ] No
- [ ] If yes, how many times?

---

Thank you for taking the time to provide us with some insight on how you see your health and the health of your community. We will be reviewing all responses and working on updating programs, seeking ways to fill gaps and enhance the services that each of our county Health Departments and Hospitals provide.

For more information about Health Department services contact:

Genesee County Health Department at 344-2580 ext. 5555 or visit their website at www.co.genesee.ny.us/departments/health/index.html. Visit Facebook at Genesee & Orleans County Health Departments and Twitter: @GoHealthNY.

Orleans County Health Department at 589-3278 or check out our website at www.orleansny.com/publichealth. Visit Facebook at Genesee & Orleans County Health Departments and Twitter: @GoHealthNY.

Wyoming County Health Department at 786-8890 or visit their website at www.wyomingco.net/health/main.html. Visit Facebook at Wyoming County

12/31/2019
Appendix B:

Community Health Assessment – Survey Template – Spanish
Los Departamentos de salud y Hospitales de los Condados de Genesee, Orleans y Wyoming están actualmente colaborando con los socios comunitarios para reunir información de los residentes a fin de planificar y ayudar con la salud pública para los próximos tres a cuatro (3-4) años.

¡Queremos saber lo que piensas! Por favor, toma unos minutos para completar esta encuesta, su respuesta nos ayudará a identificar los servicios en nuestras comunidades que trabajan y los que necesitan ser mejorados. Nosotros podemos utilizar esta información para revisar los planes existentes y para llenar los vacíos, también colaborar en necesidades en el futuro para poder movernos hacia adelante.

Tenga por seguro de que sus respuestas son completamente anónimas.

Esta encuesta tardará unos 15 minutos en completarse.

Gracias por su tiempo y ayuda con este esfuerzo.

Por favor, solo tome esta encuesta una vez (1vez) ya sea en línea de internet o en papel.

Se requieren que conteste las preguntas con estrella (*).

* 1. En qué condado Vive?
   - Genesee
   - Orleans
   - Wyoming
   - Otros (especifique)

* 2. Cual es su código postal?

* 3. Cántos años tienes?
   - Menores de 18 años
   - 018-29
   - 30-39
   - 040-49
   - 50-59
   - 60-69

Gracias por su tiempo y ayuda con este esfuerzo.

Por favor, solo tome esta encuesta una vez (1vez) ya sea en línea de internet o en papel.

Se requieren que conteste las preguntas con estrella (*).
* 4. ¿Cuál es su identidad actual de género?

- Mujer
- Hombre
- Transgenero de femenina a masculina
- Transgenero de masculine a Femenino
- Prefiero no contestar
- Otros (especifique)

* 5. ¿Cuál de las siguientes dirfa que es su raza? Seleccione todos los que apliquen

- Indio americano
- Hispanos o latinos
- Negros/afroamericanos
- Blanco/caucásico
- Asiáticos/Isleños del Pacífico
- Prefiero no contestar
- Otros (especifique)

* 6. ¿Cuál es el grado más alto o el año de escuela que completó?

- Nunca asistió a la escuela o solo asistió a kindergarten
- Grados 1 a 8 (elemental)
- Grados 9 a 11 (escuelas secundarias)
- Grado 12 o GED (graduado de escuela superior/bachillerato o GED)
- Algun colegio o escuela técnica
- Grado de asociado
* Licenciatura
* Maestría Universitario
* Más de una maestría

7. ¿Cuál es su ingreso familiar anual *(todas las fuentes)*

- $10,000 - $15,000
- $15,000 - $20,000
- $20,000 - $25,000
- $25,000 - $35,000
- $35,000 - $50,000
- $50,000 - $75,000
- $75,000+
* Prefiero no contestar

8. ¿Cuál es su estatus actual de empleo?

- Empleado con salaries
- Ama de Casa
- Trabajo por cuenta propia
- Estudiante
- Desempleado durante 1 año o menos
- Desempleado durante 1 año o más
- Retirado
- No puede trabajar
- Otros (especifique)

9. En cuanto a Internet de alta velocidad, por favor revise las siguientes declaraciones que se aplican a su hogar:
0No disponemos de Internet de alta velocidad
0Sólo tenemos línea telefónica
0Sólo disponemos de un teléfono con línea fija normal
0Tenemos teléfono(s) o celular con cobertura irregular
   ○ Solo tengo un teléfono inteligente que proporcione Internet de alta velocidad, la cobertura es irregular
0Tengo un servicio de WiFi
0Tenemos una computadora/tableta/iPad que tiene alta velocidad
0Tenemos acceso a Internet (Spectrum, Verizon, etc.)
0Tenemos teléfonos inteligentes con una fuerte cobertura de Internet

* 10. **Tiene usted algún tipo de cobertura médica o seguro de salud?**
   ○ Sí
   ○ No
   ○ Sólo tener, pero no tiene ninguna ahara
   ○ No
   Comentarios

* 11. **Cómo paga usted por sus atenciones médicas? Marque todo lo que se aplica**
   ○ Tengo seguro médico a través de mi empleador
   ○ Tengo Medicare
   ○ Tengo Medicaid
   ○ Estoy cubierto por la Asistencia de Veteranos
   ○ Compre un seguro de salud a través de NYS of Health/Intercambio de Marketplace
Utilizo servicios o seguros de salud tribales
Pago en efectivo
Otros (especifique)

12. ID6nde obtiene la mayor parte de su informacion de salud? (Seleccione hasta tres (3) opciones)
- Medico o proveedor medico
- Biblioteca
- Periodico o revista
- Enfermera escolar/Educadora de salud escolar/Maestra
- Computadora o Internet
- Redes sociales (Facebook, Twitter, Instagram, etc.)
- Televisión (TV) o radio
- Amigos y familia
- Campania de seguros de salud
- Servicios socios de salud
- Head Start
- OWIC (programa de nutrición para niños y mujeres embarazadas/lactantes)
- Lugar del trabajo
- Otros (especifique)
13. (Con que frecuencia ve a su proveedor de atención primaria (medico)?
O Varias veces al año
O Para un chequeo anual
O Solo cuando estoy enfermo
O No veo a mi proveedor de atención primaria
O No tengo un proveedor de atención primaria

Comentarios:

14. En el último año, ¿había alguna vez que necesitabas atención médica pero no podías, o no pudiste conseguirlo? Si contestaste no, pase a la pregunta 16.
O Si
O No

Si contestaste sí, ¿cántas veces?

15. ¿Cuáles fueron las principales razones por las que no ha tenido la atención médica que necesitaba? Por favor, elija todo lo que Aplicar.
O Costo - sin seguro, era demasiado caro
O Costo - incluso con seguro, era demasiado caro
O Transporte - era demasiado difícil llegar
O Horas - no estaban abiertas cuando pude llegar
O No puedo tener acceso a un médico/ escasez de médicos
O No pude conseguir tiempo libre en el trabajo
O No tenía a nadie que cuidara a mis hijos
No pude conseguir una cita par mucho tiempo
El personal medico no hablaba mi idioma
No pude conseguir un referido para vera un especialista
No sabia d6nde conseguir el cuidado que necesitaba
Decidino ir porque no me gusta ira los medicos
Alguna otra raz6n, par favor explique.

16. l,Ha utilizado usted la videoconferencia/telemedicina o camara web para interactuar con un proveedor de atenci6n medica?
0Si
0No

17. l,Ha utilizado usted videoconferencias/telemedicina o camara web para interactuar con un proveedor de salud mental o comportamiento?
0Si
0No

18. Si no ha utilizado la videoconferencia/telemedicina para interactuar con un proveedor, por favor seleccione la respuesta (s) que describen mas detalladamente la raz6n. Marque todas las que apliquen
0 Nose que es la videoconferencia/telemedicina, ya que se relaciona con un proveedor
0 Es demasiado costoso/no esta cubierto parmi seguro de salud
0 Nose d6nde encontrar un proveedor a traves de videoconferencia/ telemedicina
0 Mi proveedor no utiliza videoconferencias/telemedicina
0 Prefiero hablar con un proveedor en persona
0 Tengo inquietudes sabre la privacidad en linea
0 No tengo acceso a Internet de alta velocidad en mi casa
19. ¿Cuál de los siguientes le motivaría a utilizar la videoconferencia/telemedicina para interactuar con un proveedor? Por favor seleccione todo lo que aplique:

- Preferiría usar la telemedicina en lugar de una visita de oficina/ya tienen un historial de cuidado con el proveedor
- No hay citas disponibles cuando las necesito/incapacidad para llegar a la Oficina del proveedor debido a conflictos de horario o tiempo que se toma el viaje
- Problemas de transporte/distancia
- Problemas relacionados con mi estado de salud/mental/condiciones de comportamiento/oportunidad breve/hacer preguntas
- Necesitaba una receta o recargas
- Otros (especifique)

20. ¿Algún médico o enfermera le ha dicho lo siguientes? Por favor seleccione todo lo que aplique

- Ustede tiene problemas de azúcar en la sangre, prediabetes o diabetes?
- Tiene presión arterial alta u hipertensión?
- Tiene colesterol alto?
- Tiene asma, COPD u otros problemas respiratorios?
- Tiene sobrepeso u obesidad extrema?
- Tiene una enfermedad cardíaca?
- Usted debe recibir una detección de cáncer (p. ej., senos, colorrectal, próstata, cervical)
- Ninguno de los anteriores
- Otros (especifique)
21. **cual de las siguientes cuestiones**

le preocupa más. Por favor, seleccione tres (3).

- Acceso a servicios de salud asequibles
- Acceso a alimentos saludables
- Consumo de alcohol, sustancias o adicción
- Asma, COPD
- Cancer
- Maltrato/negligencia infantil
- Salud dental
- Prediabetes
- Diabetes
- Violencia doméstica
- Planificación familiar (prevención del embarazo)
- Lesiones relacionadas con trabajo de granja
- Lesiones relacionadas con el arma de fuego
- Seguridad y calidad de los alimentos y agua
- Problemas relacionados con el corazón (presión arterial alta, cardiopatía o derrame cerebral)
- Homicidio
- Muerte infantil
- Enfermedades infecciosas (hepatitis, tuberculosis (TB))
- Inmunización y/o prevención de enfermedades infecciosas (como gripe)
- Prevención de lesiones (caídas, seguridad de los vehículos de motor, etc.)
- Salud materna (cuidado de las madres durante y después del embarazo)
- Nutrición/alimentación saludable
- Sobrepeso/obesidad: control del peso
Actividad física: fitness y ejercicio
Seguridad en el vecindario
Enfermedades de transmisión sexual
Manejo de estres
Prevención del suicidio
Embrazo en adolescente
0VIH/SIDA
Tabaco/nicotina, dejar de fumar
Lesiones relacionadas con transportación
Otros (especifique)

22. ¿Dirfas usted que su salud física es ahora excelente, muy buena, buena, justa o pobre?
- Excelente
- Muy buena
- Buena
- Justa
- Pobre

23. ¿Dirfa usted que su salud mental o emocional es excelente, muy buena, buena, justa o pobre?
- Excelente
- Muy buena
- Buena
- Justa
- Pobre
24. ¿Utiliza usted alguno de los siguientes productos de nicotina? Por favor seleccione todo lo que aplique:

- [ ] No fumo ni uso productos de nicotina
- [ ] Cigarrillos (p. ej., Marlboro, Camel, Newport, Pall Mall, Winston, marcas genericas, etc.)
- [ ] Cigarrillos electrónicos (e-cigarrillo, JUUL, etc.)
- [ ] Vape
- [ ] Tabaco sin humo (p. ej., tabaco de mascar, snuff, snus, etc.)
- [ ] Bidis/kreteks
- [ ] Cigarrillos, cigarillos, cigarros pequeños o blunts
- [ ] Pipas
- [ ] Hooka/pipa de agua
- [ ] Otros (especifique)

25. Con qué frecuencia, si alguna vez, usted fuma o usa productos de nicotina?

- [ ] Nunca
- [ ] Solo ocasionalmente
- [ ] Algunos días
- [ ] La mayor parte de los días
- [ ] Todos los días
- [ ] Otros (especifique)
26. ¿Utiliza usted el e-cigarrillo para dejar de fumar?

O Sí
O No
O No utilice ningún tipo de producto de nicotina
O Comentario:

27. ¿Con qué frecuencia participa en actividades físicas o ejercicio?
(por ejemplo, caminar, tenis, correr, baloncesto, fútbol, natación, equipo de gimnasia, etc.)

O 5-7 veces por semana por lo menos 30 minutos cada vez
O 2-4 veces por semana por lo menos 30 minutos cada vez
O 0-1 veces por semana por lo menos 30 minutos cada vez
O No hago ejercicio regularmente, pero intento agregar actividades físicas cuando puedo.
O No hago actividad física o ejercicio más allá de las actividades diarias regulares
O Comentario:

____________________________________________________________________
28. ¿Cual, en su caso, de las siguientes, le ayudaría a estar mas activo? Marque todas las que apliquen

- Transportación al parque
- Participar en grupos
- Talleres para clases de ejercicio
- Lugar seguro para caminar o hacer ejercicio
- Instrucción individual/entrenador personal
- Información sobre programas de ejercicios o membresías de gimnasio
- Descuentos para programas de ejercicios o membresías de gimnasio
- Mejora de la salud
- Un amigo con quien hacer ejercicio
- Actividades que puedan hacer con sus hijos
- Información sobre oportunidades de ejercicios en las escuelas locales
- Ninguno de los anteriores
- Otros (especifique)

29. ¿Qué te impide comer mas frutas y vegetales todos los días? Seleccione todas las que correspondan.

- El tiempo que se tarda en prepararse
- Costo
- Las tiendas cerca de mí no venden frutas y vegetales frescas
- No me gusta comer comida sana
- Prefiero comer otros alimentos, por ejemplo, me gustan las frutas y vegetales, pero a menudo no estoy de humor y prefiero elegir ‘comidas no saludables’.
- Amí familia no le gusta comer sano
- No estoy seguro de cómo cocinar/preparar frutas y vegetales frescos
- Yo como frutas y vegetales frescas
30. Durante los últimos 7 días, (cuantas veces ha bebido agua embotellada o en vasa? Cuente el agua de la pluma o grifo, agua embotellada, agua carbonatada sin sabor, agua sin azúcar añadida.

- No he bebido agua durante los últimos 7 días
- 1 a 3 veces durante los últimos 7 días
- 4 a 6 veces durante los últimos 7 días
- 1 vez al día
- 2 veces al día
- 3 veces al día
- 4 o más veces al día
- Otros (especifique)

31. ¿Cuál es su bebida de elección la mayor parte de los días

- Agua
- Leche
- Poposoda
- Ocate (caliente o helado)
- OTe (caliente o helado)
- 100% jugo
- Bebidas de jugo
- Bebidas energeticas (Monster, amp, Red Bull, etc.)
Bebidas deportivas (Gatorade, Powerade, etc.)
Kooi-Aid, Crystal Light, otras de bebidas de mezclas
Cerveza, vino, licor
Otros (especifique)

32. La mayoría de los días, como considera usted su estado de ánimo:
0 Feliz
0 Triste
0 Enojado
0 Deprimido (dificil de hacer actividades diarias debido al estado de ánimo bajo)
0 Otros (especifique)

33.1, Ha necesitado usted tratamiento para una afeción mental o conductual en el último año? (Ej. depresión, ansiedad, trastorno bipolar, psicosis, etc.) -Si no, por favor vaya a la pregunta 35.
0 Sí
0 No

34. Si contestó, Sí, (cual es fue una de las razones principales por las que no ha tenido ayuda para problemas mentales o salud de conducta mental? Por favor, elija todos los que apliquen:
0 Recibí tratamiento de manera oportuna
0 Costo sin seguro, era demasiado caro
0 Costo-incluso con seguro, era demasiado caro
0 Transporte-era demasiado difícil llegar allí
0 Horas-no estaban abiertos cuando pude llegar
0 No puede tener acceso a un proveedor de salud mental/comportamiento
escasez de proveedores de atención médica

No pude conseguir tiempo libre en el trabajo

No tenía a nadie que me cuidara a mis hijos

El personal no hablaba mi idioma

No pude conseguir un referido para ver a un especialista

No había camas disponibles para desintoxicación/tratamiento

No sabía donde conseguir el cuidado que necesitaba

Decidí no ir porque no me gusta ir a ver a los proveedores de salud mental

Alguna otra razón (explique)
36. ¿Utiliza drogas de manera recreativa, con la intención de endrogarse? Por favor, sea honesto, le garantizamos su anonimato.

O Sí
O No
O Otros (especifique)

37. Si utiliza medicamentos, para fines distintos de los previstos, l_ que utiliza (por favor, sea honesto, le garantizamos su anonimato)? Marque todas las que correspondan.

O Nunca uso drogas recreacionalmente
O Medicación para la ansiedad
O Medicamentos de venta en las tablillas (p. ej., Robitussin, Coricidin, NyQuil, Sudafed, etc.)
O Alucinógenos (p. ej., setas, LSD, PCP, etc.)
O Marihuana
O Estimulantes, incluyendo medicamentos recetados (p. ej., metanfetaminas, anfetaminas, Ritalin, dexadrina, medicamentos para dietas, cocaína, etc.)
O Torno medicamentos recetados o de venta libre más o menos que lo instruido
O Opiáceos incluyendo medicamentos recetados (p. ej., heroína, morfina, metadona, Darvon, etc.)
O Medicamentos para dolor
O Otros (Si fuese especificar)

38. En el último mes, ha utilizado usted Narcan (para revertir la sobredosis de opioides) en su miembro de la familia, un ser querido o un amigo?

O Sí
O No
O En caso afirmativo, ¿cuántas veces?

_____________________________
_____________________________
Gracias por tomarse el tiempo para darnos una idea de como usted ve su salud y la salud de su comunidad. Estaremos revisando todas las respuestas y trabajar en la actualización de programas, buscando maneras de llenar brechas y mejorar los servicios que cada uno de nuestros condados y los departamentos de salud y hospitales proveen.

Para mas informacion sobre los servicios del Departamento de salud contacte:

Departamento de salud del Condado de Genesee al 344-2580 ext. 5555 o visite su sitio web en www.co.Genesee.NY.U5/departments/Health/index.html. Visite Facebook en los departamentos de salud del Condado de Genesee & Orleans y Twitter:

@GoHealthNY.

Departamento de salud del Condado de Orleans en 589-3278 o eche un vistazo a nuestro sitio web en www.orleansny.com/publichealth. Visita Facebook en

Departamentos de salud del Condado de Genesee & Orleans y Twitter: @GoHealthNY.

Departamento de salud del Condado de Wyoming en 786-8890 o visite su sitio web en www.wyomingco.net/health/main.html. Visita Facebook en

Condado de Wyoming
Appendix C:

CHA Survey Promotional Flyers

Tell Us About Your Health!
Take an Anonymous Survey
Your feedback will help to address local health issues

https://www.surveymonkey.com/r/GOWCHA2019
Please take this survey only once

Cuéntenos Sobre Su Salud!
Tome una Encuesta Anónima
Sus comentarios nos ayudara a solucionar problemas locales de salud

https://www.surveymonkey.com/r/GOWCHA2019Spanish
Por favor, tome esta encuesta solo una vez.
Appendix D:

CHA Survey Collection Box Signage

Take an Anonymous Survey
Your Views & Health Count

Your feedback will help to address local health issues.

Brought to you by your Local Health Departments & Hospitals

Please take this survey only once.

Insert Completed Surveys Here

Surveys
Appendix E:

CHA Outreach Letter

- Letterhead -

Date

To Whom it May Concern,

The Genesee, Orleans and Wyoming County Health Departments and Hospitals are currently working with community partners to gather information from residents and those who work in these counties to help with public health planning for the next three to four (3-4) years. This initiative is part of the New York State Prevention Agenda which is the blueprint for state and location action to improve the Health of New Yorkers.

“As chief health strategists the health departments are working toward assessing current capacity, resources, and services,” stated Paul Pettit, director for Genesee and Orleans County Health Departments. “Responses will help us to identify services in our communities that are working well and ones that need to be improved. We can then use this information to review existing plans and to fill gaps and address the needs of residents going forward as we develop our Community Health Improvement Plan (CHIP).”

It is greatly appreciated if you would share the attached survey with your colleagues, service organizations, family members and clients to complete. The survey can also be completed by March 30, 2019, online by visiting https://www.surveymonkey.com/r/GOWCHA2019. The survey focuses on the health of the person taking it. I am happy to provide hardcopies of the survey and/or flyers that promote completing it online.

I am also scheduling Community Conversations with willing groups of residents in [County] to learn what they feel are the greatest health concerns or issues in our community and thoughts on how they can be improved. Please contact me by phone or email if you are interested in this opportunity.

Your continued support is appreciated!

Sincerely,
Appendix F:

Press Release

Tell Us About Your Health
2019 Community Health Assessment Survey & Community Conversations

The Genesee, Orleans and Wyoming County Health Departments and Hospitals are currently working with community partners to gather information from residents and those who work in these counties to help with public health planning for the next three to four (3-4) years. The information will inform and guide documents called the Community Health Assessment (CHA), Community Health Improvement Plan (CHIP), and Community Services Plan (CSP). This initiative is part of the New York State Prevention Agenda which is the blueprint for state and local action to improve the health of New Yorkers.

To fully assess the health status of our communities we are asking for your input because your health counts! These organizations are asking the public to participate by taking a survey and sharing their viewpoints during community conversations.

An online survey is available, as well as paper copies at various locations in each county. You can access the survey by visiting; https://www.surveymonkey.com/r/GOWCHA2019

The survey is anonymous, only takes about 15 minutes to complete and focuses on the health of the person taking it. If you are under the age of 18 years old, be sure to receive permission to take the survey from your parent(s) or guardian(s).

“As chief health strategists the health departments are working toward assessing current capacity, resources, and services,” stated Paul Pettit, Director for Genesee and Orleans County Health Departments. “This will also help identify community health needs and current gaps, ultimately helping to develop our Community Health Improvement Plan (CHIP) for the next few years.”

The health departments are also seeking to schedule Community Conversations with willing groups to learn what they feel are the greatest health concerns or issues in their community and thoughts on how they can be improved.

Responses from the confidential surveys and conversations will help identify services that are working, need improving, or to be created. The more members of the public who
participate, the larger and stronger the “building block” of these plans will be.

To participate in a community conversation, obtain hardcopies of the survey, flyers that promote completing the survey online, or have any questions please contact your local health department,

- Genesee County Health Department at: 344-2580 ext. 5555 or visit their website at www.co.genesee.ny.us/departments/health/index.html. Visit Facebook at: Genesee & Orleans County Health Departments and Twitter: @GoHealthNY.
- Orleans County Health Department at: 589-3278 or check out our website at www.orleansny.com/publichealth. Visit Facebook at: Genesee & Orleans County Health Departments and Twitter: @GoHealthNY.
- Wyoming County Health Department at: 786-8890 or visit their web site at http://www.wyomingco.net/203/Health-Department. Visit Facebook at: Wyoming County Health Department and Twitter @WyomingHD.
### Appendix G:

**CHA Survey Distribution List**

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<tr>
<th>Organization Responsible for Distribution</th>
<th>Target/Recipient</th>
<th>Method of Distribution</th>
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12/31/2019
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<td>Hunting/gaming clubs</td>
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<td>United Memorial Medical Center</td>
<td>Rochester Regional Health at United Memorial Medical Center staff and clients</td>
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<td>Corfu Free Library</td>
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<td>Woodward Memorial Library (Le Roy)</td>
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<td>Alexander School District - Health Teachers/students</td>
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Appendix H:

CHA Survey Results

GOW Survey Results (link to document due to size of responses):
http://orleansny.com/Portals/0/Departments/PublicHealth/GOW_CHASurveyResults060519.pdf
Appendix I:

Community Conversation Template

Genesee – Orleans - Wyoming County
Community Conversation Starter

We know that in Genesee, Orleans and Wyoming Counties many people in our community face challenges every day in trying to live a healthy lifestyle. All people have a right to health, we would love to hear what you think the issues are in your community and how we might help remedy them.

Location of Conversation: __________________________________________

Attendance: ___

Issues/ Concerns: Show of hands when each issue/concern is stated:

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<thead>
<tr>
<th>Issue</th>
<th>Category</th>
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<tbody>
<tr>
<td>Transportation</td>
<td>Smoking / Tobacco</td>
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<td>Use / e-cigarettes</td>
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<tr>
<td>Jobs</td>
<td>Alcohol</td>
</tr>
<tr>
<td>Access to healthy food</td>
<td>Other Drugs</td>
</tr>
<tr>
<td>Nutrition</td>
<td>Housing</td>
</tr>
<tr>
<td>Access to Health Care / Medical Providers / Hospitals</td>
<td>Telehealth</td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
</tr>
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</table>

This is where you ask for more detail related to the issue/concern:

Transportation:
Access to health care:

Nutrition:

Smoking/ tobacco use / e-cigarettes:

Exercise/ activity:

Mental Health:

Alcohol:

Drugs:

Safety:

Housing:

Telehealth:

Access to Healthy Foods:

Nutrition:

Education:
Youth:

What 3 issues listed above do you or your family face?

Are there any other issues not listed above that concern you?

Of the issues discussed, any suggestions on how to improve? (Please feel free write on the back if needed)

Do you think it’s important that we help change these factors so that the next generation can live longer, healthier lives?

One opportunity that Genesee, Orleans and Wyoming Counties may have to improve quality, improve efficiency and/or generate cost savings in health department / hospital operations to community members "might" be to:
Appendix J:

Summary of Genesee County Community Conversations

Genesee County facilitated 4 conversations during the winter/spring of 2019. The locations included Independent Living of the Genesee Region, United Memorial Medical Center, Le Roy Junior Senior High School, and the GOW Opioid Task Force Families, Loved Ones, and Allies Work Group.

There were a total of 85 participants representing Genesee County residents and community based organizations. Below is a summary of the key comments related to the issues:

Transportation: Transportation is not reliable; expensive; limited amount of public transportation options; very limited and hasn't had any solutions; limited transportation services to doctors’ appointments; scheduling is difficult; gas is very expensive.

Jobs: Jobs are available but people do not want to work; lack of transportation; lack of opportunity; not enough jobs / close jobs; getting to work can be difficult; limited jobs available for teenagers.

Access to healthy food / Nutrition: Too many fast food options in our area (duplicated establishments in the City of Batavia); Aldi has affordable food; many seasonal farmers markets in the area; healthy foods are more expensive than processed foods; dependents who live at home do not have a choice in what their parents / providers purchase; cafeterias in schools do not offer healthy options.

Access to Health Care / Medical Providers / Hospitals: Not enough mental health practitioners; have to travel to get to a specialist, travel can be expensive; limited amount of specialists; GCASA is a great resource / expanding services; difficult to get an appointment with a provider (long waiting list); dependents who live at home are not comfortable asking their parents / providers they want to see a mental health counselor; limited coverage due to insurance; not knowing how much the out-of-pocket cost is going to be; older adults need assistance navigating healthcare.

Smoking / Tobacco / E-cigarettes: Youth vape rate is very high; youth tend to vape in public and blow the vape in other’s faces; high school students report that “no one” smokes traditional cigarettes anymore; Nicosticks are becoming popular; smoking is expensive; young people believe that it won’t affect them in the future; e-cigarette flavors are enticing; kids do not understand the danger of e-cigarettes; e-cigarettes should be banned; easy to get.
**Exercise / Activity:** Not enough safe outdoor areas to exercise; gym memberships are expensive; schools have limited hours when students / community members can use gym and or pool; sports and teams are very expensive (equipment, travel); people don’t have time to exercise; lack of free exercise options.

**Mental Health:** Depression is very common across all ages; stigma prevents people from getting help; bullying is very common; long wait times to see a clinician; no in-patients facilities in Genesee County; lack of mental health counselors in the schools; unable to afford copay; adolescent suicide has increased; not enough providers take Medicaid; there is a need for more trainings; more education on suicide is needed; this is a very big issue; media sugar coats things; family issues amplify onto children.

**Alcohol / Other Drugs:** How can we stop opioids? We are over-prescribed; it is too easy to access; Tylenol and Motrin mixed has the same effect as opioids; nothing else to do; more education is needed; it is normalized; concerned about legalizing marijuana; high use of drugs in the area, especially in the school system; even with all the awareness way too many overdoses; lack of alternative treatment; opioid and other drug use has increased; it takes more than 30 days to treat addiction; not enough treatment; dramatic increase in DWIs.

**Safety:** Police officers may have bad reputation; community supports local law enforcement; safety is a concern especially walking alone at night; high school students are afraid to be in school; high school students do not feel prepared in the event of an active shooter; bullies are ruthless; resource officers are in some schools but not all schools in Genesee County.

**Housing:** Housing is not affordable / available; lack of affordable apartments; long waiting lists; subsidized senior housing is needed; not enough one-bedroom apartments.

**Telehealth:** People would rather meet with a doctor in person; younger people are more open to the idea; worried about technology / confidentiality.

**Youth:** Need more activities; exposed to mature things early; lack of discipline; lack of respect toward adults; there are a lot of young parents / kids raising kids; some are not educated well; bullying; lack of youth centers; education in health (i.e. alcohol, tobacco); youth are lacking common sense; youth need to learn more life skills; teens need a place they can go to find odd jobs (i.e. mow lawns, babysit); there are many broken homes; no activities.

**Education:** High school students reported they receive a good education; mental health classes should be part of curriculum; there is too much of a push for college; kids don’t know how they would afford college; students have a lack of job exposure;
education is expensive; GCC classes are very beneficial; high school students can take some college level courses through GCC.

**What 3 issues listed above do you or your family face?**

- Mental Health
- Alcohol
- Substance Use
- Smoking / Vaping / Nicotine Use
- Transportation
- Finances / Money
- Transportation
- Preventive Education Needed
- Access to quality health care
- Nutrition

**Are there any other issues not listed that concern you?**

- Cyber Security / Safety
- Workforce Mental Health
- Self-care
- Pregnant Women Smoking
- Increase in Long-term Chronic Conditions
- Community Information Center
- Basic Family Hygiene Needs (Access to Shower/Laundry)
- Gambling Addiction
- Money Management
- Affordable Dental Care
- Childcare Affordability
- Lack of Support Groups

**Of the issues discussed, any suggestions on how to improve?**

- Subsidized Housing for Older Adults and Disabled
- More Uber / Lyft Transportation Services
- Homeless Shelter System
- More Mental Health Providers in Genesee County
- Saving Health Care Costs (Telemedicine)
- Teaching Mental Health in Schools
- Installing Metal Detectors in Schools
- Local Hospital can Provide Shuttle Service to Patients
Do you think it’s important that we help change these factors so that the next generation can live longer, healthier lives?

- All participants agreed that it is important to make changes for a healthier future.
Appendix K:

Summary of Orleans County Community Conversations

Community conversations are the perfect way the Orleans County Public Health Department and Orleans Community Health can get to know the community’s opinions and concerns. The community conversation facilitator asks open ended questions in order for the community to be able to address all their concerns freely. The questions asked in the community conversation allows people to share whatever they are comfortable with sharing. The job of the facilitator is to get the conversation started and assure that the conversation stays on track and is done efficiently. The community conversations are essential in making sure the community’s needs are addressed.

Orleans County facilitated 5 conversations during the winter/spring of 2019. The locations included Orleans County Human Services Council, Office for the Aging Long Term Care Council, Medina Area Association of Churches, Office for the Aging Community Council, and Albion Rotary Club.

There were a total of 83 participants representing Orleans County residents and community based organizations.

Issues/Concerns: Show of hands of issues of concern:

Transportation – 32/83
Jobs – 39/83
Access to healthy food – 9/83
Nutrition – 31/83
Access to Health Care/Medical Providers/Hospitals – 36/83
Smoking/Tobacco Use/E-cigarettes – 24/83
Alcohol – 35/83
Other drugs – 36/83
Housing – 24/83
Telehealth – 19/83
Safety – 1/83
Exercise/Activity – 21/83
Youth - 25/83
Education – 16/83
Mental Health – 31/83

Key comments related to the issues:

**Transportation:** It is difficult to get veterans to the veteran’s hospital; long distance to services; transportation is not reliable; expensive; limited amount of public transportation options; very limited and hasn’t had any solutions; limited transportation in Albion; scheduling is difficult; availability of the phone number for the bus; buses do not go outside Orleans County; bus stops at 5:00 p.m.; limited in rural areas such as Kendall and Lyndonville; does not run on the weekend or evenings; not very comfortable; difficult for the elderly to use; not reliable; not wheelchair accessible; need more weekend transportation; gas is very expensive; marginal transportation; Office for the Aging has new grant that has volunteer drivers drive people around without liability.

**Jobs:** Jobs are available but people do not want to work; we need more living wages; many jobs do not have benefits because benefits are so expensive; lack of skills/training; loss of manufacturing skills; lack of transportation; lack of diverse job options; overall lack of opportunity; not enough jobs / close jobs; getting to work can be difficult.

**Access to healthy food / Nutrition:** Accessibility to a qualified nutritionist; more education is needed; elders don’t know what their aging bodies need, such as water; high need for education in what to eat for people with hypertension and diabetes; children are lacking nutrition education; low quality; great seasonal food opportunities; more access to food banks is needed; food prep courses could be helpful; a lot of access to healthy food in the summer; Aldi’s has good produce; Foodlink need to be promoted; farmer markets need promotion; fast food / junk food is more affordable than healthy foods; schedules are too busy to plan for healthy food; stress eating is very common; conflicting media; Medina Schools has a program where the school supplies the breakfast regardless of income; expensive; lack of transportation makes it difficult to obtain healthy foods; grocery stores need better access; there is plenty of access in the summer; more CSA (Community Supported Agriculture)
is needed; Dollar General sells a lot of food; not many opportunities; people have bad habits; would benefit from improved access to food pantries; healthy food is not offered in food banks; we need to lead by example.

**Access to Health Care / Medical Providers / Hospitals:** Not enough general practitioners; have to travel to get to a specialist, travel can be expensive; doctors no longer stay in the community they were raised; limited amount of specialists; Orleans County does not have a mental health hospital; minimal doctors so have to go out of the county for care; minimal choices for low income families; elders have a difficult time keeping medication straight; visiting nurses offer medication assistance to show people how and when to take medication; more education is needed; people need to be aware of resources, the library is a great resource for information; concerned citizens for Barre (township) give baskets to people going through a variety of events, this shows them the resources they can use.

**Smoking / Tobacco / E-cigarettes:** Youth vape rate is very high; youth tend to vape in public and blow the vape in other’s faces; smoking is expensive; young people believe that it won’t affect them in the future; kids do not understand the danger of e-cigarettes; e-cigarettes should be banned; easy to get; advertisement is still targeting new users.

**Exercise / Activity:** There are many places to go but people are not educated about those places; Orleans County has many bicycle trails; Holley and Medina schools have activity programs for the community; people don’t have time to exercise; we have too many distractions; the YMCA has Silver Sneakers which is great; affordability; it is difficult to get off of social media; veterans have to pay as the YMCA in Orleans County; lack of activities for all ages; lack of free exercise options.

**Mental Health:** Depression is very common; reintegrating veterans into the community can be difficult; people need to want treatment; stigma prevents people from getting help; bullying is very common; not being seen regularly enough; not enough providers take Medicaid; no mental health facility for children; there is a need for more trainings; more education on suicide is needed; this is a very big issue; media sugar coats things; family issues amplify onto children; Orleans County does have a mental health clinician in every school.

**Alcohol / Other Drugs:** How can we stop opioids? We are over-prescribed; it is too easy to access; Tylenol and Motrin mixed has the same effect as opioids; nothing else to do; more education is needed; it is normalized;
concerned about legalizing marijuana; high use of drugs in the area, especially in the school system; even with all the awareness way too many overdoses; lack of alternative treatment; opioid and other drug use has increased; it takes more than 30 days to treat addiction; not enough treatment; dramatic increase in DWIs.

**Safety:** Bad sidewalks; lack of elevators; lack of railings; more handicap spots; not enough stores have transportation; elderly/handicap mobility; there are plenty of police officers

**Housing:** Many poorly kept houses; housing is not affordable; we need subsidized senior housing; there are no townhomes or condos; housing is old and needs repairs; we have no homeless or code blue shelter; not enough senior housing; minimal housing options, especially those with handicapped accessibility; not enough one-bedroom apartments or affordable housing; need more senior housing not based on income / non-subsidized housing; there is a wait list for senior housing.

**Telehealth:** WiFi is spotty in rural communities; lack of knowledge on telemedicine; more education and awareness is needed; telehealth is very helpful; insurance companies need to inform people about the services.

**Youth:** Need more activities; problems are amplified for kids; exposed to mature things early; lack of discipline; lack of respect toward adults; there are a lot of young parents / kids raising kids; some are not educated well; bullying; lack of youth centers; education in health (i.e. alcohol, tobacco); youth are lacking common sense; youth need to learn more life skills; teens need a place they can go to find odd jobs (i.e. mow lawns, babysit); there are many broken homes; no activities.

**Education:** Need a greater focus; a mentoring program would be helpful; kids don’t know simple skills; there is too much of a push for college; kids need more exposure to the trades; students have a lack of job exposure; college debt is very high; a high school diploma does not prepare you for much; kids need to go into a field they want to go into; need parenting education; more awareness of resources is needed; education is expensive; the county is blessed; GCC classes are very beneficial.

**What 3 issues listed above do you or your family face?**

- Distance to family members due to lack of employment
- Transportation
- Aging process
• Health – needs a lot of doctor appointments
• Volunteerism
• Jobs
• Education
• Housing
• Doctors and medical services are lacking
• Lack of healthy activities for all ages
• Preventive education needed
• Access to quality health care
• Mental Health
• Alcohol
• Nutrition

Are there any other issues not listed that concern you?

• Limited housing
• Drug task force for schools
• Use to have an Orleans County Housing Council
• Trying to put in emergency pad for helicopters but is having difficulty
• Student loan debts
• Budgeting / finances
• Accessibility for the physically disabled
• Taxes
• We need safer parks

Of the issues discussed, any suggestions on how to improve?

• Reasonable repair services for low income families
• We should explore Lyft/Uber drivers
• Teach good nutrition in schools
• Explore telemedicine
• Working with larger organizations and programs
• Incentive program
• Lower gym membership costs and lower prices on healthy foods
• Classes to offer help with personal budgeting
• Formulate committees
• Attract employers to put people to work
• Paid internships

Do you think it’s important that we help change these factors so that the next generation can live longer, healthier lives?
• Youth need to be offered something that will keep them here
• Yes!

One opportunity that Genesee and Orleans Counties may have to improve quality, improve efficiency and/or generate cost savings in health department operations “might” be to:

• The three counties sharing administration would be helpful
• Sharing a psych unit would be helpful
Appendix L:

Summary of Wyoming County Community Conversations

Community Conversation Summary- Wyoming County 2019

In Wyoming County there were 3 community conversations conducted, with a total of 36 combined community members in attendance.

Listed below are the locations where the community conversations were conducted, as well as the groups that participated:

Pine Lounge- OFA Meal Site for Senior Citizens
Varysburg Clothes Closet & Food Pantry- Coffee Clutch
Sheldon Fire Department- Volunteer members

The top three combined concerns from the community members at the conversations were:

Access to Health Care/Providers
  - Cost of Health Insurance
  - Lack of General Practitioners
  - Medical diagnosis (cancer, Dementia, Heart condition, addiction)

Transportation
  - No transportation
  - Rural area lack of bus transportation

Care Providers/Programing
  - Lack of afterschool providers for children
  - Lack of care providers for elderly
  - Lack of activities for elderly and youth

The three most common suggestions to improve issues within the community:

- Increase bus access to rural community
- Faith based programs
- Increase programing for elderly and youth (after school programs/support/social groups)