



## NYU Langone Hospitals

# Community Health Needs Assessment and Community Service Plan 2019-2021

## Executive Summary

### Who We Are

NYU Langone Health is one of the nation’s premier academic medical centers. Composed of NYU Langone Hospitals (“NYULH”) and NYU School of Medicine (“NYUSoM”), NYU Langone Health has a trifold mission: to serve, teach and discover. NYULH currently operates over 30 ambulatory care facilities and five inpatient facilities:

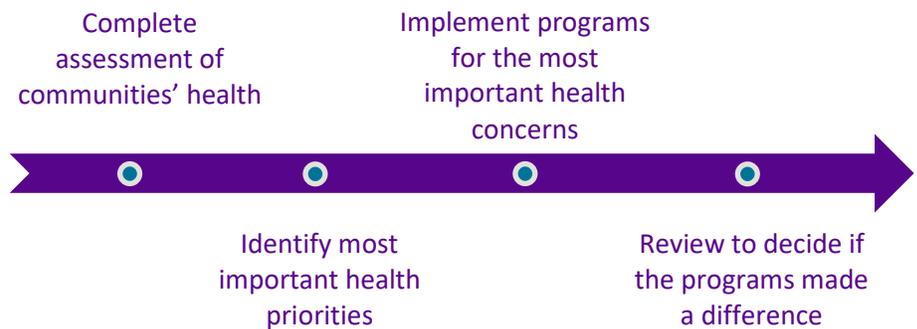
- Tisch Hospital
- Kimmel Pavilion
- NYU Langone Orthopedic Hospital
- Hassenfeld Children’s Hospital at NYU Langone
- NYU Langone Hospital–Brooklyn

In addition, Sunset Park Health Council, Inc., an affiliate of NYULH, is a Federally Qualified Health Center network, which includes nine primary care health centers in Brooklyn and over 40 school- and shelter-based extension clinics, under the name Family Health Centers at NYU Langone.

NYULH is the principal teaching hospital for NYUSoM, which has trained thousands of physicians and scientists since its founding in 1841. The faculty group practice delivers patient care at more than 375 practice sites and has affiliations with the Manhattan campus of the Veterans Affairs Health Care System and with the NYC Health and Hospitals facilities Bellevue and Gouverneur in Manhattan, and Woodhull in Brooklyn.

### Developing our Community Service Plan

Every three years, all non-profit hospitals are required to create a **Community Service Plan** – a plan to offer programs that meet the community’s top health needs. A Community Service Plan begins with a **community health needs assessment**. This is a review of community data and information from community members about their health needs and priorities. This assessment shows us what health concerns the communities are experiencing and how we can help address these concerns.

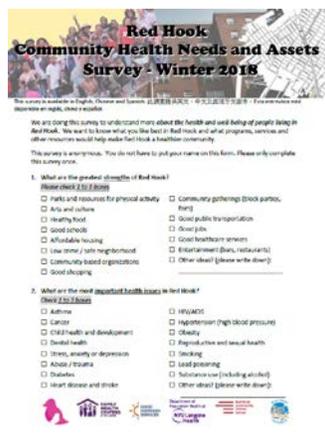


## Data Reviewed

We reviewed data to understand who is living in our partnering communities including age, sex, race and ethnicity, education levels, countries of origin and income levels.

We looked at data from the New York City Department of Health and Mental Hygiene's most recent Community Health Survey to determine the range of chronic diseases and risk factors in each community.

We also examined hospital admission and emergency department data to understand who uses these services and what are the health conditions for which they seek care. And, in response to community input, we looked at data about the housing environment, including issues of housing instability and quality.



## Public Participation & Partners

We involved community residents and leaders through surveys, interviews, focus groups, and community workshops.

Our Community Service Plan Coordinating Council, which includes leaders from NYULH and from our community partners, meets every three months to coordinate programs and to make sure that they are on track. NYU Langone Hospital–Brooklyn's advisory structure includes the Sunset Park Health Council as the community governing board; advisory groups from different cultures; and program-specific advisory groups, including the Teen Health Council.

We also spoke to many public health experts in the City and State Health and Mental Health Departments, the City Department of Education, NYCHA, the Department of Housing Preservation and Development, and other organizations, including community leaders, resident associations, faith- and community-based organizations, advocacy groups, and members of Community Boards. A list of people and organizations we spoke to and our partners is included in the full Plan.

## Our Partnering Communities:

### Lower East Side and Chinatown, Manhattan & Sunset Park and Red Hook, Brooklyn

NYU Langone Hospitals serves communities of diverse people with a variety of health concerns. As with our previous Community Service Plans, the 2019-2021 Plan focuses on the Lower East Side and Chinatown in Manhattan, and Sunset Park in Brooklyn. We also completed a needs and assets assessment in Red Hook, Brooklyn and are beginning to implement Community Community Service Plan programs there as well.

These communities were selected based on the need for services and their general proximity to NYU Langone Hospitals. Although these communities are not geographically contiguous, they share important similarities, including the diversity of their populations, an infrastructure of strong community-based organizations, and pockets of poverty amidst gentrification.

Community residents in our partnering neighborhoods share similar health concerns. Reducing tobacco use, preventing and addressing obesity and cardiovascular disease, and supporting families through early childhood and teen programs continue to be top priorities. In addition, our CHNA revealed a growing concern about the intersection of health and social and economic needs, particularly housing, across all communities and partners. These priorities are described briefly below, followed by a brief description of our evidence-based programs, which respond to these community needs and address health disparities.

## Our Priorities

### PREVENTING CHRONIC DISEASE

#### By Reducing Tobacco Use

Smoking rates in New York City have dropped. Only about 13% of New Yorkers now smoke. But 16% of low-income New Yorkers smoke. The smoking rate for Asian men in New York City is even higher (over 23%) and they are more likely to be heavy smokers than other racial and ethnic groups. The rates of smoking in the Lower East Side/Chinatown and Sunset Park, communities with large low-income Asian populations, remain higher than the rest of the City.

#### By Addressing the Intersection of Health and Housing

In recent years, there has been a growing recognition of the intersection of housing and health. Many studies have documented the link between housing instability and poor health and increased need for health care services. Homelessness increases risk for chronic and infectious conditions and mental health issues. Severe rent burden, overcrowding and eviction can lead to stress, depression, anxiety and diminished access to care and medications. Structural issues and mold and pests can cause respiratory problems and falls and other injuries. Housing instability and quality are priority social determinants of health in all of our partner communities.

#### By Preventing and Addressing Obesity

Childhood obesity continues to be epidemic throughout New York City. It is more common in low-income urban communities where neighborhood resources – like healthy food and safe places for physical activity – may not be available. Although the rates of obesity in the Lower East Side/Chinatown and Sunset Park are no higher than the New York City average (25% as of 2014), low-income children in both communities are vulnerable, and preventing and addressing obesity is a high priority for community residents and leaders. For the large immigrant populations in Sunset Park and the Lower East Side/Chinatown, addressing healthy eating and physical activity in early childhood can prevent later generations from developing obesity and diabetes.

### PROMOTING HEALTHY WOMEN, INFANTS, AND CHILDREN

Mothers and children who are exposed to stress are at risk for many health problems. In New York State, mother and child health has not improved over the past decade and, by some measures, has gotten worse. Poverty puts mothers at risk for depression and problems during pregnancy and puts children at risk for poor health and developmental problems. Many low-income families in the Lower East Side/Chinatown, Sunset Park, and Red Hook are subject to these stresses and at risk for poor health outcomes.



# Implementing Programs That Work

## PREVENTING CHRONIC DISEASE

**Tobacco Free Community** helps smokers get access to treatments and counseling to help them quit and works to reduce children’s exposure to secondhand smoke. It is being offered in the Lower East Side/Chinatown and in Sunset Park in partnership with Asian Americans for Equality and the Asian Smokers’ Quitline. The navigator program is reaching out to NYCHA residents, who may be struggling to comply with the smoke-free housing requirements. In addition, the Charles B. Wang Community Health Center is spearheading a City-wide coalition to raise awareness and to expand the navigator program across the City, with a focus on immigrant populations, and their Teen Resource Center is developing an education and outreach program about tobacco and e-cigarettes.

Goals:

- Increase knowledge about services and medications to help smokers quit
- Increase use of services and resources
- Increase support for smoke-free housing
- Decrease rates of smoking



**The Health+Housing Project** is a program in partnership with Henry Street Settlement, NYCHA and Wavecrest Management in which Community Health Workers helped residents in two buildings on the Lower East Side by connecting them to needed health and social services.

Goals:

- Support healthier eating
- Increase physical activity
- Decrease smoking
- Improve access to health care and social services
- Improve management of health problems  
Decrease need for emergency care and hospitalizations



The program is being continued by Wavecrest Management in partnership with Henry Street Settlement.

**Healthy Habits Program/Programa de hábitos saludables** consists of 12 multi-disciplinary sessions for 9–11 year olds and their parents. Each session includes customized nutrition education, family meal preparation, support groups for parents and children, and a physical fitness activity. The program is culturally tailored and is conducted in English and Spanish.

**Goals:**

- Stabilize the participating child’s BMI
- Support child and family behavior change based on 5-2-1-0:
  - Fruit and vegetable consumption (5 or more fruits and vegetables per day)
  - Daily screen time (2 hours or less of recreational screen time per day)
  - Physical activity (1 hour or more of daily physical activity)
  - Sugar-sweetened beverage consumption (0 sugary drinks).



**与你的宝宝一起动起来**

看屏幕时间不是「动」的时间

每天跟你的宝宝尝试趴著玩！

很多父母认为宝宝还不能趴著玩——其实大部分宝宝是可以的！这是如何开始的方法——

- 你可以躺下来，然后让宝宝趴在你的身上。他能抬起头来几秒吗？跟他讲话及让他看著你。
- 当他强壮一点时，放一张毛毯在地上，让宝宝趴在上面。很快他就可以把头抬起来，而且可以保持姿势十秒钟！你可以放一个玩具在他面前给他看著。
- 每次趴著玩的时间大概两分钟，一天尝试玩三次。

记住：当宝宝睡觉的时候，他应该经常保持著仰躺的姿势，不是趴著的姿势。

看屏幕时间是指观看下列物件：  
• 电视（影片）  
• 电脑  
• 平板电脑（iPad）  
• 手机

看太多屏幕让成年人和小孩增加体重。

做个好榜样——限制你和宝宝看任何屏幕的时间。你的宝宝会学习你的榜样。

每天让宝宝有趴著玩的时间。藉著锻炼，宝宝会茁壮成长！

看屏幕不是活动的时间。选择一些能与宝宝一起活动的题目！

**Greenlight** works in pediatric offices to improve parents’ understanding of health and healthy behaviors for children starting at age two months. The Greenlight program for Chinese American families has been developed in partnership with the Charles B. Wang Community Health Center and is being extended to the Seventh Avenue Family Health Center in Sunset Park. The program components include:

- Easy to read booklets and helpful tools (for example portion sized snack cups) to support physician counseling of patients;
- Training providers how to communicate health messages;
- Waiting room program where health educators promote family engagement and support Greenlight messages.

**Goals:**

- Increase parent knowledge about nutrition, physical activity, and healthy lifestyles
- Increase parent engagement and confidence
- Support healthier eating
- Decrease TV and computer time
- Increase activity

**REACH FAR Brooklyn (Racial and Ethnic Approaches to Community Health for Asian and Arab Americans in Brooklyn)** prevents heart disease by increasing access to healthy foods and providing health coaching and blood pressure monitoring. The program is located in two mosques in the Lower East Side in Manhattan and is being extended to two mosques in Sunset Park. A new effort adds a Community Health Worker component focused on diabetes prevention and management.

Goals:

- Promote healthier eating at home and communal meals
- Support better blood pressure control
- Increase knowledge about heart disease
- Increase knowledge about diabetes prevention and management



## PROMOTING HEALTHY WOMEN, INFANTS, AND CHILDREN



**ParentChild+** (formerly called Parent-Child Home Program) is a national, evidence-based early literacy, parenting and school-readiness program that serves low-income immigrant families in Sunset Park. Through intensive home visiting, ParentChild+ makes a significant difference in the lives of in-need young children and their families.

Goals:

- Build positive parent-child verbal and non-verbal interaction
- Develop and promote positive parenting skills
- Develop early literacy skills that are essential for school readiness
- Enhance children's conceptual and social-emotional development

The **Video Interaction Project (VIP)** is an evidence-based parenting program that uses videotaping and toys, books and resources to help parents utilize pretend play, shared reading, and daily routines as opportunities for strengthening early development and literacy in their children. VIP sessions take place in pediatric clinics on days of routine well-child visits, and at each session families meet individually with an interventionist for approximately 25 minutes.

Goals:

- Promote positive parenting activities
- Increase the availability and use of learning materials in the home that support positive parenting activities
- Enhance parent capacity to cope with stressors





**Project SAFE** employs an evidence-based youth development approach to prevent teen pregnancy, HIV/AIDS, and other sexually transmitted diseases. The program includes evidence-based sexual health workshops, peer-led health education groups and community events, sexual health services designed to meet the unique needs of teens, and workshops for youth workers and parents.

**Goals:**

- Increase teens' knowledge about pregnancy prevention, sexually transmitted diseases and HIV/AIDS
- Increase skills and behaviors that reduce these risks
- Increase knowledge of HIV status

**ParentCorps** works with teachers and parents in early childhood and pre-kindergarten programs to strengthen family involvement in children's education and help teachers and parents create environments that improve child health, behavior and learning. This program will continue in University Settlement sites and expand to develop digital supports for pre-kindergarten programs in Sunset Park.

**Goals:**

- Tailor ParentCorps products and services to meet the needs of pre-kindergarten programs and families in Sunset Park
- Support all pre-kindergarten programs in Sunset Park with ParentCorps digital resources
- Increase parent involvement in learning
- Promote strong parent-teacher relationships
- Foster positive home and classroom environments
- Increase child social-emotional learning
- Increase healthful behaviors



## CROSS-SECTOR CAPACITY BUILDING INITIATIVES

The **Brooklyn Health and Housing Consortium** to develop relationships and infrastructure, and build capacity to support people with health and housing needs, with an initial focus on Southwest Brooklyn.

The **Community Health Worker Research and Resource Center** (CHW-RRC) to serve as a resource to community-based organizations, health systems, municipal agencies, and research organizations that are planning, or seeking to strengthen, CHW initiatives. The CHW-RRC will help develop, support and evaluate programs that use lay health workers to enhance care, link services, and improve community health.

The **Brooklyn Data Station** to support partnerships and foster collaborations that aim to improve population health in Sunset Park, Red Hook and other parts of Brooklyn. The Data Station serves as a shared data and resource repository, supporting a knowledge network and a forum to translate findings into action to improve health.

The **Red Hook Community Health Network** to address residents' health and social service needs through organizational capacity-building and linkage to resources within and beyond Red Hook. The initiative is being designed in close partnership with The Alex House Project, Good Shepherd Services, Red Hook Community Justice Center, and Red Hook Initiative following an in-depth Red Hook Community Health Needs and Assets Assessment completed in fall 2018.

An initiative to address **social determinants of health**, which will pilot a system throughout the Family Health Center network to provide assessment, referral and follow-up services, engaging a wide array of community agencies, including economic development and legal services.

## Tracking Progress & Evaluating Impact

Our Coordinating Council, composed of community partners and NYULH program leaders, will continue to meet every three months to track and measure the progress of all of the programs. In addition, each program collects data about how many people are participating, whether they are satisfied with the services, and what impact the program is having on people's health and well-being. This is done through attendance records, surveys, and other information available about the health of the community. More information is available in the full Community Service Plan.

## What's Next?

We will continue to work with the community and our partners to understand community needs and to plan and monitor progress on our goals for each of the programs. In addition, we are partnering with organizations that represent the Arab American community in Southwest Brooklyn, to conduct a Needs Assessment to understand health needs and priorities.

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## Our Core Values

Performance – Respect – Integrity – Diversity – Excellence

Copies of the full Community Health Needs Assessment & Community Service Plan 2019-2021 can be downloaded from the NYU Langone Health website at: <http://www.nyulangone.org/our-story/community-health-needs-assessment-service-plan>.

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