

The Need for Caring in North and Central Brooklyn

A Community Health Needs Assessment




“Health Care in Brooklyn is in full crisis mode. From inadequate quality of care to a lack of access to care, the healthcare infrastructure is literally on life support. Barriers to care and growing healthcare disparities have all combined to further compound an already difficult situation.”

- State Senator John L. Sampson



BPN With Co-lead Partners CHPS and NYLPI



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A Community Health Needs Assessment Study

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Commission on the Public's Health System (CPHS)

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North and Central Brooklyn Health Care Crisis

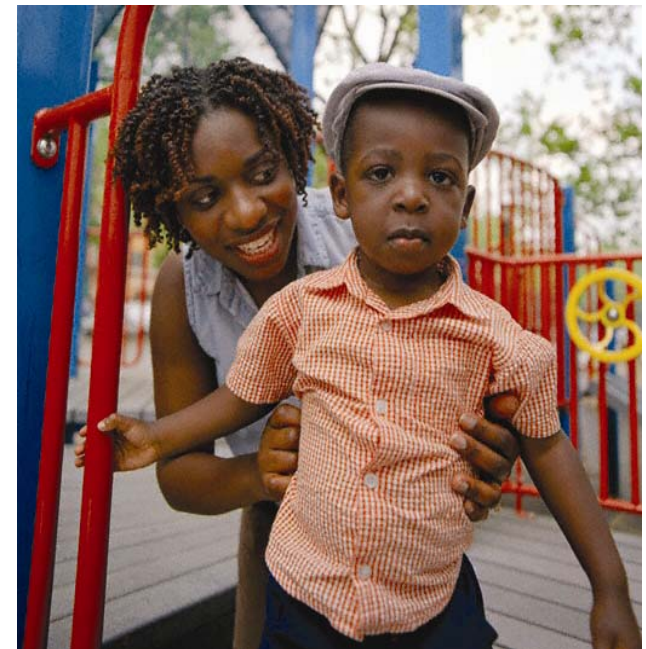
- In several zip codes, 50% or more of the residents are on Medicaid or uninsured
- Many residents live sicker and die younger
- There is a lack of health care resources
- Many hospitals are facing serious financial troubles

North and Central Brooklyn Health Care Crisis (cont.)

- 2011 Brooklyn Health System Redesign Workgroup
- Recommended three hospital merger:
 - The Brooklyn Hospital Center
 - Interfaith Medical Center
 - Wyckoff Heights Medical Center
- Community invited into planning process
- Community health study approved

What Is a Community Health Needs Assessment (CHNA)?

- Evaluates a community's health care **needs** and **barriers** to care
- Studies **with** the community, **not on it**
- Unique opportunity to input the **community's voice** in community health planning



What Is the Purpose of This Study?

- Document residents' perspectives on the **needs, barriers and gaps in access to health care services** in North and Central Brooklyn
- To collect information that the community, along with hospitals and the NY State Department of Health, will use to **shape health care**



Our Approach

- Community Based Participatory Research Approach (CBPR)
 - Key stakeholders, including community members and organizations, had a role in the study design, data collection, and data interpretation
- Collected quantitative and qualitative data through **surveys, focus groups and listening sessions**

North & Central Brooklyn




The Survey

- Worked with several **community-based organizations** to administer the survey
- Asked questions about residents' health care **experience, access to care,** and **barriers** to care
- Gathered **644** valid surveys from **15** zip codes

The Focus Groups

- Held to gather input from groups that were under-represented in the survey
- **Nine Focus Groups**
 - Pregnant women
 - LGBT
 - People with disabilities
 - Men (2)
 - Spanish-speakers living with mental illness
 - Youth
 - Seniors
 - Immigrants



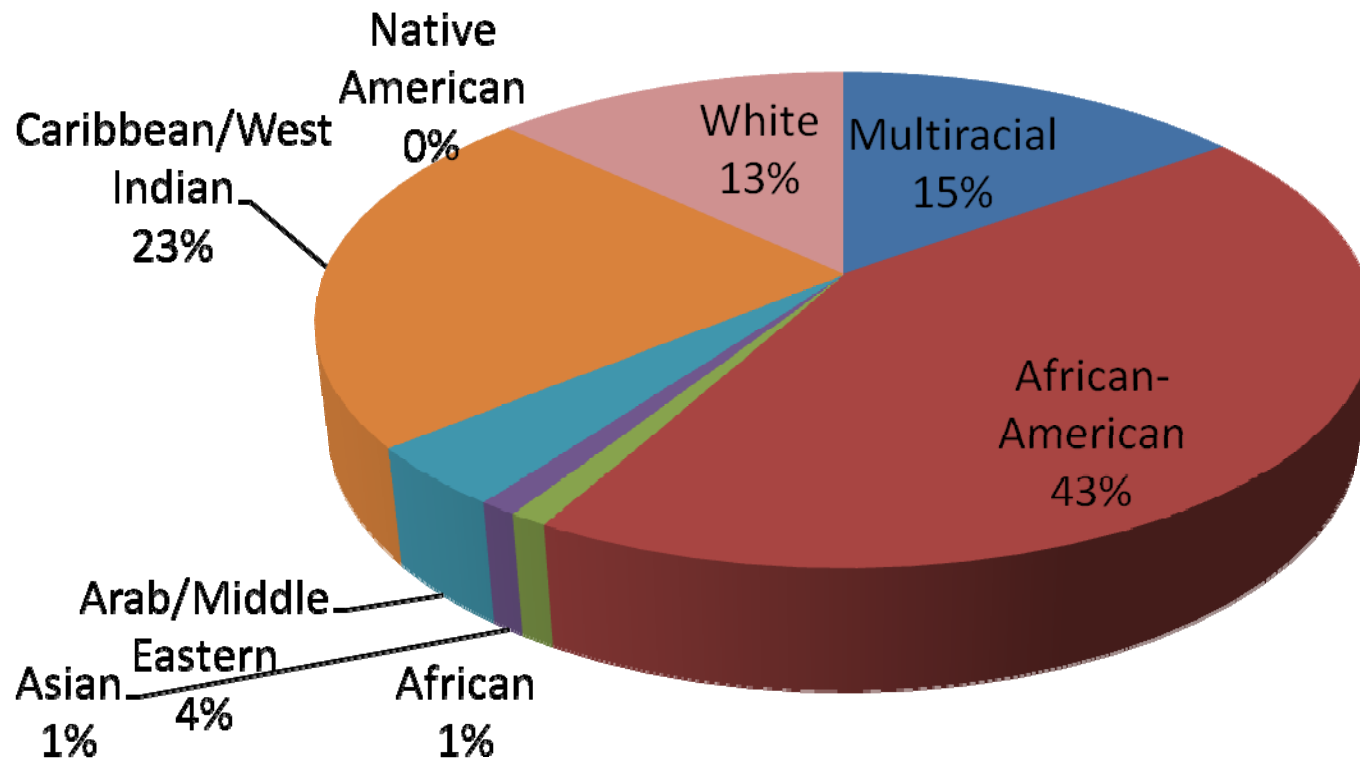
“I wish I have a clinic close to my home because I have three little children I travel with all of them to the doctor office.”

“There needs to be more of everything so you don’t have to go out of the neighborhood.”

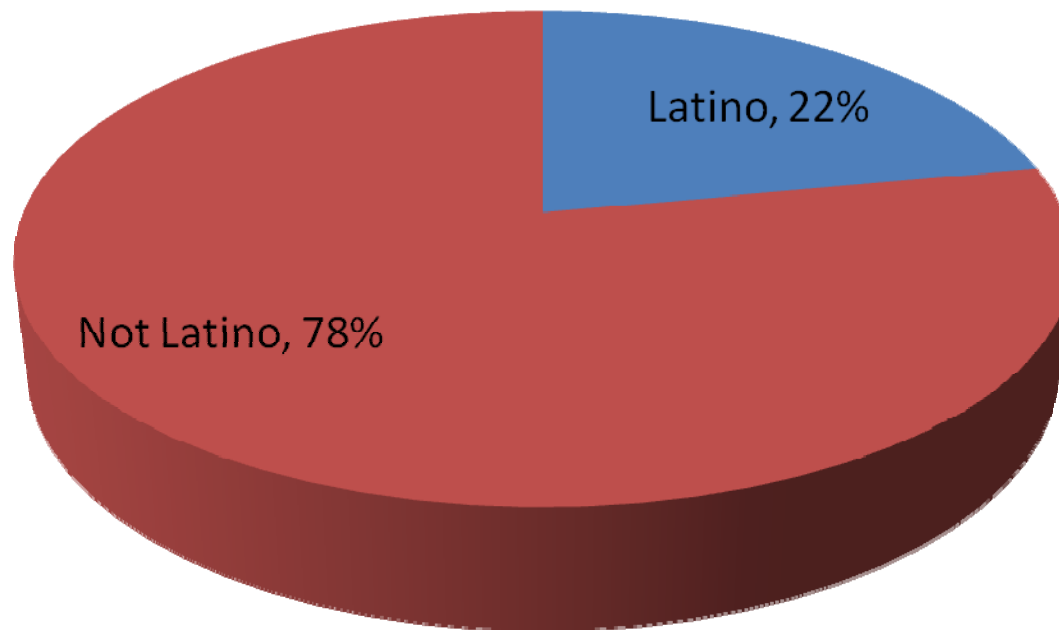
Survey Sample Demographics

- 54.7% were between the ages of 26 and 50
- 65.9% identified as women
- 40% foreign-born
 - 21% were comfortable speaking about their health care only in a language that is different from English
- 65 % indicated an income less than \$30,000 per year
- 44% not currently employed
- 45% lived in the community 10 years or more

Survey Respondents by Race/Ethnicity

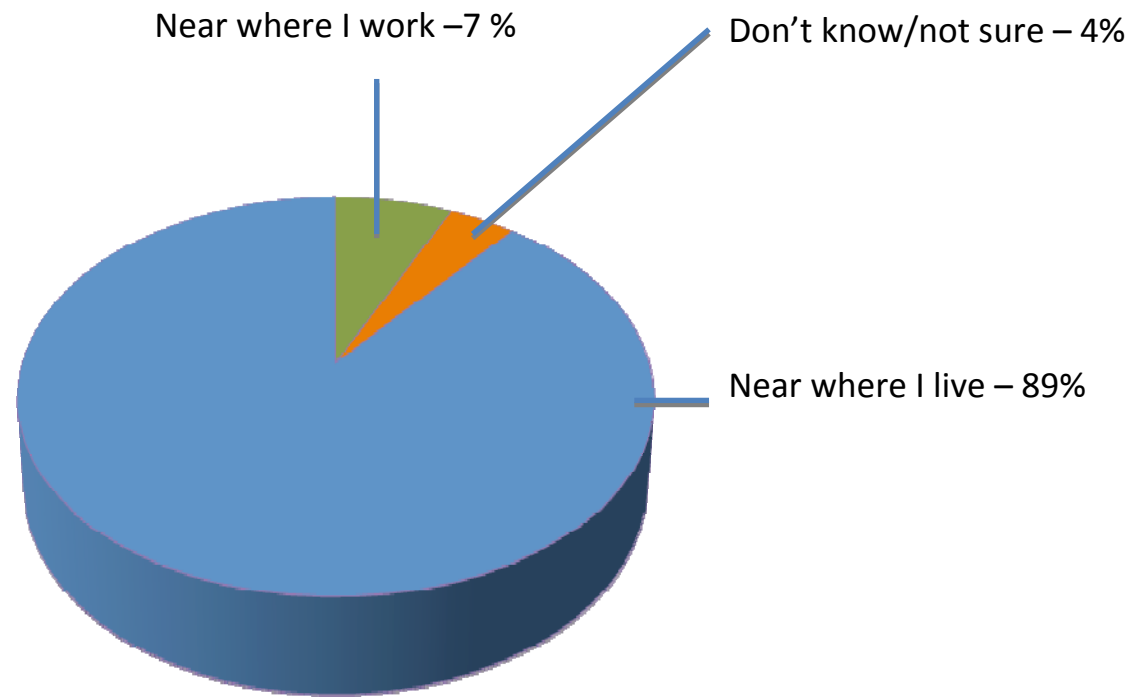


Survey Respondents Identifying as Latino



Important Survey Findings – Access to Care


Where would it be most convenient for you and members of your household to get health care?



Important Survey Findings – Access to Care

In the last two years, what percentage of your household visits to a doctor have been in your neighborhood?

Health Care Provider Visits in the Community		
Visits	Frequency	Valid Percent
None (0%)	118	18.7%
25%	56	8.8%
50%	68	10.8%
75%	88	13.9%
All (100%)	250	39.6%
Not been to a doctor	25	4.0%
Do not know/not sure	26	4.1%



“I have to travel with my children to get medical care because I don’t speak English.”

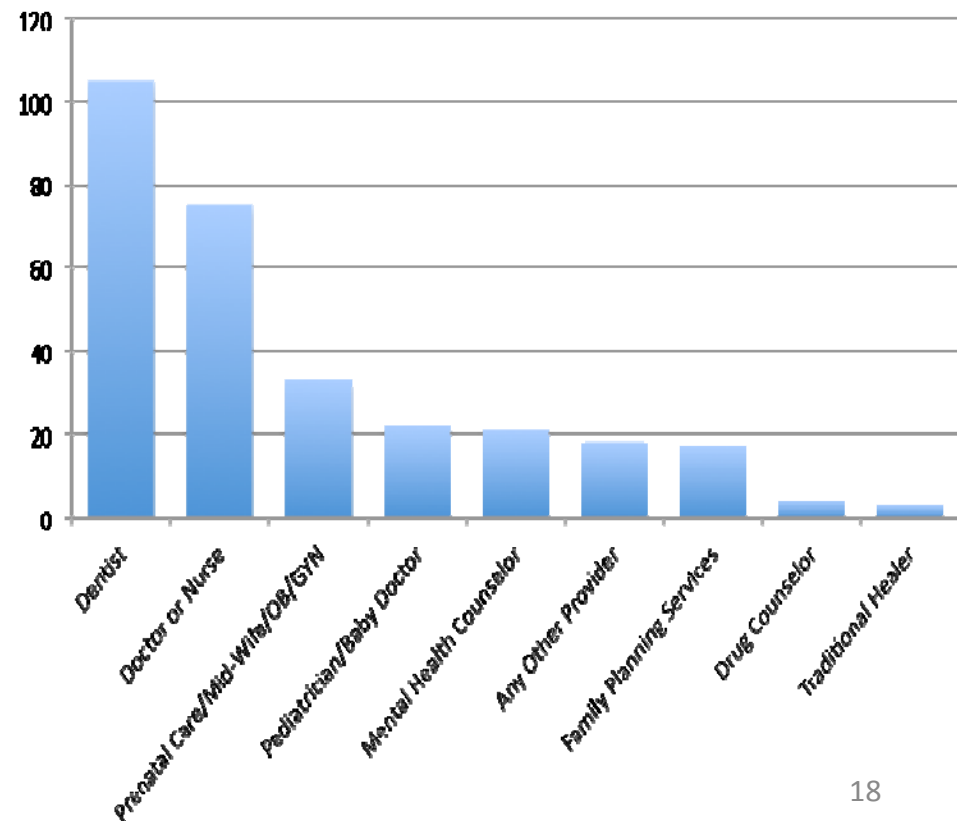
“I feel so depressed now, no job, no health insurance, no medication, and there is no mental health doctor who will understand me and help me in this area.”

“I am very happy with the health care that my children receive, but I would like to have that kind of services in my neighborhood.”

Important Survey Findings – Access to Care

- Access to care was not always available. **Dentists and primary care** are the most frequently named providers that are needed
- Specialty care services were also mentioned frequently as needed in the community. Particularly, general specialists, eye doctors, and cardiologists

In the last 2 years, which health care services has your household had difficulty accessing in your neighborhood?



Important Survey Findings – Access to Care

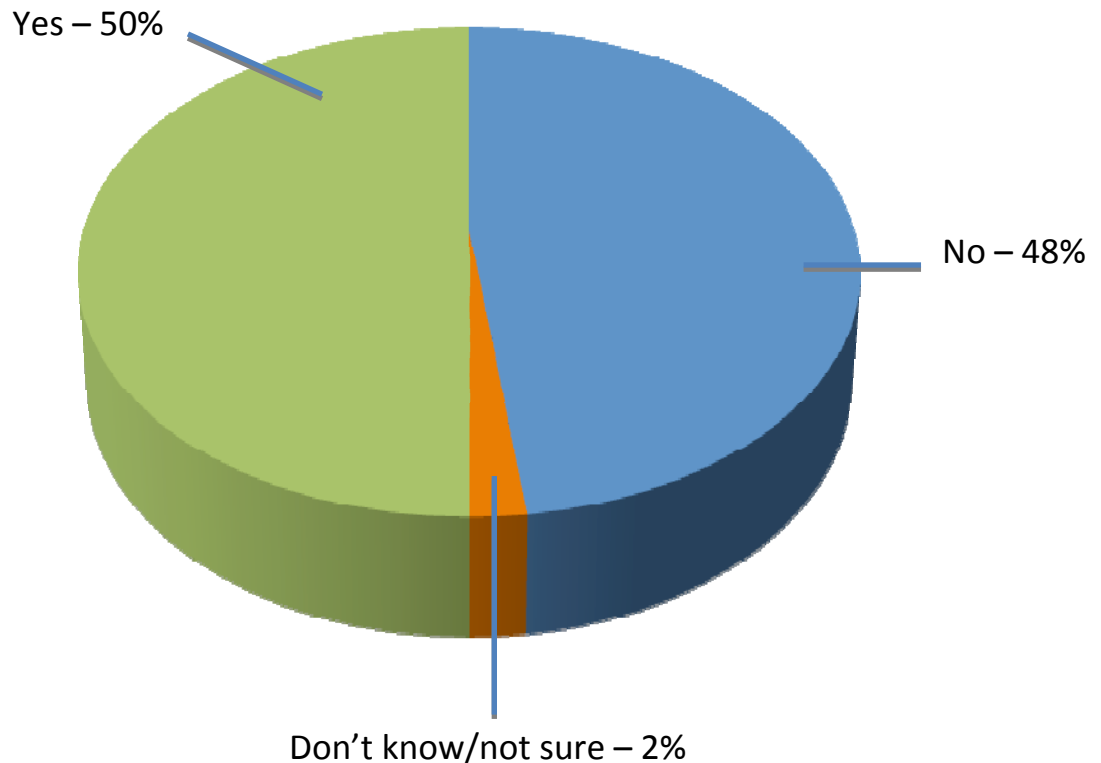
- 35% of people reporting dental problems had problems accessing dental care
- People with dental problems were much more likely to report health problems, including hearing and vision problems, high blood pressure and asthma



Important Survey Findings – Access to Care

Emergency Room Use:

Have you or members of your household been to an emergency room within the last 2 years?



Important Survey Findings – Barriers to Care

- Respondents identified the following as the top barriers to care:
 - Had to wait too long for an appointment
 - No health insurance
 - Had to wait too long at the appointment

Focus Group Demographics

- 13 to 88 years with an average age of 44 years
- Over 60% women
- 2/3 were Black
- Annual median income: \$20,000 or less
- 1 in 6 were employed
- About 7 of 10 had insurance

Focus Groups – Major Themes

- Health care insurance **does not cover** important health care needs
- Barriers to health care include:
 - **Hours** are a poor fit with people's schedules
 - Limited **hours** for specialists
 - **Long wait times** in emergency rooms and clinics
 - Difficulties in **getting health insurance**
- Uninsured felt that they “could not afford to get sick”
- Quality of care is higher at hospitals and clinics located **outside of the community**
- Problems with **Access-a-Ride**

Focus Groups – Major Themes (cont.)

- Medication concerns
- Patients are **treated differently** by health care providers because of factors like **race, income, immigration status** and **health insurance** type
- **Social issues** impact health and need to be addressed too
- The community needs more **affordable** and **compassionate** health care
- The community needs **more information** on health care resources in their communities and things they can do to be more healthy

Key Recommendations

- Develop a coordinated system of care among providers, residents and community based organizations to address various barriers like:
 - the lack of culturally and linguistically competent resources
 - long waiting times for and at appointments
 - the lack of extended office hours/days to address gaps in care/services and emergency room overuse

Key Recommendations (cont.)

- Focus attention on particular illnesses and communities to target services where they are most needed
- Increase the availability of quality dental care services in North and Central Brooklyn
- Develop a process to engage community residents “Community Advisory Board” to work on community level utilization barriers, such as over-use of emergency rooms

Key Recommendations (cont.)

- Develop working relationship with *Access-A-Ride* to:
 - address concerns with its transportation procedures, costs and timeliness
 - increase use and access to appointments, particularly for seniors and people with disabilities
- Make health care facilities more accessible, user friendly, and comfortable
 - (e.g., wheelchair access, font size of printed materials, comfort of waiting room seats for pregnant women)
- Increase access to specialty health care services in the community

Key Recommendations (cont.)

- Ensure care is patient-centered and provide customer service training to health care providers and other staff
- Develop a coordinated campaign to work with primary care providers, health clinics, and managed care plans to encourage and increase the number of providers who accept public health insurance
- Increase community awareness of and access to low cost health services and insurance

Thank you to our community participants!

We want to thank the more than 800 Brooklynites who participated in the survey and focus groups as well as the following organizations:

Field Surveyors

- Arab American Family Support Center
- Brooklyn Perinatal Network
- Caribbean Women's Health Association
- East New York Diagnostic and Treatment Center
- Ft. Greene Strategic Neighborhood Action Partnership
- Make The Road New York
- New Dimensions in Care
- New York Communities for Change
- Progressive Community Center for Children and Families
- The United Jewish Organizations of Williamsburg, Inc.

Focus Group Hosts

- Brooklyn Center for Independence of the Disabled, Inc.
- Brooklyn Community Pride Center
- Caribbean Women's Health Association
- Central Brooklyn Economic Development Corp.
- Spanish Speaking Elderly Council - RAICES

Thank you to the Community Health Planning Workgroup!

- **The Brooklyn Hospital Center**
Richard B. Becker, MD, President and CEO
Leroy Charles, Director, Government Relations and External Affairs
Joan Clark, SVP, Strategic Planning
Catherine Derr, Vice President, Marketing and Communications
Gary Stephens, MD, Chief Medical Officer
Beryl Williams-Augustin, Director, Community Outreach
- **TBHC Community Advisory Board**
Rev. Earl Jones, Pastor, First Cavalry Baptist Church
- **Bedford-Stuyvesant Family Health Center**
Patricia Fernandez, CEO
- **BMS Family Health Center**
Harvey Lawrence, President and CEO
- **Brooklyn Borough President's Office**
Italia Granshaw, Policy Analyst
- **Brooklyn NAACP**
Lorraine Braithwaite-Harte, Health Committee Chairman
- **Brooklyn Perinatal Network**
Ngozi Moses, Executive Director
Denise West, Deputy Executive Director
- **Brooklyn Plaza Medical Center**
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Chris Quinones, VP of Administration and Corporate Compliance Officer
- **CPHS**
Anthony Feliciano, Director
Mary Li, Education and Outreach Coordinator
- **Interfaith Medical Center**
Luis Hernandez, CEO and President
Diane Porter, Board Member
- **KenJam Consultants/BPMC**
Maurice Reid
- **Kings County Hospital**
Hope Mason
- **Lutheran Medical Center**
Mary Quinones, VP for Strategic Community Partnerships
- **NY Lawyers for the Public Interest**
Alyssa Aguilera, Community Organizer
Shena Elrington, Director Health Justice Program
Jennifer Swayne, Staff Attorney
- **NYC DOH**
Aletha Maybank, MD, Assistant Commissioner
- **NYC DOHMH**
Darin Taylor
- **State Senator Velmanette Montgomery's Office**
Jim Vogel, Community Coordinator



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Thank you!



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