## St. Luke's Roosevelt



A Member of the Mount Sinai Health System

# COMMUNITY HEALTH NEEDS **ASSESSMENT**

December 17, 2013



## Community Health Needs Assessment 2013

## On September 30, 2013 The Hospitals comprising Continuum Health Partners combined with Mount Sinai Medical Center to form the Mount Sinai Health System.

The Mount Sinai Health System is an integrated health care system providing exceptional medical care to our local and global communities. Encompassing seven hospital campuses in the New York metropolitan area, as well as a large, regional ambulatory footprint, Mount Sinai is acclaimed internationally for its excellence in research, patient care, and education across a range of specialties. The Mount Sinai Health System was created from the combination of The Mount Sinai Medical Center and Continuum Health Partners, which both agreed unanimously to combine the two entities in July 2013.

The Health System is designed to increase efficiencies and economies of scale, improve quality and outcomes, and expand access to advanced primary, specialty, and ambulatory care services throughout a wide clinical network. The System includes 2,784 full- and part-time physicians, 3,783 voluntary physicians, and 12 freestanding ambulatory surgery centers. With more than 430 full- and part-time primary care physicians, clinical teams are able to manage large populations of patients in the lowest-cost, most effective settings. The System also features a robust and continually expanding network of multispecialty services, including more than 45 ambulatory practices throughout the five boroughs of New York City, Westchester, and Long Island. It has more than 40 clinical and academic relationships with other local health care organizations, and Mount Sinai physicians can be found in more than 200 community locations throughout the New York metropolitan area. With an extraordinary array of resources for the provision of compassionate, state-of-the-art care, the Mount Sinai Health System is poised to identify and respond to the health-related needs of the diverse populations we serve.

#### The Mission

The mission of the **Mount Sinai Health System** is to provide compassionate patient care with seamless coordination and to advance medicine through unrivaled education, research, and outreach in the many diverse communities we serve.

#### <u>Vision</u>

An unrivaled academic medical center, Mount Sinai's vision is to continue to grow and challenge convention through our pioneering spirit, scientific advancements, forward-thinking leadership, and collaborative approach to providing exceptional patient care.



## **History of Continuum Health Partners**

In January of 1997, **Beth Israel Medical Center** and **St. Luke's-Roosevelt Hospital Center** joined to form **Continuum Health Partners, Inc.** This entity became the parent corporation of each hospital, while each hospital continued its separate corporate identity. Both institutions had well over a century of providing care to New York's poor and elderly, and an active tradition of community involvement, responsiveness to community needs and commitment to the improved health of the communities they served. Through the Continuum relationship, each hospital retained its own identity, its own governance structure, and its own unique relationship with its communities and its own financial independence. However, the relationship allowed the hospitals to work together in areas of mutual benefit, such as purchasing, human resource management, marketing and public affairs, government and community affairs, managed care contracting and information systems. It also, however, allowed each hospital to retain its unique and separate qualities, with separate clinical leadership. The dynamic, vibrant and community-based characteristics of each hospital were successfully retained within the relationship, distinguishing the Continuum Hospitals from many of their counterparts.

In September of 1999, **The New York Eye and Ear Infirmary** – a specialty institution with a proud 189 year tradition of service to the Lower East Side of Manhattan, became the newest member of the Continuum network.

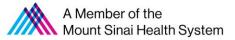
#### Recognition Of The Unique Role Of Continuum Hospitals

The Continuum Hospitals are distinguished by the extraordinary degree to which they provide uncompensated care to their communities and serve as hospitals for New York's poor and elderly. Each hospital has long been recognized for its role as a "safety net" hospital that serves a disproportionate number of Medicaid, low-income elderly and uninsured patients, and is distinguished by a similar inpatient payor mix that is over 60% Medicaid, Medicare and uninsured patients. As a group, the three Continuum Hospitals account for approximately 8% of the State's Medicaid hospital expenditures.

Notwithstanding the extraordinary financial pressures faced by all NY hospitals, the Continuum Hospitals continue to expand basic services and provide health education and outreach. The Continuum Hospitals offer a wide array of hospital-sponsored community health education and screening events. The community is notified of these events and screenings by various means - mailings, advertising in local newspapers, flyers, and through mailings of various NYC Community Boards, etc. Most of these are free to those we serve. In addition, Continuum generates an extraordinarily well-used health website – <u>www.chpnyc.org</u> – offering on-line health education and physician referral. In 2012, **2,594,377** visitors browsed the Continuum website. The Continuum Hospitals provide multi-lingual educational materials for their patients and communities and markets their services in New York's diverse ethnic communities

## St. Luke's Roosevelt

St. Luke's and Roosevelt Hospitals



#### **Mission Statement**

St. Luke's-Roosevelt Hospital Center, formed by merger in 1979, is a combination of three hospitals, each with a distinguished history of accomplishment and public service.

St. Luke's Hospital was founded in 1846, in affiliation with the Episcopal Church to "provide care for the sick poor." Women's Hospital was established in 1855, for the "treatment of diseases peculiar to women." Roosevelt Hospital, chartered in 1864, was dedicated to "the reception and relief of sick and diseased persons."

From the beginning, the Hospitals have considered spiritual, moral and emotional support for their patients as integral to the important work of healing. They have been aided by the contributions of people of good will of many faiths and moral and ethical traditions in a truly ecumenical effort.

In keeping with the traditions of these hospitals, the mission of the St. Luke's-Roosevelt Hospital Center is to provide:

- Outstanding health care to meet the needs of the Hospital Center's West Side community and the broader community of patients who utilize the services of the Hospital Center. Such care is provided without discrimination, including the care of the poor, while recognizing the limitations of the resources of the Hospital.
- Highest quality education of health professionals.
- Research to further medical knowledge and develop excellence in the delivery of health care.

### **Communities Served**

This assessment is being submitted on behalf of St. Luke's-Roosevelt Hospital Center

St. Luke's and Roosevelt Hospital offer a wide range of specialty services that cater to a large number of patients located throughout the southern portion of New York State and parts of New Jersey and Connecticut.

For purposes of this Assessment we have analyzed our Core Market.

Core Market is a smaller geography than a Primary Service Area (PSA), and provides a view of the neighborhoods in close proximity to a hospital, where the hospital's sphere of influence is strongest.

Core Markets are defined through careful examination of the nearby neighborhoods with high market share and patient origin, and from which it is reasonable to think the hospital might serve a larger share of the residents.

### Overview

### St. Luke's Hospital, A Member of the Mount Sinai Health System

With 523 beds, St. Luke's Hospital serves as the principal health care provider for the West Harlem and Morningside Heights communities and operates one of Manhattan's few Level 1 trauma services. Founded in 1847, it is home to the Al-Sabah Arrhythmia Institute, a world-class, multidisciplinary center specializing in the care and treatment of heart ailments. St. Luke's Hospital also enjoys an outstanding reputation for services in many other medical specialties, including internal medicine, geriatrics, trauma, bariatric surgery, vascular disease, HIV/AIDS, cardiac care, physical rehabilitation, psychiatric disorders, and substance abuse. St. Luke's Hospital also continues to expand its commitment to community-based ambulatory care and access to primary and specialty care.

The Hospital (and its designees) serves as Board members of the Morningside Area Alliance, the West Manhattan Chamber of Commerce, the Greater Harlem Chamber of Commerce, and as members of the Lincoln Square BID.

#### Roosevelt Hospital, A Member of the Mount Sinai Health System

With 505 beds, Roosevelt Hospital is a full-service community and tertiary-care hospital with an emergency department serving Midtown and the West Side of Manhattan. Since its founding in 1871, it has placed strong emphasis on primary and specialty care. The hospital serves as the home to several renowned clinical services, including those in endovascular surgery, cancer, cardiology, and obstetrics and gynecology. Roosevelt Hospital also maintains a strong primary care presence in its surrounding neighborhoods through ambulatory and physician practices and through longstanding partnerships with some of New York's largest federally qualified health centers, particularly the William F. Ryan Community Health Center.

## **Public Participation**

To assess the overall health needs of the communities served by Beth Israel Medical Center data and information was collected from the following sources:

• New York City Department of Health 2011 survey:

https://a816-healthpsi.nyc.gov/SASStoredProcess/guest?\_PROGRAM=%2FEpiQuery%2FCHS%2Fchsindex&year=2011

- New York City Community Boards served by St. Luke's and Roosevelt Hospitals whose membership contain representatives of Community-Based Organizations, Employees of FHQC's, and concerned residents. Additionally, the local community boards retrieve data from health care recipients and providers when assessing their district needs.
- William F. Ryan Health Centers / Ryan Chelsea Clinton
- Hatzolah Ambulance Service
- St. Luke's and Roosevelt Hospitals' Community Advisory Board
- Continuum's Physician Referral Service
- Community Health Education Department at St. Luke's and Roosevelt Hospitals
- St. Luke's and Roosevelt Hospitals' Emergency Department Discharge Data
- Actor's Fund
- St. Vincent's Catholic Medical Center's Closure Study

## St. Luke's Hospital

## St. Luke's Hospital



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Neighborhood:	Central Harlem Zip Codes: 10026, 10027, 10030, 10034, 10039
Percentage of Pa	
	Health Indicators: Percentage of Residents Non- Age Adjusted.
Weight:	40.6 Overweight 24.4 Obese
HPB:	23.5 yes/ever
High Chol:	19.4 yes/ever
Diabetes:	09.0 yes/ever
Smoker:	16.7
Fmr Smoker:	14.1
Binge Drinker:	24.8
Heavy Drinker:	No reliable data available
Asthma:	10.6 ever 1.8 currently
HIV Testing:	53.9 Within last 12 Mos
	24.8 More than 12 Mos
	21.3 Never Tested
Colonoscopy:	59.9 (only 50+)
Flu Vaccine:	42.4 Received flu vaccine
Self Reported He	ealth: (Rating Choice: Excellent, Very Good, Good, Fair or Poor)
	31.2 Excellent:
	33.1 Very Good:
	24.1 Good:
	11.6 Fair/Poor:

Neighborhood:	Upper West Side Zip Codes: 10023, 10024, 10025, 10069	
Percentage of Pa		
reicentage of ra		
	Health Indicators: Percentage of Residents Non- Age Adjusted.	
Weight:	29.7 Overweight 8.1 Obese	
HPB:	23.7 yes/ever	
High Chol:	24.7 yes/ever	
Diabetes:	No reliable data available yes/ever	
Smoker:	8.4	
Fmr Smoker:	23.7	
Binge Drinker:	28.8	
Heavy Drinker:	9.1	
Asthma:	8.1 ever No reliable data available currently	
HIV Testing:	27.1 Within last 12 Mos 41.7 More than 12 Mos	
	31.2 Never Tested	
	ST.2 Never rested	
Colonoscopy:	76.9 (only 50+)	
Flu Vaccine:	44.2 Received flu vaccine	
Self Reported Health: (Rating Choice: Excellent, Very Good, Good, Fair or Poor)		
-	31.2 Excellent:	
	26.6 Very Good:	
	31.3 Good:	
	10.8 Fair/Poor:	

Neighborhood: Percentage of Pa	<ul> <li>Washington Heights</li> <li>Inwood</li> <li>Tip Codes: 10031, 10032,10033, 10034, 10040</li> </ul>
	Health Indicators: Percentage of Residents Non- Age Adjusted.
Weight:	35.9 Overweight 20.1 Obese
HPB:	23.2 yes/ever
High Chol:	31.8 yes/ever
Diabetes:	06.1 yes/ever
Smoker:	11.6
Fmr Smoker:	21.8
Binge Drinker:	28.5
Heavy Drinker:	11.1
Asthma:	9.3 ever No reliable data available currently
HIV Testing:	42.4 Within last 12 Mos
	35.6 More than 12 Mos
	22.0 Never Tested
Colonoscopy:	70.6 (only 50+)
Flu Vaccine:	34.5 Received flu vaccine
Self Reported He	ealth: (Rating Choice: Excellent, Very Good, Good, Fair or Poor)
	19.3 Excellent:
	22.3 Very Good:
	33.5 Good:
	25.0 Fair/Poor:

# Roosevelt Hospital

## **Roosevelt Hospital**



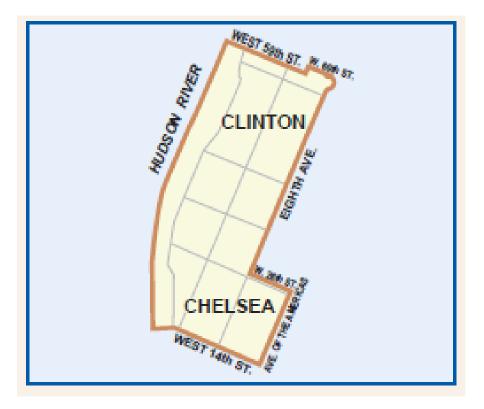
A Member of the Mount Sinai Health System

Neighborhood:	Upper West Side Zip Codes: 10023, 10024, 10025, 10069		
Percentage of Patients: 17			
	Health Indicators: Percentage of Residents Non- Age Adjusted.		
Weight:	29.7 Overweight 8.1 Obese		
HPB:	23.7 yes/ever		
High Chol:	24.7 yes/ever		
Diabetes:	No reliable data available yes/ever		
Smoker:	8.4		
Fmr Smoker:	23.7		
Binge Drinker:	28.8		
Heavy Drinker:	09.1		
Asthma:	8.1 ever No reliable data available Currently		
HIV Testing:	27.1 Within last 12 Mos		
	41.7 More than 12 Mos		
	31.2 Never Tested		
Colonoscopy:	76.9 (only 50+)		
Flu Vaccine:	44.2 Received flu vaccine		
Self Reported Health: (Rating Choice: Excellent, Very Good, Good, Fair or Poor)			
	31.2 Excellent:		
	26.6 Very Good:		
	31.3 Good:		
	10.8 Fair/Poor:		

Neighborhood: Percentage of Pa	<ul> <li>Chelsea Zip Codes: 10001, 10011, 10012, 10013. 10014, 10019</li> <li>Greenwich Village 10019</li> <li>Clinton Soho</li> <li>atients: 15.0</li> </ul>	
Health Indicators: Percentage of Residents Non- Age Adjusted.		
Weight:	26.7 Overweight 9.7 Obese	
HPB:	12.5 yes/ever	
High Chol:	26.8 yes/ever	
Diabetes:	03.4 yes/ever	
Smoker:	13.7	
Fmr Smoker:	23.6	
Binge Drinker:	37.5	
Heavy Drinker:	19.3	
Asthma:	9.1 ever 2.4 currently	
HIV Testing:	26.6 Within last 12 Mos	
	42.5 More than 12 Mos	
	30.9 Never Tested	
Colonoscopy:	60.1 (only 50+)	
Flu Vaccine:	46.3 Received flu vaccine	
Self Reported He	ealth: (Rating Choice: Excellent, Very Good, Good, Fair or Poor)	
	22.7 Excellent:	
	41.3 Very Good:	
	18.3 Good:	
	17.8 Fair/Poor:	

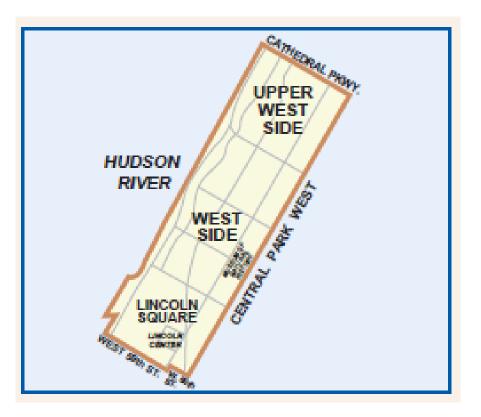
Neighborhood:	Central Harlem Zip Codes: 10026, 10027, 10030, 10034, 10039
Percentage of Pa	
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	Health Indicators: Percentage of Residents Non- Age Adjusted.
	5
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HPB:	23.5 yes/ever
High Chol:	19.4 yes/ever
Diabetes:	09.0 yes/ever
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	31.2 Excellent:
	33.1 Very Good:
	24.1 Good:
	11.6 Fair/Poor:

Neighborhood: Percentage of Patien	<ul> <li>Washington Heights Zip Codes: 10031, 10032,10033, 10034, 10040</li> <li>Inwood</li> <li>hts: 6%</li> </ul>	
Health Indicators: Percentage of Residents Non- Age Adjusted.		
Weight: 35	5.9 Overweight 20.1 Obese	
HPB: 23	3.2 yes/ever	
High Chol: 31	1.8 yes/ever	
Diabetes: 0 6	6.1 yes/ever	
Smoker: 11	1.6	
Fmr Smoker: 21	1.8	
Binge Drinker: 28	3.5	
Heavy Drinker: 11	.1	
Asthma: 9.	3 ever No reliable data available currently	
HIV Testing: 42	2.4 Within last 12 Mos	
35	5.6 More than 12 Mos	
22	2.0 Never Tested	
Colonoscopy: 70	0.6 (only 50+)	
Flu Vaccine: 34	4.5 Received flu vaccine	
Self Reported Health	n: (Rating Choice: Excellent, Very Good, Good, Fair or Poor)	
	19.3 Excellent:	
	22.3 Very Good:	
	33.5 Good:	
	25.0 Fair/Poor:	



Manhattan Community Board 4 was greatly affected by the closure of the St. Vincent's Catholic Medical Center. To assess the effects of the closure, Board 4 partook in a community health needs assessment. The needs identified by studies were:

- Access to Care
- Emergency Services
- HIV/AIDS
- Substance Abuse
- In addition Community Board 4 additionally found the need for:
- Services for seniors



According to the 2014 District Needs Statement the needs identified by studies were:

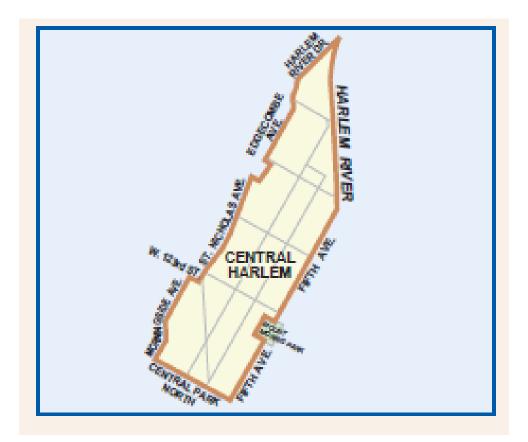
- Homeless Services including:
- AIDS
- Mental Health
- Addiction
- Services for seniors:
- In home services
- Adult Day Programs



Manhattan Community Board 9 has not done a Community Health Assessment for 2014.

The only one found from 2011 states:

- Ambulatory Care services for prenatal care,
- Services for addicted mothers and teenagers
- Mental Health Services for youth



According to their District Needs Statement:

- Cerebral Vascular Disease
- Cancer
- Heart Disease
- HIV Related Illness
- Obesity
- Substance Abuse
- Teen Pregnancy
- Access to care for Seniors

The Community Health Education Department undertook a survey during their outreach programs for 2013. The top three Community Health Needs identified for the Harlem area were:

- Diabetes
- Heart Disease
- Hypertension

#### According to the Emergency Department Discharge Data for 2012, the top five discharges were:

St. Luke's Hospital

Acute Uri Nos Alcohol Abuse Abdominal Pain Acute Pharngitis Lumbago

#### Roosevelt Hospital

Alcohol Abuse Abdominal Pain Acute URI NOS Syncope and Collapse Head Injury

#### St. Luke's and Roosevelt Hospitals' Community Advisory Board:

A survey of the members of the Hospital's own Community Advisory Board found the following health needs:

Access to Primary Care	Hypertention
Cancer	Mental Health
Diabetes	Rehab (Physical) Services
Family Medicine Services	Services for Seniors
Heart Disease	Substance Abuse

#### **Continuum-Wide Results**

The top 11 most requested specialties to our Physican Referral Line (Jan2013 - June 2013):

<u>Specialty</u>	# of Requests
Internal Medicine/Family Practice	1,394
Orthopedics	968
Surgery (Including General, Breast, Colorectal, Vascular & Podiatry)	568
OB/GYN	386
Neurology	290
Dermatology	253
ENT/Head and Neck	249
Psychiatry/Psychology	222
Gastroenterology	219
Rehab Medicine	198
Pediatrics/Pediatric Specialties	193

The top five Community Health Needs identified by the Hatzolah Volunteer Ambulance Service, serving the Lower East Side and West Side of Manhattan and the Williamsburg section of Brooklyn, in order of importance:

- Cardiology
- Neurology
- Pulmonary/Respiratory
- Pediatrics
- Orthopedics

The top five Community Health Needs identified by the The William F. Ryan Community Health Center, serving the Upper West Side of Manhattan, in order of importance:

- Diabetes
- Hypertension
- Asthma
- Obesity
- Tobacco Cessation

The top five Community Health Needs identified by The Ryan /Chelsea-Clinton Community Health Center, serving the Greenwich Village and Chelsea, in order of importance:

- Diabetes
- Hypertension
- Asthma
- Obesity
- Kidney Disease

## **Community Health Outreach and Education**

St. Luke's and Roosevelt Hospitals maintain a robust series of education and screening programs through our **Community Health Education and Outreach Programs**. For the last twenty years, this has been accomplished through the work of the **Department of Government & Community Affairs** and its community outreach program. The Department's integral partnerships and inter-departmental and external collaborations have only heightened healthcare delivery and community outreach accessibility. The Hospitals are committed to the health screenings and other activities staged through their outreach efforts. They have taken specific steps to ensure that they are closely targeted to the community's health needs.

#### Cardiovascular Diseases and Diabetes

African Americans and Latinos represent one of the highest-risk groups for Type 2 Diabetes and Hypertension in terms of prevalence and disease burden. The Department of Government and Community Affairs has been addressing health disparities in the underserved communities by providing innovative outreach activities offered through the Department's Community Health Education and Outreach Programs. Last year, the department participated in more than 30 events, conferences, lectures, street festivals, cultural festivals, and other community outreach initiatives, conducting health screenings which included blood pressure, total cholesterol, HDL, and blood glucose, and prostate cancer, at churches, beauty salons, and community centers in Harlem. More than 1,200 people (predominantly African American and Latino/Hispanic) were screened and, when medically necessary, referred participants to one of St. Luke's or Roosevelt Hospitals' medical facilities. In addition, this department has led the **Barbershop Quartet** Initiative and **CHOSEN Program** (*Church-based Health Outreach, Screening and Education Network*) each serving as a vehicle for delivering screening, prevention and health education services to a largely indigent and medically underserved and underrepresented minority populations.

#### **Childhood Obesity**

The New York Obesity Research Center (TNYORC), at St. Luke's and Roosevelt Hospital, has a strong professional education program, committed to advancing the training of physicians and scientists who take pride in serving at-risk members of our communities surrounding the Harlem. Although specific physiological and environmental factors are known to increase the risk of obesity, little is known about how these factors interact in individual children and within economically disadvantaged communities with a higher than average prevalence of obesity, such as those within SLR's catchment area. Over the last decade, TNYORC's has made combating the increasing childhood obesity problem a prime focus. This is in response to the growing racial and ethnic disparities, and disproportionate health outcomes, experienced in our communities. Some ways they have strived to combat this epidemic include:

- Body Composition Studies: Where they utilize their pre-eminent body composition laboratory to account for accurate non-invasive measurement of BMI.
- Food Intake Studies: where they utilize The Child Taste and Eating Lab to make nutritious food more appealing and edible to children.
- Epidemiological Studies: Where they continually design research projects that focus on areas that assess long term implications and outcomes of childhood obesity. Thereafter, they intend to utilize

this research to develop new strategies for preventing and treating obesity, in the Latino and African American communities

St. Luke's and Roosevelt Hospital Centers have also collaborated with numerous Community-Based Organizations to ensure that the hospitals are addressing the community's health needs. They have partnered with organizations such as:

- Abyssinian Baptist Church
- Alpha Phi Alpha Senior Citizens Center
- American Diabetes Association
- Assemblyman Danny O'Donnell's Office
- Assemblyman Keith Wright
- Bat For A Cause
- Caanan Baptist Church
- Christian Cultural Center
- Clergy and Citizens With A Purpose
- Community School Districts #3 and #5 (Harlem)
- Duryea Presbyterian Church
- Eastchester Presbyterian Church

- Emblem Health
- Greater Harlem Chamber of Commerce
- Healthfirst Health Plan
- Iris House, Inc
- National Council of Jewish Women NY Section
- New York City Housing Authority
- New York Yankees
- Omega Psi Phi Fraternity
- St. Gregory the Great Parish
- Teacher's College
- Touro College
- West Manhattan Chamber of Commerce

In addition, the department of Government & Community Affairs has ongoing collaboration with internal medical departments which include:

- Breast Surgery Department
- Cardiology Department
- Endocrinology Department
- H.E.A.L. Center Program
- Neurology Department
- Pediatric Department

- Psychiatry Department
- The New York Obesity Research Center
- Urology Department
- Vascular Surgery Department
- Women, Infants and Children Program (WIC)

## Caring For Our Underserved Communities by Reducing Racial Health Disparities and Disproportionate Health Outcomes

St. Luke's and Roosevelt Hospitals have developed strategies for specific groups of New Yorkers to make their lives healthier and better. Each new initiative is designed to provide culturally-sensitive care, build awareness among hospital staff about the differences in diverse populations, and provide improved educational opportunities and access to quality care. The Community Health Education and Outreach Program is known for its innovative outreach initiatives, including screening hundreds of African Americans and Latinos across various socio-economic and health coverage backgrounds in Harlem and its surrounding communities. These screenings focus on cardiovascular disease and diabetes prevention and awareness. Additionally, the Hospital and its Community Health Education and Outreach Programs, address behavioral modification and disease-management by referring community members to the their primary care facilities in order to manage their respective diseases.

- Out of approximately 1,200 persons that were screened, 57% were female and 43% were male.
- Fifty-eight percent of the females had abnormal glucose levels while 42% of the males also had elevated glucose levels indicative of a possible diagnosis of Diabetes Mellitus (Type 2).
- The total cholesterol blood levels were also measured, with 67% of the female participants having elevated blood levels versus 33% of the males.
- The blood pressure readings were elevated for fifty one percent of the females and 49 percent of the males screened.

After participants are screened for diabetes, hypertension, and heart disease they have an individualized consultation with a medical professional who discusses the screening results with them. Persons with abnormal results are referred to their primary care physicians for further evaluation. If a participant has a severely abnormal result, they are referred to the nearest emergency room for immediate medical attention. Participants are counseled on proper nutrition, daily exercise, the importance of medical follow-up with their primary care provider and adherence to their medications, if applicable. Departmental staff follow-up on abnormal results with a telephone call and/or a letter reminding the participant on the importance of further evaluation.

If a participant is uninsured or underinsured, they are referred to the Hospital Center's H.E.A.L. Center finance program. The Center provides assistance in applying for public health insurance. However, if the participant is ineligible for public health insurance they are placed on the hospital's sliding fee scale so they can receive affordable health care services.

#### **Combating Childhood Obesity**

It is estimated that 15 percent of American children are obese. Over the past twenty years, the proportion of overweight children ages 6 through 11 has more than doubled, and the rate for adolescents ages 12 through 18 has tripled. Additionally, obese children are at increased risk of developing high cholesterol, high blood pressure and Type 2 Diabetes. According to the CDC, obesity is more prevalent among African Americans and Hispanic/Latinos.

There are significant racial and ethnic disparities in obesity prevalence among U.S. children and adolescents, in comparison to studies conducted almost 20 years ago. In 2007-2008, the prevalence of obesity was significantly higher among Mexican-American adolescent boys (26.8%) than among non-Hispanic white adolescent boys (16.7%). In contrast to data extrapolated from the CDC's National Health and Nutrition Examination Survey (NHANES III) (1988-1994) there was no significant difference in prevalence between Mexican-American and non-Hispanic white adolescent boys. Among girls in the period 2007-2008, non-Hispanic black adolescents (29.2%) were significantly more likely to be obese compared with non-Hispanic white adolescent girls (16.3%) were more likely to be obese compared with non-Hispanic white adolescent girls (8.9%) in the period 1988-1994, according to the same data from NHANES III. Subsequently it is a primary focus of **The New York Obesity Research Center**, to reduce racial and ethnic disparities as listed below:

Between 1988-1994 and 2007-2008 the prevalence of obesity increased:

- From 11.6% to 16.7% among non-Hispanic white boys.
- From 10.7% to 19.8% among non-Hispanic black boys.
- From 14.1% to 26.8% among Mexican-American boys.

Between 1988-1994 and 2007-2008 the prevalence of obesity increased:

- From 8.9% to 14.5% among non-Hispanic white girls.
- From 16.3% to 29.2% among non-Hispanic black girls.
- From 13.4% to 17.4% among Mexican-American girls.

Since the majority of the communities we serve reflect these racial and ethnic groups, SLR is committed to counteract the burdens of pediatric obesity through community outreach in schools and neighborhoods throughout the city and state.

In addition to these programs, the Infectious Disease Control Department maintains an active program of Community Influenza Vaccination Programs at the following locations:

- Encore West
- Lincoln Synagogue
- Mount Calvary
- Notre Dame Church
- Assemblymember Rosenthal's Office
- Schwab House
- Self Help
- St. Gregory Church
- St. John the Divine Soup Kitchen
- St. John the Divine Employees
- St. Paul's Church
- Young Israel



## For Additional Information, Contact:

#### PLEASE CONTACT:

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