



# 2019 Community Health Needs Assessment

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Greater Bridgeport Community Public Forum  
April 4, 2019

# We are now....Health Improvement Alliance (HIA)

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# Agenda

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- Overview of the Community Health Needs Assessment (CHNA) Process
- Summary of Data
  - Key Informant Survey
  - DataHaven Wellbeing Survey
  - Community Conversations
- 2019-2022 Health Priorities
- Community Health Improvement Plans (CHIP) & Implementation Strategies
- Discussion/Questions & Answers



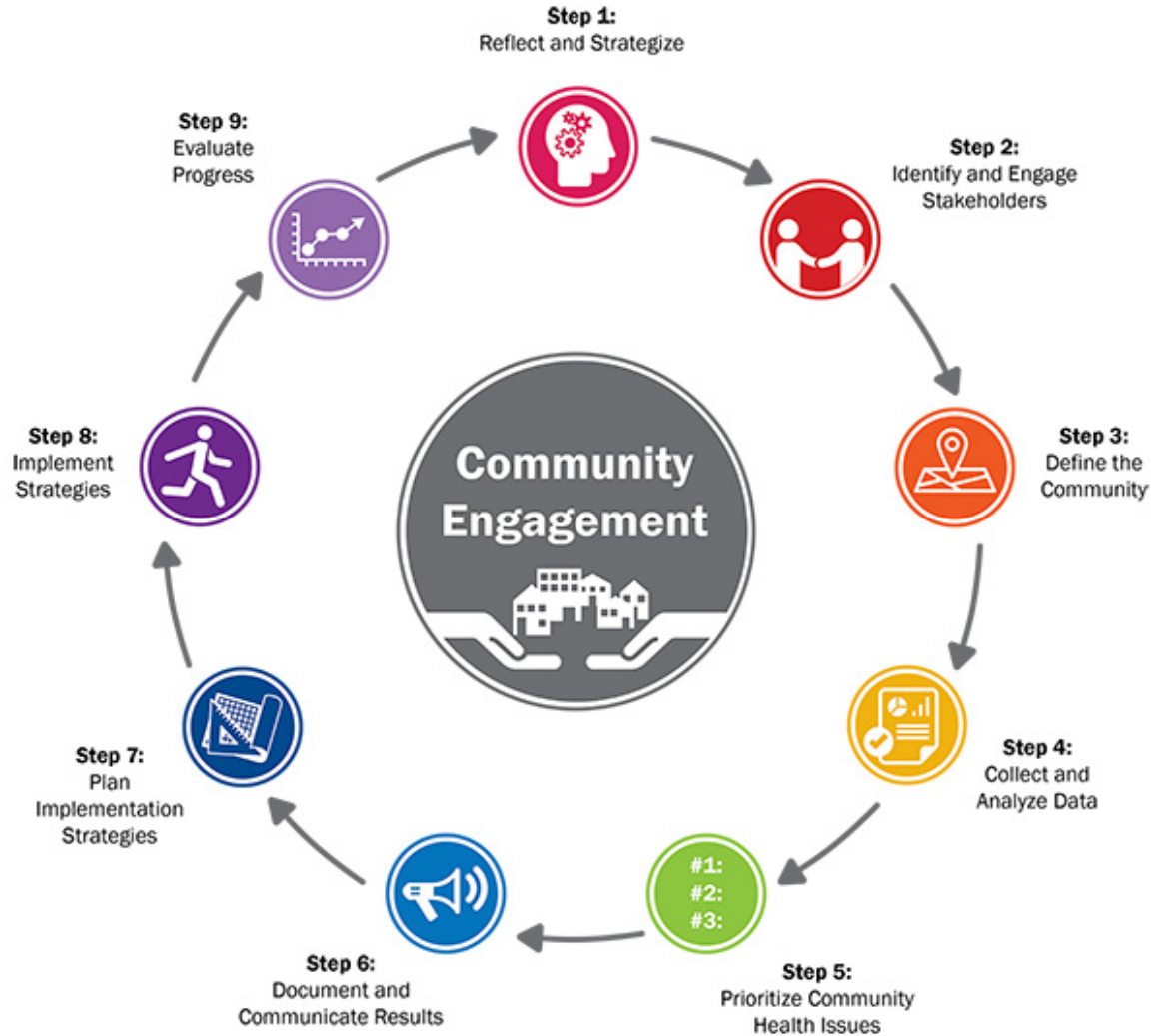
# Community Health Needs Assessment

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- Health Care Reform Law, 2010
  - Internal Revenue Service
- Three-year cycle  
(e.g. 2016, 2019, 2022,....)
- Collaborative effort
  - Public Health (PHAB local/state, 5-year)
  - Broad interests of the community
- Two main elements:
  - Assessment
    - Primary
    - Secondary
  - Implementation Strategy
    - Addressing significant health needs



# Community Health Needs Assessment Process



# Community Health Coalition

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- Multi-stakeholder coalitions working with the community to improve health and well-being
- Healthcare Providers
  - Hospitals
  - Federally Qualified Health Centers
- Health Departments/Districts
- Academic Partners
- Social Service Agencies
- Non-profit Organizations



# Health Improvement Alliance Partners

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## PROVIDERS

- Bridgeport Hospital/YNHHS
- St. Vincent's Medical Center
- Optimus Healthcare
- Southwest Community Health Center
- AmeriCares Free Clinic of Bridgeport
- Greater Bridgeport Medical Assoc.
- Northeast Medical Group
- Pediatric Healthcare Associates
- Visiting Nurse Services of CT

## HEALTH DEPARTMENTS

- City of Bridgeport Department of Health and Social Services
- Fairfield Health Department
- Monroe Health Department
- Trumbull Health Department
- Stratford Health Department
- Easton Health Department

## GOVERNMENT

- City of Bridgeport/City Council
- Town of Stratford/City Council
- Town of Fairfield
- Town of Trumbull
- Town of Monroe



# Health Improvement Alliance Partners

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## **SCHOOLS**

- Bridgeport Public School System
- Bridgeport Hospital School of Nursing
- Fairfield University School of Nursing
- Sacred Heart University School of Nursing
- St. Vincent's College Nursing Program
- Southern CT State University
- Housatonic Community College
- University of Bridgeport

## **FAITH BASED**

- Greater Bridgeport Council of Churches
- Catholic Charities

## **SOCIAL SERVICE AGENCIES**

- Bridgeport Rescue Mission
- Council of Churches Hunger Outreach Network (HON)
- United Way of Coastal Fairfield County
- Wholesome Wave
- Central CT Coast YMCA
- YMCA Kolbe Daycare Center
- Green Village Initiative





# Health Improvement Alliance Partners

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## **BUSINESSES**

- Bridgeport Regional Business Council

## **HOUSING**

- Supportive Housing Works

## **MENTAL HEALTH PROVIDERS**

- Recovery Network of Programs
- The Connection
- Continuum of Care
- Liberation Programs

## **PAYERS**

- Community Health Network
- Access Health CT
- Value Options

## **ADVOCACY GROUPS**

- American Diabetes Association
- American Heart & Stroke Association
- Bridgeport Alliance for Young Children  
Bridgeport Child Advocacy Coalition
- Bridgeport Food Policy Council
- Southwestern Area Health Education Center
- DataHaven
- Hispanic Health Council

## **STATE AGENCIES**

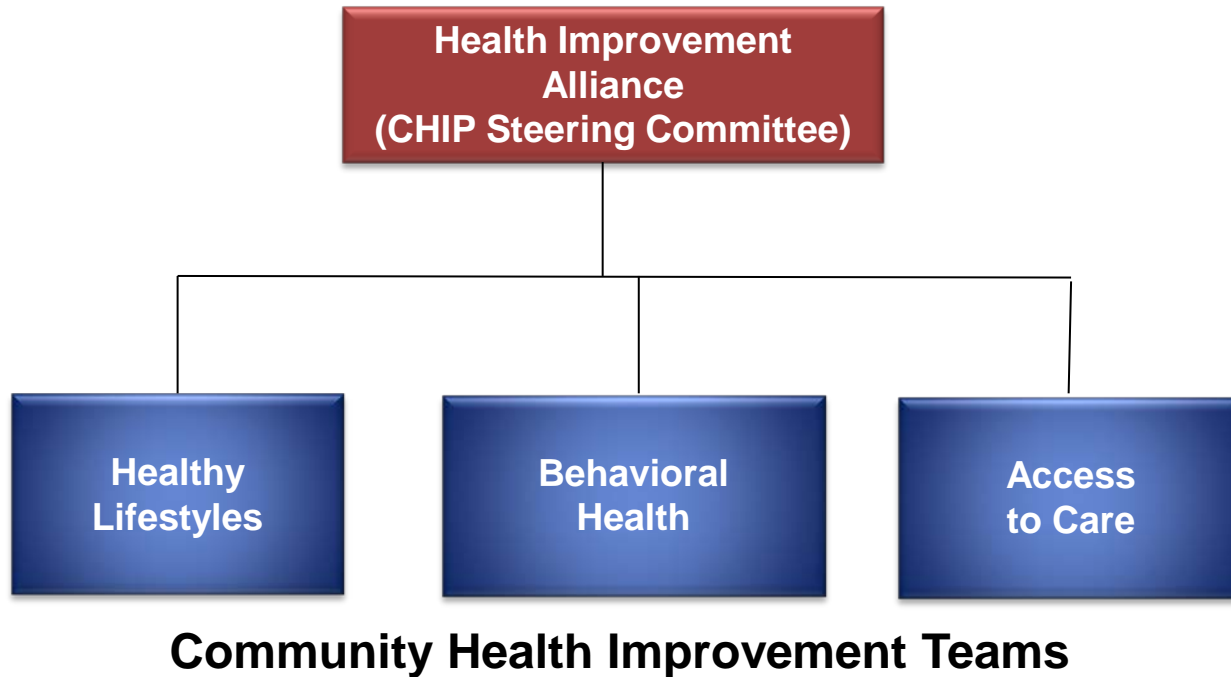
- CT Dept of Mental Health & Addiction Services/Greater Bridgeport Mental Health Services
- CT Department of Public Health
- CT Department of Social Services
- Southwest CT Mental Health Board



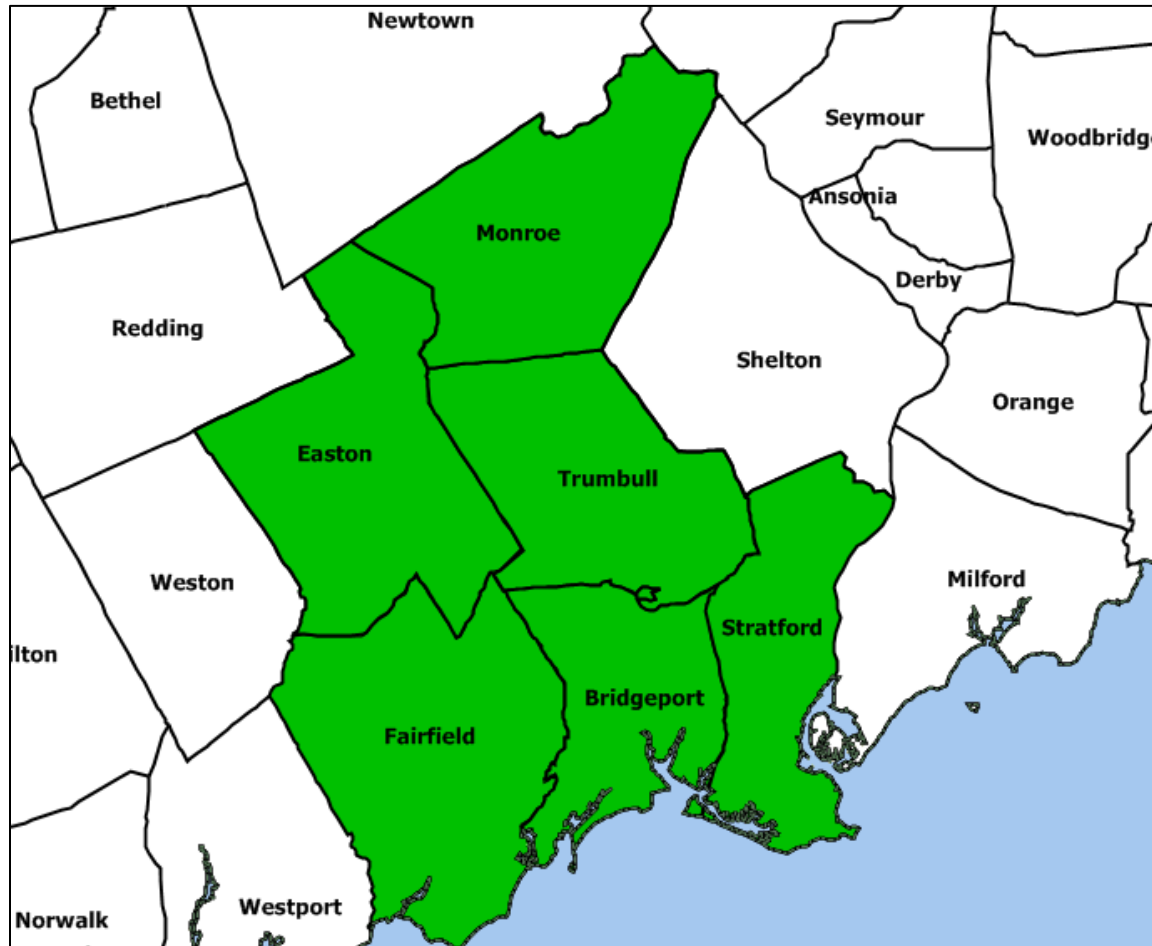


## **Health Improvement Alliance (formerly Primary Care Action Group)**

- A community coalition that has worked to improve health since 2003
- Conducted first CHIP in 2009



# Greater Bridgeport Planning Region

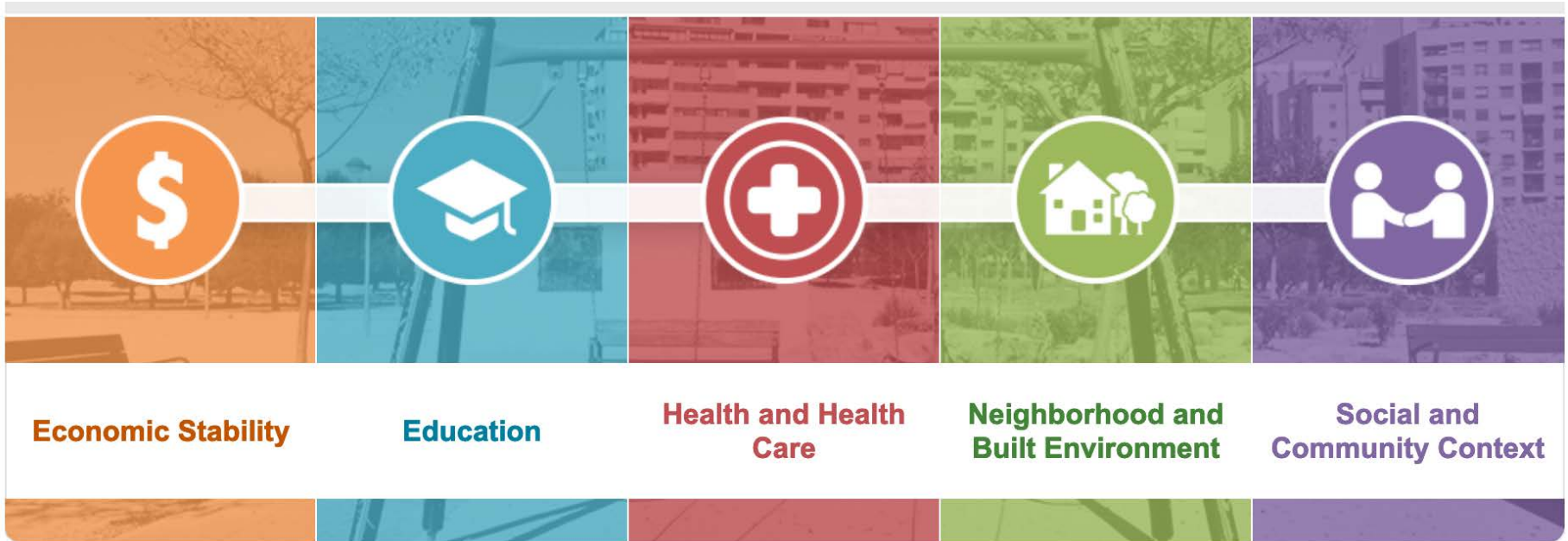


# 2018-19 CHNA & CHIP Timeline

	WINTER 2018	SPRING 2018	SUMMER 2018	FALL 2018	WINTER 2019	SPRING 2019	SUMMER 2019
Key Informant Survey (YSPH Consulting Group)							
CT Well-Being Survey Conducted (DataHaven)							
Secondary Data Collection (CHIME/DataHaven)							
Primary & Secondary Data Findings Presented (DataHaven)							
Community Engagement (Health Equity Solutions)							
Asset Mapping (YSPH Student Consulting Group)							
Community Meetings / Prioritization (Health Equity Solutions)							
CHIP Updated (Health Equity Solutions)							
2019 Community Indexes (DataHaven)							
Hospital Board Presentations							



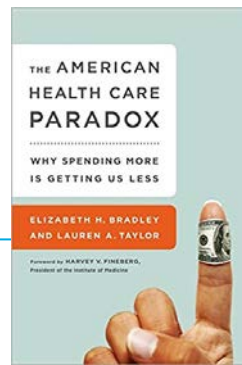
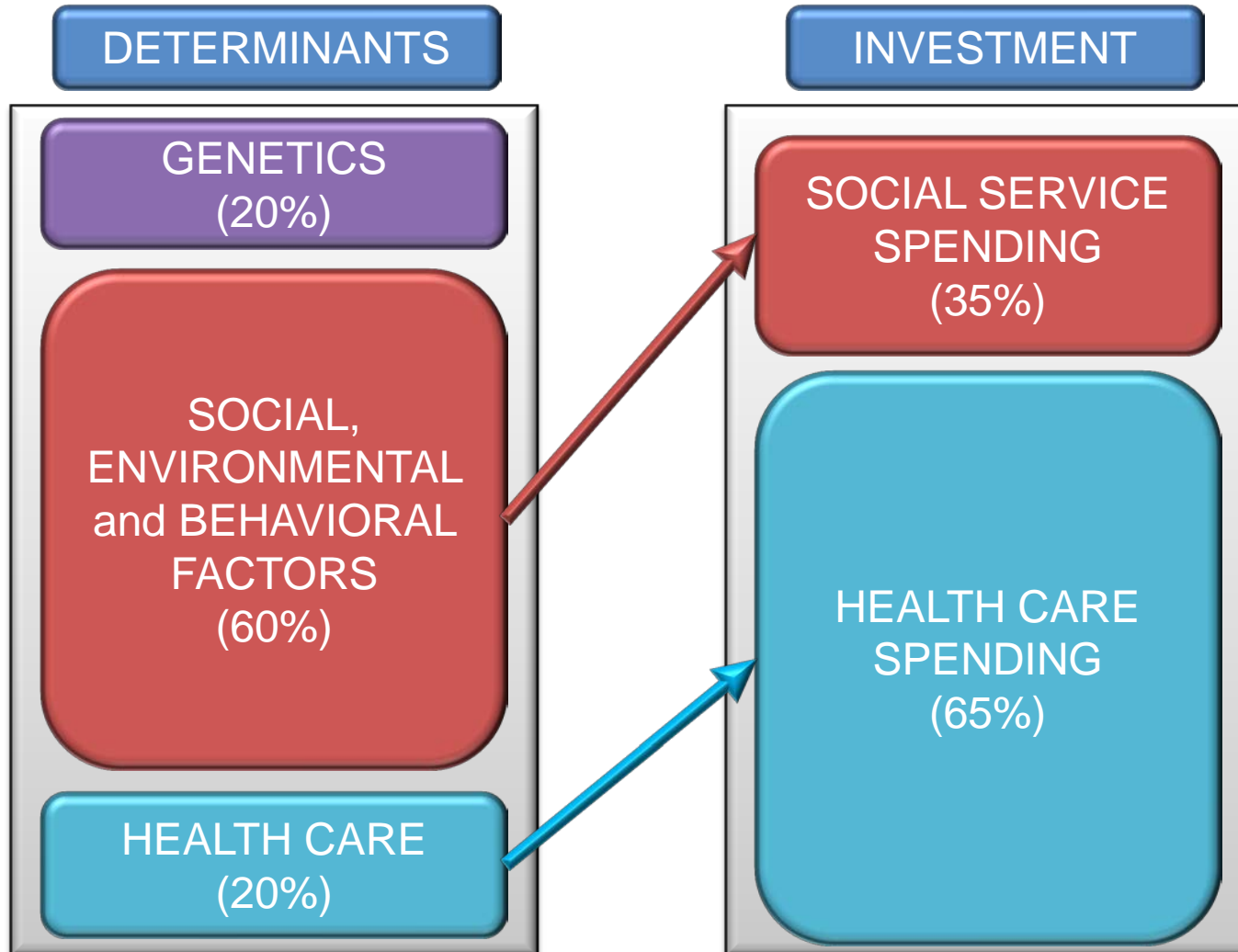
# Social Determinants of Health (SDoH)



Source: *HealthyPeople 2020*



# Investment Mismatch



Source: *The American Health Care Paradox*, Elizabeth H. Bradley and Lauren A. Taylor, 2013



# Key Informant Survey

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- Key Informant Categories
  - Group 1: Health and Human Services (58% response rate)
  - Group 2: Government and Community Leadership (42% response rate)
- Conducted throughout March 2018
- 101 surveys in Greater Bridgeport (36% response rate)



# Key Informant Survey

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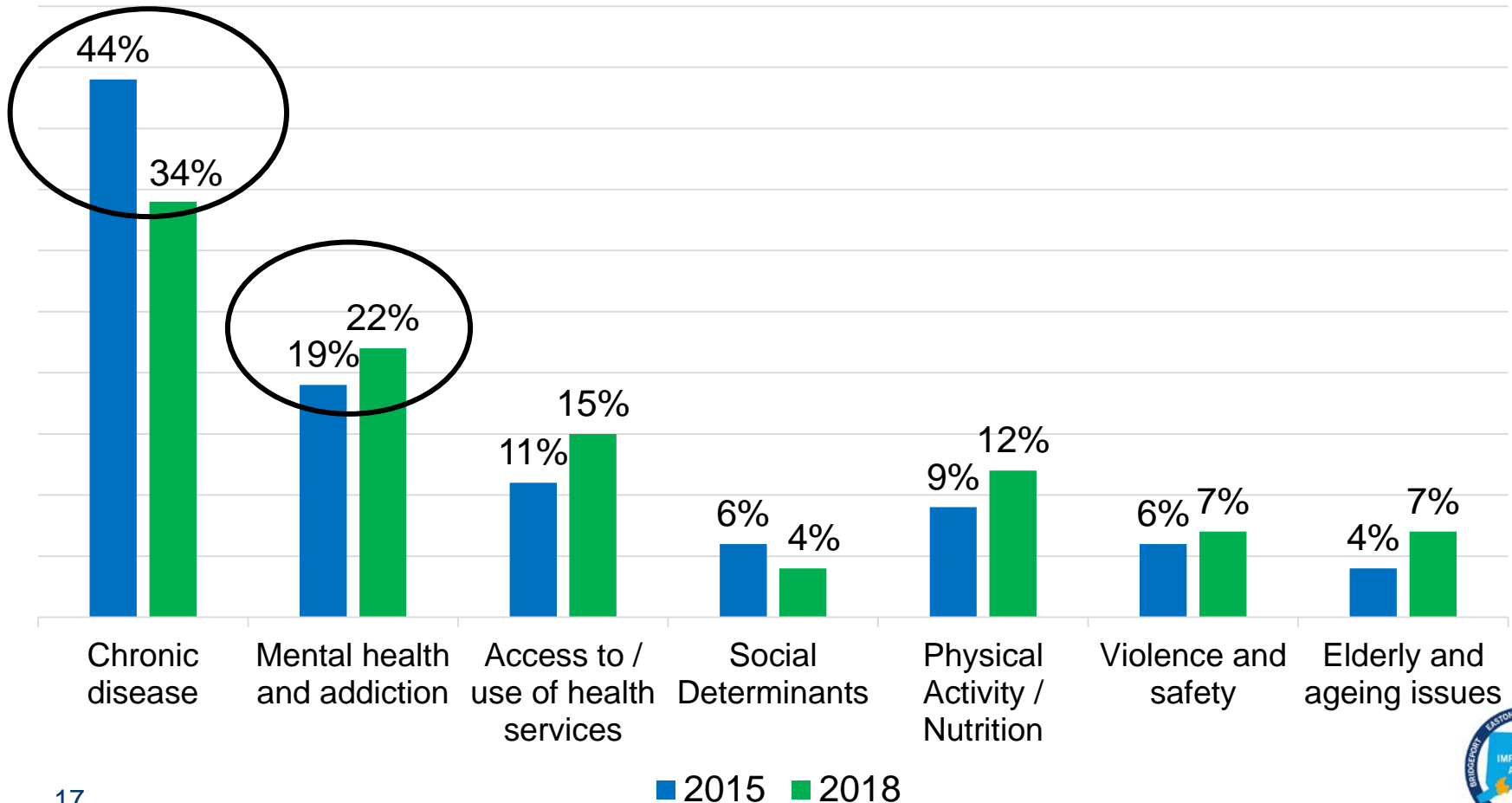
- Observations:
  - Awareness of CHNA decreased between 2015 and 2018
  - Respondents believe there is limited access to mental/behavioral health care despite rising concerns as a top health issue
  - Many respondents were uncertain regarding enough/adequate providers (Medicaid, Bilingual) and transportation





# Key Informant Survey: Top health concerns

Chronic disease, mental health and addiction remain respondents' greatest concern



# Key Informant Survey: Greatest negative impact for adults

## Physical (17%)



- Poor nutrition
- Lack of physical activity
- Obesity

## Social (40%)



- Lack of education or skills
- Stress
- unsafe housing

## Economic (43%)



- Lack of transportation
- Health insurance coverage

# Key Informant Survey: Greatest negative impact for children

## Physical (29%)



- More after school activities
- Lack of exercise
- Obesity
- Nutrition education

## Social (60%)



- Social isolation
- Technology
- Safe housing
- Education

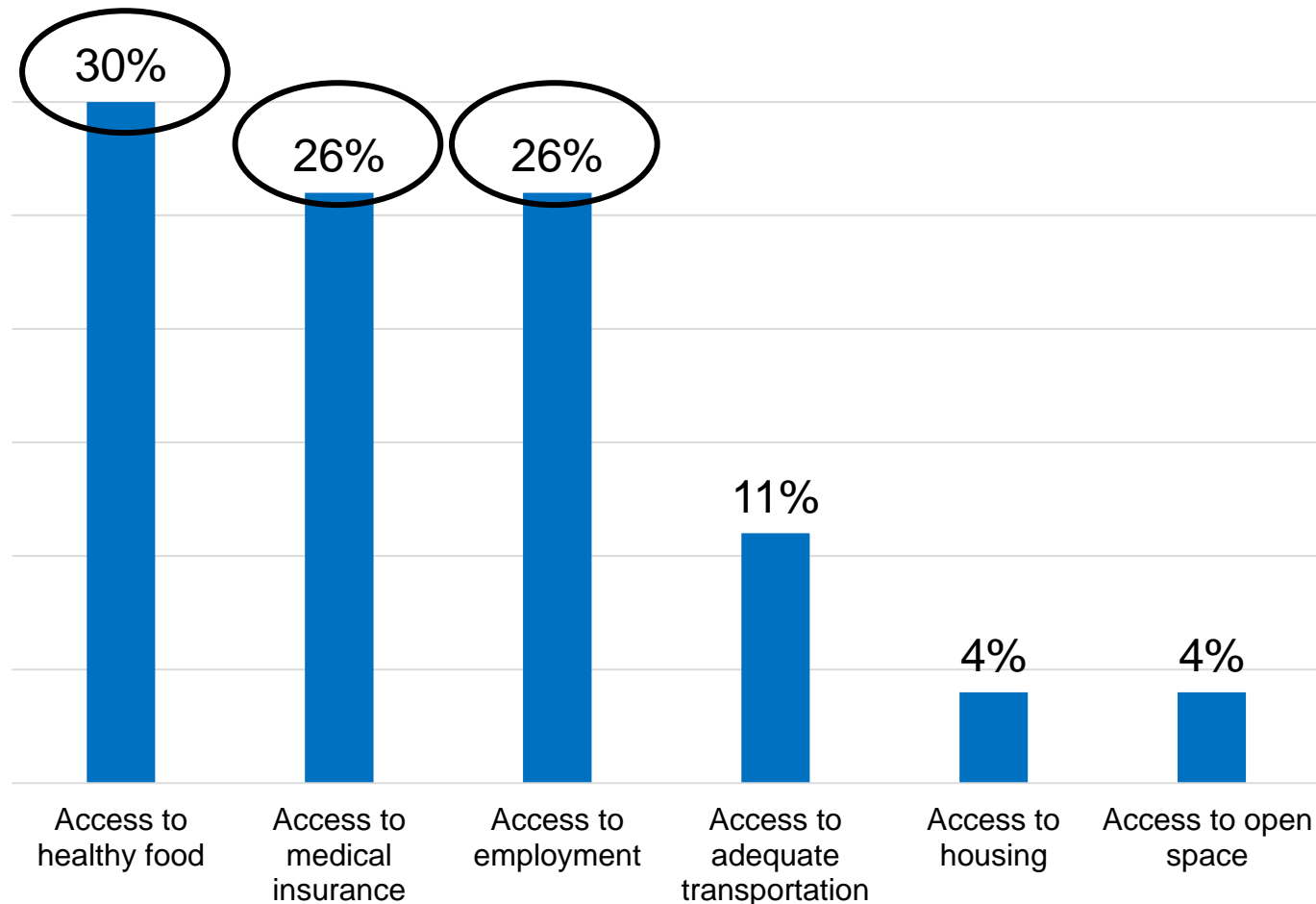
## Economic (11%)



- Employment
- Primary care access
- Cost of healthy food
- Health care costs

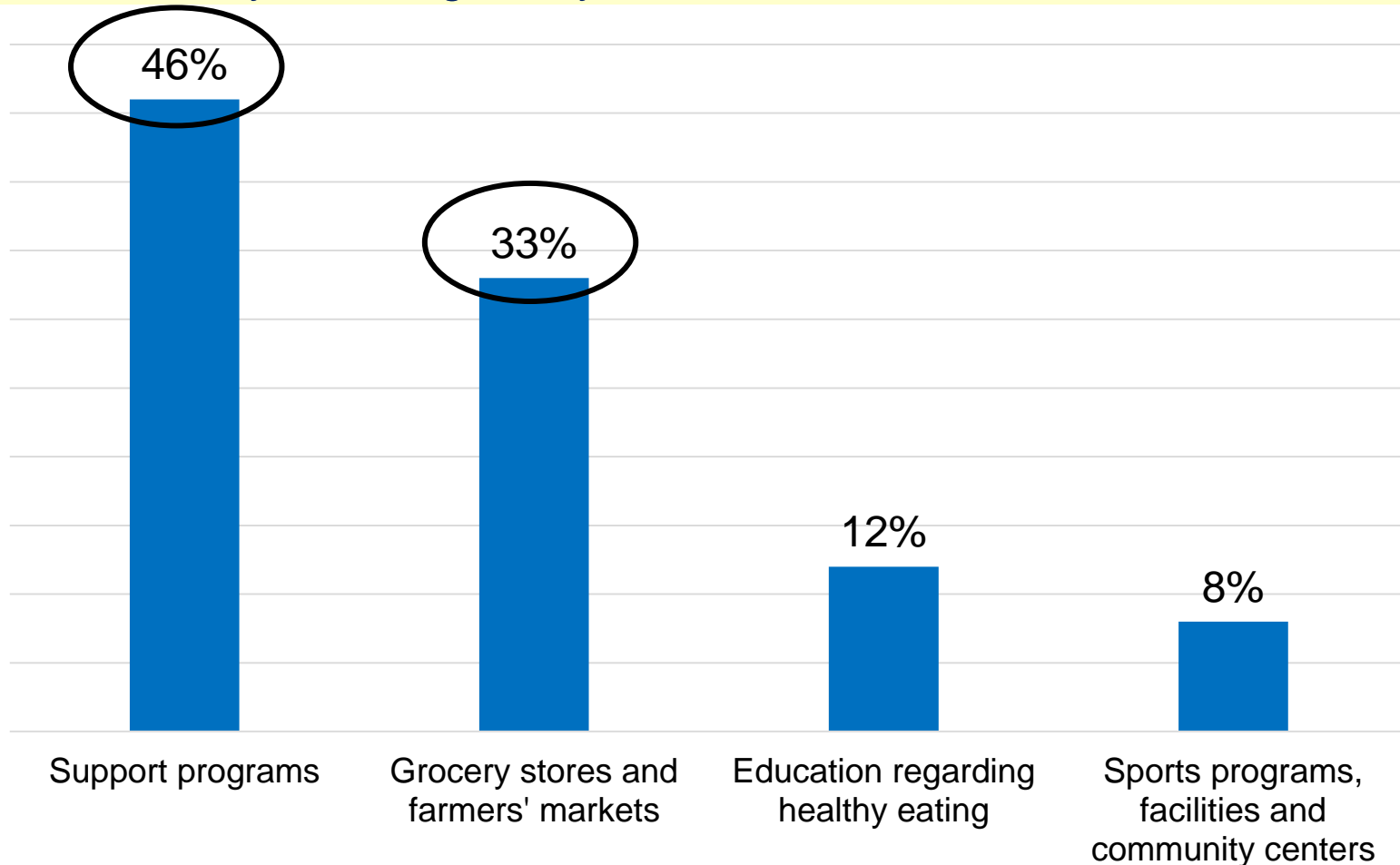
# Key Informant Survey: Rank socio-economic barriers

Access to healthy food was the most important factor followed by access to medical insurance and employment

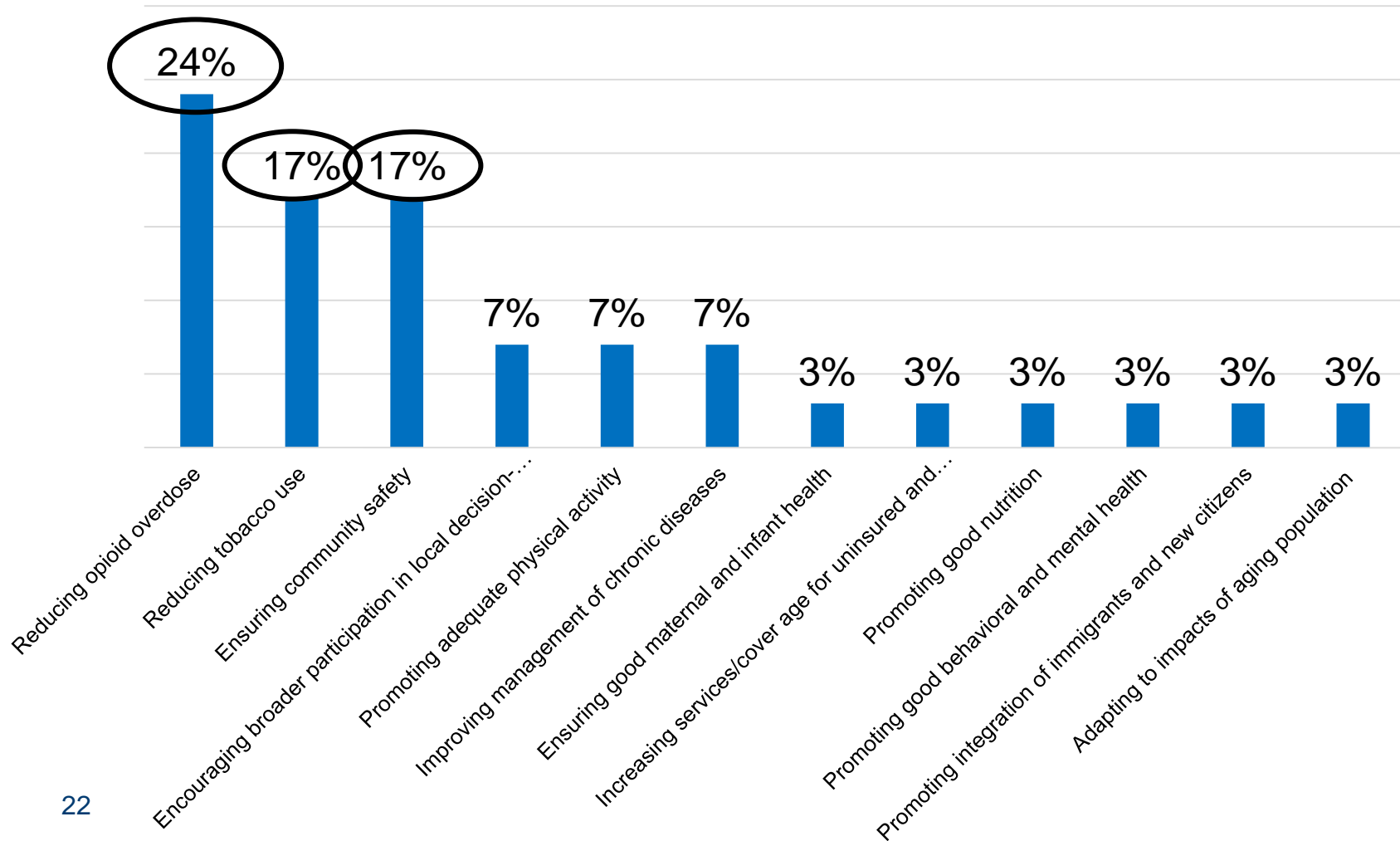


# Key Informant Survey: Rank environmental barriers

Lack of support programs was the most important factor followed by lack of grocery stores and farmers' markets



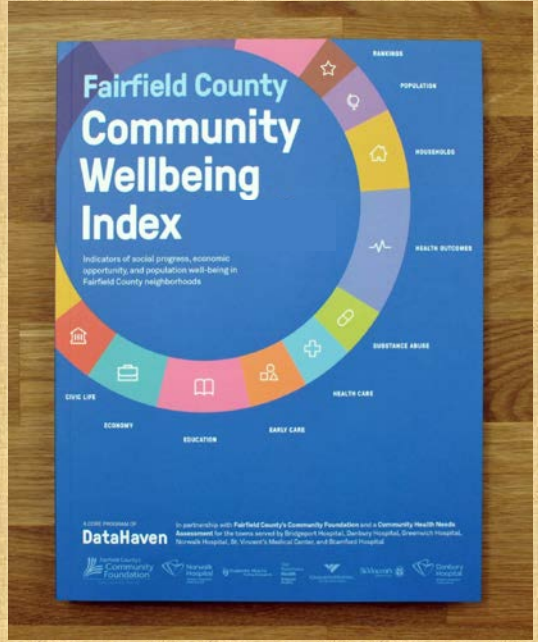
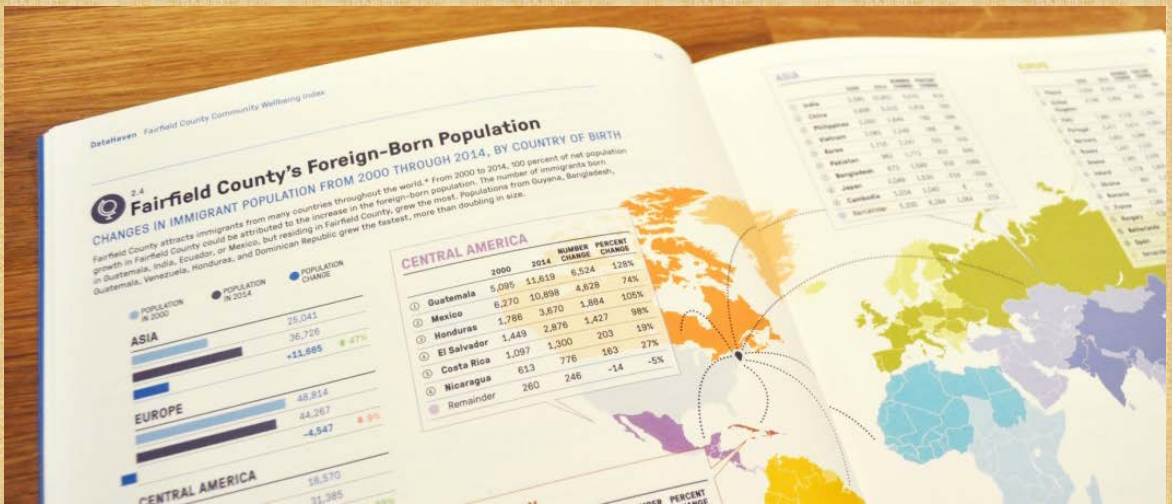
# Key Informant Survey: Policymakers Top Concerns



# Community Wellbeing Survey: 2018



**DataHaven**  
The Twenty Fifth Year



Website: [www.ctdatahaven.org](http://www.ctdatahaven.org)

# Survey Methodology

- In-depth interviews with nearly 16,043 Connecticut and New York residents in 2018
- Largest wellbeing survey in the US
- Topics covered: physical & mental health, economic opportunity, housing, transportation, and civic engagement.
- Conducted & weighted to be representative of adults in each area
- Randomly-selected landline & cell phone numbers (any area code) were called to ensure a representative sample
- Conducted in English & Spanish





# 2018 Connecticut Wellbeing Survey

- 16,043 interviews throughout CT (every town) including:
  - 4,680 in Fairfield County
  - 1,715 in Greater Bridgeport
  - 1,001 in Bridgeport
  - 230 in Stratford
  - 240 in Fairfield
  - 141 in Trumbull
  - 72 in Monroe
  - 31 in Easton



Note: Easton interviews are not enough to be statistically significant as a stand alone category and are not reported as an individual town



# 2015-2018 Social Trends in Greater Bridgeport

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## **Economic Stability**

- Improved perception of job opportunity
- Rising financial stress: ex, adults with <6 months of savings increased (Region: 46% to 50% Bridgeport: 55% to 61%)
- Increase in food insecurity: (Region 16% to 18%; Bridgeport 25% to 28%)

## **Neighborhood and Physical Environment**

- Significant increase in adults in Bridgeport who do not feel safe walking at night in their neighborhood
- Bridgeport residents agree people in their neighborhood are trying to improve their neighborhood
- Bikeability perceptions stable (55% of region and 47% of city residents agree there are safe places to bike, same as 2015)

## **Community and Social Context**

- Very little change, showing belief among most adults that area is a good place to live
- Confidence in ability to influence local government rose from 59% to 68%



# 2015-2018 Social Trends in Greater Bridgeport

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## **BMI (from height/weight) and Diabetes**

- Obesity rate rose:
  - From 28% to 33% in Greater Bridgeport
  - From 36% to 40% in Bridgeport
  - Diabetes rate also rose from 9% to 11%

## **Tobacco**

- Stable rates of smoking in Greater Bridgeport (from 15% to 15%)
- Rise in vaping (19% of adults having tried e-cigs, up from 16% in 2015)
- Adults using e-cigarettes in past 30 days:
  - 10% of Greater Bridgeport adults
  - 12% of city adults
  - 8% statewide

## **Mental Health**

- Higher reported anxiety, in the city & region
- Slightly lower levels of life satisfaction and happiness



# 2015-2018 Social Trends in Greater Bridgeport

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## Health Care Access

- Adult health insurance coverage rate may have dropped slightly
  - 93% to 92% in region
  - 90% to 88% in Bridgeport
- Dental visit in the past year declined
  - 71% of adults in region down from 74% in 2015
  - 66% of adults in Bridgeport dropped to 61%
- Adults not getting the medical care they need increased
  - 7% to 11% in region
  - 11% to 14% in Bridgeport
- Adults who postponed care rose from 21% to 24% in region

# 2015-2018 Social Trends in Greater Bridgeport

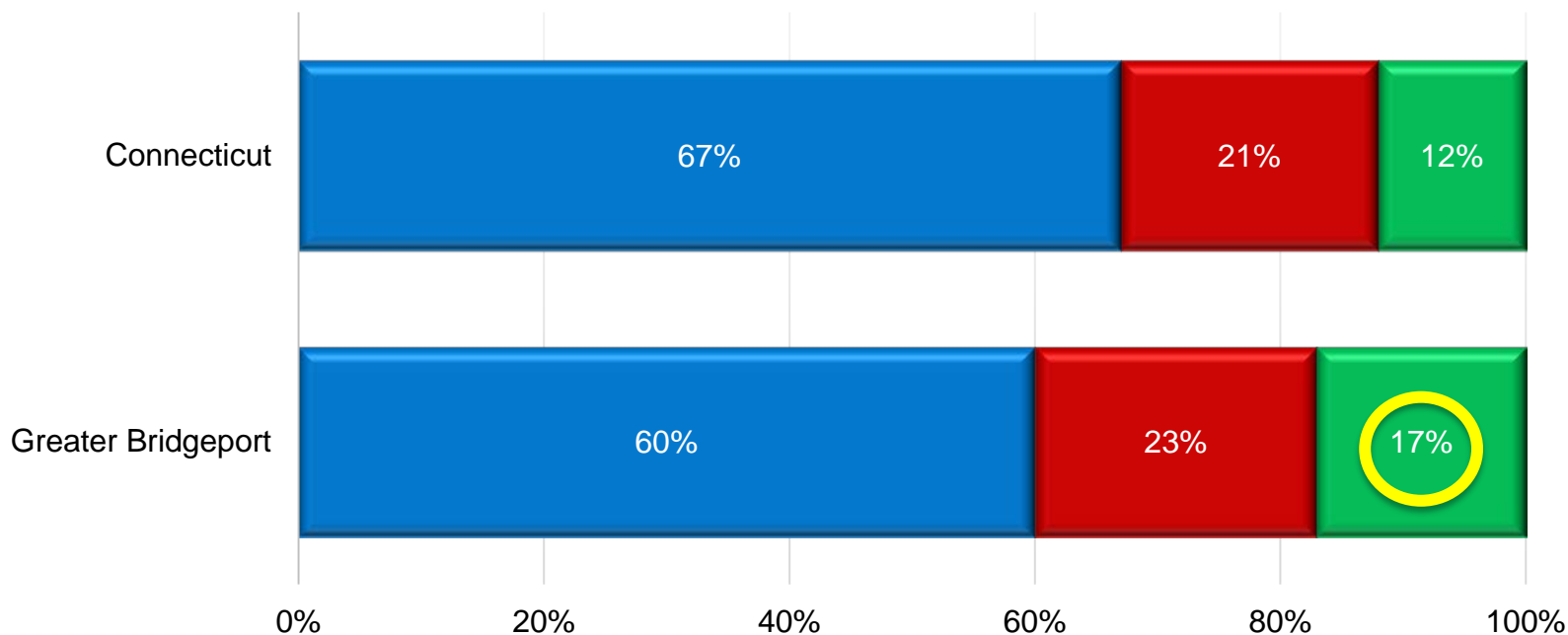
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## Health Care Access

- Barriers include:
  - Cost
  - Lack of time
  - Unable to get an appointment
  - Caregiving
  - Lack of adequate insurance
  - Health plan not paying
  
- Adults with limited income are more likely to be impacted by cost and health insurance-related issues
  
- Regional no “medical home” rates (no single provider)
  - 14% of adults
  - 25% of Latinos
  - 27% of adults age 18-34



# How well would you say you are managing financially these days? Would you say you are...



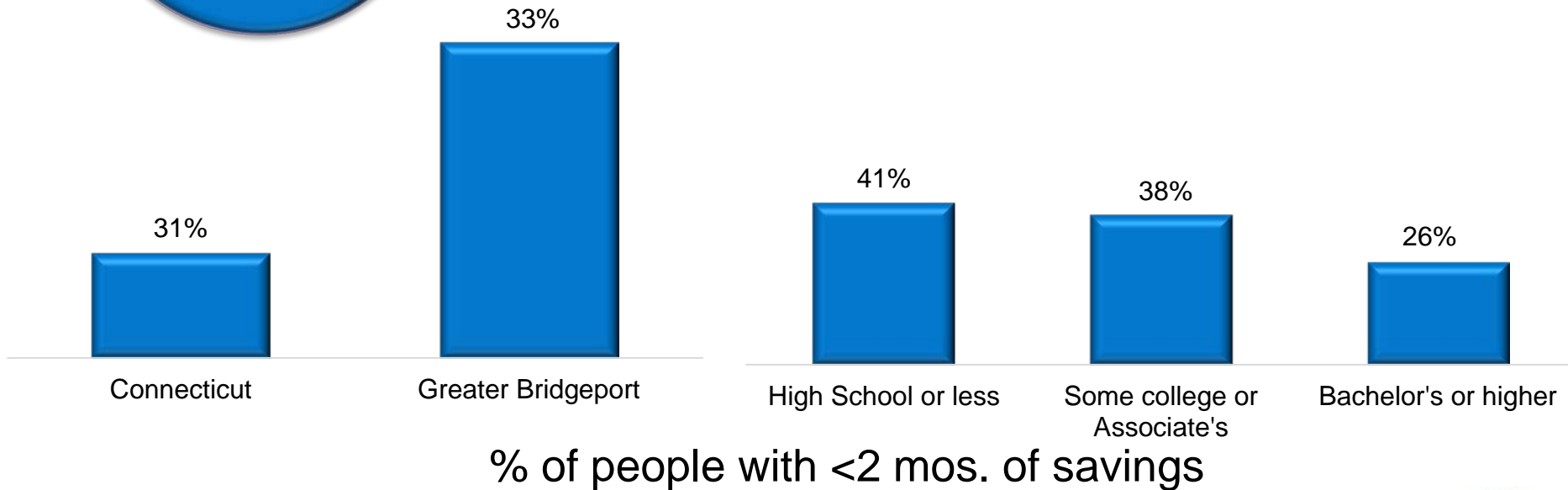
■ Living comfortably/Doing Alright   ■ Just Getting by   ■ Finding it difficult/ very difficult   ■ Refused



# Financial Stress: Region/Education Level



Greater Bridgeport Living Comfortably  
2018: 29%  
2015: 27%



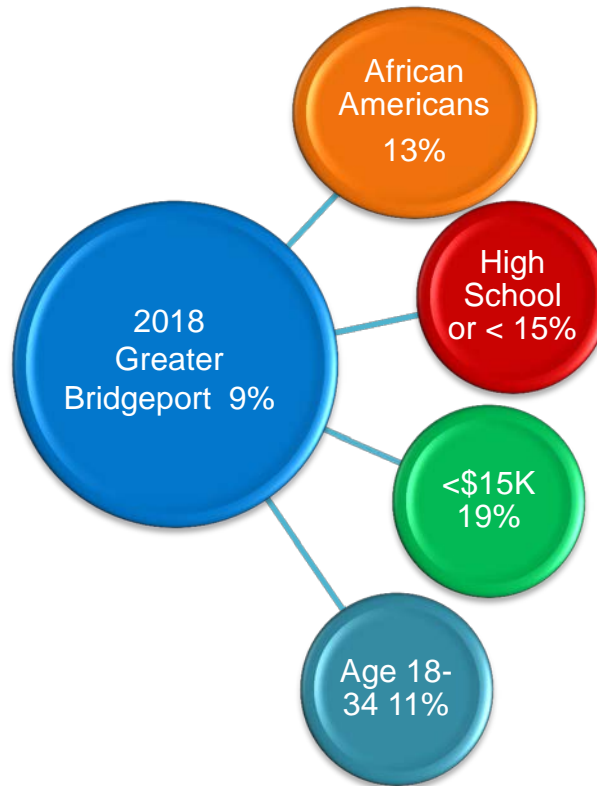
Source: 2018 State of CT Wellbeing Survey, DataHaven



# Housing Insecurity



## Housing Insecure

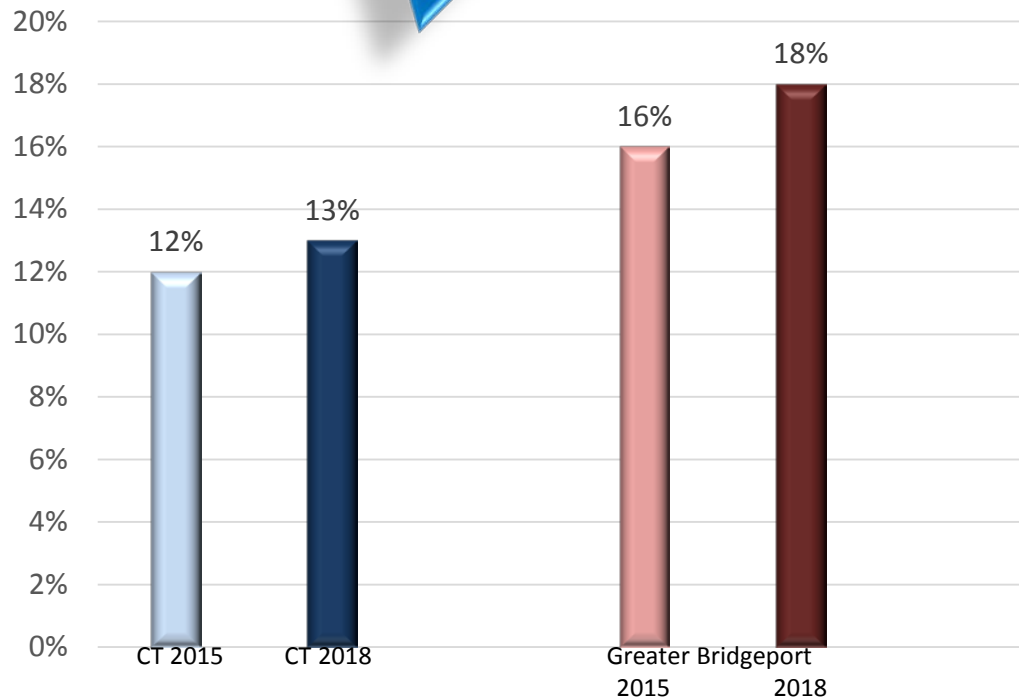




# Food insecurity



Have there been times in the past 12 months when you did not have enough money to buy food that you or your family needed?

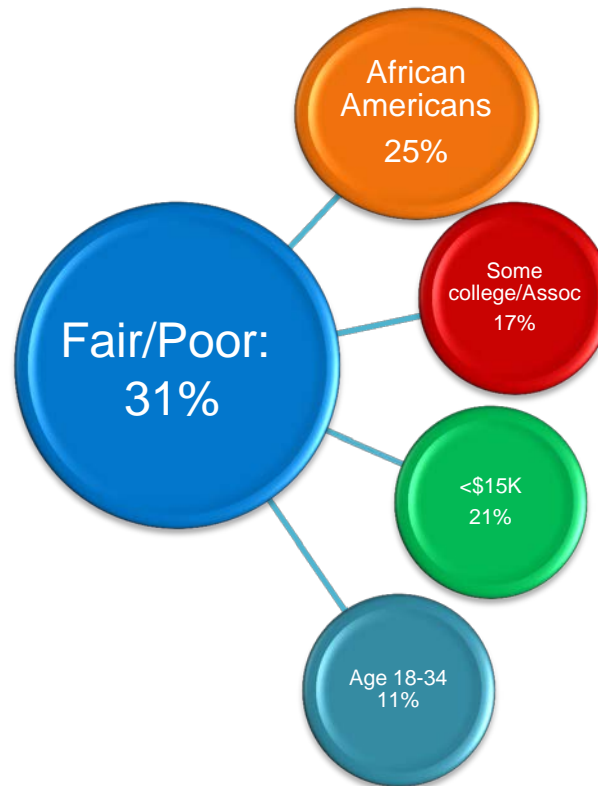


How often did you not have enough money to buy food that you and your family needed?

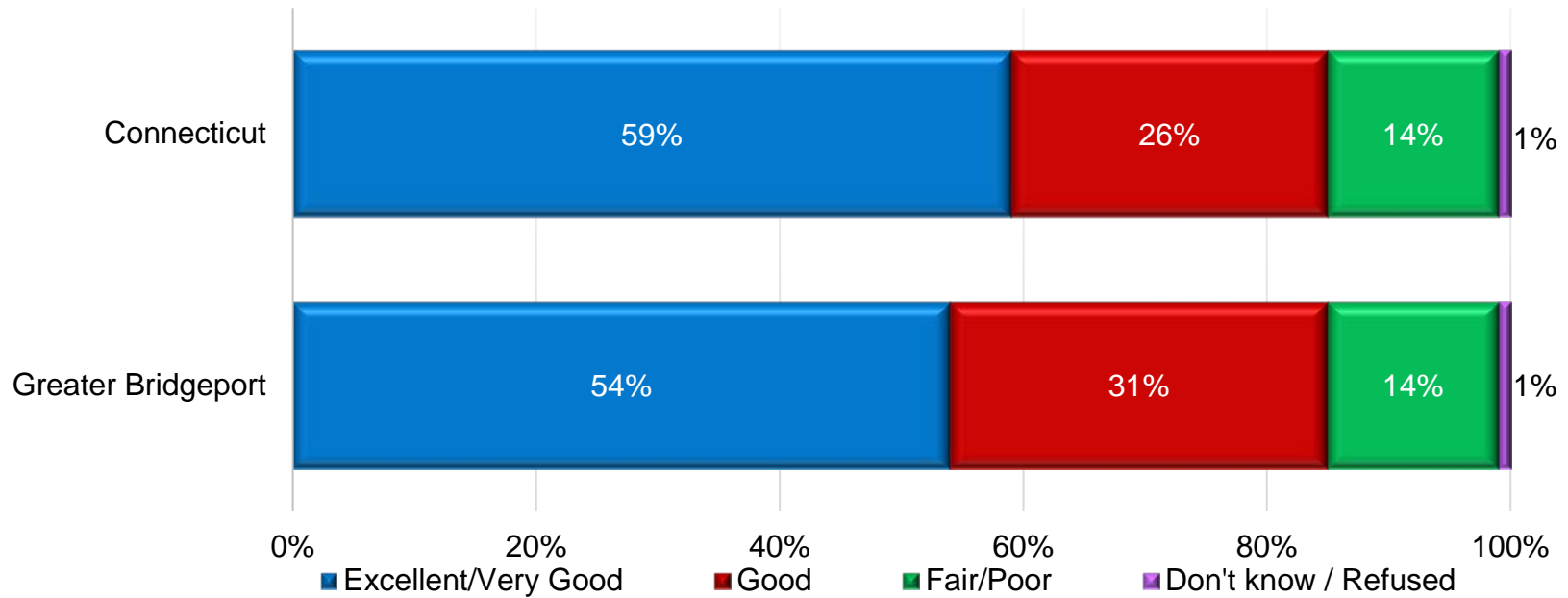
Greater Bridgeport  
69% did not have enough money either every month or some months



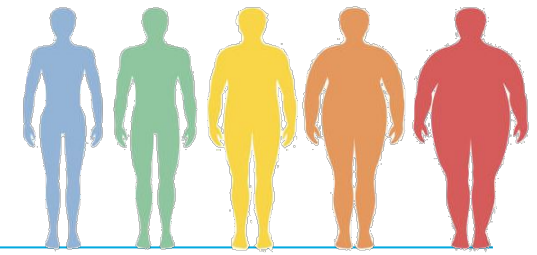
# Access to Affordable Fruit & Vegetables



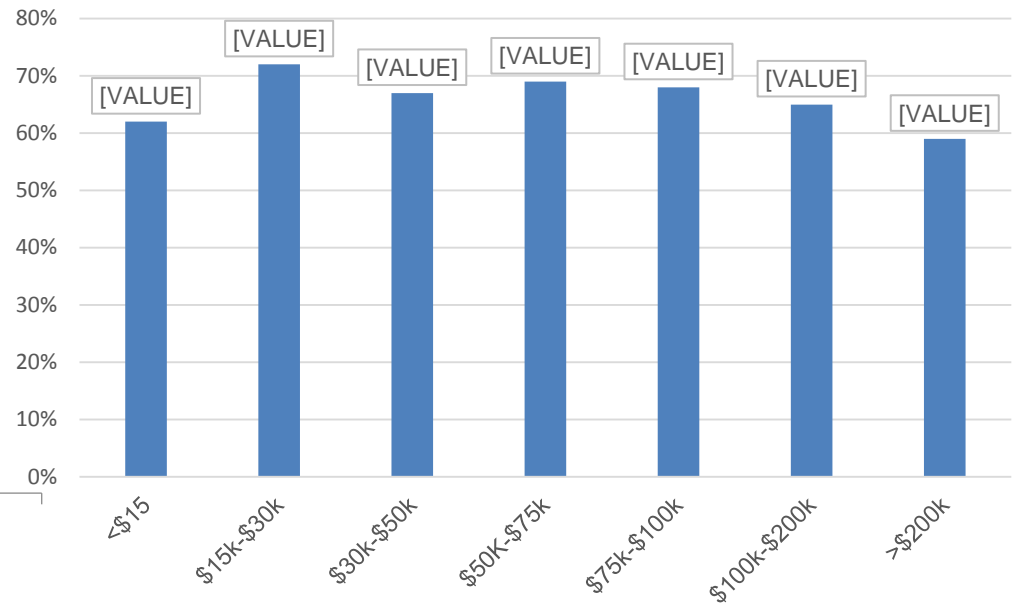
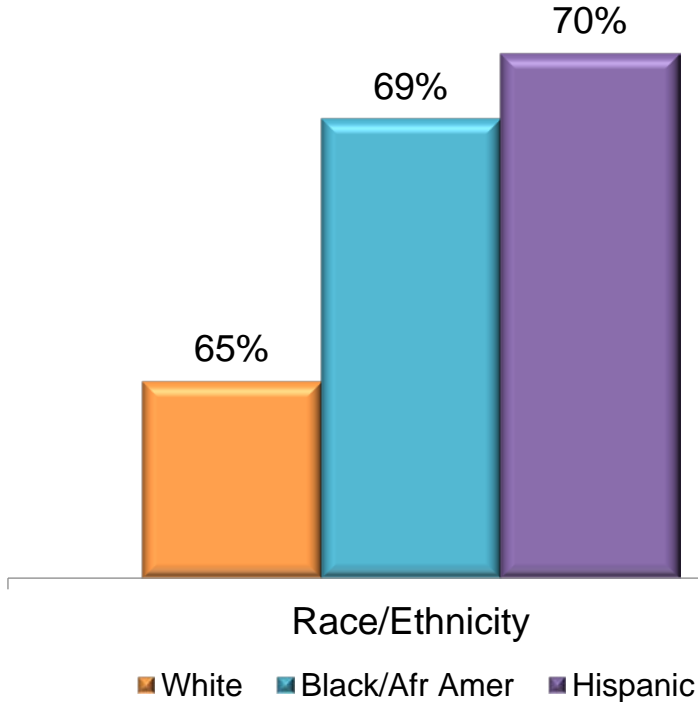
# Self Reported Health Status



# Self Reported BMI Overweight & Obese: Race / Income



Greater  
Bridgeport  
2018: 65%  
2015: 64%



Source: 2018 State of CT Wellbeing Survey, DataHaven

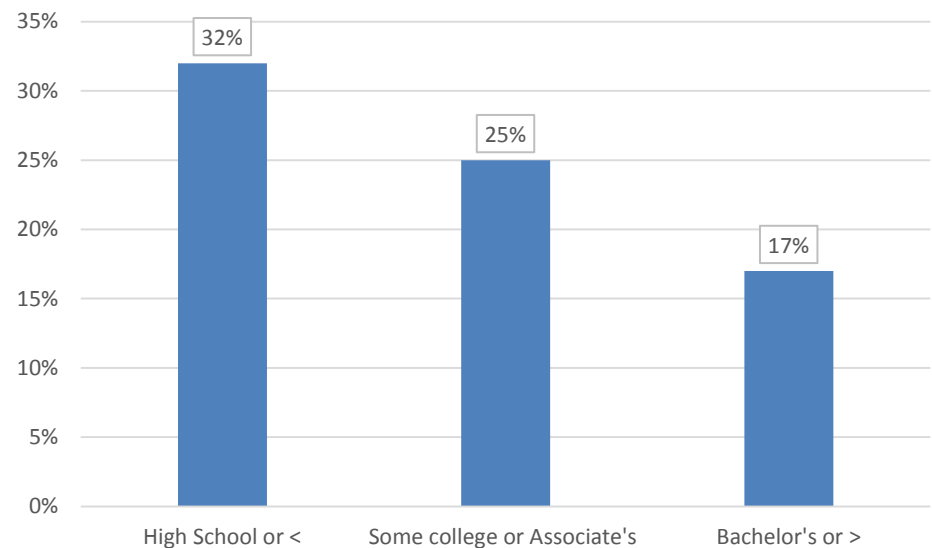
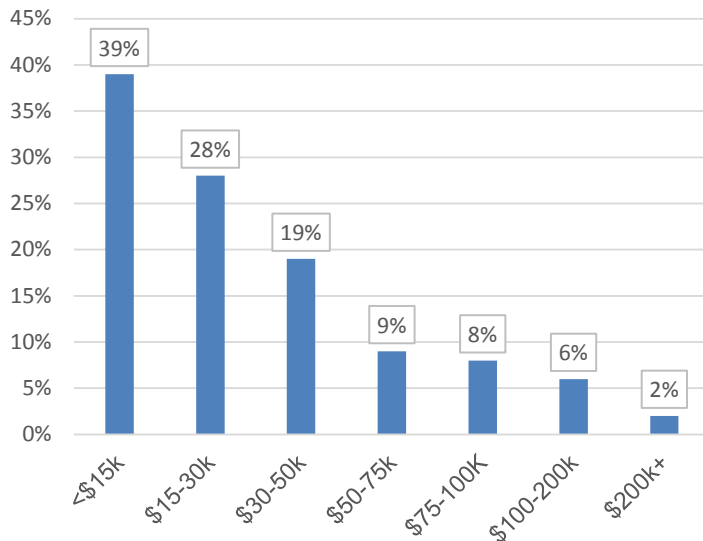




# Exercise – 0 Days Per Week

American Heart Association recommends 150 minutes per week of moderate-intensity aerobic activity or 75 minutes per week of vigorous aerobic activity, or a combination of both

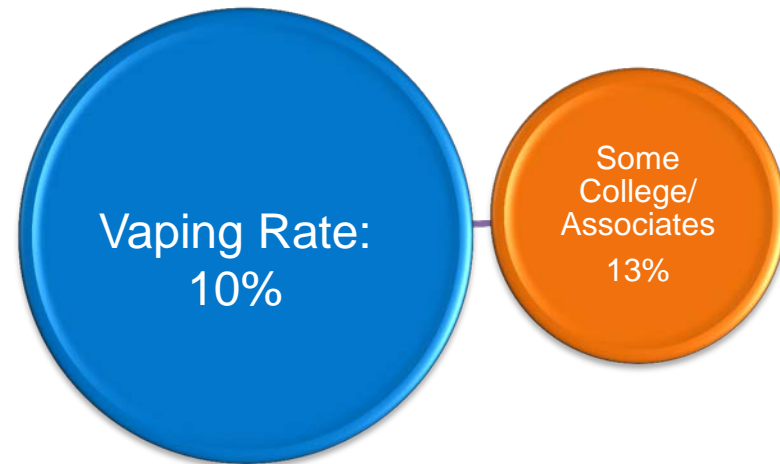
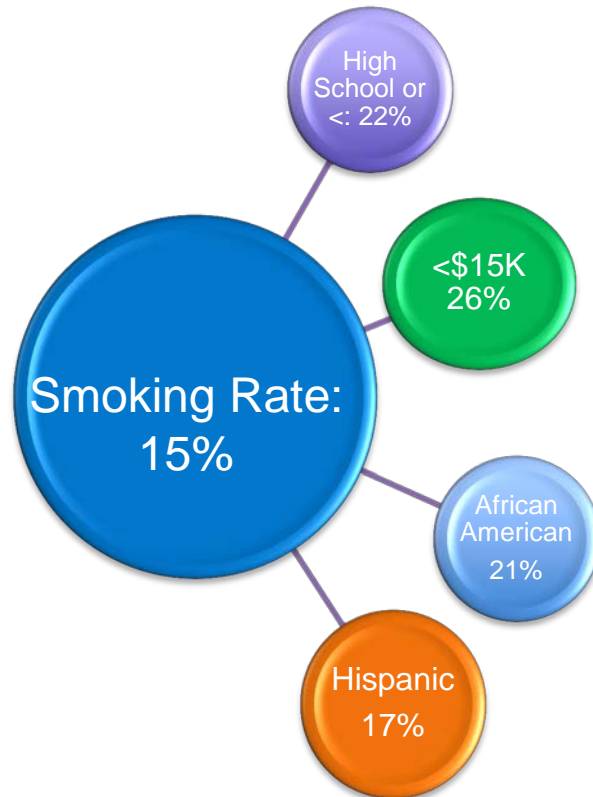
24% of Greater Bridgeport (2018) respondents did not exercise



Source: 2018 State of CT Wellbeing Survey, DataHaven



# Smoking and Vaping Rates in Last 30 Days



Source: 2018 State of CT Wellbeing Survey, DataHaven



# Medical Conditions

(as diagnosed by a doctor or health professional)

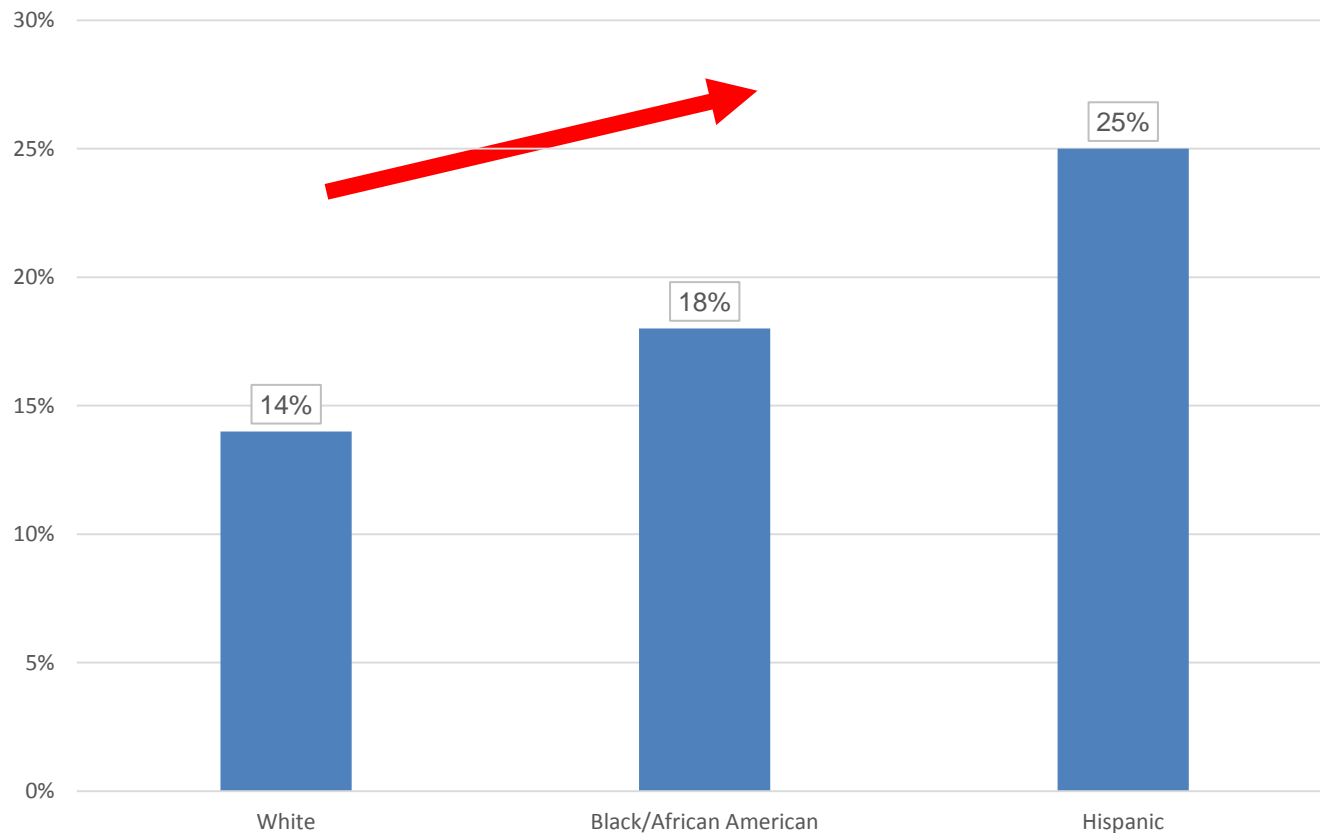
	CT	Fairfield County	Greater Bridgeport	Bridgeport	Fairfield	Monroe	Stratford	Trumbull
High blood pressure/ Hypertension	30% (28%)	28% (24%)	30% (28%)	32% (28%)	24% (26%)	24% (29%)	35% (32%)	25% (28%)
Diabetes	10% (9%)	9% (7%)	11% (9%)	13% (12%)	6% (7%)	10% (10%)	14% (8%)	10% (11%)
Heart disease/ Heart attack	6% (5%)	5% (5%)	5% (5%)	5% (5%)	6% (5%)	3% (6%)	8% (5%)	5% (7%)
Asthma	15% (13%)	13% (11%)	17% (12%)	19% (15%)	13% (7%)	15% (7%)	18% (16%)	13% (7%)

Source: 2018 State of CT Wellbeing Survey, DataHaven; 2015 in parentheses



# Asthma Rate: Race/Ethnicity

## Greater Bridgeport 2018: 17%



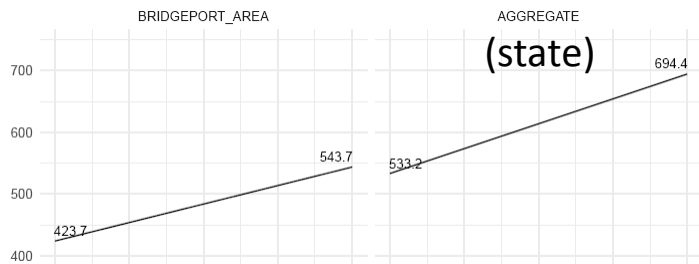
Source: 2018 State of CT Wellbeing Survey, DataHaven



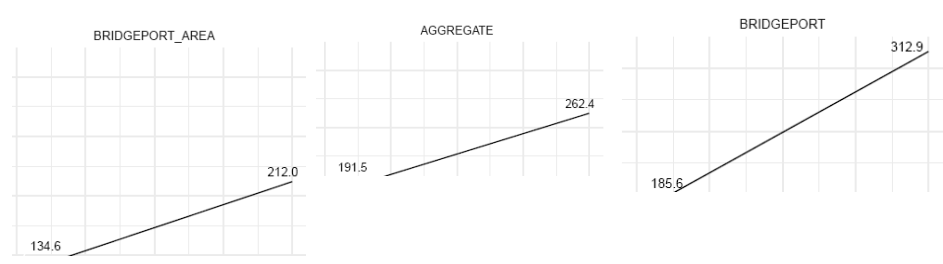


# CHIMEdata on all Hospital Encounters

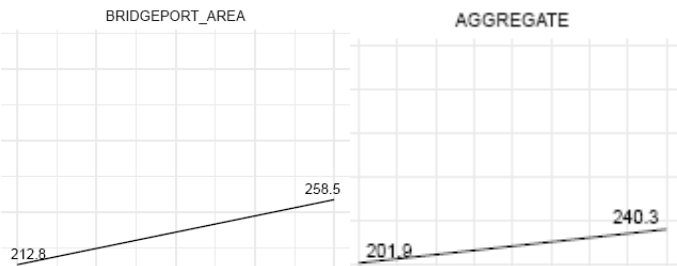
**Rising rate of Greater Bridgeport resident visits for mental disorders, COPD, heart disease, and diabetes, in line with statewide trends**



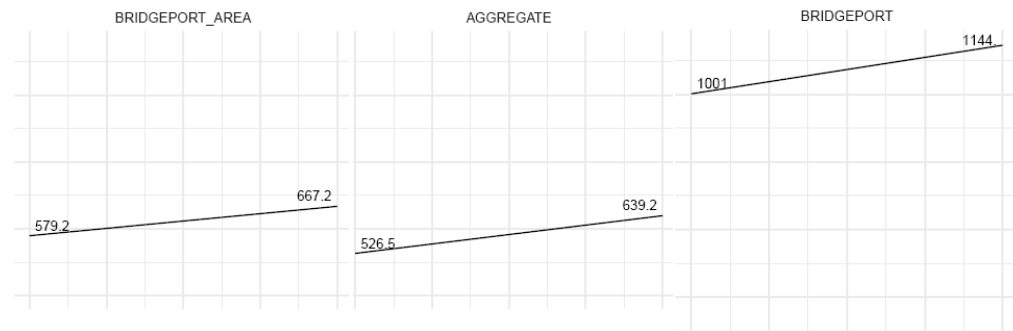
**Mental Disorders Encounter Rate Trend, 2012-14 versus 2015-17**



**COPD Encounter Rate Trend, 2012-14 versus 2015-17**



**Heart Disease Encounter Rate Trend, 2012-14 versus 2015-17**



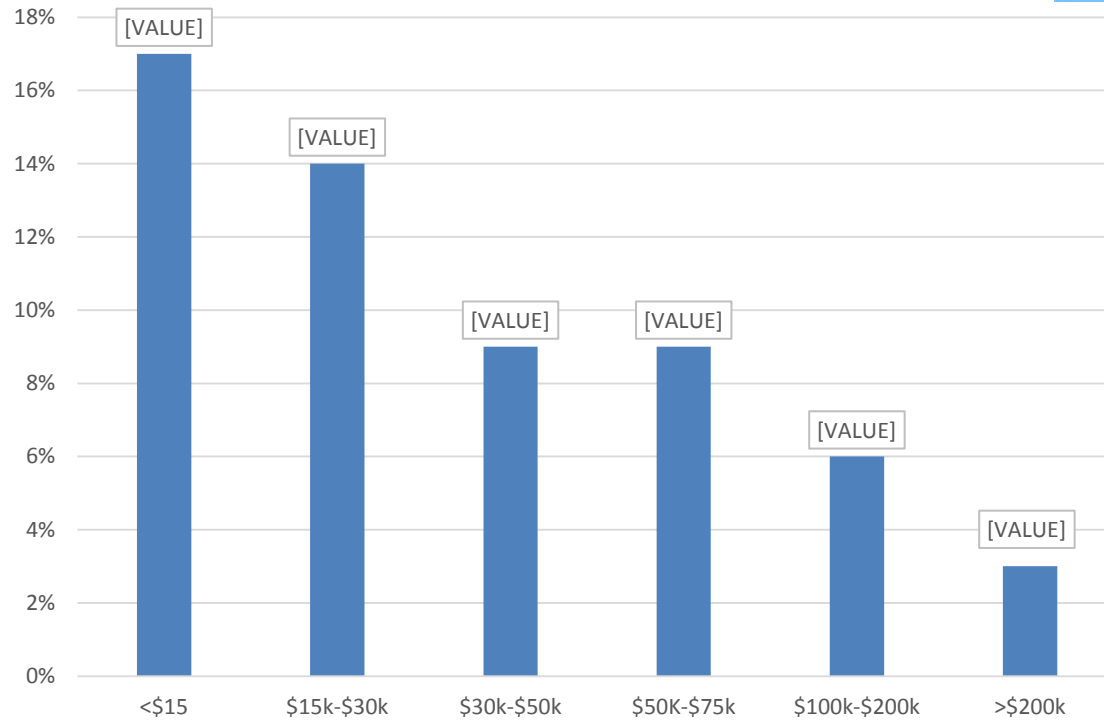
**Diabetes Encounter Rate Trend, 2012-14 versus 2015-17**



# Difficulty Affording Prescriptions: Income



Greater  
Bridgeport  
2018: 11%  
2015: 11%



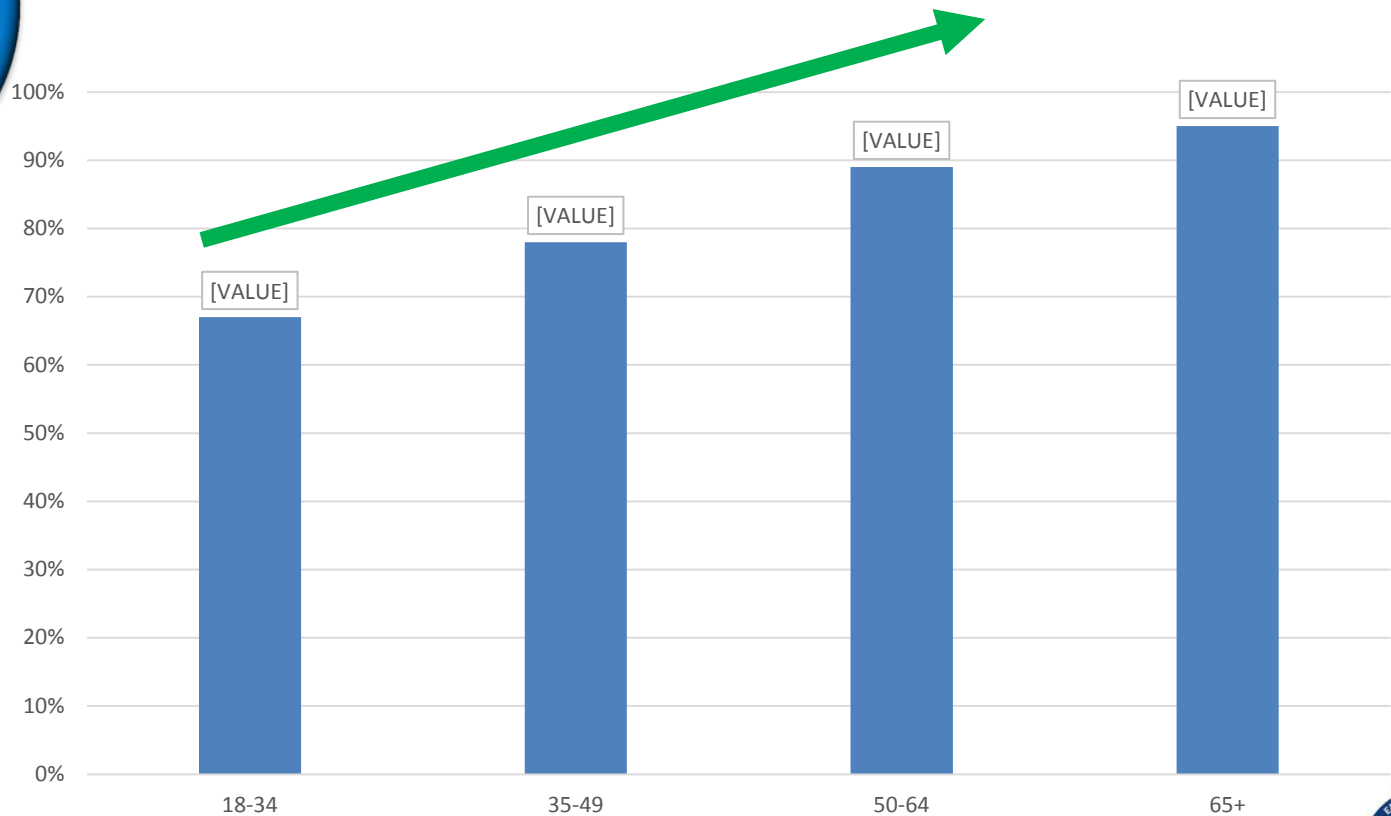
Source: 2018 State of CT Wellbeing Survey, DataHaven



# Personal doctor or health care provider: Age



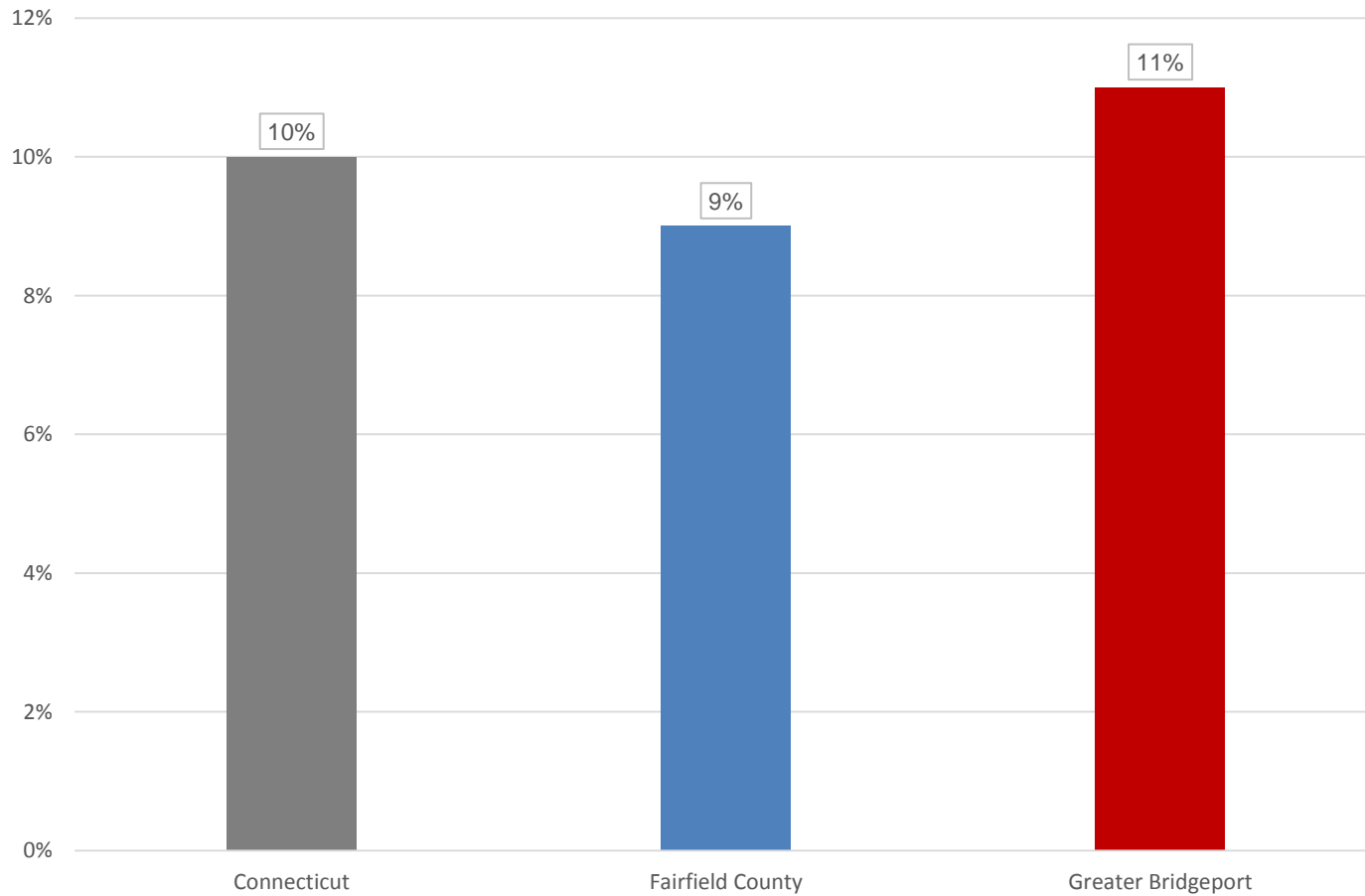
Greater  
Bridgeport  
2018: 81%  
2015: 82%



Source: 2018 State of CT Wellbeing Survey, DataHaven



# Discrimination When Receiving Health Services



Source: 2018 State of CT Wellbeing Survey, DataHaven



# Reason for Discrimination

Responses	CT	Fairfield County	Greater Bridgeport
Ancestry/origin	7%	8%	6%
Gender	12%	13%	10%
Race	17%	22%	26%
Age	12%	8%	7%
Religion	3%	4%	0%
Height	1%	2%	2%
Weight	8%	5%	5%
Other aspect of appearance	11%	9%	11%
Sexual orientation	4%	4%	5%
Education or income level	13%	10%	11%
A physical disability	6%	4%	3%
Health insurance status	26%	21%	16%
Don't know / Refused	24%	30%	38%

Source: 2018 State of CT Wellbeing Survey, DataHaven



# Last Dental Visit

When was the last time you were seen by a dentist, was it..	CT	Fairfield County	Greater Bridgeport
Within the last 6 months	60%	61%	55% (58%)
More than 6 months but less than a year	14%	16%	16% (16%)
More than a year but less than two years	11%	11%	14% (13%)
More than two years ago	13%	11%	13% (11%)
Never been to the dentist	1%	1%	1% (1%)
Don't know / Refused	0%	1%	1%

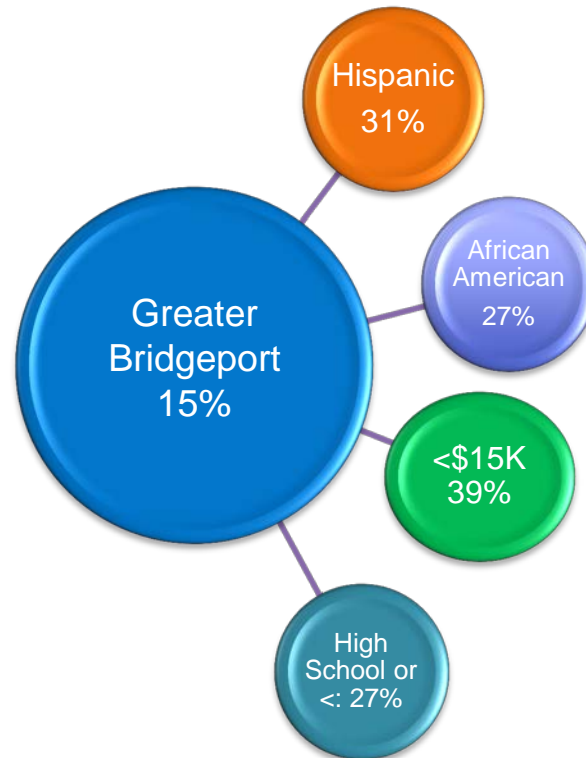
Source: 2018 State of CT Wellbeing Survey, DataHaven



# Access to Reliable Transportation



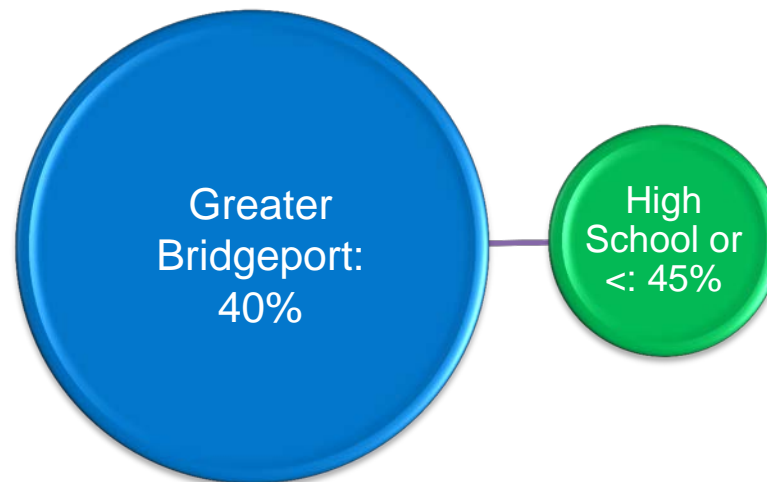
No access to reliable transportation



# Access to Reliable Transportation



Missed a medical appointment due to lack of access to reliable transportation

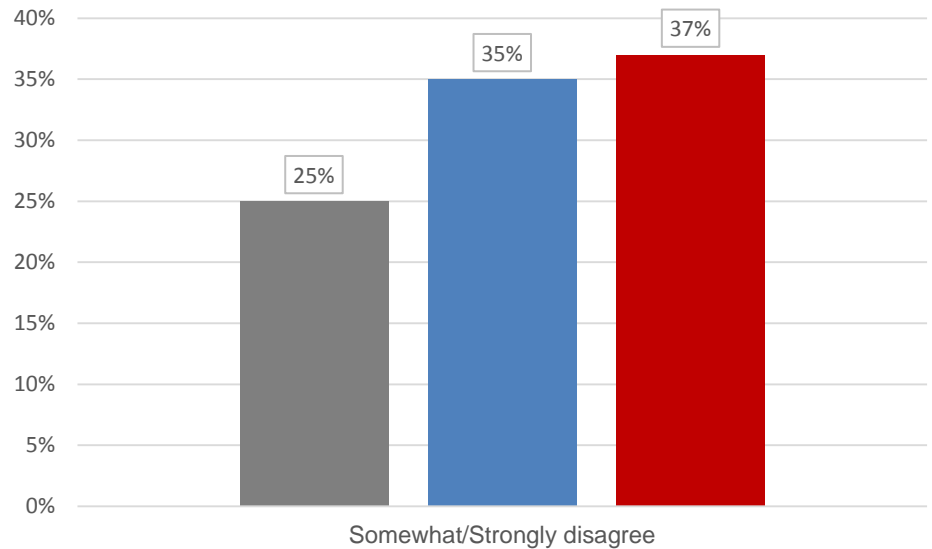
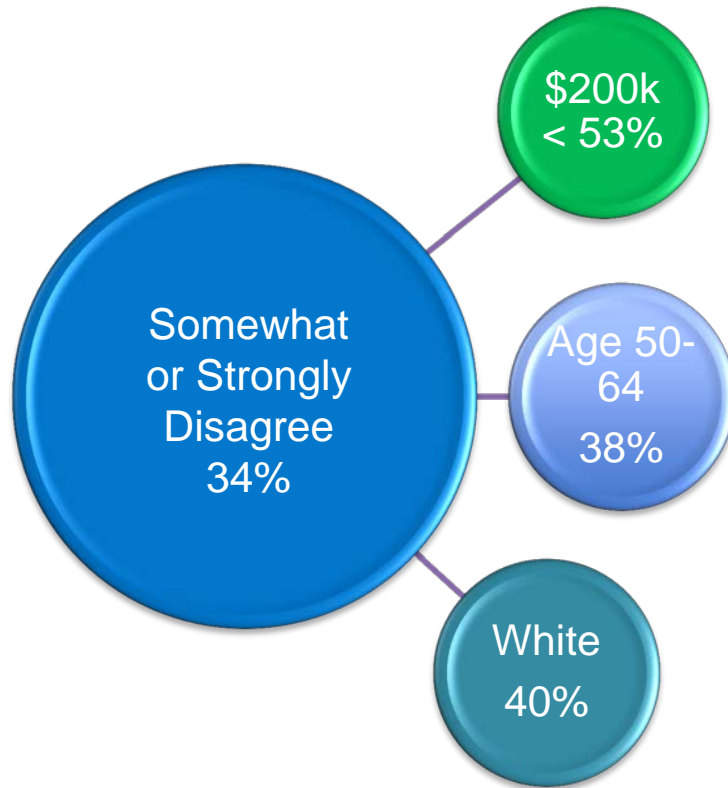






# Walkability

## Safe sidewalks & crosswalks in my neighborhood



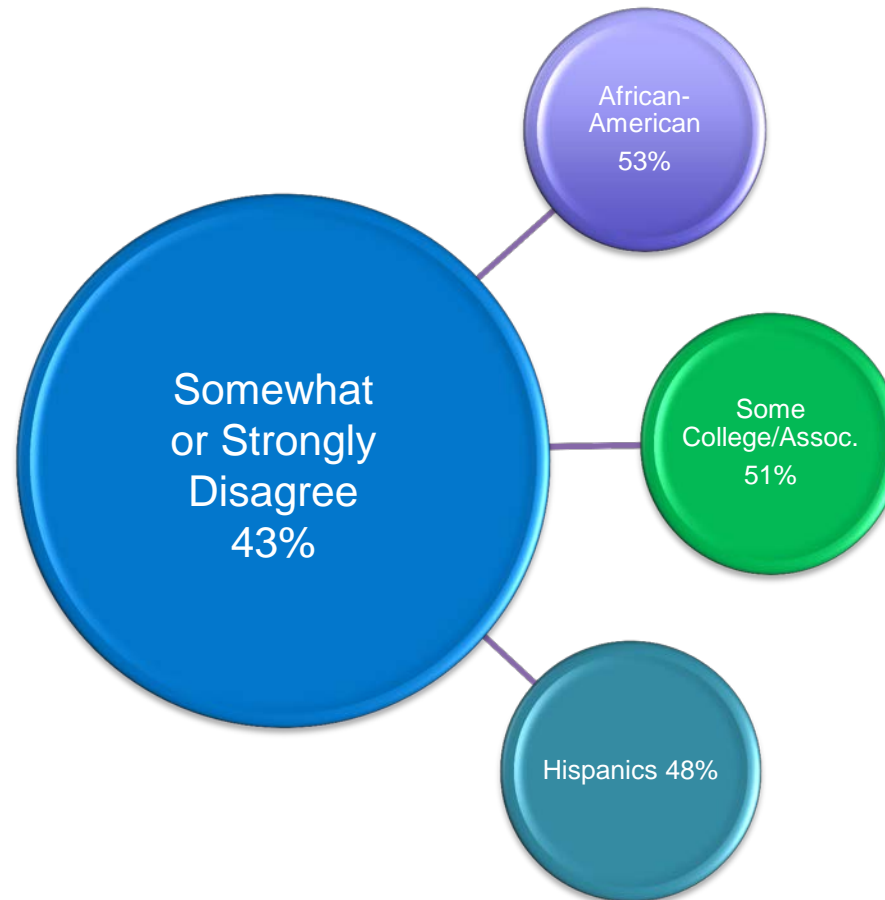
Disagreement increases with education



# Bikeability



Safe from traffic; special lanes, paths, etc.

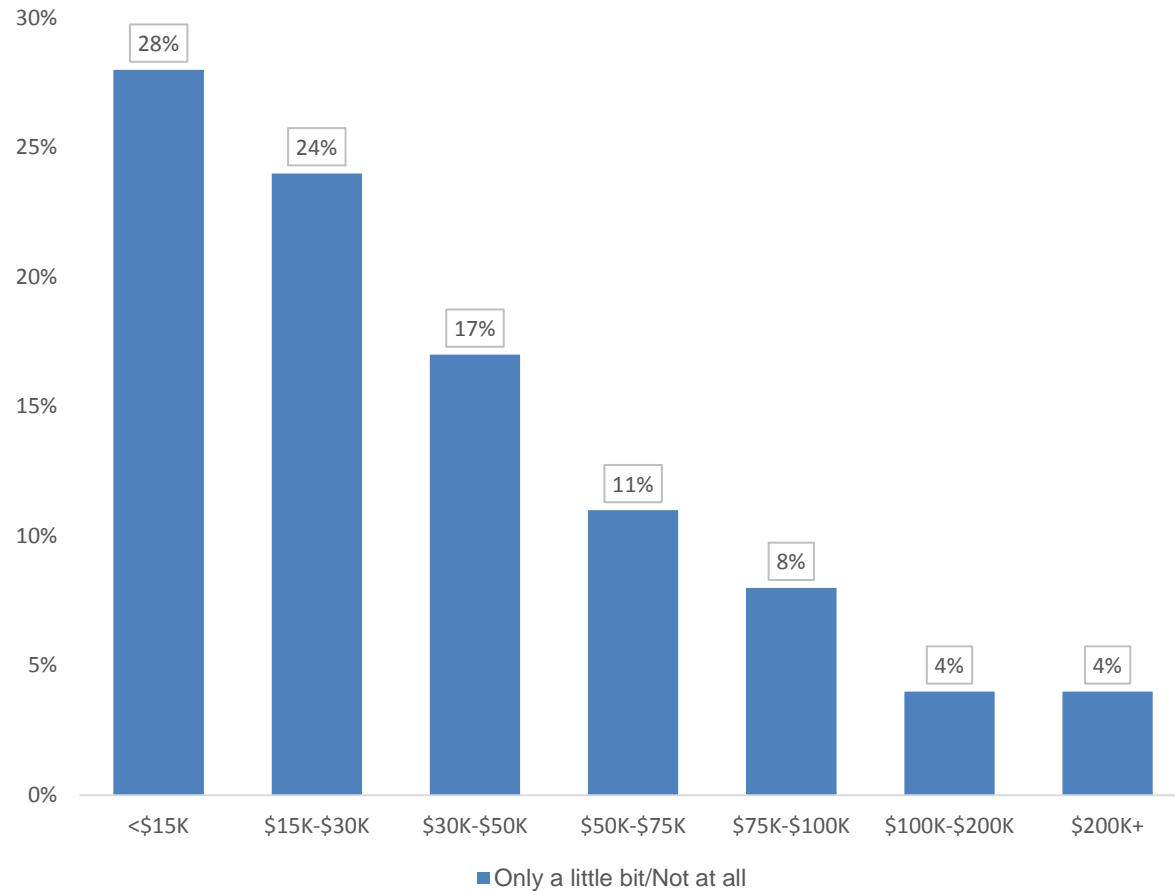




# Dissatisfaction with Life: Income

Greater Bridgeport  
2018: 11%  
2015: 9%

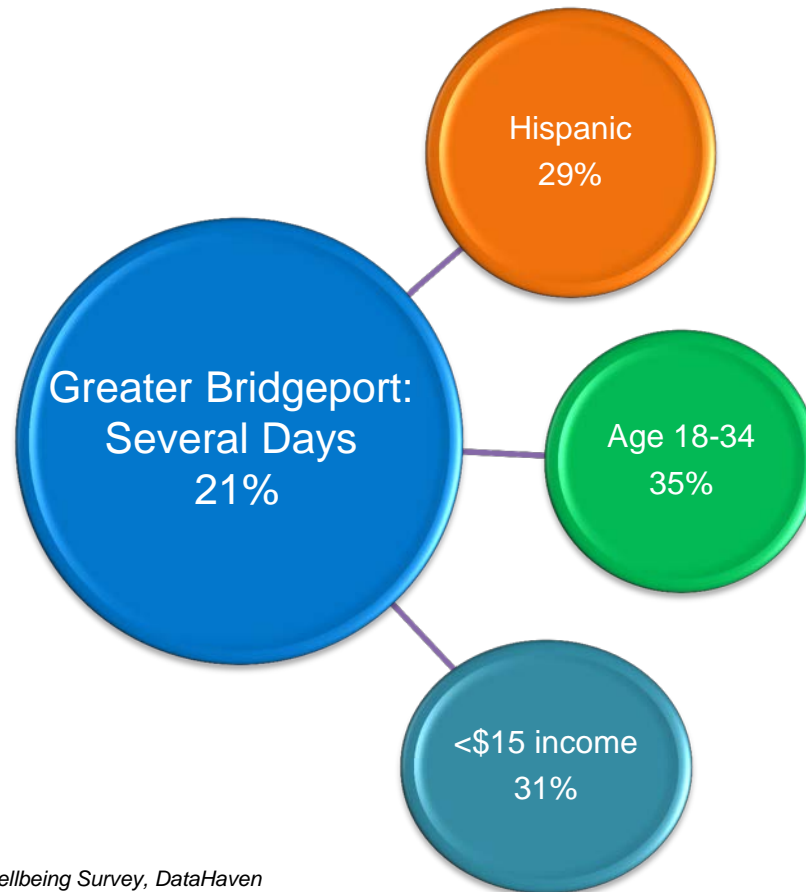
As income increases, dissatisfaction decreases



# Feeling down/depressed/hopeless during the last two weeks



A third of respondents reported feeling this way



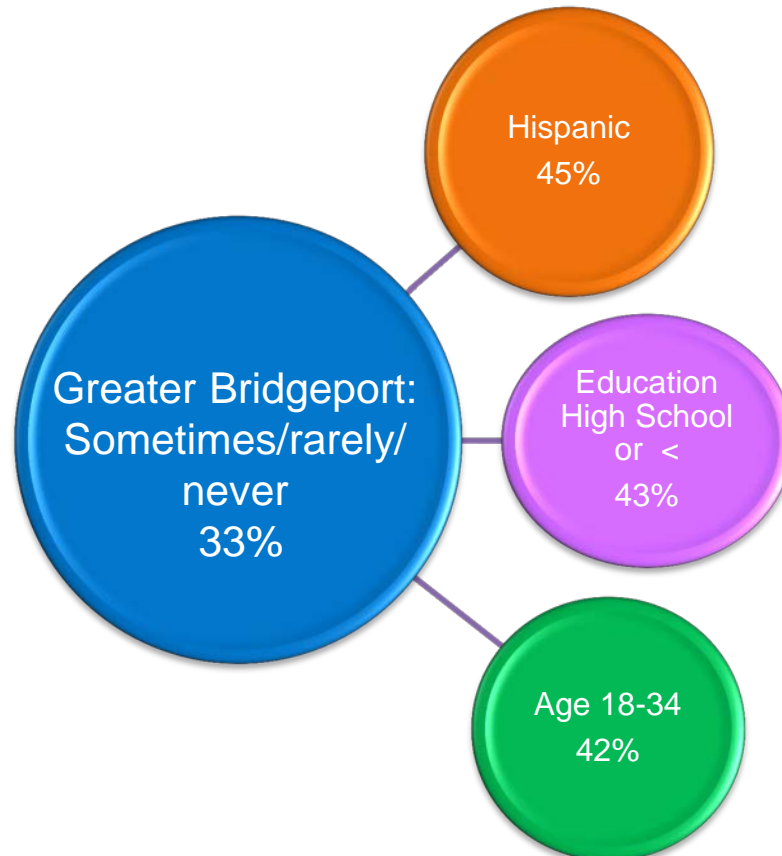
Source: 2018 State of CT Wellbeing Survey, DataHaven



# Social & Emotional Support



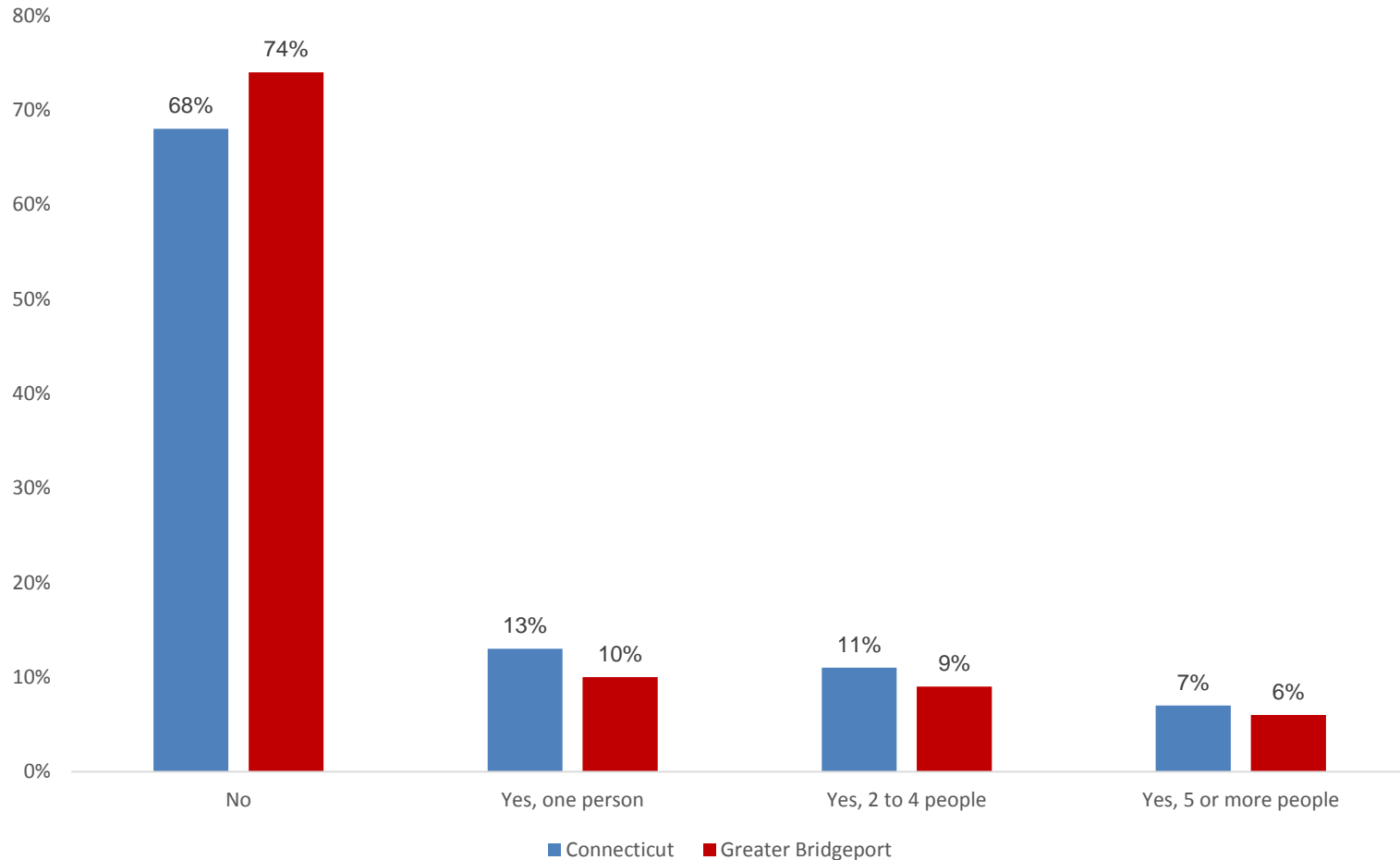
One-third sometimes/rarely, or never get the social and emotional support they need



Source: 2018 State of CT Wellbeing Survey, DataHaven



# Personal Knowledge of Someone Misusing Opioids



Source: 2018 State of CT Wellbeing Survey, DataHaven

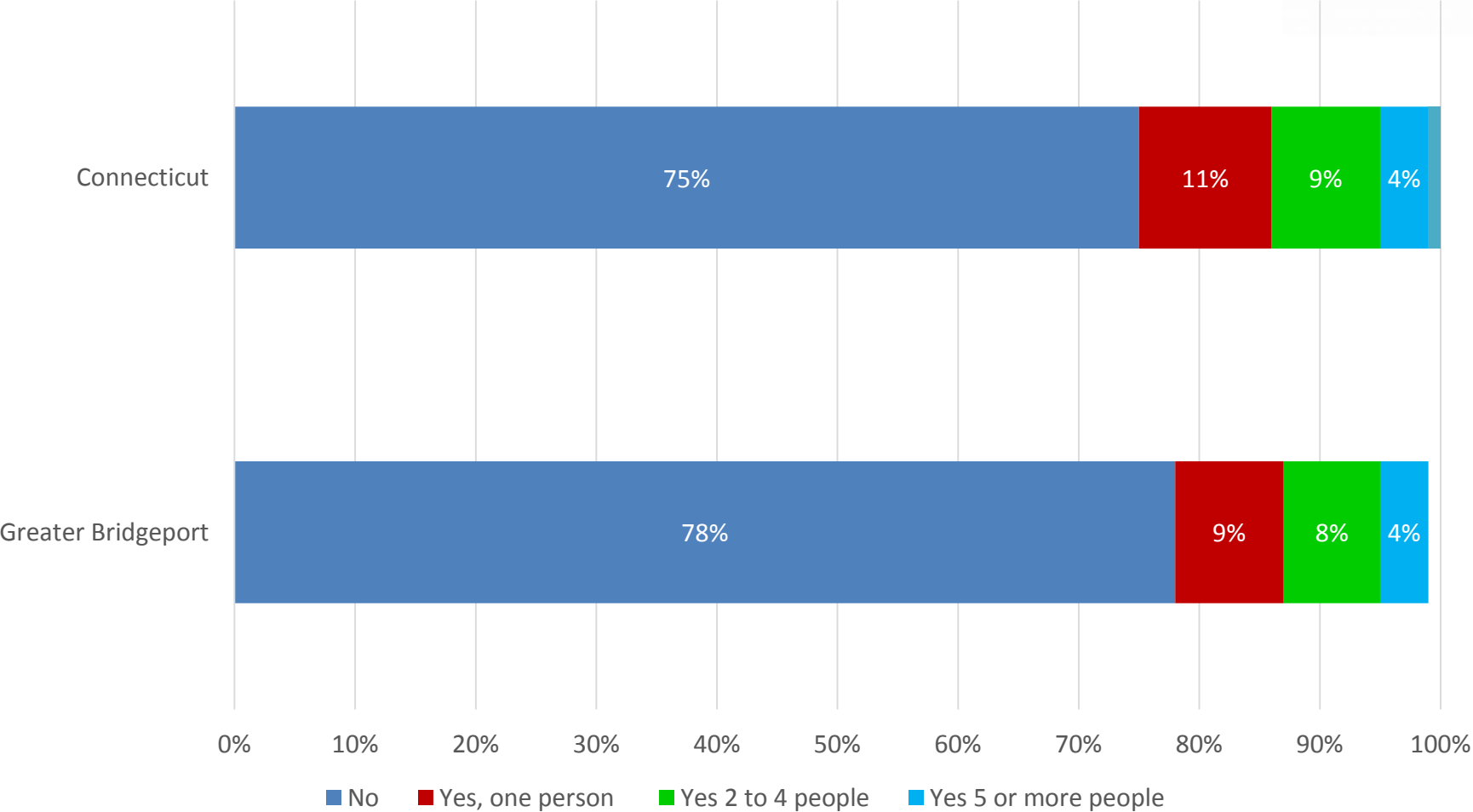


# Personal Knowledge of Someone Dying from Opioid Overdose

PREVENTION • TREATMENT • RECOVERY

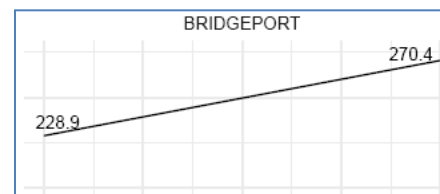
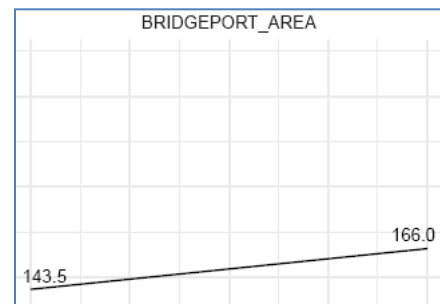
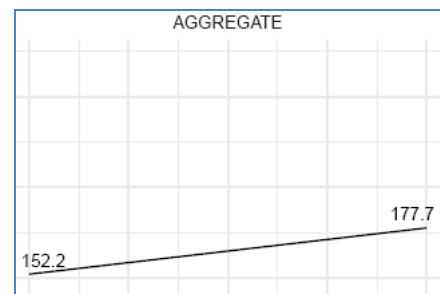
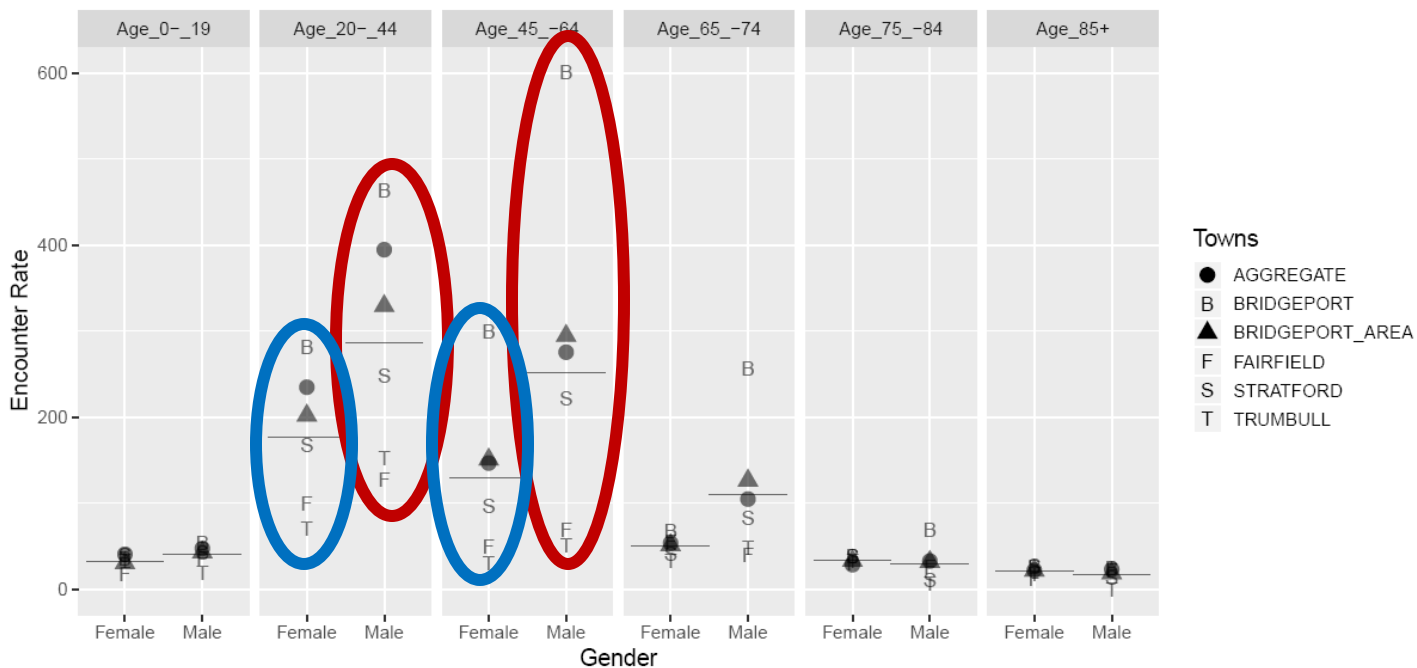


Before it's **too late.**



# CHIMEdata on all Hospital Encounters

**Rising rates of substance misuse encounters, similar to state: Rates are rising in city, but mostly stable in other towns in the region**





# Community Conversations

**We Want To Hear From You!**

Your Voice Matters

**Tell us about community health needs and concerns.**

**What:**  
Community Conversation about healthcare

**When:**  
Saturday,  
March 16, 2019  
9:30 a.m. to 11:00 a.m.

**Where:**  
La Senda Antigua Ministries  
1126 East Main Street  
Bridgeport, CT 06608

**Dinner and gift cards (max 20) served after the session.**

Join the conversation



For more information, call 860-461-7637.

HEALTH EQUITY SOLUTIONS



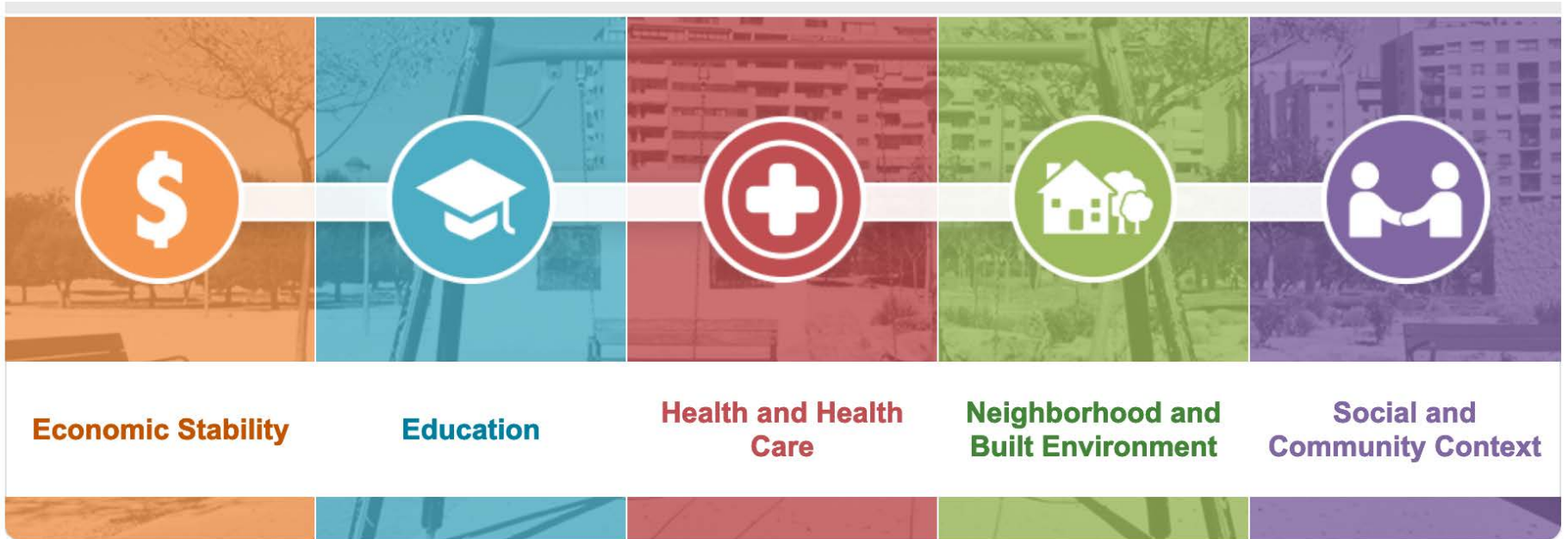
# Greater Bridgeport Community Conversations

## Location & Audience

Target Population	Location	Date	Number Attending
Parish Nurses (Regional)	St. Vincent's Hospital - Bridgeport	2/19/2019	18
Lower income parents	Stratford YMCA - Stratford	2/27/2019	7
Seniors	Baldwin Senior Center-Stratford	2/5/2019	15
Seniors	Trumbull YMCA (Trumbull and Monroe residents) - Trumbull	2/27/2019	30
Mixed group	Vazzy's 19 <sup>th</sup> Hole-Fairfield	3/14/2019	21
Uninsured	AmeriCares Free Clinic - Bridgeport	3/15/2019	5
Hispanic/Latino	La Senda Antigua - Bridgeport	3/21/2019	18
<b>TOTAL</b>			<b>114</b>



# Social Determinants of Health (SDoH)



Source: *HealthyPeople 2020*

# Community Conversation Themes

## Key Themes by SDoH Domains

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### Health & Health Care System

- Health Coverage/Insurance

### Neighborhood & Built Environment

- Recreations
- Safety
- Transportation
- Food

### Social & Community Context

- Mental Health
- Substance Use Disorder



# Community Conversation Themes

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## Health Coverage/Insurance

- Medicare coverage limited
  - Does not have dental coverage & hearing devices
- Insurance challenges with plan choice
- More oral health services and health supports for formerly incarcerated people



Health and Health  
Care



# Community Conversation Themes

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## Recreation

- Low cost/affordable options for exercise are needed
- Senior centers are great but program improvements welcomed
- More youth activities for teenagers

## Safety

- Walkability & safety limited due to lack of street lighting & pedestrian walkways
- Inequity noted due to residential variability within towns regarding sidewalks, lighting etc.

## Transportation

- Availability of public transportation
- Cost of transportation

## Food

- Affordability of eating healthier & food generally
- Farmers markets are too expensive



Neighborhood and  
Built Environment



# Community Conversation Themes

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## Mental Health

- Stress, depression, & anxiety (related to a variety of issues)
- Limited availability of services
- Stigma related to accessing services
- Treatment facility availability – shorter stays
- Lack of group homes and supportive housing
- Trauma services needed in the community

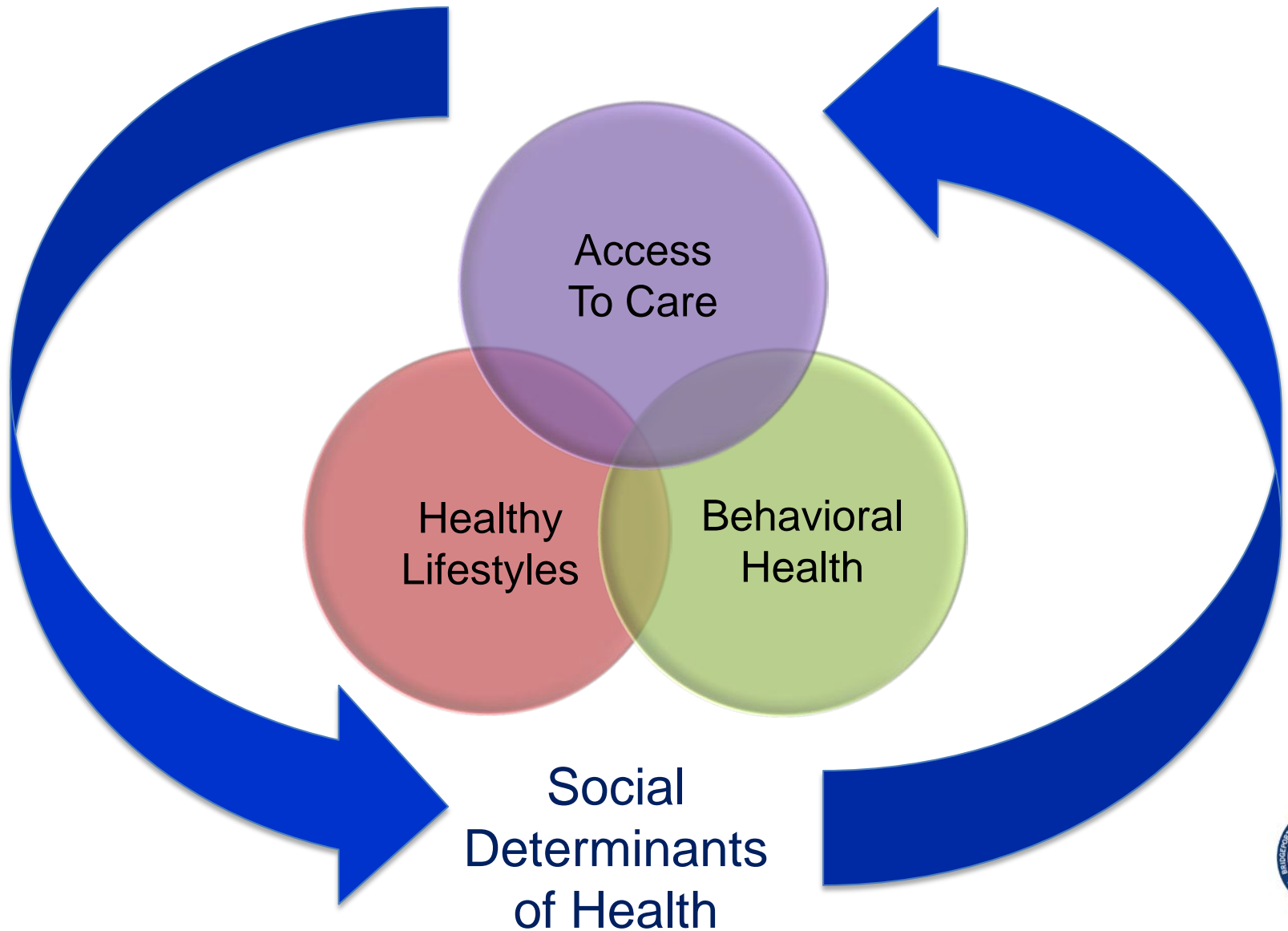
## Substance Use

- Specific concerns about opioids and marijuana
- Concerned that not enough attention is given to this issue in the more affluent and suburban towns (Stratford, Trumbull, Monroe)



# 2019 Health Priorities

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## 2019-22 HIA Access To Care Community Health Improvement Plan

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**By February 2022, only 13% of adults in Greater Bridgeport will report not having a medical home and 74% will report visiting a dentist at least once in the past year.**

### Strategies:

- Promote available medical services in the Greater Bridgeport region to positively impact the number of individuals who have a medical home
- Promote available dental services in the Greater Bridgeport region to positively impact the number of individuals who see a dental provider at least once a year
- Increase access to specialty care providers
- Continue to work with partners to improve access to reliable medical transportation
- Increase implementation of CLAS standards by health care organizations in the Greater Bridgeport region





# 2019-22 HIA Access To Care Community Health Improvement Plan

## Priority Area: Access to Care

**Indicator:** Percentage of people in Greater Bridgeport that indicate they do not have a medical home [2015- N/A, 2018-14%]

**Indicator:** Percentage of people in Greater Bridgeport that have indicate they have been to the dentist in the last year [2015- 74%, 2018-71%]

**Indicator:** Percentage of people in Greater Bridgeport who report missing a doctor's appointment or a visit to a health care provider because they did not have access to reliable transportation [2015- N/A, 2018-40%]

**Indicator:** Percentage of people in Greater Bridgeport who indicate being treated with less respect or received services that were not as good while seeking health care [2015- N/A, 2018-11%]

*\*Source- CT Well-Being Survey 2015 and 2018*

**Goal:** By February 2022, only 13% of adults in Greater Bridgeport will report not having a medical home and 74% will report visiting a dentist at least once in the past year

Strategy	Action Steps	Outcomes
Promote available medical services in the Greater Bridgeport region to positively impact the number of individuals who have a medical home	<ul style="list-style-type: none"> <li>Determine how to best educate the community about the importance of having a medical home, particularly in the young adult population and implement strategies as appropriate</li> <li>Promote available medical services in the region</li> <li>Collaborate to increase referrals from partner organizations to primary care providers</li> </ul>	# of referrals
Strategy	Action Steps	Outcomes
Promote available dental services in the Greater Bridgeport region to positively impact the number of individuals who see a dental provider at least once a year	<ul style="list-style-type: none"> <li>Produce and distribute educational materials on the importance of dental care</li> <li>Promote available dental services in the region</li> <li>Continue to improve and expand the dental referral system between partner organizations</li> <li>Advocate for improved dental insurance coverage</li> </ul>	# of CHWs in GBT region who have successfully completed a dental training workshop  # of referrals  % change in dental service utilization





# 2019-22 HIA Access To Care Community Health Improvement Plan (cont.)

Strategy	Action Steps	Outcomes
Increase access to specialty care providers	<ul style="list-style-type: none"> <li>Identify gaps in specialty care access for Medicaid and uninsured patients and investigate ways to increase availability and access</li> <li>Collaborate with specialty care providers to increase the number of providers who accept Medicaid and uninsured patients</li> <li>Continue to work on asthma initiatives</li> </ul>	<p># of focus groups with specialty care providers</p> <p># of new providers accepting Medicaid and uninsured patients</p> <p>Annual update of specialty care database</p>
Strategy	Action Steps	Outcomes
Continue to work with partners to improve access to reliable medical transportation	<ul style="list-style-type: none"> <li>Continue to be involved in the state medical transportation efforts and share local experiences at the state level</li> <li>Continue communications with Veyo and invite them to task force meetings for quarterly updates and communicate those updates with partners organizations</li> <li>Determine accessibility of additional medical transportation options, including public transportation and medical ride programs and develop strategies based on this assessment</li> </ul>	<p># of task force meetings attended by Veyo</p> <p>Track initiatives and local outcomes with Veyo</p>
Strategy	Action Steps	Outcomes
Increase implementation of Culturally and Linguistically Appropriate Services (CLAS) standards by health care organizations in the Greater Bridgeport region	<ul style="list-style-type: none"> <li>Complete a CLAS assessment with local partner organizations to determine current gaps and implement CLAS strategies as needed</li> <li>Collect CLAS implementation tools and disseminate within partner organizations within Access to Care and throughout PCAG organizations</li> </ul>	# of organization assessments completed

## Partner Organizations

Bridgeport Hospital, St. Vincent's Medical Center, Optimus Healthcare, Southwest Community Health Center, University of Bridgeport, Visiting Nurses Association of Connecticut, Americares, Connecticut Oral Health Initiative, CT Dental Health Partnership, Southwestern AHEC, Bridgeport Health Department, Stratford Health Department, Trumbull Health Department, Fairfield Health Department, Monroe Health Department



# 2019-22 HIA Healthy Lifestyles Community Health Improvement Plan

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**By February 2022, promote healthy lifestyles in the Greater Bridgeport region to reduce diagnosed hypertension and diabetes in adults by 3%.**

## Strategies:

- Continue Know Your Numbers program
- Increase number of days per week of exercise among adults
- Decrease rates of residents who report use of tobacco & e-cigarettes/vaping products
- Increase access to healthy food and address other social determinants of health in the Greater Bridgeport region





# 2019-22 HIA Healthy Lifestyles Community Health Improvement Plan

## Priority Area: Healthy Lifestyles

**Indicator:** % of people in Greater Bridgeport who have been told they have high blood pressure [2015- 28%, 2018-30%], diabetes [2015- 9%, 2018- 11%] or heart disease [2015- 5%, 2018-5%]

**Indicator:** Current smoking [2015-15%, 2018- 15%] and vaping rates [2015-N/A, 2018- 10%] for Greater Bridgeport

**Indicator:** % of people in Greater Bridgeport who agree that there are safe places to walk [2015- 66%, 2018- 67%] or bike [2015- 55%, 2018-55%] in or near their neighborhood

**Indicator:** % of people in Greater Bridgeport who indicate their neighborhood has either excellent or good access to affordable, high quality fruits and vegetables [2015- N/A 2018-65%]

*\*Source- CT Well-Being Survey 2015 and 2018*

**Goal:** By February 2022, promote healthy lifestyles in the Greater Bridgeport region to reduce diagnosed hypertension and diabetes in adults by 3%.

Strategy	Action Steps	Outcomes
Continue Know Your Numbers program in the Greater Bridgeport region	<ul style="list-style-type: none"> <li>Utilize American Heart Association’s Life’s Simple 7</li> <li>Design a KYN campaign targeted to adults ages 18-49</li> <li>Determine effectiveness of KYN screenings in their current sites and work with task force partners to make adjustments as needed based on data available</li> <li>Continue to partner with community health workers to link KYN participants to follow-up care</li> <li>Determine effectiveness of expanding KYN to include hA1c screenings and practice providing automated BP cuffs for ongoing BP monitoring and expand where feasible</li> </ul>	<p># of people screened through KYN</p> <p># of KYN participants connected to follow-up health care</p>
Strategy	Action Steps	Outcomes
Increase number of days per week of exercise among adults in Greater Bridgeport	<ul style="list-style-type: none"> <li>Determine barriers related to access to available free and low-cost fitness opportunities and develop ways to address these</li> <li>Continue to work towards regional Bike Share programs and promote/support safe biking/walking in neighborhoods through complete streets policies, partnerships with police/law enforcement, planning and zoning, and other city/town officials</li> </ul>	<p>Track implementation of regional bike shares</p> <p># of people who utilize the available bike shares</p>

Note: Indicators and goal are from the DataHaven 2015 and 2018 Wellbeing Survey





# 2019-22 HIA Healthy Lifestyles Community Health Improvement Plan (cont.)

Strategy	Action Steps	Outcomes
Decrease rates of residents who report use of tobacco and e-cigarettes/vaping products	<ul style="list-style-type: none"> <li>• Develop an educational campaign around e-cigarettes/vaping</li> <li>• Identify local youth prevention coalitions and collaborate to track vaping usage in youth</li> <li>• Promote Tobacco 21 ordinance roll out in the City of Bridgeport and support the passage of local ordinances or state laws around Tobacco 21</li> <li>• Promote local tobacco cessation resources</li> </ul>	Track vaping usage among youth  # of local Tobacco 21 ordinances/track the passage of a state law  # of participants referred to tobacco cessation resources
Strategy	Action Steps	Outcomes
Increase access to healthy food and address other social determinants of health (SDOH) in the Greater Bridgeport region	<ul style="list-style-type: none"> <li>• Evaluate implementing prescription to fruit and vegetable programs</li> <li>• Determine national best practices for addressing SDOH as related to healthy lifestyles and decreasing hypertension and diabetes</li> <li>• Start to build partnerships to work towards addressing SDOH, potential areas include Adverse Childhood Experiences (ACES), advocacy around increasing the minimum wage, WIC and SNAP acceptance in more venues</li> </ul>	TBD as local initiatives are developed

## Partner Organizations

Bridgeport Hospital, St. Vincent's Medical Center, Bridgeport Health Department, Stratford Health Department, Trumbull Health Department, Fairfield Health Department, Monroe Health Department, American Heart Association, Hispanic Health Council, St. Vincent's Medical Center Parish Nurses, American Diabetes Association, Central Connecticut Coast YMCA, Bridgeport Regional Business Council, Bridgeport Food Policy Council, Council of Churches of Greater Bridgeport, local feeding programs, Sacred Heart University, Fairfield University, Bridgeport Farmers' Market Collaborative, Wakeman Boys and Girls Club, local businesses and non-profits, local municipalities



## 2019-22 HIA Behavioral Health Community Health Improvement Plan

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**By February 2022, the Health Improvement Alliance's (HIA) efforts will result in a 2% increase in social and emotional support for adults in the Greater Bridgeport area.**

### Strategies:

- Increase access to mobile and community-based services and supports for behavioral health in the Greater Bridgeport area
- Develop targeted messaging around behavioral health in the Greater Bridgeport area to increase awareness of available resources
- Improve the coordination of care for frequent users of ED in local hospitals





# 2019-22 HIA Behavioral Health Community Health Improvement Plan

## Priority Area : Behavioral Health

**Indicator:** Percentage of people in the Greater Bridgeport region who indicate they receive the social and emotional support they need [DHWS, 2018 Baseline: 66% Always/Usually]

**Indicator:** Percentage of people in the Greater Bridgeport region who indicate how satisfied they are with their lives [DHWS, 2018 Baseline: 36% Not all to somewhat satisfied]

**Indicator:** Percentage of people in the Greater Bridgeport region who indicate they felt down, depressed or hopeless in the past two weeks [DHWS, 2018 Baseline: 65% Not all]

*\*Source- CT Well-Being Survey 2015 and 2018*

**Goal:** By February 2022, the Health Improvement Alliance's (HIA) efforts will result in a 2% increase in social and emotional support for adults in the Greater Bridgeport area.

Strategy	Action Steps	Outcomes
Increase access to mobile and community-based services and supports for behavioral health in the Greater Bridgeport area	<ul style="list-style-type: none"> <li>Align resources and build collaboration between organizations to increase access and awareness to community health workers and peer support specialists</li> <li>Participate in funding opportunities such as BUILD Health</li> <li>Develop strategies to link clinical and non-clinical services</li> <li>Establish or expand mobile or community based resource in the greater Bridgeport area</li> </ul>	<ul style="list-style-type: none"> <li># of initiatives to increase access/awareness for community health workers and peer support specialists</li> <li># of funding opportunities with participation of members</li> <li># of strategies to link clinical and non-clinical services</li> <li># of initiatives to establish or expand mobile or community based resources</li> </ul>
Strategy	Action Steps	Outcomes
Develop targeted messaging around behavioral health in the Greater Bridgeport area to increase awareness of available resources	<ul style="list-style-type: none"> <li>Educate providers on resources (physicians, hospitals, others)</li> <li>Develop strategy to educate the general community on available resources for non-crisis services</li> <li>Develop strategy to educate the general community on available resources for crisis services</li> <li>Develop strategies to reach selected communities (youth, young adult, elderly, etc)</li> </ul>	<ul style="list-style-type: none"> <li># provider education initiatives</li> <li># educational strategies for non-crisis services</li> <li># educational strategies for crisis services</li> <li># strategies to reach selected communities</li> </ul>

Note: Indicators and goal are from the DataHaven 2015 and 2018 Wellbeing Survey







# 2019-22 HIA Behavioral Health Community Health Improvement Plan (cont.)

Strategy	Action Steps	Outcomes
Improve the coordination of care for frequent users of ED in local hospitals	<ul style="list-style-type: none"> <li>• Refine Bridgeport Care Coordination Team (CCT)</li> <li>• Improve attendance at meetings and involvement of organizations</li> <li>• Establish a dedicated patient navigator for CCT</li> <li>• Improve information sharing across organizations</li> <li>• Track outcomes and share results on a quarterly basis</li> <li>• Evaluate state and local best practices for improvement of CCT including re-establishing participation in Health and Housing stability work group</li> </ul>	# organizations actively involved from current to end of CHIP  Establishment of patient navigator Tracking/results sharing improvement
<b>Partner Organizations</b>		
Operation Hope, CCAR, Supportive Housing Works, Town of Monroe, St. Vincent’s Medical Center, DMHAS SWCMHS, City of Fairfield, Bridgeport Hospital, YNHHS, Town of Trumbull, Optimus, RNP, SWCHC, Beacon Health Options, Town of Stratford, The Hub, Town of Easton, SWAHEC		



# Discussion Exercise

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- Break into groups
- Discuss the presentation (30 mins)
  - What did you hear today were the key issues? What stood out?
  - What specific feedback do you have related to what you heard today?



# Questions? Comments?

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