Canton-Potsdam Hospital  
One-Year Community Service Plan Update  
2011

To fulfill Canton-Potsdam Hospital’s reporting requirement to the New York State Department of Health, this one-year Community Service Plan includes progress updates to its 2009 Comprehensive Community Service Plan.

1. Contact information:  
Marlinda LaValley, Vice President of Administrative Services, is the Community Service Plan liaison for Canton-Potsdam Hospital. Her email address is mlavalley@cphospital.org and her phone number is (315) 261-5000.

2. Which hospital or hospital system CSP are you submitting for:  
Canton-Potsdam Hospital

3. In which county is the hospital located?  
St. Lawrence County

Canton-Potsdam Hospital simplified its mission statement to better represent its goals. The former statement read: “We provide healthcare to the people of St. Lawrence County and to areas beyond for specialty services. We work cooperatively to provide or coordinate access to quality healthcare and to optimize the healthcare of our customers.” With careful consideration of feedback received from community members, medical providers, and Hospital staff, the mission now reads: “To provide skilled, compassionate, cost-effective care that promotes wellness and meets community needs.”

5. Describe the Hospital Service Area. Indicate any changes to the primary service areas used in the community service planning. Have any changes occurred since the 2010 update?  
Canton-Potsdam Hospital’s total service area remains at approximately 55,000 people living in St. Lawrence County. This number includes the student population at four colleges in Canton and Potsdam. Since submission of the Community Service Plan comprehensive report in 2009, the Hospital’s primary service area has not changed.

6. The last CSP reported that community partners were involved in assessing community health needs. Please indicate whether or not community partners continued to be actively involved.

X Yes  
__ No
7. What are the Prevention Agenda Priorities identified in the CSP? (select below)
   __ None
   __ Access to Quality Health Care
   X Chronic Disease
   __ Community Preparedness
   __ Healthy Environment
   __ Healthy Mothers, Healthy Babies, Healthy Children
   __ Infectious Disease
   __ Mental Health and Substance abuse
   __ Physical Activity and Nutrition
   __ Tobacco Use
   __ Unintentional Injury

8. How do these priorities compare to the priorities reported in the previous CSP?
   X Same
   __ Changed

9. Check priorities added or deleted; or write N/A if no change was made.
   N/A Priorities added
   N/A Priorities deleted

10. What are the goals for the selected priority areas?
    Reduce readmissions, reduce CHF, COPD, and Stroke incidents, educate providers and community members on chronic disease management and tobacco cessation training workshops and support groups.

11. What measures are you using to track progress in your selected priorities? (If N/A, explain why).
    Chronic Disease – The Hospital implemented CRIMSON physician management software that allows staff to track key quality and utilization measures and adherence to order sets. Physicians may access their own data. The hospital’s data analyst creates and distributes to selected leaders daily reports to monitor readmissions, patients without a primary care provider, inpatient versus observation status and lengths of stay.

    Tobacco Cessation – The Hospital closely adheres to the US Public Health’s clinical guidelines on tobacco dependence use and treatment. Medical providers, respiratory therapists, and nurses use the “5 A” practice of Ask, Advise, Assess, Assist, and Arrange with all patients who use tobacco products. Patients are counseled on what to expect if/when quitting and how to find support resources. Staff submit consent forms to the New York State Smokers Quit Line indicating a patient needs additional counseling and/or quitting supplies. The Smokers Quit Line has data to track our referrals over the years.

12. Please provide an update on the Plan for Action. Provide a summary of the implementation status of your 3-year plan, including successes and barriers in the
implementation process. If applicable, indicate how and why plans have been altered as a result of states success and barriers.

Successes: Stroke Awareness - Efforts continue to be closely tied to tobacco cessation and chronic disease management projects. Individuals attending workshops and receiving educational resources through the tobacco cessation program are educated on the risks of stroke in conjunction with tobacco use. Chronic diseases, like CHF, directly relate to risks of stroke and as individuals become more aware of how to manage their health, the incidents of stroke should begin to decrease.

The Hospital hosts education workshops (with Clarkson University’s assistance) for Nurse Practitioners and Physician Assistants. All NPs and PAs in the North Country are invited and encouraged to attend. Most recently, Dr. Anthony Tramontano, Cardiologist with Fletcher Allen Healthcare working at Canton-Potsdam Hospital, presented on the use of Cardiovascular Nuclear MRI (CVNMR). CVNMR is found to be beneficial in diagnosing cardiac and stress conditions, including blockages in the Carotid Arteries and neck, which are often stroke predictors. CPH offers continued education workshops to update providers on the services and equipment available. Providers share information with their patients and utilize newly learned techniques and equipment to provide preventive care.

Barriers:
Collaborative efforts directly related to stroke awareness have been minimal while focus continued more heavily on Chronic Disease Management (CHF, COPD), and Tobacco Cessation.

Successes: Tobacco Cessation - Beth Gero, PhD., Smoking Cessation Specialist for St. Lawrence County and participating area hospitals, has her satellite office at Canton-Potsdam Hospital’s 50 Leroy Street address. Following the success of her weekly workshops and clinician visits, Ms. Gero is scheduled to begin providing luncheon presentations to promote awareness by educating all levels of medical providers. Her first luncheon begins at Canton-Potsdam Hospital this fall.

2011 marks Canton-Potsdam Hospital’s 3rd Anniversary as a smoke-free campus. Working jointly with the Tobacco Cessation Center of Northern New York, smoking remains prohibited on Hospital property and cessation educational materials, including posters and flyers continue to be promoted among employees and the public. Special efforts were taking to organize an education event on May 31st, “World No Tobacco Day”.

All patients continue to receive cessation education resources and consultations from trained providers and therapists upon each visit to the Hospital. In the future, more emphasis will be placed on heavier utilization of the Hospital’s recently created tobacco cessation webpage for newsletters, workshop schedules, and updates.

Successes: Chronic Disease Management – Canton-Potsdam Hospital actively participates on the Case Management Coalition. Members of the Coalition meet monthly and include professionals from New York Connects, Canton-Potsdam Hospital, Claxton Hepburn Medical center, St. Lawrence County Health Initiative, Cerebral Palsy of Northern NY, Department of Social
Services, and St. Lawrence County Public Health. CPH’s Director and Assistant Director of Quality and Case Management presented to the committee on Long-Term Care, specifically the current status of health care reform and its impact on hospitals and all aspects of health care. The main objective of the Coalition is to keep patients out of hospitals when they do not require acute care. Chronic disease support programs such as the “I Can Feel Better Workshops” offered by Health Initiative prevention programs, and options for affordable health care at a federally qualified Health Care Center at CP of Northern NY, are valuable tools to keep people out of the hospital. With feedback from Claxton-Hepburn Medical Center’s successful implementation of the “I Can Feel Better” self-management program, Canton-Potsdam Hospital is now making progress with its own implementation. Canton-Potsdam Hospital’s series of workshops is scheduled to begin September 21st. Individuals living with chronic conditions are invited to attend, where they will develop coping and management techniques.

In 2011, the Hospital secured a $40,000 grant from Excellus Blue Cross/Blue Shield for creation of a Congestive Heart Failure (CHF) Continued Care 30-day Program, designed to improve the quality of life for patients living with CHF and minimize hospital readmissions. A specially trained nurse will monitor patients’ medications, body weight, blood pressure, and help with management activities. Cardio Rehabilitation specialists, nurses, and case workers have been trained on continued care and work collaboratively with medical providers and patients. All patients admitted with CHF or a history of CHF, are asked to enroll. Over a two month period, 60 patients out of 70 agreed to participate in the program.

Patients and community members of Canton-Potsdam Hospital continue to be provided with educational materials, workshops, and medical follow-up to help decrease the instances of recurrence and readmissions of chronic diseases.

**Barriers:**
St. Lawrence County, the fifth largest county east of the Mississippi River, is rural, remote, medically underserved, sparsely populated, endures long, harsh winters, has little public transportation, is challenged by low incomes, a high percentage of uninsured/underinsured, and a high unemployment rate. The combination creates significant barriers to providing comprehensive approaches to improving patient care, effectively reaching, educating and following up with patients and their families and assuring such services are available on a year-round basis.

13. **Explain any impact or changes that have been realized to date as a result of your collaborative plan. If “N/A”, explain why.**
The Prevention Collaborative Work Group (PCWC), led by St. Lawrence County Public Health, which includes representatives from local health organizations (including Canton-Potsdam and other local hospitals, rescue teams, hospice, health initiative, etc.) did not meet consistently for a good portion of 2011 and efforts were not regularly monitored. There is, therefore, no data available. The group has re-assembled and will meet monthly to discuss community health priorities and collaborative efforts. The group had agreed to place a collaborative focus on the four chronic illnesses of COPD, diabetes/asthma, heart failure, and pneumonia. Canton-Potsdam
Hospital’s internal data confirms inpatient COPD and CHF cases continue to trend downward since 2009 with inpatient Stroke cases reflecting a similar downward trend since last year.

14. **Since completing your CSP in 2010, have you conducted any new surveys?**
   __ Yes  
   [X] No

15. **Please list other non-prevention agenda priorities or issues on which the hospital is working?**

   **Patient Safety and Quality:**
   A Vice President of Quality and Patient Safety position was created in 2011 and filled in September, demonstrating our commitment to achieving quality outcomes and performance improvement activities that will streamline processes and improve efficiencies.

   In early 2011, the Hospital joined the Institute for Healthcare Improvement’s Project JOINTS (Joining Organizations IN Tackling SSI) Initiative, a federally-funded program designed to speed adoption of proven methods to prevent surgical site infections (SSIs) after hip and knee replacement surgery. New York is one of five states participating in the first stage of this three-year project. A member of the Hospital’s operating room nursing staff led the implementation on a national level and shared the Hospital’s strategies for early success with participating hospitals in the other five states via webcasts. It’s an opportunity for healthcare facilities to learn from each other’s experiences, in this case, we took a lead role and provided guidance to other hospitals. This is a new initiative for 2011.

   The hospital has signed an agreement to participate in IPRO’s 10th Statement of Work, designed to align with CMS’ goals. The six priorities include making care safer; promoting effective coordination of care; assuring care is person and family-centered; promoting the best possible prevention and treatment of the leading causes of mortality; helping communities support better health; and making care more affordable for individuals, families, employers and governments by reducing the costs of care through continual improvement.

   The Hospitals Patient Safety and Infection Prevention Departments have been instrumental in engaging the community (including the Hospital Guilds), staff, and patients on the importance of taking control of the healthcare they receive. Public presentations (including some from the Institute for Healthcare Improvement and Department of Health and Human Services websites), mandatory pneumonia prevention education, and hand hygiene initiatives were put into place to help promote a positive, clean culture at CPH. These efforts are on-going.

   A Falls Prevention Program was created, which includes nursing, housekeeping, nutritional services, and administrative staff. Patients who are at risk for falls are dressed with bright yellow socks and wrist bands that alert staff that there is a higher than normal risk for an event to occur. In addition to visual clues for staff and physicians, patients are encouraged to take a cooperative role in their safety while at the Hospital by speaking up when something doesn’t feel ‘normal’ to
them and/or holding onto railings or support equipment when mobile. Our Medical/Surgical 3rd Floor staff recently celebrated 102 days with no falls.

The Hospital recently affiliated with the new healthcare accreditation program from DNV Healthcare. DNV requires the Hospital to implement ISO9001 safety standards within a 3-year period. The annual survey process appears to be a more effective vehicle to assure constant readiness and progress toward specific organization goals.

A Low-Does CT Scanner was acquired in 2011 to reduce patients’ exposure to radiation. During the implementation/transition period, some patients have already undergone scans with exposure levels at 1/10 of the radiation they would have received on the former machine.

A new linear accelerator was purchased to replace the existing unit that is reaching the end of its useful life and has suffered numerous breakdowns, interrupting patient treatments. The new state-of-the-art equipment will target cancer cells with tremendous accuracy leaving healthy cells untouched by radiation, which the old machine was unable to do. This is the newest and most advanced radiation therapy machine within St. Lawrence County. The new equipment will be housed in a recently constructed Center for Cancer Care within the hospital building. The move into the new facility will combine the medical and radiation oncology units into one center, dramatically improving patient convenience and facilitating provider communication and consultation.

Canton-Potsdam Hospital is implementing electronic medical records (EMR) throughout the facility and off-site. Technology-assisted clinical support and evidence-based decision making has been shown in several studies to improve patient care by standardizing processes which reduce opportunities for errors.

Education and Prevention:
On average, the Hospital has produced more than 100 editorial pieces each year intended to update the community on pro-active ways individuals can be more involved in their own healthcare, maintain good health, and avoid hospital admission (ie: CPH advises on Whooping Cough/Pertussis, CPH Team Helps Manage Diabetes During Holidays, and Dr. Hauerstock Shares Importance of Screenings and Education). In addition to providing informative news releases, support groups, screenings, and educational workshops, the Hospital actively participates at collaborative health events throughout the community, with Clarkson University, SUNY Canton, Employee Assistance Program, and the Senior Action Counsel of Northern New York. Health fairs are well attended with staff from numerous departments providing free screenings and answering questions about healthcare proxies and Lifeline resources.

In June of 2011, Canton-Potsdam Hospital launched a revised website, which was designed with a focus on patient education. The Hospital has contracted with A.D.A.M Health Solutions which is recognized for having one of the world’s largest continually-enhanced online consumer health information libraries and a host of other products and tools. In using A.D.A.M. content and resources, we are able to provide website visitors with the most current, physician reviewed health articles. In addition to education and research, visitors can also utilize the symptom navigator to better determine their health concerns prior to visiting the emergency room and/or
primary care provider. Education and patient self-management is critical in preventive medicine, with the addition of A.D.A.M. content, patients are now able to review and print instructions for procedures or follow-up care right from their own homes.

Canton and Potsdam are 11 miles apart and are host to 4 universities. A Canton-Potsdam Hospital nurse practitioner was a featured clinical leader-educator in an American College Health association-approved webinar series hosted by the National College Depression Partnership (NCPD), an affiliate program of New York University. The webinar was created to provide college health and counseling professionals with training in the latest advances in assessment, diagnosis, and treatment of depression in college students. Depression is particularly prevalent among college students and can adversely affect overall health if left untreated. The NCDP program brings collaborative, community oriented approaches to bear on this health issue to help us address it proactively.

The hospital provides management of student health services at Clarkson and St. Lawrence Universities. Hospital representatives are participating in Clarkson University’s newly established student wellness committee charged with addressing depression, substance abuse, suicides, and promoting healthy lifetime habits.

Canton-Potsdam Hospital recently received notification that the Diabetes Self-Management Program has received accreditation by The American Association of Diabetes Educators. Accreditation allows the program to be recognized by Medicaid, Medicare, and most major insurance companies. The Registered Dietician at the Hospital meets with patients and community members to discuss healthy eating and creating appropriate meal plans. The Dietician holds 3-4 “healthy eating” workshops for the community each year. Participants have an opportunity to ask questions and take heart-healthy recipes home with them. In collaboration with the Diabetic Educator, community members have access to resources and self-management workshops to help manage their diets and reduce their risk of diabetes, obesity, and heart disease.

An interdisciplinary effort resulted in the establishment of Joint Program-Perception of Pain classes. Patients preparing for knee, hip, or other joint surgery are encouraged to attend the class, which educates patients on what to expect after surgery and what should be considered productive pain. Staff and patients report improved patient perceptions of pain; staff experience enhanced patient cooperation, more realistic patient expectations and improved patient participation in post-surgical activities.

**Increased Access to Primary Care:**
In October of 2010, the Hospital recruited Dr. Mariam Asar, Psychiatrist, to help address the severe shortage of mental health services in the region. Dr. Asar is the hospital’s only psychiatrist. In a 2008 study, psychiatry was identified as the specialty in most severe need, with a shortage of 6 practitioners in our service area.

While the Hospital continues to actively recruit primary and specialty care providers, additions to the staff are barely keeping pace with staff relocations/retirements. Changing provider expectations requires the employment of most providers. Space and services as hospital-sponsored entities must be code compliant and had to be developed to accommodate recruitment
efforts. The hospital created additional professional medical office space by purchasing and repurposing a former Catholic school building in Potsdam and constructing an adjoining medical building at 80 East Main, Canton, which houses the specialties of Pediatrics, Family Health, and Urology.

Dramatic growth in ED volumes (25,000 visits in space designed for 15,000) necessitated renovations to add exam rooms.

The Hospital supports the St. Lawrence County Public Transportation “Connecting Communities” initiative. The main campus of the Hospital is one of the arrival/departure locations for public transportation. Upon creation of the Public Transportation, the Hospital provided a monetary donation to help with development.

16. **Is your hospital’s CSP posted on the website?**  
   _X_ Yes  
   __No

17. **What is the url address of the CSP posted on the hospital website?**  
   http://www.cphospital.org/about-us

18. **What are some other ways that the CSP is disseminated to the public?**  
   __Newsletter  
   __Mailing  
   __Other, specify  
   _X_ None

19. **Describe the hospital’s successes and challenges regarding the provision of financial aid, in accordance with Public Health Law 2807(k)(9-a), and any changes envisioned for this year. Also, include a general overview of accomplishments, process improvement and/or best practices related to the hospital’s financial aid program. The hospital’s policy or financial data is not required.**

With the economic downturn and related activity at both the Federal and State levels, planned expenditures to hospitals for reimbursement are decreasing. In addition, access to healthcare services by our community’s uninsured population is still a pressing need. Although, we do not have any immediate plan for diminution of services, we are constantly evaluating our ability to continue to provide the broad scope of services that our community needs.

The impact of increased Bad Debt expense has contributed to a negative financial performance for our organization and we are actively pursuing the ability for our patients to benefit from our Charity/Financial access programs proactively to avoid the eventuality of becoming a Bad Debt.

During 2010, the Hospital provided $1,021,000 for Charity Care and budgeted a total of $1,275,637 for 2011. Year to date 2011, we are on target to meet or exceed the budgeted number.
In addition, the Bad Debt expenditures for Canton-Potsdam Hospital were $4,637,763 in 2010 with a budget of $4,600,000 for 2011. Year to date 2011, this amount is $3,971,334 and is targeted to reach $6,808,001 by year end.

Canton-Potsdam Hospital is experiencing an increasing volume of patients who are either uninsured or underinsured; as a result, the Hospital continues to feel the financial pressure of this reality, which is reflected in the above numbers.

In developing the budget for 2012, the Hospital will be assessing its ability to continue to provide these same levels of Charity Care, while not diminishing the quality and scope of services provided to the community.

No specific changes to Canton-Potsdam Hospital’s Charity Care policy for 2011 have been formally adopted as of September 15, 2010.

20. Are there any additional comments that you would like to share about your hospital’s CSP?
None at this time.