

# 2013 Community Health Needs Assessment for St. Joseph's Healthcare System



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## Executive Summary

St. Joseph's Healthcare System (SJHS) is a not-for-profit comprehensive healthcare organization that serves the medical and related needs of northern New Jersey. The System includes St. Joseph's Regional Medical Center (SJRMC), a 651-licensed bed acute tertiary care hospital, St. Joseph's Wayne Hospital (SJWH), a 229-licensed bed community hospital, St. Vincent's Nursing Home (SVNH) and eleven ambulatory care centers located throughout the community.

In addition to its role as the primary hospital for the City of Paterson, SJRMC is a NJ DHSS designated Level II Trauma Center, Adult and Pediatric Open Heart Surgery Center, Children's Hospital, and Regional Perinatal Center. Founded by the Sisters of Charity of Saint Elizabeth in 1867, St. Joseph's has been serving the poor and infirm of Paterson for 146 years. Beginning as St. Joseph's Hospital and expanding to encompass a tertiary medical center, an acute care hospital, a nursing home, and a number of ambulatory sites and clinics, the System is renowned for its excellence of care and its compassionate staff.

SJWH is a community hospital located in Wayne, NJ offering comprehensive acute medical, surgical, geriatric, and rehabilitation inpatient services as well as emergency, diagnostic and outpatient rehabilitation services.

To meet the health needs of its community, SJHS has formed partnerships with community organizations such as schools, churches, and government agencies to provide an extensive range of health care initiatives via community outreach programs. The hospital also provides various after-discharge services such as ambulatory care sites, clinic services, support groups and classes, case management services, hospices, homebound program, and spiritual counseling. SJHS is continuously sponsoring, hosting and providing outreach programs at our medical facilities and in the neighborhood communities, schools and churches.

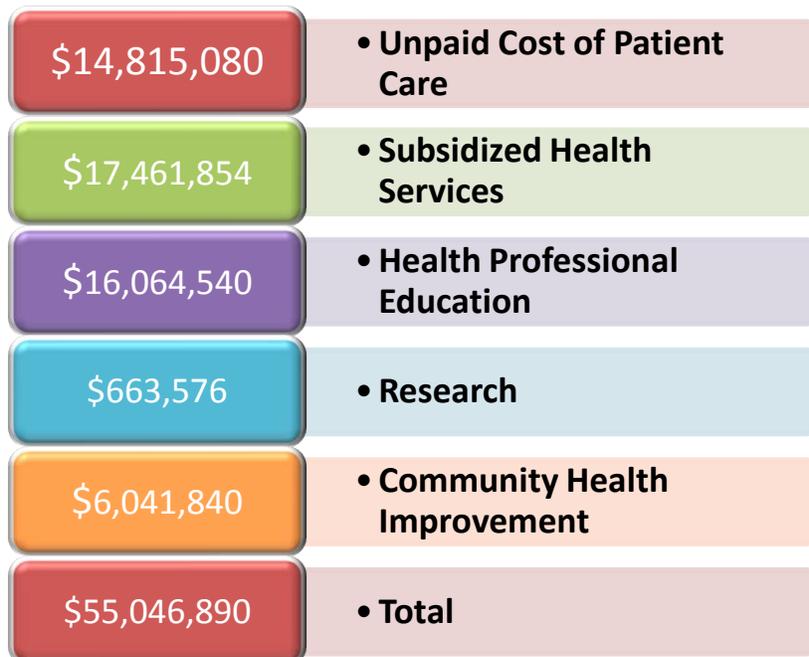
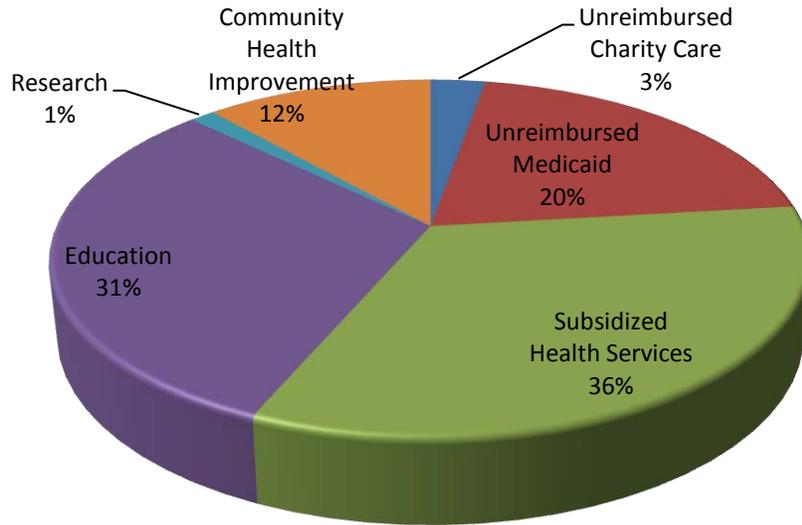
For many years, a variety of programs have provided care for the poor and underserved. Here, we name only a few: the Outpatient Adult Clinics, the Great Falls Pediatrics, an emergency Prescription Fund, the Dental Clinic, the Pediatric Specialty Clinic, the Family Health Center which includes our Homebound Program, the Specialty Clinics, the Comprehensive Care Center for persons affected by HIV/AIDS. Some of our Mental Health Services include Harbor House, the Mental Health Clinic, ACCESS program (for Deaf/Hard of Hearing Mental Health Services) Family Preservation Services, and Harborside Apartments. Other programs for the poor and underserved that are growing are WIC, Breast and Cervical Screening, the Healthy Paterson Project and Parish Nursing.

This Community Health Needs Assessment was conducted by gathering information from publicly available data sets, interactions with key community leaders, and by surveying the broad community, as well as the underserved community of Paterson.

## St. Joseph's Healthcare System Community Benefit

St. Joseph's provided over \$55 million in healthcare services to its community in 2012.

The figures below illustrate the breakdown of the community benefit dollars.



## Our Mission

Rich in history, St. Joseph's Healthcare System has evolved from humble beginnings. In 1867, the Sisters of Charity of Saint Elizabeth opened St. Joseph's Hospital on Church Street in Paterson with only 12 beds to care for the sick and the poor of the area, particularly those from the local mills and factories. Thirty years later, in 1898, St. Joseph's reported treating 1,559 patients and delivering 52 babies and in 1900, it performed 300 operations.

Since then, St. Joseph's Healthcare System grew in size and customer service with major building expansion projects and advancements in technology. Last year, St. Joseph's Healthcare System physicians, nurses and health care providers saw over 1.6 million patients.

Today, St. Joseph's continues to serve the community as the principal provider of healthcare for Passaic County. In line with the mission, SJHS renders quality service to all who come to our door. In light of this, many services continue to develop and show great promise for the care of thousands of patients each year. As the region's State designated Trauma Service, Cardiovascular and Perinatal Center, SJHS provides lifesaving treatments to all who come directly as well as providing a higher level of care for nearly 1,200 patient transfers from area hospitals and facilities.

With more than 1,400 physicians and nearly 5,000 employees, St. Joseph's Healthcare System is the largest employer in Passaic County, the second largest provider of charity care in New Jersey, and the health care provider of choice for the residents of the region. Serving close to 1,000 beds system-wide, St. Joseph's Healthcare System continues to fulfill the Mission, Vision, and Values set forth by its founders and sponsors, the Sisters of Charity of Saint Elizabeth.

### **Our Mission**

In the spirit of Toward Boundless Charity, the Mission of the St. Joseph's Healthcare System, a ministry of healing in the Catholic Church and sponsored by the Sisters of Charity of Saint Elizabeth, is to render quality healthcare in northern New Jersey with a special concern for the poor and under served.

### **Our Vision**

St. Joseph's Healthcare System will be recognized as a leading health care provider of choice in New Jersey. It will be characterized by the excellence of its health care services, its focus on compassionate care of its patients, and by a culture of continuous quality improvement.

### **Our Values**

The core values express our convictions and beliefs.  
We strive to integrate these values into all that we do.

**Dignity** - We respect each person at every stage of development as created by God.

**Justice** - We advocate for the needs of the most vulnerable. We operate at all levels in an ethical manner, with fairness, honesty, and confidentiality.

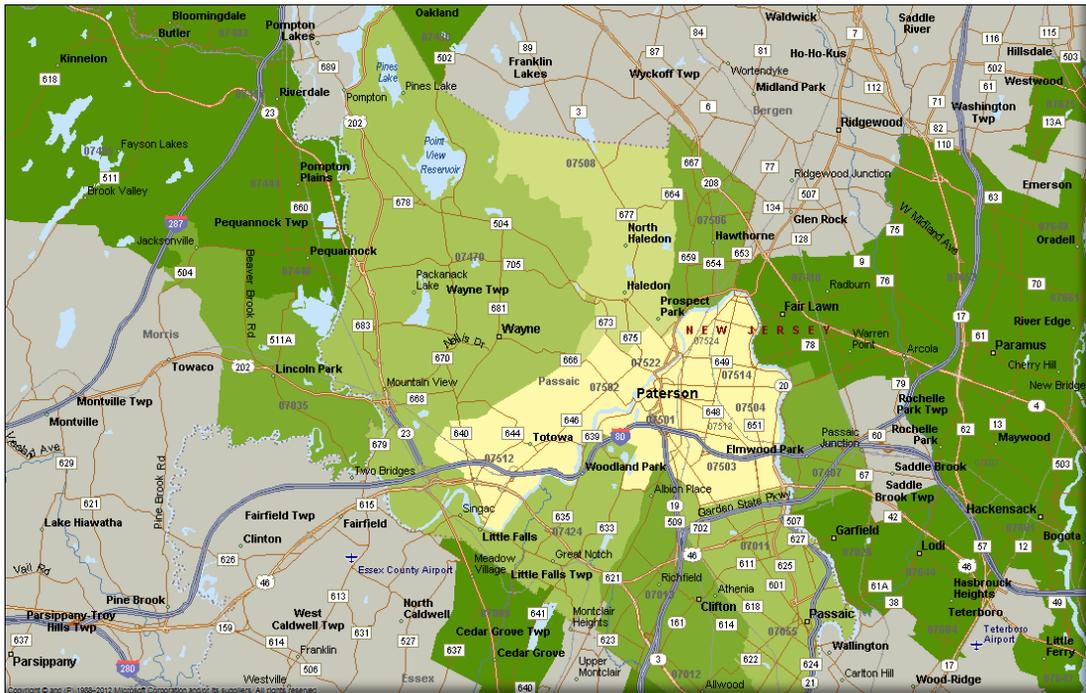
**Excellence** - We enable the highest performance through ongoing growth and development with a commitment to quality, openness to new ideas, accountability to standards, and working together to achieve goals.

**Stewardship** - We use our resources, both human and financial, in a responsible manner with a special commitment for the care of the poor.

## Our Community

St. Joseph's Healthcare System serves 49 municipalities located in Passaic, Northern Essex, Eastern Morris, and Southern Bergen Counties. Our Primary Service Area (PSA) is defined as the southern half of Passaic County including the Cities of Paterson, Clifton, Passaic and Wayne and their immediate surrounding municipalities of Hawthorne, Haledon, Little Falls, and Totowa. For the purposes of data comparison and general community description, Passaic County, New Jersey will be utilized to define St. Joseph's Regional Medical Center's Community.

SJRM's sister hospital, St. Joseph's Wayne Hospital is also located in Passaic County, approximately 7 miles to the north of Paterson in Wayne, New Jersey. Wayne is a suburban community with 55,000 residents. The median household income is \$100,853; 5% of households had income below \$15,000 a year, with 4% in poverty; 29% reported income greater than \$150,000. Median age was 43.4 years; 21% percent of the population is under 18 years; 17 percent of the population is over 65 years of age; 93% of the population has health insurance coverage with 10% of the population reporting a disability.



Passaic County is a diverse young community of 501,226 residents, with approximately 85% of its residents residing in the southern half of the County. The median age of a Passaic County resident is 36.2 years, with 25% percent of the population under 18 years and 12% over the age of 65 years. Racially, 62% percent of the residents identify themselves as white, 14% as Black or African American, 4% Asian and 17% as other. Ethnically, 29.9 % identify themselves as Hispanic or Latino.

Native residents of the United States account for 72% of Passaic County's population; 28% of the people living in Passaic County were foreign born. Of the foreign born population, 48 % are naturalized U.S. citizens.

## Identification of Community Health Needs

To assist it in identification of health needs, St. Joseph’s Healthcare System conducted a survey of area residents through an independent research firm, gathered information from key community stakeholders, and performed a thorough analysis of publicly available data.

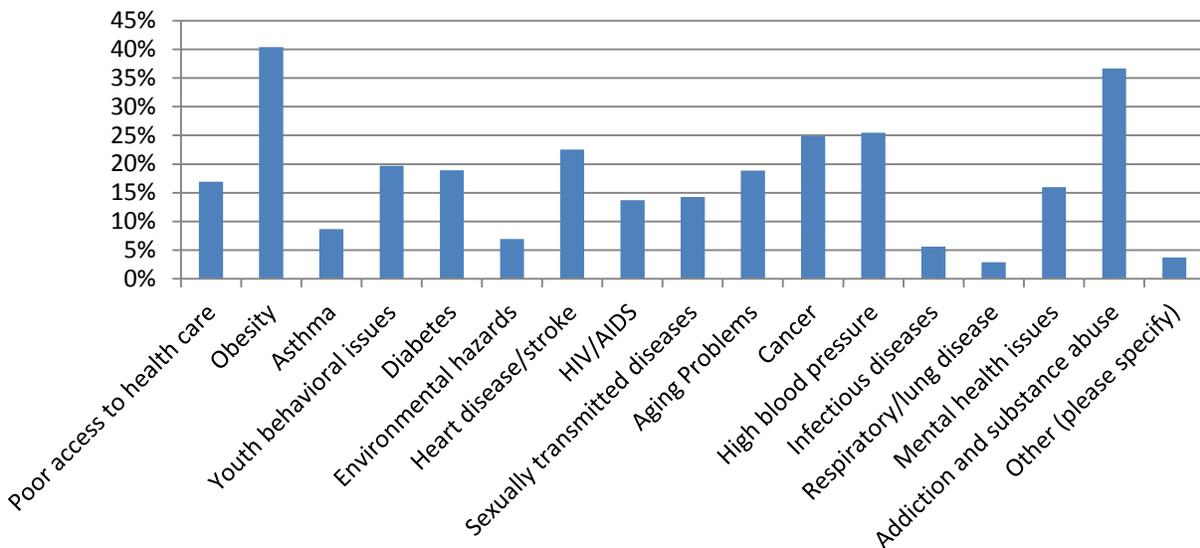
### Community Health Needs Assessment Survey

The research firm utilized by St. Joseph’s is the National Research Corporation (NRC). NRC surveys the community through internet questionnaires. In addition to gathering data on the St. Joseph’s underserved community, NRC compiles statistics nationwide. This allows us to analyze comparative data and make informed decisions to best implement effective interventions.

The NRC Consumer Health Report for St. Joseph’s Healthcare System utilizes a sample of 689 households in its community as defined by its Primary (“PSA”) and Secondary Service Area (“SSA”). The standard error range for a sample of 689 households is +/- 3.7 percent at the 95 percent confidence level.

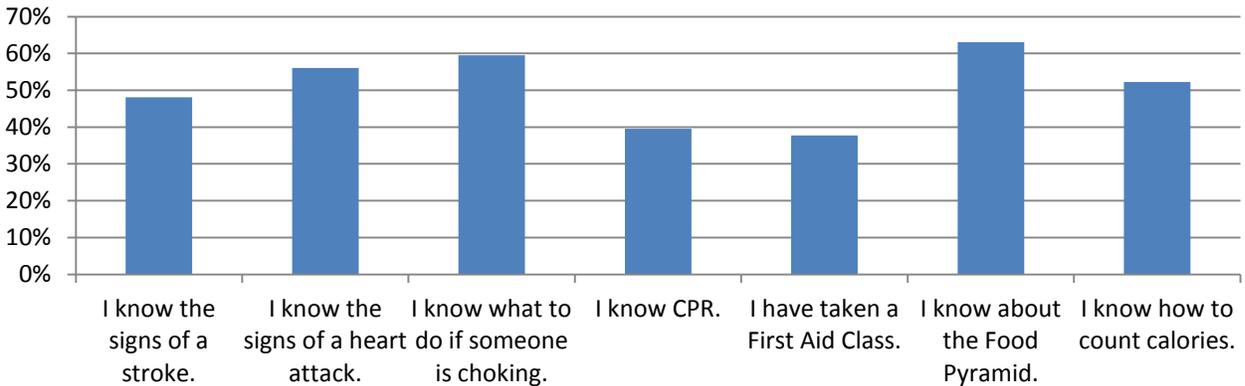
The following are the aggregate results of selected survey questions, as well as subset analysis data by selected demographic cohorts representing key community characteristics such as race and age.

***Which of the following health problems has the greatest negative effect on the overall community health of your county? (Choose up to 5)***



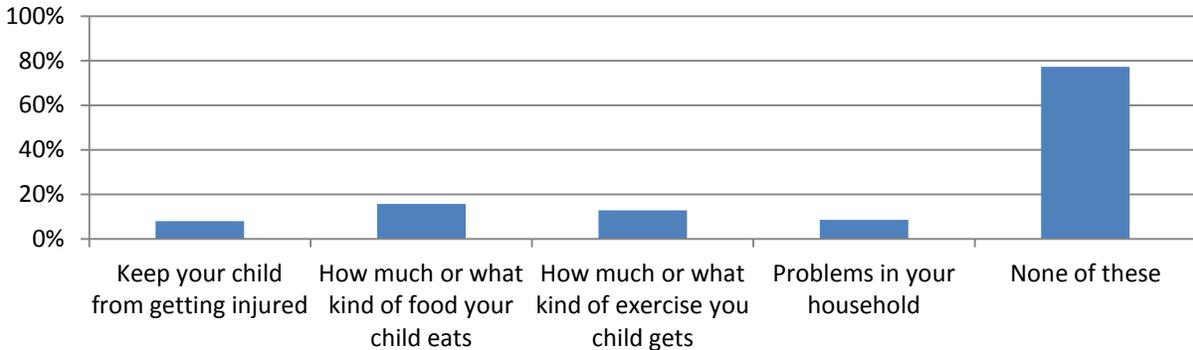
The above graph illustrates that 40.37% respondents indicated that “Obesity” has the greatest negative effect on the community with “Addiction and substance abuse” rated second with 36.65% of the surveyed population. When this question is analyzed by race, white respondents most frequently selected “Obesity”, and “Black or African American” respondents most frequently selected “Addiction or substance abuse”.

**Which of the following statements apply to you? (choose as many as apply)**



This survey question was asked to determine which areas may need greater emphasis from an educational public health perspective. The greatest percentage of the population responded that they know about the food pyramid (63.03%). The second highest scoring category was from respondents claiming that they know what to do when someone is choking (59.52%). The lowest two categories are “I know CPR” (39.51%) and “I have taken a First Aid Class” (37.7%).

**In the last 12 months, which of the following have you discussed with your child’s doctor or health professional? (Choose as many as apply)**



This question was designed to gather feedback on the types of conversations pediatricians and pediatric healthcare workers were having with parents. The above graph illustrates that 77.26% of those surveyed indicated that their child’s pediatrician has not discussed injury prevention, nutrition, exercise, or household problems during visits in the last 12 months.

## ***Input from the Community***

In assessing our community's health needs, St. Joseph's Healthcare System took into account input from persons who represented broad interests of its community. Community input is routinely gathered through the involvement of physicians and staff who participate in various community councils, committees and public health organizations. Through their active involvement in outside organizations, these individuals work with the System to shape the services and programs offered by the hospital.

Medical Director, Passaic County Department of Health

*In this role, Dr. James Pruden reviews candidates for fit testing, plans and conducts various public health drills, participates in training for media spokespeople, and helps identify needs and opportunities for the Department of Health to address.*

Medical Director, EMS for the Sherriff's Department of Passaic County

*In this role, Dr. James Pruden reviews protocols, engages in healthcare and safety design, and reviews the 911 response.*

Chair, Crisis Standard of Care Committee, The Department of Health

*This subcommittee is charged with designing operational strategy for rationing limited resources in the event of a long standing healthcare crisis, such as a pandemic.*

Chair, Board of Trustees, Home Care Options Visiting Nursing Service

*In this position, Ken Morris, develops board policy, oversees all sub-committees, directs organization's investment policy, and develops strategic initiatives to improve patient outcomes.*

Chair, Passaic County Perinatal Coordinating Council

*Provides strategic planning for county-wide Perinatal services*

### ***St. Joseph's Healthcare System is active in the following community organizations:***

Member, Coordinated Community Board

*This is the Campus Violence Prevention Program of William Paterson University.*

*This committee implements strategy to prevent campus violence, develop educational programs, and coordinate with local agencies.*

Member, Domestic Security Preparedness and Planning Group

*This group conducts monthly meetings with leadership from various state and public agencies including, the Attorney Generals Office, the Department of Public Works, the Board of Public Utilities, and New Jersey Transit etc. to plan, coordinate, and review the preparedness strategies for the state of New Jersey.*

Member, Preparedness Coordinating Group of the New Jersey Hospital Association

*Participate with the other preparedness directors and coordinators in the state to collaborate on preparedness efforts in the state of New Jersey.*

Member, Local Emergency Preparedness Council, Paterson Office of Emergency Management

*Engage with local agencies and departments in planning, coordinating, and reviewing preparedness and disaster responses.*

Member, Health and Nutrition Advisory Board of Paterson Concerned Parents for Headstart  
*Committee reviews health and nutritional needs of birth to five year olds in Paterson. How Paterson Concerned Parents for Headstart can partner with community agencies to meet the needs of their enrolled families. Committee is made up of approximately 40 community agency representatives.*

Member, Home Visitation Advisory Board of Partnership for Maternal and Child Health of Northern NJ  
*Provide suggestions and help with strategic plan for improvement of home visitation programs in Passaic County. Committee is made up of approximately 15 health related community representatives from throughout the county.*

Member, Center for Family Resources (CFR) Community Advisement Board/Committee  
*Participate in community assessment discussions on local community trends/changes – such as increasing foreign language interpreter needs, new or growing cultural groups (ie Bengali population increase in Paterson), environmental safety changes, trends of client needs, etc. Additionally, participate in CFR Advisement Committee comprised of approximately 70 to 100 community agency representatives.*

Member, Helpful Hands Northeast Regional Early Intervention Passaic County  
*Participate in County meetings discussing Early Intervention and other needs of families of children with developmental delay and/or disability; discuss trends/changes in Passaic County. Committee is made up of administrators of NJ Early Intervention System provider agencies in Passaic County and all Service Coordination staff members.*

Member, NJFEELS, NJ Partnership for Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children  
*Participate in statewide meetings to develop and bring the Pyramid Model to NJ for all children birth to 5 years of age. Discuss the needs of birth to five year olds and their families in various regions of the state. Currently in the development phase, we are approximately the 11<sup>th</sup> state to participate. Committee is made up of State representatives from various departments, child care centers, universities, children's hospitals (us), special needs educators, mental health organizations, etc.*

Member, Paterson Chamber of Commerce  
*This group works to develop strategies to improve the growth of local business and strategic alliances between resource providers.*

Member, St. Joseph's Children's Hospital Family Centered Care Committee (Chaired by Dr. Joseph Holahan)  
*Participate in discussions and develop plans to respond to requests/comments/ suggests/issues of parents on the St. Joseph's Children's Hospital Parent Advisory Board related to the health, educational, spiritual and resource needs. Committee consists of physicians, nurse managers of pediatric in patient units, child life specialists, social workers (NICU/Hem Onc/Peds Ambulatory), Children's Hospital Chaplain, etc.*

Member, Board of Directors of the Paterson YMCA  
*Ken Morris's work on this board included directing HUD 1 and HUD 2 grants to provide subsidized housing for the homeless; developing strategy for the implementation of new outreach programs; implementing a marketing program that increased adult and female memberships by 30%.*

Member, United Way of Passaic County

*The United Way develops programs that address housing shortages, financial literacy, and educational outcomes. This organization also serves as a granting agency to other non-profits and safety-net providers. Activity on this board helps the hospital to network and provide St. Joseph's patients with a continuum of support.*

Member, Passaic County Workforce Investment Board

*This group develops strategies to foster job growth and development in low to moderate income households. The group develops job training and readiness programs for at-risk youth and fosters relationships with area businesses to develop employment opportunities for young adults.*

Member, Minority Concerns Committee of the Passaic County Superior Court

*This group develops strategies to improve access to the criminal and family courts, and addresses constituent concerns with the judicial system of the Passaic County Vicinage.*

Paterson Rotary

*Local service organization that addresses the needs of the disenfranchised throughout Paterson.*

Member, New Jersey Council of Teaching Hospital Government Relations and Children's Hospital Committee

*This group advocates for better reimbursement to hospital base physician teaching program, and develops strategies to improve State-wide access to patient care.*

Member, New Jersey Hospital Association

*This group advocates for greater patient access, improved reimbursement to hospitals in an effort to ensure that the healthcare industry remains stable.*

Member, Hospital Alliance of New Jersey

*The Hospital Alliance advocates for improved patient access, and equitable reimbursement to urban hospitals.*

Member, Home Visitation Advisory Board of Partnership for Maternal and Child Health of Northern NJ  
*Provide suggestions and help with strategic plan for improvement of home visitation programs in Passaic County. Committee is made up of approximately 15 health related community representatives from throughout the county.*

Member, Breastfeeding Committee, Partnership for Maternal and Child Health of Northern NJ

*Committee consists of hospital representatives and private practice to plan and develop strategies to increase the breastfeeding rate in the region.*

Member, Community Assessment Board, Center for Family Resources

*Provides planning and coordination of services for families.*

## ***Review and Analysis of Public Data***

In addition to surveying the community, St. Joseph's Healthcare System reviewed and analyzed publically available health survey data to gain better understanding of our community health issues.

Data reviewed included statistical information organized by CommunityCommons.org an initiative of *Advancing the Movement*, and powered by *Institute for People, Place and Possibilities (IP3)*. This web site was funded by the Centers for Disease Control and Prevention, Kaiser Permanente, Ascension Health, the YMCA of the USA, The Convergence Partnership and IP3 (a partnership of Community Initiatives, the Center for Applied Research and Environmental Systems (CARES), and Transtria).

Other health data reviewed included:

- Population, Socio-economic, and Economic Status based on age, poverty, unemployment, school enrollment, home values, crime rates, and more
- County Health Rankings - Prevalence and mortality rates for various health indicators including obesity, heart disease, diabetes, smoking, asthma, binge drinking, infant mortality
- Healthy New Jersey 2020
- Hospital Statistics - Inpatient discharges, inpatient days, ED utilization, and outpatient clinic activity for uncompensated care.

## Meeting the Health Needs of Our Community

To service the health needs of its community, St. Joseph’s Health Care System routinely prioritizes clinical program development based on:

- Patient and Physician request/demand for services - *Responding to the clinical needs of our patients, St. Joseph’s routinely adjusts program development and services using real-time analysis of patient and physician demand for new or expanded services. This can be seen as sudden increases in disease prevalence or in more subtle analysis of patient waiting times for certain clinical services.*
- Ongoing communications with hospital and affiliated care coordinators - *Communication with the direct patient care coordinators allows our executive team to develop strategic action plans for appropriate follow up care for patients upon hospital discharge.*
- Community Organization, City, County, and State request for services - *St. Joseph’s documents all requests for service from the community. This assists the hospital in developing the most effective interventions*
- Community Health Assessment survey results and interviews - *Synthesis of the available data sources provides a framework to develop a model of change.*

*This compilation assists the Healthcare System in being an effective provider of services.*

Below are selected community health statistics and a few of its Community program offerings:

### General Health of the Community

#### General Health

Report Area	Total Population Age 18+	Estimated Population with Poor or Fair Health	Percent Population with Poor or Fair Health
Passaic County, New Jersey	371,613	79,525	21.40%
New Jersey	6,640,037	996,006	15%
United States	229,932,154	36,429,871	15.84%

Source: Community Commons

St. Joseph’s offers adult and pediatric primary and subspecialty health clinics. In 2012, the System provided approximately 100,000 patient encounters to for the residents of Passaic County without the ability to pay.

#### HIV/AIDS

	Baseline Data Year	Total Baseline	Total Target	White Baseline	White Target	Black Baseline	Black Target	Hispanic Baseline	Hispanic Target
Reduce the rate of HIV transmission among adolescents and adults	2008	15.6	12.5	4.5	3.6	65.3	52.2	23.2	18.6
Increase the proportion of HIV-infected adolescents and adults who receive HIV care and treatment consistent with current standards	2008	54%	65%	56%	67%	55%	67%	49%	60%
Reduce the death rate due to HIV infection	2007	5.3	4.2	1.7	1.4	27.3	21.8	5.9	4.7

Source: Healthy New Jersey 2020

St. Joseph’s offers an HIV diagnosis, treatment and follow up care service. The Comprehensive Care Program treated approximately 1,200 patients in 2012.

### Dental Care Utilization

Report Area	Total Population(Age 18+)	Total Adults Without Recent Dental Exam	Percent Adults with No Dental Exam
Passaic County, NJ	371,613	101,200	27.23%
New Jersey	6,684,371	1,637,631	24.50%
United States	235,375,690	70,965,788	30.15%

In 2012, St. Joseph’s Healthcare System provided \$2.89 million of unreimbursed dental care to the community, registering 5,233 patients for a total of 12,212 encounters.

### Obesity (BMI >30)

Report Area	Total Population Age 20+	Population with BMI > 30.0 (Obese)	Percent Population with BMI > 30.0 (Obese)
Passaic County, New Jersey	354,320	86,454	24.20%
New Jersey	6,442,877	1,588,093	24.39%
United States	223,576,989	61,460,308	27.35%

Source: Community Commons

St. Joseph’s offers multilingual nutrition counseling services throughout its clinic programs for diabetics, cardiac, new mothers, and school age children.

### Chronic Disease Issues

#### Diabetes Prevalence

Report Area	Total Population Age 20+	Population with Diagnosed Diabetes	Percent Population with Diagnosed Diabetes
Passaic County, New Jersey	353,849	30,431	8.20%
New Jersey	6,440,230	562,046	8.07%
United States	223,653,607	20,615,282	8.72%

Source: Community Commons

St. Joseph’s John Victor Machuga Diabetes Education Program offers individual and group community based diabetic education and nutritional services to area residents.

#### Stroke Mortality

Report Area	Total Population	Average Annual Deaths, 2006-2010	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate, Stroke Mortality (Per 100,000 Pop.)
Passaic County, New Jersey	496,077	186	37.53	36.98
New Jersey	8,719,630	3,378	38.74	34.23
United States	303,844,430	133,107	43.81	41.78
HP 2020 Target				<= 33.8

Source: Community Commons

St. Joseph’s Comprehensive Stroke Center offers advanced life saving medical, interventional, and surgical services as well as Primary Stroke Center and community support and educational services. One such program offer in 2012, was a first responder training program to approximately 50 first responders, educating local first aid teams on the signs and symptoms of stroke.

### Heart Disease Mortality

Report Area	Total Population	Average Annual Deaths, 2006-2010	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate, Heart Disease Mortality (Per 100,000 Pop.)
Passaic County, New Jersey	496,077	717	144.45	141.57
New Jersey	8,719,630	13,546	155.35	136.29
United States	303,844,430	432,552	142.36	134.65
HP 2020 Target				<= 100.8

Source: Robert Wood Johnson Foundation, "County Health Rankings & Roadmaps"

As a Regional Cardiovascular Center, St. Joseph's provides comprehensive cardiac care to its immediate and greater North Jersey community. Services include open heart, cardiac catheterization and medical management of patients with heart disease. In addition, the hospital offers cardiac specialty clinics and diagnostic centers for the follow up care and treatment of its residents.

Outreach efforts include the participation in a program sponsored together with the Association of Black Cardiologists and the American Hypertension Society, incorporating church and government leaders in the city of Paterson, to provide free screenings for more than 350 people from our community, in an effort to educate and mitigate cardiac risk

### Cancer Mortality

Report Area	Total Population	Average Annual Deaths, 2006-2010	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate, Cancer Mortality (Per 100,000 Pop.)
Passaic County, New Jersey	496,077	851	171.63	171.88
New Jersey	8,719,630	16,902	193.83	175.24
United States	303,844,430	566,121	186.32	176.66
HP 2020 Target				<= 160.6

Source: Community Commons

Nationally recognized as a Comprehensive Cancer Center, St. Joseph's offers cancer screening, prevention, diagnostic and treatment services. In addition to clinical services and in partnership with the American Cancer Society, St. Joseph's offers patient navigation services to assist individuals in managing their daily activities by identifying local resources such as transportation, aesthetic, and social support services.

One of its outreach programs is St. Joseph's CEED (Cancer Education and Early Detection) program which provides screening and treatment services to the underserved through a grant from the NJ Department of Health in collaboration with the Susan G. Komen Foundation and the Paterson Cancer Initiative. Since its inception at St. Joseph's the program has provided services for thousands of minority women and men, with the greatest percentage of those screened being of Hispanic origin.

**Women and Children Health Issues**

**Teen Births**

Report Area	Female Population Age 15 - 19	Births to Mothers Age 15 - 19	Teen Birth Rate (Per 1,000 Births)
Passaic County, New Jersey	119,194	4,732	39.7
New Jersey	2,007,078	48,772	24.3
United States	72,071,117	2,969,330	41.2

Source: Community Commons

**Low Birth Weight**

Report Area	Total Live Births	Number Low Weight (< 2500g) Births	Percent Low Weight Births
Passaic County, New Jersey	53,499	4,654	8.70%
New Jersey	800,136	66,411	8.30%
United States	29,300,498	2,387,855	8.15%

Source: Community Commons

As a Regional Perinatology Center, St. Joseph’s offers General Obstetric, High Risk (MFM), Teen OB and Midwifery prenatal and delivery services. The System also offers prenatal education and post delivery breast feeding and baby care classes. As a neonatal transfer center, the System accepted 168 Neonatal transfers to its facility for high risk infant care.

## Priority Health Needs and Implementation Plans

Through the process of surveying the community, analyzing St. Joseph's internal operations, and discussions with key community leaders the System has prioritized the following as significant community health needs:

Childhood Obesity  
HIV/AIDS Services  
Asthma Care  
Cardiac Services

### Childhood Obesity

Identified through forums with pediatricians and other healthcare providers, as well as the NRC survey questions targeted to lifestyle questions, St. Joseph's identified childhood obesity as a community need priority.

Pediatric obesity is defined as a total bodyweight comprised of greater than 25% body fat or as a Body Mass Index (BMI) of greater than 85<sup>th</sup> percentile for age. A BMI of 85<sup>th</sup> to 95<sup>th</sup> percentile for age and gender are considered at risk and overweight, 95<sup>th</sup> percentile for age and gender are considered obese. Childhood obesity is one of New Jersey's most serious health concerns. A recent NJ Department of Health and Human Services report states that 38% of sixth grade students are overweight, while 20% are actually obese. The report also indicates that children living in low socioeconomic school districts are *two and a half times more likely* to be obese than children living in high socioeconomic school districts.

Obesity is striking at younger and younger ages and is on the rise in northern New Jersey. According to the Center for Disease Control, the percentage of children between the ages of 6 and 18 who are characterized as overweight has more than doubled in the last 20 years. This number has tripled among adolescents. Among children of Latino and African American descent the trend is even more alarming, with obesity increasing at a rate 45%-70% faster than other racial groups. For example, in Paterson, NJ a city of 87,000 children between the ages of 3 and 18, of which 33% are African American and 58% are Latino, the prevalence of obesity far exceeds national averages. The City lacks grocery stores, and many residents rely on the prevalence of fast food restaurants or convenience stores. Further, there are not enough appropriate recreational opportunities as a result of unsafe neighborhoods and parks. All together, it is this public health condition that serves as the impetus for the development and operations of **St. Joseph's Children's Hospital's Reaching Ultimate Student Health (R.U.S.H.) School-Based Wellness Program.**

The St. Joseph's Children's Hospital R.U. S.H. School Based Wellness Program offers childhood obesity prevention services through a 12-week school-based wellness program which promotes weight management and healthy living for at-risk children within the St. Josephs' prevalently poor and underprivileged communities. This intervention program was created along with a consortium of community partners: the Paterson Public School District, the New Jersey Community Development Corporation, William Paterson University and local after school programs.

Recognizing that that in many cases, metabolic disorders are not at fault but rather unhealthy lifestyle choices account for excess weight gain. The program offers nutritional counseling to the students and their families as well as aggressive medical or surgical treatment for the extremely obese child. Children learn basic health habits and are taught the skills and given opportunities to practice

good health habits. This is particularly important in Paterson and surrounding communities, which has a low-income and diverse community where the prevalence of obesity far exceeds national averages.

**Goal/Outcome:**

Currently, the 12-week R.U.S.H School-Based Wellness Program is being implemented at School 5 Elementary School in Paterson. With an overarching goal to help reverse the trend toward increased weight and sedentary lifestyles among American children and nearly 80,000 students in 40 elementary-level schools within the Public Paterson School District, the St. Joseph's Children's Hospital R.U.S.H. program continues to seek opportunities to expand this program to additional schools in the community.

**HIV/AIDS**

Passaic County has 2,546 people living with HIV/AIDS and Bergen County has 1,562. Paterson has 41% (1,692) of the living cases of HIV/AIDS. Last year there was an increase of 7% in cases due to new AIDS diagnoses. Women account for 35% of the HIV/AIDS cases (2nd highest in the state) and 39% of HIV cases (43% in Paterson). 71% (91% in Paterson) are minority (39% Black and 31% Hispanic). Hispanics are the fastest growing segment of new AIDS cases. 74% of PLWA and 59% of the PLWH are over 45 and 26% are over age 55.

Minorities continue to be disproportionately affected by HIV with 39% of those infected being Black (8% of general population); 31% Hispanic (24% of population) compared to Whites 28% living with HIV/AIDS, but 69% of the population. This disproportionate effect is best illustrated by the rates of HIV among different racial/ethnic groups: One in every 252 Hispanics, 1 in every 68 blacks and 1 in every 688 whites. In Paterson 1 in every 47 Black, non-Hispanic males is living with AIDS. Among newly diagnosed, 79% are black, non-Hispanic.

St. Joseph's addresses this community need by offering comprehensive care management services which includes medical, psychosocial and case management services to individuals diagnosed with HIV. In addition, the program has recently expanded its service offering to include screening and prevention follow up services: rapid testing to target those individuals who identify with at-risk profiles either through demographics or behaviors, including Black, non-Hispanic and Hispanic women; men who have sex with men of all races and ethnicities; injecting drug users; persons recently released from incarceration; and Black, non-Hispanic and Hispanic men.

According to information presented at the New Jersey CTR Coordinators meeting in March, 2012, almost 84% of clients who tested positive in 2010 identified heterosexual contact without a barrier as the risk factor and almost 74% of those testing positive the first 6 months of 2011 identified heterosexual contact without a barrier as the risk. However, no one seeking service in any of the counseling and testing sites will be refused testing based on race, ethnicity, gender, sexual orientation or other demographic characteristic or behaviors.

SJHMC provides outreach to the at-risk community through word of mouth, social marketing, and participation in quarterly workshops at area churches with ministries to minority populations that will include information on HIV, information on testing sites and testing at the event.

The National Institute of Health promotes, that "social forces and risky behaviors fuel the spread of HIV. Issues such as poverty, racism, homophobia, and stigma attached to HIV infection and AIDS seriously impede HIV prevention efforts." The epidemic in Paterson, in particular, bears witness to the truth of that statement. It is an extremely crowded and impoverished area with high levels of drug use and other behaviors that are indicative of risk for HIV infections. It is the goal of St. Joseph's efforts to achieve the targets set by Healthy New Jersey 2020.

**Goal/Outcome:**

Continue efforts to expand rapid testing services and follow up to increase the percentage of cases treated for HIV.

**Asthma**

Passaic County reports a higher than average incidence of asthma, as indicated in the table above. SJRMC currently treats approximately 1,500 inpatients, 7,900 emergency visits and 2,300 outpatient clinic visits per year with the primary diagnosis of asthma. Twenty percent (20%) of the patients admitted are readmissions for primary asthma within 12 months of initial admission. Upon further review of the data, significant variance is seen between the adult and pediatric populations as well as the Medicaid/Charity care population and other insured patient populations. In the adult population, the readmission rate is 25% for adult Medicaid patients and 30% for adult Charity care patients. For pediatric patients the readmission rate is 15% for pediatric Medicaid patients. A review of the emergency room treatment and release data shows that 30% of adult and pediatric patients have had an asthma related emergency room encounter at least once in the past 12 months with 75 patients having 3 or more emergency room encounters. Three patients had over 10 encounters in 2012. In the process of conducting our community assessment, Paterson community agencies, Eva's Village and Catholic Charities, reported the need for a formal community asthma education program. To satisfy this community health need, St. Joseph's is in the process of developing an Asthma Education & Navigation Program.

Consistent with CMS' Triple Aim goals, the St. Joseph's Asthma Education & Navigation Program (Program) will strive to facilitate optimal asthma care for the low income residents of Paterson and its surrounding areas by increasing the awareness of the importance of: (1) proper diagnosis; (2) adherence to evidence based medicine guidelines; and (3) self care to improve patient quality of life. The Program will accomplish this by providing hospital based educators, called Navigators, to guide patients to appropriate care services, monitor patient and provider adherence to asthma guidelines, and promote asthma health in our community. It is anticipated that the Program will decrease inpatient admissions and emergency department visits.

SJHS will implement the Program which will be customized to the adult and pediatric populations and will offer training/education programs to hospital based and community providers/ caregivers in evidence based asthma education and treatment. SJHMC will also develop a formalized in-patient and outpatient care management program which will offer personalized patient self-care education and support.

To accomplish this, a multidisciplinary team will:

1. Establish standardized patient population specific care education and protocols based on the National Heart, Lung and Blood Institute (NHLBI) expert panel report (EPR-3) asthma care guidelines. Tools will be age and language specific.
2. Offer internal training to staff on up-to-date asthma care, including offering Respiratory Therapists and other appropriate staff opportunities to receive nationally recognized asthma education and certification.
3. Identify adult and pediatric Navigators who will managed and monitor education and protocol compliance. Examples of duties be performed by the Navigators may include:

- a. Transition of care services, assisting patients with identifying appropriate outpatient follow up services.
  - b. Provide face to face education.
  - c. Assisting patients in identifying ways to obtain affordable asthma medications and supplies.
  - d. Working with Federal and State programs, insurance carriers and pharmaceuticals to necessary medications.
  - e. Track patients' self-care compliance and educate as needed.
4. Identify opportunities to partner with primary care physicians, community organizations, schools, and child care centers to increase asthma care awareness with up-to-date medications and guidelines using programs such as those offered by Pediatric/Adult Coalition of NJ.
  5. Work with local pharmacies to offer 340B medication pricing and tracking/monitoring of quick medication.

**Goal/Outcome:**

In addition to the 4 Goals set forth above:

- 1) Reduce readmissions due to patient non-compliance.
- 2) Reduce emergency department visits by increasing patient outpatient education on Asthma Disease Management, leading to increased adherence to preventative medication and decreased need for rescue medication. Expand Episode Clinic program to offer Asthma management resources for urgent care.
- 3) Identify opportunities for patients to obtain affordable medications and supplies through collaborative efforts with insurance carriers, local pharmacies and medical device companies.
- 4) Increase patient satisfaction through a personalized asthma educational approach by utilizing asthma action plans and assessment questionnaire tools that are age and language appropriate, and following up patients after their hospital or outpatient visits.

**Cardiac Services**

Heart Failure (HF) is the number one Medicare Diagnosis Related Group (DRG) across the United States. With over 5.7 (Circulation, 3(10), 2012) million existing cases and about 550,000 new cases diagnosed annually in this country, it is the only cardiovascular disease increasing in incidence and prevalence. The disease is the primary reason for over 6.5 million hospital days per year, making heart failure the most costly DRG ([Hunt, Baker, Chin, Cinquegrani, Feldman, et al., 2001](#)).

At St. Joseph's Regional Medical Center (SJRM), inpatient volume has increased incrementally from 773 cases in 2005, to approximately one thousand cases annually. Nationally, the thirty day readmission rate for the diagnosis averages nearly 25% and is currently 28% at SJRM (Hunt, et al., 2005; St. Joseph's Regional Medical Center).

## **Fractionated Heart Failure Care**

Heart failure care often begins with admission to the hospital. The large array of care providers/givers contributes to a fractionated, inconsistent approach to care. Sometimes cardiologists primarily attend to the hospital needs of heart failure patients. Alternatively, private physicians in the fields of internal medicine or family practice often serve as attending physicians for this population. Cardiology consultation is requested in less than the majority of cases. Multiple other specialty physicians participate in the care of HF patients, due to problematic co-morbid conditions. Despite the best evidence-based therapies available, hospitalized HF patients may not have evidenced –based HF medications prescribed, often do not have prescribed HF medications up-titrated from baseline doses, raised to target doses, or optimized prior to discharge. Physician prescribed consultations for non-pharmacological interdisciplinary intervention related to HF are sparse.

Patients have higher than usual anxiety levels during hospitalization, which at best, may prevent patients from retaining pertinent HF education that is offered. Frequently, patients receive inadequate education and social support necessary to self-manage HF after discharge, despite a variety of efforts from hospital employees.

Post discharge care also varies by patient. Many patients see their private attending physician, with the majority following-up with various specialty consultants as well. Indigent patients are mostly served by hospital or government family health clinics or cardiology clinics, with long appointment wait times from hospital discharge to first clinic visit.

The paradigm of urban health and its biologic, social and contextual forces is integral to understanding the City of Paterson residents' need for supported HF self-management after discharge from the city's only hospital. In Paterson, and at this facility, barriers for the poor and underserved HF patients included poor access to timely outpatient care, education and social service support; fragmented care; lack of resources to acquire medications and low sodium non-processed food diets; and cultural and language barriers. These separately and in aggregate result in reduced cardiovascular health, frequent readmissions, as well as reduced quality and increased mortality. The largest culture represented among the population of Paterson was 57% Hispanic or Latino (32% of who were born outside of the U.S.), 28.3% were black, 9.2% were white, and other races or ethnicities were 4.8% (Citydata.com, 2012; United States Census Bureau, 2000). Of hospitalized HF patients, about 20% were Hispanic or Latino, 30% were black, and 34% were white (including a large multinational Arabic population), and 16% were other races or ethnicities, necessitating attention to cultural aspects of patient care

The **Outpatient Heart Failure Center (HFC) at SJRMC** is designed to provide expert cardiology care and prevent hospital readmissions in its underserved largely multi-racial, multi-ethnic local population, while improving standardized HF care and health-related quality of life in patients with this diagnosis.

### **Goal/Outcome:**

Furthering this program's mission, the hospital recently established a Heart Failure Navigator program which follows patients post discharge and assists in the patients care management. This individual works with post acute providers and care givers to support medication reconciliation, post discharge education and support. The outcome of this position is to work with community partners to provide seamless quality transition from hospital to post-discharge care as well as to reduce the readmissions to the for the culturally diverse underserved heart failure population that frequents this inner city hospital.

## Services Delivered by the Community

Our community health needs assessment indicates that the Paterson community reports drug and alcohol abuse as one of the leading the causes impacting community health. To address this issue, St. Joseph's works closely with local community organizations, such as Straight and Narrow and Eva's Village to assist patients in need of drug and alcohol treatment services.

In addition, although St. Joseph's does not offer specific drug and alcohol abuse treatment services, its Behavioral Health Services program offers an extensive continuum of psychiatric services with a specific focus on those with severe and persistent mental illness, often assisting community programs with dual diagnosis patient treatment services.

At present, Behavioral Health Services is comprised of the following:

- ◆ Psychiatric Emergency Services/Screening Center
- ◆ Voluntary Psychiatric Inpatient Service
- ◆ Adult Partial Hospitalization Program-Harbor House, inclusive of co-occurring track and mono-lingual Spanish track
- ◆ Adult Partial Hospitalization Program-ACCESS
- ◆ Family Preservation Services
- ◆ Outpatient Mental Health Services, with specialties in:
  - ◆ Co-occurring substance abuse
  - ◆ HIV/AIDS
  - ◆ Medication monitoring
  - ◆ Deaf and hard of hearing
- ◆ Supported Employment Program
- ◆ Supportive Housing Program
- ◆ Adult Residential Services – both transitional and permanent housing
- ◆ Adult Residential Services – ACCESS
- ◆ ICMS – ACCESS
- ◆ PATH

St. Joseph's has a long and successful history of providing outreach oriented treatment, rehabilitation and recovery oriented services to individuals with serious and persistent mental illness and has played a leadership role in New Jersey in the delivery of and advocacy for comprehensive community based behavioral healthcare.

St. Joseph's is experienced in providing non-traditional comprehensive outreach oriented services to those with serious and persistent mental illness; Supportive Housing, Project for Assistance in Transition from Homelessness (PATH) and ICMS are three examples of programs currently provided in Passaic county which require flexible, assertive, consumer centered outreach services towards recovery.