

# Health 1

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## Introduction

During the recent Reality Check Workshops, topical experts and members of the public worked together in small groups to examine a particular topic in-depth. During the two-hour workshops they worked with a trained facilitator to complete the following exercises:

- 1) Review of Ideas. Participants reviewed all of the ideas related to their topic that were collected during the community Idea Gathering Sessions.
- 2) Critical Questions. Participants engaged in a discussion of two Critical Questions, which had been identified by the *Vision for Staten Island* Steering Committee. The facilitator recorded the results of the discussion on flipchart paper, and then helped the group summarize major areas of agreement and disagreement.
- 3) Implementation Recommendations. At the end of the discussion period, each participant wrote down two practical, specific strategies or implementation steps to help Staten Island achieve its vision for their topic.

Two small groups addressed the topic of health. The results from the first Health group are provided below. Note that responses have been recorded verbatim, and some errors may remain due to handwriting legibility. Responses are numbered for reference purposes only; this does not indicate any sense of priority.

## Quick Brainstorm:

What are Staten Island's most significant community health issues? (e.g. smoking, obesity, etc.)

1. Lack of sufficient outpatient services, insurance. Insured unable to access what is available
2. Poor wellness education, i.e. obesity, diabetes, etc.
3. Limited financial resources to both hospitals
4. Smoking, obesity rates in SI up
5. Higher death rates from multiple causes
6. Lack of NYC investments in infrastructure
7. Lack of integrated mental health substance abuse treatment
8. High rates of drug and alcohol abuse among adolescents
9. Heart disease, teen pregnancy
10. Link increased access of insurance to facilities who accept that insurance (ex. Medicaid)
11. Inequitable distribution of government resources to SI hospital
12. Lack of sufficient mental health housing (adolescents especially)
13. Cancer
14. Shortage of primary care

## Critical Question 1:

What are the challenges and opportunities for addressing community health issues?

1. Overall funding causes excess and shortages
2. Motivating people to participate in prevention and addiction programs
3. Resources for late diseases and providing preventive care without preventive care
4. No meaningful reimbursement for preventive care, health promotion and education
5. Partner up and cross-pollinate. Combine experiences collaboratively; tie in inpatient and outpatient services.  
Link preventive care via teamwork
6. Shortage of primary care
7. Public's behavioral change public uses too many resources. Abuse of resources requires public education. Need

- for gatekeeping and adequate referrals
8. Too many facilities increasing costs inadequately studied (?)
  9. No public hospital in SI, unfunded services, approve beds but not services
  10. SI has ability to be a center where sources can be allocated based on community needs vs. traditional method
  11. No real coordination of healthcare. Referrals are reimbursed but care is discontinued. "No medical home."  
Don't pay primary care doctors enough.
  12. Consumer culture and media impacting the way healthcare is provided. There are ways for community health centers to be cost effective while coordinating with hospitals to spread out preventive services. Identify needs in addition to medical issues. Share burden.
  13. More emphasis on primary care in west. Inherent difference between west and east. Better gatekeeping patient playing
  14. Coordinated public education regarding healthcare. Give public a reality test.
  15. Community closing down addiction center and housing for mentally ill included elected officials meet needs.  
Not ignore them to improve care in SI which would help economy as well
  16. Link caregivers electronically, uniform database opportunity.
  17. New focus on health care: outcome, reimbursement; specific things will improve healthcare and prevention.  
NYC Health Commission supportive of above. Government is working to impact positively issues above.
  18. System problems driven by insurance companies who determine who gets reimbursed. 50% of what we have discussed can be changed by us, the other is not. Social/cultural issues impact healthcare. Culture of excess among youth in SI

**Critical Question 1 SUMMARY:**

1. Systemic problem may be difficult to address by collaborating and working together to combine resources – link databases, link technology
2. Cooperate not compete
3. Unique opportunities in SI
4. Educate public, officials
5. Culture of excess harming health
6. Health care is alright. Deliver services based on community needs
7. Provide funding and accept insurance that exists
8. Medicine should be based on needs not competitive edge (business)
9. Overhaul costs of care
10. Public perception of what patient needs us relying on disexpertise
11. Important to allocate resources efficiently and adequately
12. How to implement a plan to combat problem
13. Preventive medicine as a tool to lower cost
14. Mental health and addiction services and public education

**Critical Question 2:**

What are some short term actions that can be taken to improve the accessibility and quality of healthcare on Staten Island?

1. Link with government, elected officials. Short term actions for accessibility. Gather to pressure government for help.
2. Educate – develop speaker bureau public education program multiple places and times - weekly. All doctors on SI contribute to it
3. Primary care physicians replicate project to get medical records to be linked on SI and get funding to do so. Link to hospitals
4. Hospitals work to get buy-in from doctors regarding linking medical records, legible medical notes
5. Meet with McMahan to discuss funding.
6. Community focus, cultural competence training, lunch lecture, teaching program, train med students and doctors on culture and medicine. Help doctors to meet changes in culture and cultural expectations
7. Mechanisms for reimbursement. Voucher/debit card system. Legislative support. Negotiated rate for procedures
8. Pressure Bloomberg to help SI if he wants our vote
9. Alter legislation
10. Keep our wave of mentality of heightened concern for healthcare public and ongoing
11. Don't allow city to short change S.I.
12. Develop series of white papers
13. Get insurance companies to find doctors to accept many different types of health insurance – will eventually cut costs

**Critical Question 2 SUMMARY:**

1. Education
2. Linking technology
3. Pressure politicians
4. Organize people, doctors, communities, insurance companies
5. Funding
6. Implementation – how? Clear plan
7. Reimbursement/Procedures
8. Possible lawsuit
9. Create vision of process with public education

**Implementation Recommendations:**

Consider the draft vision statement, the ideas gathered from the public, and your group's discussion of critical questions. Please recommend two practical, specific strategies or implementation steps that you would recommend to help Staten Island achieve its vision for your topic.

1. Develop coordinated health care system with an emphasis on preventive and case linkages (?)
2. Secure funding for voucher insurance system from HHC to cover uninsured/underinsured on SI
3. More rational use of scarce funding resources by encouraging more collaboration among providers
4. Develop series of (?) programs covering significant health issues for use in (?) public and (?) officials
5. Implement education programs on healthcare needs of SI, prevention, addiction services and anti-stigma campaigns on behalf of mental health, developmental disabilities
6. Begin a project, seek government assistance, to begin an electronic medical records program with specific goals and dates
7. More money into primary care infrastructure to increase access from wherever
8. Better coordination between insurance companies, icare practitioners, and specialists to link primary and specialty care and improve access to disease condition treatment
9. Teaching program with hospitals and health centers focusing on prevention, "medical home" concept for residents and students
10. Convene a healthcare "think tank" group to develop a clear position paper and action steps to secure additional NYC support for health care in the borough
11. Find funding/support to help plan and create a boroughwide EMR system – look at primary care development corporations project
12. Develop a true regional plan that looks at healthcare for 500,000 people
13. Start a public sector (?) bureau of physicians and other healthcare providers to start education the public – based on the regional plan

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