BROOME COUNTY COMMUNITY HEALTH IMPROVEMENT/ COMMUNITY SERVICE PLAN

Public Health
Prevent. Promote. Protect.

2025-2030

Olivia Catalano, MHA Director of Public Health
Broome County Public Health

John Carrigg, President & CEO
United Health Services

Kathy Connerton, President & SVP
Guthrie Lourdes Hospital

COVER PAGE

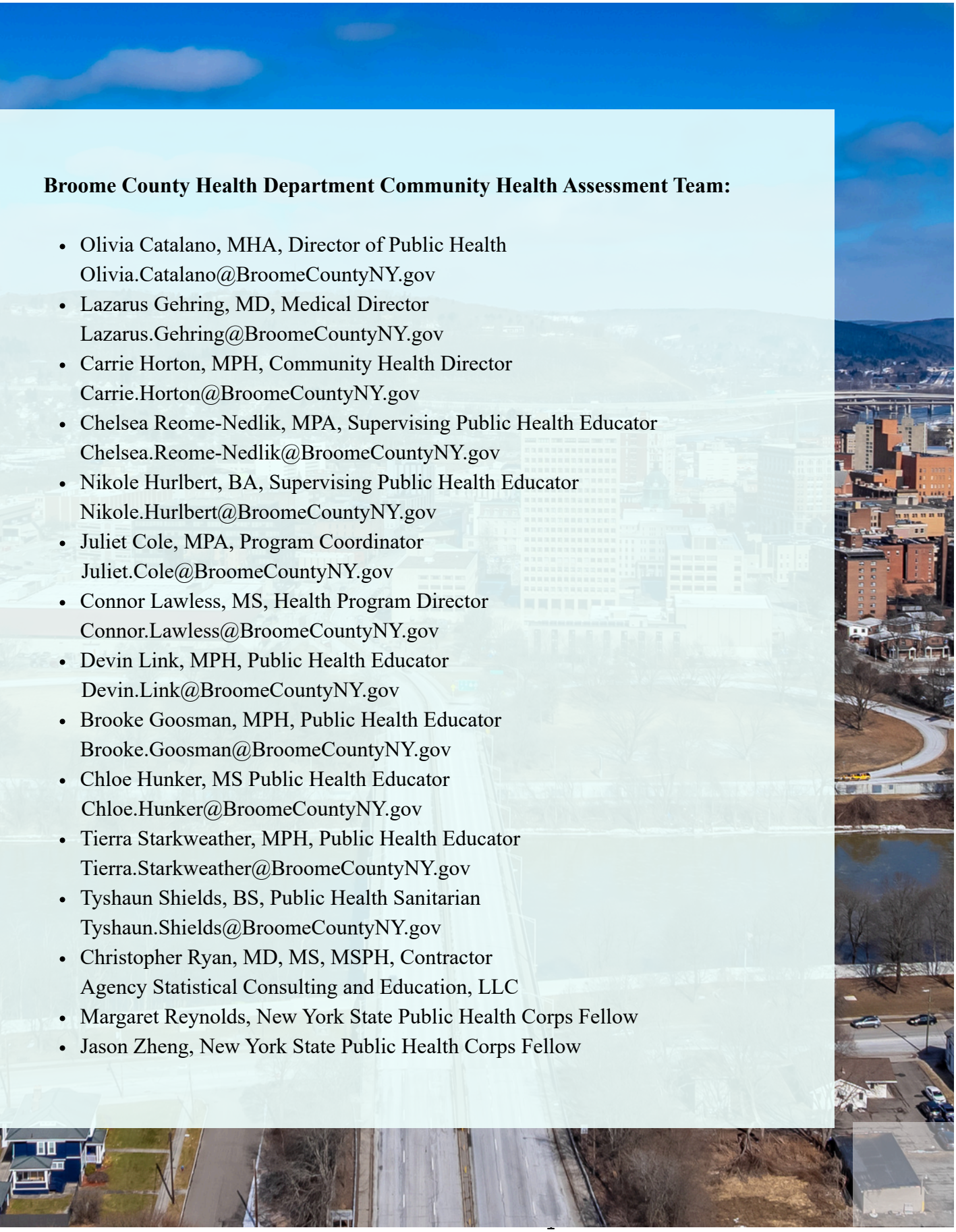
County Covered:	Broome County
Participating Local Health Department:	Broome County Health Department 225 Front Street Binghamton, NY 13905 Phone: (607) 778-3930 Fax: (607) 778-2838 www.gobroomecounty.com/hd
Participating Hospitals:	**United Health Services Hospitals, Inc.** UHS Wilson Medical Center 33-57 Harrison Street Johnson City, NY 13790 Phone: (607) 763-6000 UHS Binghamton General Hospital 10-42 Mitchell Avenue Binghamton, NY 13903 Phone: (607) 762-2200 **Guthrie Lourdes Hospital** 169 Riverside Drive Binghamton, NY 13905 Phone: (607) 798-5111

Coalition/entity completing assessment & plan:

Broome County Community Health Assessment Team

Broome County Health Department Community Health Assessment Team:

- Olivia Catalano, MHA, Director of Public Health
  Olivia.Catalano@BroomeCountyNY.gov
- Lazarus Gehring, MD, Medical Director
  Lazarus.Gehring@BroomeCountyNY.gov
- Carrie Horton, MPH, Community Health Director
  Carrie.Horton@BroomeCountyNY.gov
- Chelsea Reome-Nedlik, MPA, Supervising Public Health Educator
  Chelsea.Reome-Nedlik@BroomeCountyNY.gov
- Nikole Hurlbert, BA, Supervising Public Health Educator
  Nikole.Hurlbert@BroomeCountyNY.gov
- Juliet Cole, MPA, Program Coordinator
  Juliet.Cole@BroomeCountyNY.gov
- Connor Lawless, MS, Health Program Director
  Connor.Lawless@BroomeCountyNY.gov
- Devin Link, MPH, Public Health Educator
  Devin.Link@BroomeCountyNY.gov
- Brooke Goosman, MPH, Public Health Educator
  Brooke.Goosman@BroomeCountyNY.gov
- Chloe Hunker, MS Public Health Educator
  Chloe.Hunker@BroomeCountyNY.gov
- Tierra Starkweather, MPH, Public Health Educator
  Tierra.Starkweather@BroomeCountyNY.gov
- Tyshaun Shields, BS, Public Health Sanitarian
  Tyshaun.Shields@BroomeCountyNY.gov
- Christopher Ryan, MD, MS, MSPH, Contractor
  Agency Statistical Consulting and Education, LLC
- Margaret Reynolds, New York State Public Health Corps Fellow
- Jason Zheng, New York State Public Health Corps Fellow





With gratitude to the following individuals for their service on and contributions to the Broome County Health Assessment 2025-2030 Steering Committee:

- All of the Community Health Survey distribution sites
- Addiction Center of Broome County
- American Heart Association
- Binghamton Housing Authority
- Binghamton Metropolitan Transportation Study
- Binghamton University
- Broome County Council of Churches
- Broome County Department of Social Services
- Broome County Food Council
- Broome County Mental Health Department
- Broome County Office for Aging
- Broome County Planning Department
- Broome County United Way
- Broome County Urban League
- Broome Tioga BOCES
- Broome Tioga NAACP
- Care Compass Network
- Catholic Charities of Broome County
- Community Foundation of SCNY
- Cornell Cooperative Extension of Broome County
- Cornerstone Family Healthcare
- Crime Victims Assistance Center
- Excellus Blue Cross Blue Shield



Broome County Health Assessment 2025-2030 Steering Committee (continued):

- Family Enrichment Network
- First Presbyterian Church of Johnson City
- Greater Good Grocery Store
- Guthrie-Lourdes Hospital
- Klee Foundation
- Mothers and Babies Perinatal Network
- North of Main (NoMa)
- Rural Health Network of SCNY
- Southern Tier Independence Center
- Southern Tier AIDS Program (STAP)
- The Stack Project
- Truth Pharm
- United Health Services Hospitals
- Volunteers Improving Neighborhood Environments (VINES)
- YMCA of Broome County
- YWCA of Binghamton and Broome County

BROOME COUNTY PUBLIC HEALTH



Mission

Broome County Health Department serves our residents by promoting and protecting public health through education and prevention.

Vision

Optimal health and equity where we live, learn, work, and play.

TABLE OF CONTENTS

Cover Page 2
Broome County Community Health Assessment Team 3
Broome County Health Assessment Steering Committee 4
Broome County Health Department Mission & Vision Statements 6
Table of Contents 7
Executive Summary 8
Prevention Agenda Priorities 8
Data Review 8
Partners and Roles 9
Interventions and Strategies 9
Progress and Evaluation 10
Data Collection methods 10
Community Engagement 11
Community Assets and Resources 12
Identified Gaps and Areas of Need 14
Major Community Health Needs Identified 15
Prioritization Methods 15
Description of Prioritization Process 18
Community Engagement 18
Justification for Unaddressed Health Needs 18
Developing Goals, Strategies, and an Action Plan 18
Alignment with Prevention Agenda 18
Partner Engagement 19
Sharing Findings with the Community 19
Progress and Evaluation 20
Appendices
Appendix A: Community Health Survey 21
Glossary of Terms 25
References 26
Housing Stability and Affordability Workplan Template 29
Poverty Workplan Template 30
Stress and Anxiety Workplan Template 31



EXECUTIVE SUMMARY

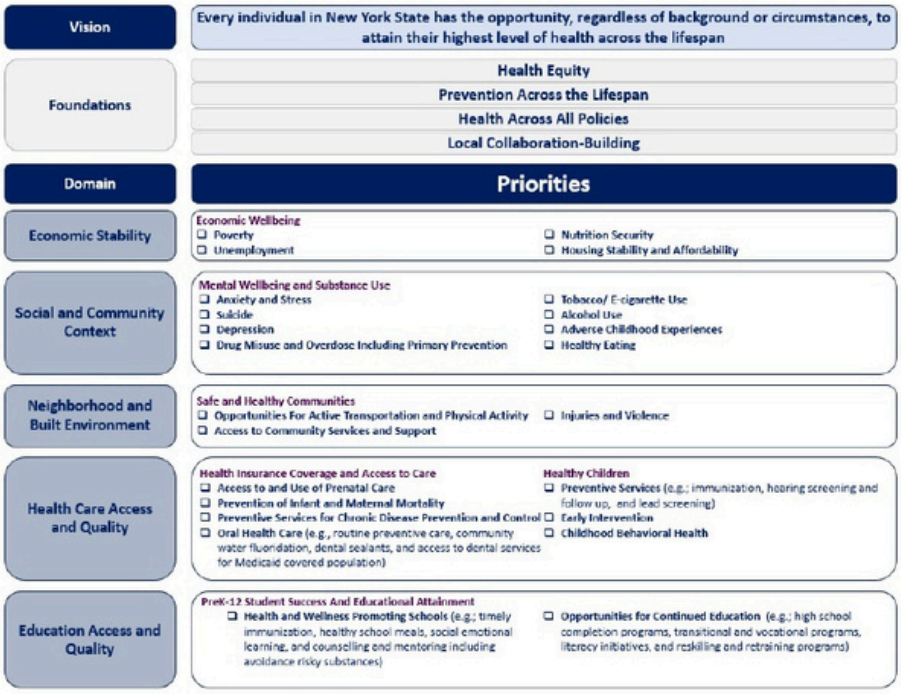
Prevention Agenda Priorities

For the 2025-2030 period, Broome County is choosing to address the following domains outlined by the NYS Prevention Agenda listed in order of greatest concern:

1. Economic Stability
    a. Housing Stability and Affordability
    b. Poverty
2. Social and Community Context
    a. Anxiety and Stress

These areas were selected with feedback from our community and professional organizations.

Figure 1. 2025-2030 NYS Prevention Agenda framework



Reprinted From: NYS Prevention Agenda

Data Review

Broome County Heath Department (BCHD) Community Health Assessment (CHA) team analyzed existing data sources, such as publicly available data, partner agency annual reports, and hospital needs assessments. Steering Committee members shared their existing datasets and reports with the BCHD team to organize and review. In addition to local reports, data sources include, but are not limited to, the NYSDOH Community Health Indicator Reports (CHIRS), NYS Prevention Agenda dashboards, the NYSDOH Behavioral Risk Factor Surveillance System (BRFSS) Reports, United States Census data, the FEMA National Risk Index, NYS Office of Mental Health Statistics and Reports, and NYS Office of Addiction Services and Supports data. BCHD partnered with the Binghamton University Community-Based Research Methods class to assist with reviewing each data source.

BCHD CHA team, in partnership with the CHA Steering Committee, developed two surveys. The audience for the first survey was community members who live, work, or spend a significant

amount of time in Broome County. The second survey was intended for service providers in Broome County who could provide feedback about populations they serve. The survey content and terminology mirrored the NYS Prevention Agenda, in an effort to align the Prevention Agenda priorities with the most important needs to be addressed in Broome County. The surveys focused on available services, identifying service gaps, and what respondents consider to be the most pressing health concerns in Broome County. Respondents were given a free-response section to offer ideas for solutions to the priorities they chose. The surveys were open to the public from March to August 2025. Members of BCHD CHA team then compiled and analyzed these survey results with the assistance of, Dr. Christopher Ryan, Agency Statistical Consulting and Education, LLC.

In Fall 2025, a CHA Symposium was held at BCHD where results of the surveys were shared with the Steering Committee and other stakeholders. Additionally, BCHD CHA team presented information collected from the data review of partner reports and public data. Both Broome County hospital systems, United Health Services and Guthrie Lourdes, provided presentations about their own available datasets and community needs assessments.

Partners and Roles

BCHD works closely with several educational institutions, government programs, community agencies, and healthcare organizations in order to conduct this assessment and effectively implement the Community Health Improvement Plan (CHIP). These partners make up the CHA Steering Committee and were actively engaged throughout the assessment process. The Steering Committee assisted with development of the two surveys, distribution of the surveys, contributed their data to be included in the CHA, and systematically identified the top three priorities of focus (See Symposium Ranking Tool).

For the 2025-2030 cycle, the Steering Committee will meet quarterly to share community health updates and contribute feedback on current community health improvement activities. In addition to larger quarterly meetings, the Steering Committee will also have workgroups that will meet monthly. Each workgroup will focus on a different area of the chosen priorities from the NYS Prevention Agenda and will consist of experts from each relevant field that address the priority areas. Workgroup members will select interventions for their workgroup, identify target populations, provide data from their organization to fulfill CHIP objectives, participate in workgroup discussions regarding interventions, and help in decision making for the CHIP. BCHD will have a representative in each workgroup. The public will be informed of the BCHD CHA and CHIP, efforts that address Prevention Agenda priorities through the BCHD Annual Report, and updates through televised, print, and social media. The Broome County CHA is available on the BCHD website and offers physical copies upon request. CHA Steering Committee members are encouraged to publicize the CHA and CHIP process, data, and activities through their newsletters, media outlets, and internally.

Interventions and Strategies

Each workgroup (Housing Stability and Affordability, Poverty, Anxiety and Stress) will be responsible for identifying interventions for their priority area that are impactful, measurable, and feasible, while ensuring considerations for health equity. Steering Committee members have been invited to participate in the workgroups. Other subject matter experts and stakeholders are being

identified for each workgroup, where updates will be offered throughout the planning, implementation, and intervention processes. These interventions were selected through community feedback, committee meetings and feedback collected during the CHA.

Progress and Evaluation

Each agency contributing to the 2025-2030 CHIP will be responsible for collecting and submitting data. Workgroup members will ensure that their progress aligns with the chosen priority area and interventions. The BCHD CHA team will then review the data to ensure that information is being collected to evaluate impact.

Data Collection Methods

Design

The BCHD CHA team and the Steering Committee developed a mixed-results survey, the Community Survey, to engage the public and obtain feedback about specific health concerns and challenges. Many of the questions directly related to the NYS Prevention Agenda, instructing participants to choose which of the domains, and priorities within those domains, were the largest concern for them personally, and then for the county. Participants were also asked to provide additional context to those health concerns, asking them to share ideas about interventions they would suggest to reduce local health concerns. Participants had to be 18 years or older and living, working or spending a significant amount of time in Broome County. Questions were asked to capture this information. The first two answers given on the survey indicated if the participant met these criteria. If not, and they responded "no" to either question, they could no longer advance to the next question. While the survey was comprised of primarily multiple-choice questions, Question 9, offered open-ended, narrative responses (Appendix A).

Setting

The Community Survey was available to all of Broome County. Qualifying questions were used to determine if a person spent a significant amount of time in Broome County. Those who did not meet the given criteria were excluded from data analysis.

Participants

The goal of the Community Survey was to investigate the health concerns of individuals over the age of 18 who either live, work, or spend a significant amount of time in Broome County. Participants were recruited to complete the study from April 2025 to July 2025.

Participants were recruited through a variety of means, that for the purposes of this explanation, have been split into two main categories – digital and physical. Digital recruitment included any form of outreach or recruitment effort that occurred online or in media. Examples of this included press releases sent to news organizations, promotion of the survey on popular local television broadcast *Around the Tiers*, social media posts on Facebook and LinkedIn, internal county and department-wide emails, emails to partners to help distribute, and promotion of the survey through the Broome County website. Physical recruitment included any form of outreach or recruitment effort that involved physical media or presence. Examples of this included tabling with physical

copies of the survey, business cards, and flyers with a QR code to the survey, to local partners such as faith-based groups, businesses, agencies, etc. to help distribute and promote the survey. Surveys were also printed and available at BCHD for individuals or groups to complete while there or take to complete later. The survey was translated into languages other than English that are commonly spoken in the county (Haitian-Creole, Spanish, Ukrainian, Russian, etc.). Participants who completed the survey could enter a raffle to win one of four $50 grocery store gift cards or an emergency preparedness supply kit. Participants were recruited at a plethora of locations, with concentrated efforts to hit all major population areas across the county. This was achieved through the use of a spreadsheet tracking outreach and engagement efforts. Participant demographics were tracked throughout the process to guide efforts of recruitment within all populations with a goal of obtaining responses that reflected a close representation of Broome County's population demographics. Targeted outreach was conducted in geographic areas that appeared to be under-represented among the respondents.

Purpose

The purpose of the Community Survey was communicated to participants on the cover page. A community-based participatory approach to health, utilizes feedback from the public about their biggest concerns and how they would suggest these concerns be addressed. These responses will help the county and partners in the development of the health improvement plan priorities, goals and objectives over the next six years. Community responses will be prioritized in determining what health concerns should take priority and to develop objections to address these concerns.

Community Engagement

To fully assess the health of a community, buy-in or support from all levels of the community, including government, hospitals, organizations, businesses, and members of the public, is necessary. The assessment process could not have been completed without the assistance and collaboration of the CHA Steering Committee.

The CHA Steering Committee members contributed their assessments and reports which helped to guide the development of the survey. The data and measures taken from these reports were used to identify notable areas of concern related to the NYS Prevention Agenda 2025-2030.

While much of the Community Survey was drafted internally by the BCHD team, the Steering Committee played a vital role in ensuring the surveys were accessible, understandable, and served the intended purpose. The Steering Committee and other community partners (see full list here) also assisted in the distribution of the survey by allowing flyers and business cards with QR codes to the survey to be displayed, allowing the BCHD team to table at their site or event to administer the survey, and having surveys available at their site for individuals to take and complete.

An important role of the CHA process is to foster community engagement and collaboration among local stakeholders. Development of the CHIP will include community feedback to guide resource allocation. Involving community members in the process, builds trust in the process, increases buy-in, and offers validation to their lived experiences. To increase community participation throughout the process, the survey encouraged sharing potential nterventions and

solutions to community health concerns. Preliminary survey findings were shared first with the CHA Steering Committee members who attended the CHA Symposium. Graphs and charts of the averages and counts of responses were shared within a detailed presentation to Symposium attendees. Results were compiled to create the 2025-2030 Broome County CHA, which will be located on Broome County and BCHD websites.

Community Assets and Resources

The identification and mobilization of community assets are essential to advancing the goals of the NYS Prevention Agenda, particularly in addressing health disparities and the Social Determinants of Health (SDOH). The community benefits from a broad network of organizations and institutions across healthcare, education, government, media, and community-based services that collectively support population health and well-being.

Healthcare Systems and Providers

Local healthcare systems serve as critical anchors in addressing both clinical and preventive health needs. United Health Services and Guthrie Lourdes provide comprehensive inpatient, outpatient, emergency, and specialty care services to residents across the county. In addition, a network of primary care and specialty providers, including but not limited to, Broome Pediatrics, Endwell Family Physicians, Cornerstone Family Healthcare (FQHC), and the Binghamton VA Clinic, Comprehensive Psychiatric Emergency Program (CPEP), Greater Binghamton Health Center, supports access to preventive services, chronic disease management, maternal and child health, mental health, and care coordination. These providers contribute directly to Prevention Agenda priorities related to preventive care, chronic disease prevention, and access to quality healthcare. Additional services are available for emergency needs through our first responder system, emergency dispatch center, ambulances, fire departments, and law enforcement (school resource officers, NYS Police, Broome County Sheriff, local police).

Community-Based Agencies and Organizations

Community-based organizations play a vital role in addressing non-clinical factors that influence health outcomes, consistent with the Prevention Agenda focus on health equity and community engagement. These partners provide services that support mental health, disability access, housing-related assistance, and social support, reaching priority populations, reducing barriers to care, and addressing SDOH. Some of these include poverty, substance use, mobility, aging, domestic violence, veterans and equality resources. Broome County United Way provides a comprehensive list of community resources and services that can be easily accessed by calling 2-1-1.

Academic Institutions and School Systems

Educational institutions contribute to community health through education, workforce development, research, and the provision of shared community resources. Broome Community College and Binghamton University, support public health training, data analysis, and community-based research initiatives aligned with Prevention Agenda goals. Local school districts and Broome-Tioga BOCES further support health promotion by offering facilities for recreation and community programming, delivering health education, and serving as key access points for children, adolescents, and families. They also help increase the education of those in the community, attracting diverse populations to their campuses. Local ambulance services provide paramedicine training and education in schools to certify first responders, as well as pay for further training for EMT and Paramedic certifications.

Media and Communications

Local media outlets serve as important partners in disseminating credible public health information, increasing awareness of available services, and promoting Prevention Agenda initiatives. Partners support public health messaging related to awareness and prevention, emergency preparedness, and community resources.

Television:

- Spectrum-News
- WBNG-TV, local CBS/CW affiliate
- WICZ-TV, local FOX affiliate
- WIVT/WBGH News Channel 34, local ABC and NBC affiliates
- WSKG Public Broadcasting System

Radio:

- Cumulus Broadcasting, Inc.
- Equinox Broadcasting
- IHeartMedia, Inc.
- Radigan Broadcasting Group, LLC
- Townsquare Media
- WHRW FM-Binghamton University
- WJOB FM-Broome County Urban League
- WSKG Public Media

Print:

- Press & Sun-Bulletin/Press Connects
- Pipe Dream-Binghamton University
- Community Partner newsletters
- Rosanne Salle Advertising
- Park Outdoors

Government Departments and Services

Multiple government sectors contribute to population health outcomes through policy development, service delivery, and systems-level interventions. Broome County Government, including the Executive Office and Legislature, support public health through policy development, funding, collaboration and understand the benefit of public health to the community. Additional key partners include Economic Development and Planning, Mental Health Services, Department of Social Services, Sheriff's Office, District Attorney's Office, Office for Aging, and Emergency Services. These agencies influence SDOH such as economic stability, housing, public safety, behavioral health, and access to social services, aligning with the Prevention Agenda focus on creating healthy and safe environments.

Transportation Systems

Spanning across 705.7 square miles, Broome County residents need transportation access to travel throughout the county. Broome County has an affordable robust public bus system. BCHD partners with the bus system to offer free transportation for vaccine appointments, the county has partnered to offer transportation to get access to food, and lead testing. Residents with Medicaid access can utilize the local taxi system free of cost to them. There are private businesses offering medical transport, services, food and medicine delivery.

Additional Community Assets

The community also benefits from built environments, physical and social infrastructure that promotes healthy behaviors, including parks and recreation centers, farmers' markets, school-based public facilities, and informal mutual aid groups or support networks. These assets support physical activity, nutrition, social cohesion, and resilience, all of which are key components of Prevention Agenda priority areas. Notable community resources, but not limited to, include free carousels throughout the county, community parks with swimming areas and sprinklers, walking trails, camping areas, kayaking, recreational sports (tennis, basketball, pickleball, golf), community centers dog parks, ice rinks, skating and bicycle parks and playgrounds. Additionally, there are specific resource centers for young children, seniors, and veterans promoting health and wellbeing. There are multiple community events throughout the year including Spiedie Festival and Balloon Rally, LUMA, Bike Pedals, Blues on the Bridge, farmers markets, festivals and multiple professional sporting events.

Identified Gaps and Areas of Need

Despite the presence of strong community assets like , significant areas of need remain. A critical unmet need is housing stability and affordability, which directly impacts health outcomes and health equity. Strengthened partnerships with housing developers, affordable housing organizations, and planning agencies are needed to address housing insecurity and support Prevention Agenda objectives related to SDOH and equitable access to safe, stable housing.

Access to mental health care is another area where improvements are needed to meet NYS Prevention Agenda goals. BCHD promotes mental health by encouraging exercise, movement in the community, promoting safe and healthy lifestyles and environments, and improving refferals and access to mental health services.

Additional gaps and areas of need include affordable childcare and eldercare, food security, and substance use treatment. While there are community organizations working to address these needs, resources are not growing quickly enough to keep up with the demand..

Major Community Health Needs Identified

The major health needs of Broome County were identified through the results of the Community Health Survey distributed by the Broome County Health Department, along with data provided by our local community partners. Based on these findings, three priority areas were selected to focus on for the 2025–2030 cycle. They were chosen in the following order:

1. Housing Stability and Affordability
2. Poverty
3. Anxiety and Stress

Prioritization Methods

Description of Prioritization Process

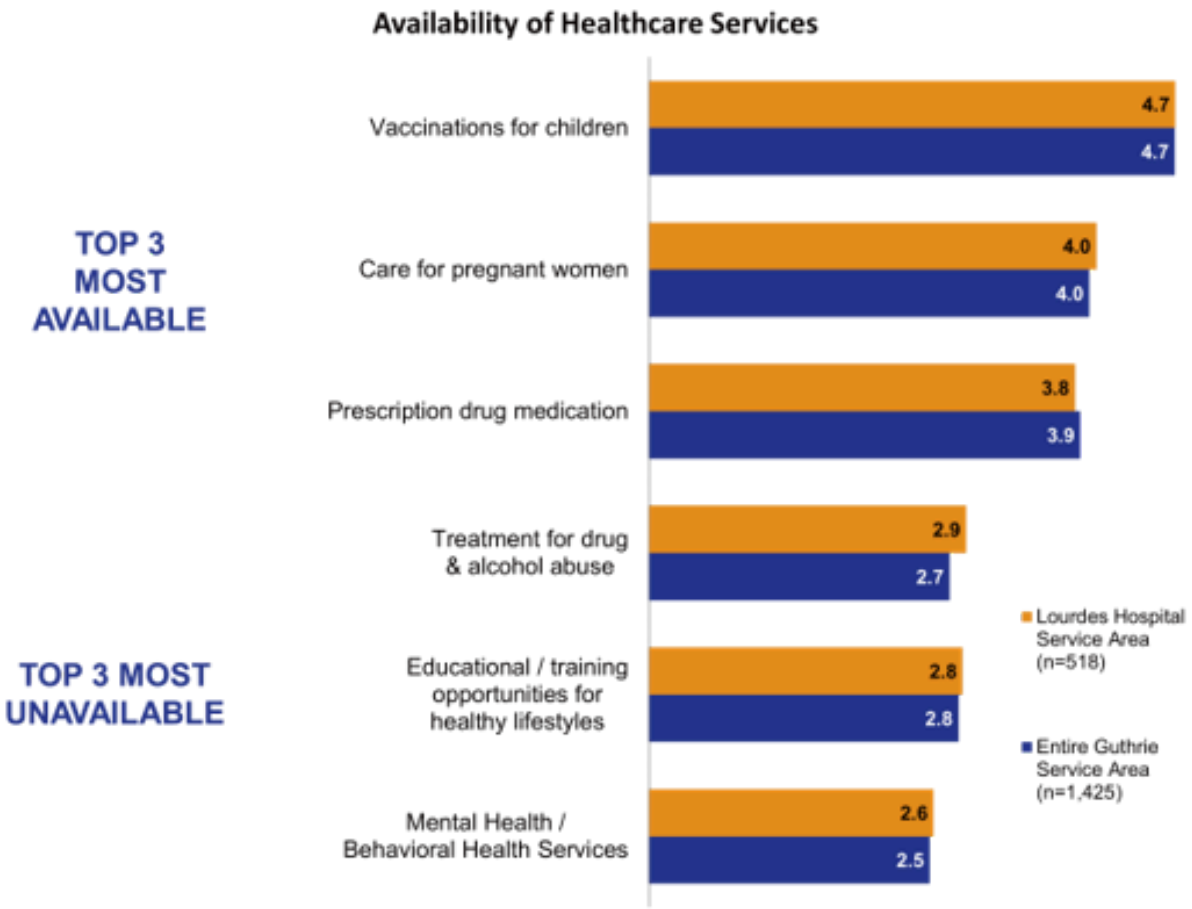
Local data collected from the Community Health Survey by the Broome County Health Department was presented alongside New York State data at the 2025 CHA Symposium. This allowed community partners to compare health indicators at both the local and state levels. Data contributed by our local hospitals, United Health Services and Guthrie Lourdes was also shared at the Symposium, and their findings closely aligned with the results of the Community Health Survey.

United Health Services (UHS) identified the local needs of the community they serve through specific interventions that were implemented to improve the health of the community. They identified health disparities in their service area with efforts from their Population Health Team. The UHS population health team consists of nurse care managers, navigation professionals, care coordinators, and SDOH Coordinators. These professionals assess and address the socio-clinical needs of the community. United Health Services was able to conclude from their assessments that the main health concerns for their service area are mental health and housing. UHS has developed interventions to address community issues, including food insecurity and domestic violence, identifying needs with their patient screening questionnaire.

Guthrie Lourdes Hospital conducted their own Community Health Needs Assessment, which identified targeted interventions to address the health challenges faced by the Guthrie Lourdes Hospital service area. Their service area consists of 245,844 residents. A total of 518 Guthrie Lourdes Hospital service area residents participated in the online survey, and 10 community stakeholders participated in in-depth interviews. Residents who participated in Guthrie Lourdes survey identified the top three healthcare issues facing the community are cancer, heart disease and stroke. Residents were asked to rate the availability of several healthcare services in the Lourdes Hospital service area on a scale 1 to 5. (1=not available, 5=widely available)

- Most widely available healthcare services in Broome and Tioga counties are Vaccinations for Children (Other than Covid-19 Vaccine), Care for Pregnant Women, and Prescription Drug Medication. Least widely available healthcare services in Broome & Tioga counties are Mental/ Behavioral Health Services, Educational/Training Opportunities for Healthy Lifestyles, and Treatment for Drug and Alcohol Abuse. A total of 10 Broome and Tioga County area community stakeholders participated in interviews. Stakeholders were asked to rank the availability of healthcare services in their community.

- Stakeholders provided an average availability score of 6.2/10, (1=not available, 10=high availability), Overall, stakeholders felt that the availability has remained the same over the past three years. Stakeholders feel that both Broome and Tioga have available services such as Primary Care, Emergency Care, Urgent/Walk-in Care, but the availability of those resources is dependent on the individual's ability to access them. Many residents experience the healthcare system differently based on where they live and their available resources. Some services that were found to be lacking or limited include:
  - Mental/ Behavioral Health, including Substance Use Treatment Services
  - OB/GYN
  - Dental Care
  - Pediatrics
- Stakeholders felt that the Guthrie Lourdes service area was *below average* when it came to overall health of the community. The score given was 2.6 out of 5. (5=very healthy) The interview results concluded that the Guthrie Lourdes service area is an overall safe community to raise children, but many requested more health education for children in nutrition and health literacy. Many voiced concerns that there is not enough housing or economic opportunity in the area.



BCHD distributed their Community Survey to Broome County residents at outreach tabling events, local businesses, and other local events. This survey was distributed using both handheld tablets and paper copies. The surveys were completed by community members who were at least 18 yrs or older and had spent a significant amount of time in Broome County. Whether they worked, played, or traveled to Broome County for resources or services, they were eligible to take the survey. Survey respondents were asked both multiple choice and short answer questions. The two short answer questions included at the end of the survey asked respondents to pick "Which of these issues are the biggest concern to you personally?" Following with "For the issue you picked in the previous question, what could be done in Broome County to make things better for you?"

BCHD analyzed and reviewed survey responses. They concluded from the data that the main personal concerns most commonly reported by survey respondents were economic issues and access to mental health programs and resources specifically for drug and alcohol use disorders. People mostly reported being unable to afford or access housing in the Broome County area.

During the CHA Symposium, BCHD presented Community Survey data and shared ideas from survey participants regarding solution ideas that could address identified issues in Broome County.

Priority Area Voting

During the Symposium, the top priority areas were selected through a voting process that included participation from community partners in attendance, representatives from our local hospitals and universities, and other key stakeholders. A Prevention Agenda Focus Area Ranking Tool, developed by the BCHD CHA team, was used by attendees to vote on the top priority areas.

The three priority areas were chosen in the following order:

- Housing Stability and Affordability
- Poverty
- Anxiety and Stress

The CHA Steering Committee followed NYSDOH guidelines, requiring participants to choose at least three priority areas from the Prevention Agenda list, including at least one of the following SDOH:

1. Poverty
2. Unemployment
3. Nutrition Security
4. Housing Stability and Affordability
5. Health and Wellness Promoting Schools
6. Opportunities for Continued Education

Prevention Agenda Focus Area Ranking Tool

Instructions: Please review the full list of Priority Areas. From this list, circle the **five** Priority Areas you feel are most important. Next, take the **five** Priority Areas you circled and **rank them 1-5**, starting with **1 being the most important.** You may refer to the ***NYS Prevention Agenda*** handout for examples to help guide your selections.

Domains	Priority Areas	Ranking
Economic Stability	Housing Stability and Affordability	
	Nutrition Security	
	Poverty	
	Unemployment	
Social and Community Context	Adverse Childhood Experiences	
	Alcohol Use	
	Anxiety and Stress	
	Depression	
	Drug Misuse and Overdose Including Primary Prevention	
	Healthy Eating	
	Tobacco/E-cigarette Use	
	Suicide	
Neighborhood and Built Environment	Access to Community Services and Support	
	Injuries and Violence	
	Opportunities for Active Transportation and Physical Activity	
Health Care Access and Quality	Access to and Use of Prenatal Care	
	Childhood Behavioral Health	
	Early Intervention	
	Oral Health Care	
	Prevention of Infant and Maternal Mortality	
	Prevention Services for Chronic Disease Prevention and Control	
	Preventive Services	
Education Access and Quality	Health and Wellness Promoting Schools	
	Opportunities for Continued Education	

Community Engagement

The BCHD CHA Steering Committee developed a community survey based off the NYS Prevention Agenda framework. This survey collected input from Broome County residents on the top priority areas from the NYS Prevention Agenda that were most important to them. BCHD employees who are a part of the steering committee, attended outreach events across Broome County to distribute the Community Survey to Broome County residents.

The BCHD hosted monthly meetings with steering committee members which included community partners from different organizations in Broome County. These partners attended presentations from various organizations to gain a broader knowledge of current services and interventions being offered. Local partners were also expected to submit their local data over time to support their interventions being carried out from the previous cycle. These monthly meetings occurred throughout 2024 and 2025 until the CHA symposium held in September 2025.

The 2025 CHA Symposium was held on September 9,2025 at the Broome County Health Department. Members from local organization, schools, and hospitals who are members of the committee attended in person to listen to presentations on local and state data and to decide the top three priority areas for the 2025-20230 CHIP cycle.

Justification for Unaddressed Health Needs

There are 24 priority areas in the 2025-2030 NYS Prevention Agenda framework. For the 2025-2030 Community Health Improvement Plan, the top three priorities for Broome County were approved by the CHA Steering Committee. The remaining 21 priority areas are being addressed through various organizations in Broome County, but will not be included in the CHIP as they have been identified as lower priority by all parties involved in the selection process. The impact of the top three priorities are considerably greater then those not chosen, and many have ample services in place to address the need.

Developing Goals, Strategies, and an Action Plan

Alignment with Prevention Agenda

Broome County Health Department along with local organizations and local hospitals, United Health Services (UHS) and Guthrie Lourdes, design their interventions based off of the NYS Prevention Agenda. For each selected priority area for the Community Health Improvement Plan (CHIP), the committee must choose one SMARTIE objective. A SMARTIE objective is characterized as being Specific, Measurable, Achievable, Relevant, Timebound, Inclusive and Equitable. For each objective, an indicator needs to be selected to track progress. Interventions will be evidence based for each priority area chosen. For each of the selected priority areas, Housing Stability and Affordability, Poverty, and Anxiety and Stress, a target population needs to be identified, and strategies need to be selected to reduce disparities and inequities among the selected population.

Health Equity

Workgroup Development

The Broome County Health Department CHA Steering Committee distributed a survey to its community partners to gather input on workgroup participation. Partners were asked to provide their availability for attending workgroup meetings which focused on selecting objectives and interventions for the 2025–2030 Community Health Improvement Plan (CHIP).

Members from local organizations were invited to indicate whether they were interested in serving as "community experts" or workgroup leaders for each priority area. Based on the survey responses, leaders were assigned to each priority area and the remaining steering committee members were assigned to the appropriate workgroups. Each workgroup then met monthly to discuss and determine the objectives to be included in the CHIP. A representative from the BCHD's CHA Steering Committee attended the monthly workgroup meetings. They were in attendance to ensure that members were selecting appropriate objectives for each priority area and aligning their work with the NYS Prevention Agenda framework. The BCHD Steering Committee also implemented quarterly meetings for all priority workgroups to come together, share updates, and present the objectives they planned to implement for the next CHIP cycle.

Steering committee members were encouraged to reference the data and survey results presented to them at the CHA Symposium when selecting specific objectives for their priority area. The workgroups had to make sure the objectives they had chosen were SMARTIE objectives (Specific, Measurable, Achievable, Relevant, Timebound, Inclusive and Equitable). The objectives that were chosen by the steering committee members also had to be in line with the Prevention Agenda framework and have one indicator to track their progress. The indicator for each SMARTIE objective would be a metric or measure used to quantify an outcome.

Partner Engagement

Working with community partners has been a crucial component of the CHA process. Workgroups were established after the 2025 CHA Symposium, and that consisted of local partners, representatives from local hospitals, and other members of the CHA committee who are experts in select priority areas.

The steering committee will continue to meet on a monthly basis following the submission of the CHIP work plan. Progress will be assessed through a performance monitoring tool that tracks all CHIP related activities. These updates will be submitted to the BCHD CHA Steering committee.

Sharing Findings with the Community

BCHD, along with partnering agencies and local hospitals, will share the 2025-2030 CHA and CHIP with community members on the Broome County and BCHD websites. Interventions chosen and implemented through the CHIP will be included in the BCHD Annual Report and shared through social media, and local media reports.

Progress and Evaluation

Interventions will be implemented through targeted community health improvement efforts aligned with the 2025-2030 Prevention Agenda. BCHD, UHS, Guthrie, and other partner organizations will track progress using measures such as screenings, referrals, outreach activities, events, and community partner engagement. Interventions will focus on prevention and improving access to care, with outcomes reported annually through Community Service Plan reports and other public updates.

Strategies may be adjusted based on ongoing evaluation, and additional community partners will be engaged as needed. Progress on community health priorities will be shared through BCHD, Guthrie, UHS, and other partner organizations' websites and social media to inform and engage the public.

Appendices

Appendix A – Community Health Survey

Community Health Survey 2025

Broome County Health Assessment Steering Committee

The Broome County Health Assessment Steering Committee is asking you to anonymously answer some questions about concerns in Broome County. To participate, you must be at least 18 years old and spend a lot of time in Broome County. Participation is voluntary and you may choose not to answer a question for any reason. When you complete the survey, you will have the opportunity to enter a raffle to win a $50 Weis gift card. Entering the raffle will not be linked back to your survey responses.

The information from this survey will be used to develop the Community Health Improvement Plan - a plan used by local hospitals, government agencies, and nonprofits to address the area's most important health concerns. If you have any questions or concerns, you may contact Broome County Health Department at (607)778-3930 or email BChealth@broomecountyny.gov.

1. Do you live, work, or spend a lot of time in Broome County?
   - o I live in Broome County all year.
   - o I live in Broome County part of the year.
   - o I don't live in Broome County, but I work, visit, shop, go to appointments, etc. in Broome County.
   - o No (if you select this, please do not continue with the survey).

2. How old are you?
   - o Under 18 (if you select this, please do not continue with the survey).
   - o 18-24
   - o 25-34
   - o 35-44
   - o 45-54
   - o 55-64
   - o 65-74
   - o 75-84
   - o 85+

3. Which of these economic topics do you think is the biggest concern for **Broome County**? Pick one.
   - o Poverty
   - o Unemployment
   - o Nutrition security (getting enough healthy food)
   - o Housing (finding, affording, and keeping housing)
   - o None of these are problems for Broome County
   - o Prefer not to say

4. Which of these mental health and drug/ alcohol use topics do you think is the biggest concern for **Broome County**? Pick one.

- Anxiety and stress
- Suicide
- Depression
- Drug use and overdose
- Tobacco/ e-cigarette use
- Alcohol use
- Adverse childhood experiences (childhood trauma)
- Healthy eating
- None of these are problems for Broome County
- Prefer not to say

5. Which of these community safety and connectedness topics do you think is the biggest concern for **Broome County**? Pick one.

- Not enough safe and convenient places to exercise, walk and bike
- Access to community services and support
- Injuries and violence
- None of these are problems for Broome County
- Prefer not to say

6. Which of these health care topics do you think is the biggest concern for **Broome County**? Pick one.

- Prenatal care (health care for pregnant people)
- Preventing deaths in mothers and babies
- Resources to prevent or control chronic diseases (diabetes, high blood pressure, heart disease, etc.)
- Dental health care
- Preventative services for children (vaccines, lead screening, hearing tests, etc.)
- Services for childhood developmental delays
- Services for childhood mental and behavioral health
- None of these are problems for Broome County
- Prefer not to say

7. Which of these education topics do you think is the biggest concern for **Broome County**? Pick one.

- Promoting healthy choices in schools
- Education opportunities for adults (GED, trade schools, colleges)
- None of these are problems for Broome County
- Prefer not to say

8. Which one of these is the biggest concern for **you personally**? Pick one.

- o Economic Issues
- o Mental health and drug/ alcohol use issues
- o Community safety and connectedness issues
- o Health care issues
- o Education issues
- o None of these are problems for me
- o Prefer not to say

9. For the issue you picked in Question 8, what could be done in Broome County to make things better for you?

_____
_____
_____
_____
_____
_____
_____

10. In your opinion, which of these things make Broome County a great place to live? Select all that apply.

- ❑ Friends and family
- ❑ Sense of belonging
- ❑ Schools, colleges, and universities
- ❑ Good jobs
- ❑ Opportunities to be in nature
- ❑ Opportunities to volunteer
- ❑ Festivals, events, and recreational activities
- ❑ Community spaces (such as parks, libraries, community centers, senior centers, etc.)
- ❑ Places of worship and faith community
- ❑ The arts
- ❑ Minor league sports teams
- ❑ Local businesses
- ❑ Services to help people who are struggling (such as assistance with housing, food, finding a job, etc.)
- ❑ Other (please describe)

_____

11. Where do you find trusted health information? Select all that apply.

- ❑ Healthcare provider (doctor, nurse, pharmacist, etc.)
- ❑ Health Insurance provider
- ❑ Work
- ❑ Religious organization
- ❑ My or my child's school
- ❑ Family
- ❑ Friends/ Community
- ❑ TV Shows/ News Programs
- ❑ Newspaper
- ❑ Radio or Podcasts
- ❑ Public health organizations (CDC, Broome County Health Department, etc.)
- ❑ Internet
- ❑ Social Media
- ❑ Other _____ _____ _____
- ❑ Prefer not to say

12. Please list some specific sources you turn to for health information.

_____
_____

13. Please select the response that best applies to you:

	Never or Almost Never	Sometimes	Often	Always or Almost Always	Prefer not to say
How often do you have someone help you read medical materials?	o	o	o	o	o
How often do you have problems learning about your medical condition because of difficulty understanding written information?	o	o	o	o	o
How often do you have a problem understanding what is told to you about your medical conditions?	o	o	o	o	o

14. What is your gender?
- ○ Woman
- ○ Man
- ○ Non-binary
- ○ Prefer not to say
- ○ Other _____

15. Do you identify as LGBTQIA+? (lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual?)
- ○ Yes
- ○ No
- ○ Prefer not to say

16. What is your race/ethnicity? Select all that apply.
- ❑ American Indian or Alaska Native
- ❑ Asian
- ❑ Black or African American
- ❑ Hispanic or Latino
- ❑ Middle Eastern
- ❑ Native Hawaiian or Other Pacific Islander
- ❑ White
- ❑ Prefer not to say
- ❑ Other _____

17. What is the highest level of school you have completed or the highest degree you have received? Select all that apply
- ❑ Less than high school degree
- ❑ High school degree or GED
- ❑ Some college but no degree
- ❑ College degree – Associate, Bachelor, Graduate
- ❑ Trade or vocational school
- ❑ Prefer not to say
- ❑ Other _____

18. What is your household income?
- ○ Less than $15,000
- ○ $15,000-$24,999
- ○ $25,000-$49,999
- ○ $50,000-$74,999
- ○ $75,000-$99,999
- ○ $100,000-$149,999
- ○ $150,000-$199,999
- ○ $200,000 or more
- ○ Prefer not to say

19. Including yourself, what is your household size?
- ○ 1
- ○ 2
- ○ 3-4
- ○ 5-7
- ○ 8+
- ○ Prefer not to say

20. What best describes your employment status? Select all that apply.
- ❑ Full-time employed
- ❑ Part-time employed
- ❑ Unemployed
- ❑ Student
- ❑ Retired
- ❑ Prefer not to say
- ❑ Other _____

21. What is your ZIP code? _____

Thank you for completing the survey! Surveys can be mailed to or dropped off at Broome County Health Department, 225 Front Street in Binghamton.

If you or someone you know is struggling or in crisis, help is available. Call or text: 988 or chat: 988lifeline.org 24 hours a day, 7 days a week.

If you would like resources for any of the other issues discussed in this survey, please call 211 or visit 211/United Way online.

Glossary of Terms

ACS	American Community Survey	Ongoing survey that provides vital information on a yearly basis about our nation and its people (Census)
BCHD	Broome County Health Department	Local Health Department located in Broome County, NY
CDC	Center for Disease Control	United States federal organization that protects the public's health (CDC)
CHA	Community Health Assessment	Refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection, and analysis (CDC)
CHIP	Community Health Improvement Plan	Utilizes the results of community health assessment activities and the community health improvement process (CDC)
CHIRE	County Health Indicators by Race and Ethnicity	Provides data on health indicators in each New York county by race and ethnicity (CHIRE)
NYS DOH	New York State Department of Health	Agency responsible for overseeing public health in New York State
NYS PA	New York State Prevention Agenda	New York's State's six-year initiative aimed at improving the health status of individuals in New York and reducing health disparities through a strong emphasis on prevention. The Prevention Agenda outlines key health priorities and how these priorities will be addressed to improve the health and wellbeing of all individuals in New York. (NYSDOH)
SDOH	Social Determinants of Health	Also known as Social Drivers of Health, conditions in the environments where people are born, live, learn, work, play, worship, and age, that affect a wide range of health, functioning, and quality-of-life outcomes and risks (NYSDOH)
UNY	Upstate New York	New York State excluding New York City

References

Agency Statistical Consulting and Education, LLC. *Home page*. (2025). https://www.agencystatistical.com/

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th-TR). American Psychiatric Association. https://doi.org/10.1176/appi.books.9780890425787 American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th-TR). American Psychiatric Association. https://doi.org/10.1176/appi.books.9780890425787

Bethune, S. (2023, November). *Stress in America 2023.* American Psychiatric Association. https://www.apa.org/news/press/releases/stress/2023/collective-trauma-recovery

Broome County Department of Planning & Economic Development. (n.d.-a). Retrieved December 12, 2025, from https://broomecountyny.gov/sites/default/files/dept/planning/pdfs/2024-Annual-Report.pdf

Broome County Department of Planning & Economic Development. (n.d.-b). Retrieved December 2025, from https://broomecountyny.gov/sites/default/files/dept/planning/pdfs/Broome-County-Housing-Needs-Assessment-2024.pdf

Data USA. (n.d.). *Broome County, NY*. Data USA. Retrieved December 4, 2025, from https://datausa.io/profile/geo/broome-county-ny

Census Reporter. (n.d.). *Broome County, NY profile data*. Census Reporter. Retrieved December 4, 2025, from https://censusreporter.org/profiles/05000US36007-broome-county-ny/

Center for Disease Control and Prevention. (n.d.). *PLACES. (2023).* https://www.cdc.gov/places/index.html

Confluence Court Managed by Housing Visions | Housing Visions. (2025, April 21). Housing Visions. https://www.housingvisions.org/projects/confluence-court/

Cornell Program on Applied Demographics. (n.d.). *County trends: Broome County, New York*. Cornell University. Retrieved December 4, 2025, from https://pad.human.cornell.edu/counties/trends1geo.cfm?geo=007

EDA-Census Poverty Status Viewer (n.d.). U.S. Department of Commerce, U.S. Economic Development Administration. https://mtgis-portal.geo.census.gov/arcgis/apps/experiencebuilder/experience/?id=ad8ad0751e474f938fc98345462cdfbf

Federal Reserve Economic Data (FRED). (2024). *Percent of Population Below the Poverty Level (5-year estimate) in Broome County, NY (S1701ACS036007).* Federal Reserve Bank of St. Louis. https://fred.stlouisfed.org/series/S1701ACS036007#

Federal Reserve Economic Data (FRED). (2025). *Employed Persons in Broome County, NY* (LAUCN360070000000005). Federal Reserve Bank of St. Louis. https://fred.stlouisfed.org/series/LAUCN360070000000005

Horn, Lisa (2024, May 15th). *CFSCNY Needs Assessment: Broome County Summary Report.* Community Foundation for Central New York (CFSCNY).

References (continued)

https://donorswhocare.org/wp-content/uploads/2024/11/Brooome-CFSCNY-Needs-Assessment_2024.pdf

Lourdes. (2022) *Community Health Needs Assessment*. https://www.guthrie.org/sites/default/files/Lourdes_CHNA%20Report%202021_2025.pdf

Graham, G. N. (2016). Why Your ZIP Code Matters More than Your Genetic Code: Promoting Healthy Outcomes from Mother to Child. *Breastfeeding Medicine*, *11*(8), 396–397. https://doi.org/10.1089/bfm.2016.0113

HealthCare.gov. (2025). *Federal Poverty Level (FPL)*. HealthCare.gov. https://www.healthcare.gov/glossary/federal-poverty-level-fpl/

Mayor Kraham Announces Housing Projects | News List | City of Binghamton New York. (2021). Binghamton-Ny.gov. https://www.binghamton-ny.gov/Home/Components/News/News/550/15

Marmot, M. (2010). *Fair Society Healthy Lives (The Marmot Review)*. Institute of Health Equity. https://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review

National Association of County and City Health Officials (NACCHO). (2025). *Mobilizing for Action Through Planning & Partnerships: MAPP 2.0.* https://healthyhoi.org/resources/Documents/Board%20Meeting%20Agendas%20and%20Minutes/MAPP%202.0%20Handbook.pdf

New York State Department of Health. (2023a). *Behavioral Risk Factor Surveillance System (BRFSS) Health Indicators by County and Region.* [Data set]. health.data.ny.gov https://health.data.ny.gov/Health/Behavioral-Risk-Factor-Surveillance-System-BRFSS-H/jsy7-eb4n/about_data

New York State Department of Health. (2023b). *Broome County Health Indicators by Race and Ethnicity (2020-2022).* health.ny.gov. https://www.health.ny.gov/community/health_equity/reports/county/broome.htm

New York State Department of Health (2025a). health.ny.gov. https://apps.health.ny.gov/public/tabvis/PHIG_Public/lcd/reports/#county

New York State Department of Health. (2025b). *New York State CHIRS County/Region Comparison Dashboard*. https://apps.health.ny.gov/public/tabvis/PHIG_Public/chirs/reports/#county

New York State Department of Health. (2025c). *New York State Prevention Agenda (Version 2)*. https://health.ny.gov/prevention/prevention_agenda/2025-2030/docs/prevention_agenda_plan.pdf

New York State Department of Health. (2025d). health.ny.gov https://apps.health.ny.gov/public/tabvis/PHIG_Public/pa/reports/#county

Office of Disease Prevention ad Health Promotion (ODPHP). (n.d.) *Social Determinants of Health*. ODPHP, Healthy People 2030. https://odphp.health.gov/healthypeople/priority-areas/social-determinants-health

Office. (2025). *Fiscal Stress Monitoring System Search Tool*. State.ny.us. https://wwe1.osc.state.ny.us/localgov/fiscalmonitoring/fsms.cfm

References (continued)

Partnership for a Healthy Community - MAPP 2.0 Documents. (2025). Healthyhoi.org. https://healthyhoi.org/MAPP-2.0-Documents

Senator Lea Webb Announces $300,000 in State Funding for the Broome County Urban League. (2025). NYSenate.gov. https://www.nysenate.gov/newsroom/press-releases/2025/lea-webb/senator-lea-webb-announces-300000-state-funding-broome-county

United Health Care Services. (2023). https://nyuhs.widen.net/s/ztnrpwvmgv/2023-uhs-community-impact-report_singles_hi-res

U.S. Census Bureau, U.S. Department of Commerce. (2025). *Table DP05: Demographic and Housing Estimates, 2024 American Community Survey 1-year estimates — Broome County, New York (GEOID05000US36007). data.census.gov.* Retrieved December 22, 2025, from https://data.census.gov/table/ACSDP1Y2024.DP05?g=050XX00US36007

U.S. Census Bureau, U.S. Department of Commerce. (n.d.-a). *Poverty Status in the Past 12 Months*. American Community Survey, ACS 1-Year Estimates Subject Tables, Table S1701. Retrieved December 30, 2025, from https://data.census.gov/table/ACSST1Y2023.S1701?t=Income+and+Poverty&g=050XX00US36007

U.S. Census Bureau, U.S. Department of Commerce. (n.d.-b). *Poverty Status in the Past 12 Months.* American Community Survey, ACS 5-Year Estimates Subject Tables, Table S1701. Retrieved December 30, 2025, from https://data.census.gov/table/ACSST5Y2023.S1701?t=Income+and+Poverty&g=050XX00US36007.

U.S. Census Bureau, U.S. Department of Commerce. (n.d.-c). *Selected Characteristics of Health Insurance Coverage in the United States.* American Community Survey, ACS 5-Year Estimates Subject Tables Table S2701. https://data.census.gov/chart/ACSST5Y2023.S2701?t=Health+Insurance&g=050XX00US36007

Veterans Services | Broome County. (2025). Broomecountyny.gov. https://broomecountyny.gov/veterans

White, M. (2025, April 22). *Broome County YMCA Gives Update Regarding Decision to Transition Downtown Binghamton Facility to Focus on Housing*. WICZ. https://www.wicz.com/news/broome-county-ymca-gives-update-regarding-decision-to-transition-downtown-binghamton-facility-to-focus-on/article_dd4ce7d3-28d0-4f3d-a122-102048593dae.html

World Health Organization (WHO). (n.d.). *Constitution of the World Health Organization.* https://www.who.int/about/governance/constitution

Economic Stability	**Instructions:** Please review the Community Health Improvement Planning Guidance for the required elements of the Community Health Improvement Plan (CHIP) and Community Service Plan (CSP): https://www.health.ny.gov/prevention/prevention_agenda/2025-2030/docs/letter_and_guidence.pdf. **Column B:** Select a priority from the dropdown menu. For new priorities NOT listed in the Prevention Agenda, first identify the appropriate SDOH domain tab, then manually enter the priority name. See page 9 of the guidance for details about adding additional priorities. **Column C:** Select an objective from the dropdown menu. To add an additional objective not in the dropdown, type it in the blank cell. See page 9 of the guidance for details about adding additional objectives not included in the Prevention Agenda. **Column D:** Enter and cite the intervention. List each intervention on a separate row; use evidence-based interventions; if not available, best or promising practices. **Column E:** List disparities the intervention addresses. **Column F:** Identify the specific metric or measure used to evaluate the intervention's implementation progress.

Domain	Priority (select one from drop down list)	Objective (select one from drop down list)	Intervention	Disparities Being Addressed	Family of Measures	Timeframe		Implementation Partner *(Please select one partner from the dropdown list per row)*	Partner Role(s) and Resources
						Start Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)		
Economic Stability	Housing Stability and Affordability	4.1 Increase the percentage of adults, with an annual income of less than $25,000, who were able to pay their mortgage, rent, or utility bills in the past 12 months from 85.1% to 89.4%.	Creation of a UHS Housing Coordinator position to support and navigate community members to affordable and safe housing, support linkages to community resources, and facilitate completion of financial applications as needed.	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	1/1/2026	12/31/2030	Hospital	United Health Services, Hospital/Health Care System. UHS will employ this position, ensuring linkages to community members to safe and affordable housing.
Economic Stability	Housing Stability and Affordability		A 68-unit affordable and supportive mixed-use project that includes both new construction and preservation of a building that will be transformed into a childcare facility. The project will include onsite solar funded through the Multifamily SolarProgram. Developed by YWCA of Binghamton and Broome County.	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	2/17/2026	12/31/2030	Housing	https://www.governor.ny.gov/news/governor-hochul-announces-more-240-million-investment-create-and-pr eser ve-1800-affor dable? fbclid=IwdG R j cAQB _ j dj bG Nr B AH-KGV4dG4DYWVtAjExAHNydGMGYXBwX2lkDDM1MDY4NTUzMTcyOAABHkmMxxIM2JY0GJsTyKzU1L-fSkzrNvoUkEylaKZLl4fgi97OMqE8-_aem_p5RTTZdm5L_J2IZiI5h0AQ
Economic Stability	Housing Stability and Affordability		CHIP Housing Workgroup to remain connected throughout Prevention Agenda period to facilitate housing applications and linkage to units where there are vacancies.	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	5/1/2026	12/31/2030	Local health department	Broome County Health Department Housing Wor kgr oup
Economic Stability	Housing Stability and Affordability		Town of Union will provide utility assistance through emergency fund	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	4/1/2026	12/31/2026	Local government	Town of Union residents might qualify for utility assistance through new emergency program
Economic Stability	Housing Stability and Affordability		Housing Access Voucher Pilot Program; Broome County was awarded 16 Vouchers	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	4/1/2026	5/1/2030	Housing	Department of Social Services, ODTA
Economic Stability	Housing Stability and Affordability		Rental Supplement Program through ODTA, contracted with YWCA to manage program. 85 households will be supported (up from 65 previously).	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	4/1/2026	3/31/2027	Social Services	Department of Social Services, ODTA, YWCA
Economic Stability	Housing Stability and Affordability		SAEF Shelter Arrears Eviction Program, OTDA. Up to 6 months of back rent. 2026 is year 2.	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	10/1/2024	9/30/2026	Social Services	Department of Social Services
Economic Stability	Housing Stability and Affordability		Care Compass Network 1115 Waiver Program will provide funding for individuals assessed to have Health Related Social Needs	Income-Based Housing Affordability Gaps	Housing Availability and Affordability	4/1/2024	3/31/2027	Other (please describe partner and role(s) in	Care Compass Network as the Social Care Network

Economic Stability	**Instructions:** Please review the Community Health Improvement Planning Guidance for the required elements of the Community Health Improvement Plan (CHIP) and Community Service Plan (CSP): https://www.health.ny.gov/prevention/prevention_agenda/2025-2030/docs/letter_and_guidence.pdf. **Column B:** Select a priority from the dropdown menu. For new priorities NOT listed in the Prevention Agenda, first identify the appropriate SDOH domain tab, then manually enter the priority name. See page 9 of the guidance for details about adding additional priorities. **Column C:** Select an objective from the dropdown menu. To add an additional objective not in the dropdown, type it in the blank cell. See page 9 of the guidance for details about adding additional objectives not included in the Prevention Agenda. **Column D:** Enter and cite the intervention. List each intervention on a separate row; use evidence-based interventions; if not available, best or promising practices. **Column E:** List disparities the intervention addresses. **Column F:** Identify the specific metric or measure used to evaluate the intervention's implementation progress.

Domain	Priority (select one from drop down list)	Objective (select one from drop down list)	Intervention	Disparities Being Addressed	Family of Measures	Timeframe		Implementation Partner *(Please select one partner from the dropdown list per row)*	Partner Role(s) and Resources
						Start Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)		
Economic Stability	P over ty	1.0 Reduce the percentage of people living in poverty from 18.9% to 17%.	Develop a resource guide that can be posted on websites and distributed at clinics, hospitals, libraries, and pharmacies to include information on community resources. Examples include: Food banks and pantries, Summer food programs for children, Farmers markets, locations that participate in produce double bucks program, Low-income housing resources, Homelessness intervention programs, County Department of Social Services (DSS), Support programs for completing Medicaid/SNAP applications, Community outreach/human services programs, Access financial services/resources.	Low-income and underserved. Families living within the ALICE threshold.	Creation of resource guide. Number of community partners the resource guide was distributed/shared with.	6/30/2026	6/30/2027	Community-based organizations	United Way 211-Community resource information and r efer r al
Economic Stability	P over ty		Annually review and update the resource guide.	Low-income and underserved. Families living within the ALICE threshold.	Resource guide updated annually.	6/30/2026	12/31/2030	Community-based organizations	United Way 211-Community resource information and r efer r al
Economic Stability	P over ty		Partner with, promote, and refer to supplemental nutrition programs including Woman's, Infants and Children (WIC).	Low-income and underserved. Families living within the ALICE threshold.	Number of families enrolling and utilizing WIC benefits on a bi-annual basis.	6/30/2026	12/31/2030	Local health department	The local health department holds the Broome County WIC Program grant.
Economic Stability	P over ty		Partner with, promote, and refer to supplemental nutrition programs including Supplemental Nutrition Assistance Program (SNAP)	Low-income and underserved. Families living within the ALICE threshold.	Number of children and adults receiving SNAP benefits each year.	6/30/2026	12/31/2030	Social Services	Broome County Department of Social Services (DSS) SNAP information for children and adults.
Economic Stability	P over ty		Promote and/or facilitate opportunities to receive education on personal finance for those who receive public assistance or who are enrolled in Medicaid.	Children and families in poverty.	Number of individuals aged 16-64 receiving information on personal finance.	6/30/2026	12/31/2030	Community-based organizations	The Stack Project

Social & Community Context	**Instructions:** Please review the Community Health Improvement Planning Guidance for the required elements of the Community Health Improvement Plan (CHIP) and Community Service Plan (CSP): https://www.health.ny.gov/prevention/prevention_agenda/2025-2030/docs/letter_and_guidence.pdf. **Column B:** Select a priority from the dropdown menu. For new priorities NOT listed in the Prevention Agenda, first identify the appropriate SDOH domain tab, then manually enter the priority name. See page 9 of the guidance for details about adding additional priorities. **Column C:** Select an objective from the dropdown menu. To add an additional objective not in the dropdown, type it in the blank cell. See page 9 of the guidance for details about adding additional objectives not included in the Prevention Agenda. **Column D:** Enter and cite the intervention. List each intervention on a separate row; use evidence-based interventions; if not available, best or promising practices. **Column E:** List disparities the intervention addresses. **Column F:** Identify the specific metric or measure used to evaluate the intervention's implementation progress.

Domain	Priority (select one from drop down list)	Objective (select one from drop down list)	Intervention	Disparities Being Addressed	Family of Measures	Timeframe		Implementation Partner *(Please select one partner from the dropdown list per row)*	Partner Role(s) and Resources
						Start Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)		
Social & Community Context	Anxiety & Stress	5.0 Decrease the percentage of adults who experience frequent mental distress from 13.4% to 12.0%.	Implement and promote Mental Health First Aid course training.	Train community members to provide support to adults experiencing frequent mental distress in Broome County.	1. Total number of participants 2. Total number of workshops (Trainings will be offered to the public, peer organizations, and community groups)	7/1/2026	12/31/2030	Community-based organizations	Rural Health Network of SCNY
Social & Community Context	Anxiety & Stress		Implement and promote Mental Health First Aid course training.	Train community members to provide support to adults experiencing frequent mental distress in Broome County.	1. Total number of participants 2. Total number of workshops (Trainings will be offered to the public, peer organizations, and community groups)	7/1/2026	12/31/2030	Educational institution	SUNY Binghamton
Social & Community Context	Anxiety & Stress		Implement and promote Mental Health First Aid course training.	Train community members to provide support to adults experiencing frequent mental distress in Broome County.	1. Total number of participants 2. Total number of workshops (Trainings will be offered to the public, peer organizations, and community groups)	7/1/2026	12/31/2030	Educational institution	SUNY Broome
Social & Community Context	Anxiety & Stress		Promote and implement models that screen people for stress, anxiety, and their social needs.	Identificaton of depression & anxiety and appropriate referral to services as a result of positive screen	1. Total number of families and individuals screened 2. Total number of successful referrals made as a result of screening	7/1/2026	12/31/2030	Community-based organizations	Mothers and Babies Perinatal Network
Social & Community Context	Anxiety & Stress		Offer support groups for recent mothers and/or postpartum moms	Identification of recent mothers and/or postpartum moms who score high on PHQ9 or experience symptoms of depression, anxiety, or difficulty adjusting to postpartum changes, followed by timely referral to support services.	1. Total number of individuals attending the support group	7/1/2026	12/31/2030	Community-based organizations	Mothers and Babies Perinatal Network

Social & Community Context	**Instructions:** Please review the Community Health Improvement Planning Guidance for the required elements of the Community Health Improvement Plan (CHIP) and Community Service Plan (CSP): https://www.health.ny.gov/prevention/prevention_agenda/2025-2030/docs/letter_and_guidence.pdf. **Column B:** Select a priority from the dropdown menu. For new priorities NOT listed in the Prevention Agenda, first identify the appropriate SDOH domain tab, then manually enter the priority name. See page 9 of the guidance for details about adding additional priorities. **Column C:** Select an objective from the dropdown menu. To add an additional objective not in the dropdown, type it in the blank cell. See page 9 of the guidance for details about adding additional objectives not included in the Prevention Agenda. **Column D:** Enter and cite the intervention. List each intervention on a separate row; use evidence-based interventions; if not available, best or promising practices. **Column E:** List disparities the intervention addresses. **Column F:** Identify the specific metric or measure used to evaluate the intervention's implementation progress.

Domain	Priority (select one from drop down list)	Objective (select one from drop down list)	Intervention	Disparities Being Addressed	Family of Measures	Timeframe		Implementation Partner *(Please select one partner from the dropdown list per row)*	Partner Role(s) and Resources
						Start Date (mm/dd/yyyy)	Completion Date (mm/dd/yyyy)		
Social & Community Context	Anxiety & Stress	5.1 Decrease the percentage of 7th-12th grade students that take the Prevention Needs Assessment (PNA) in Broome County who report high on the depressive symptom scale as an indicator of stress and anxiety from 45% to 37% by December 31, 2030.	Promote and expand school-based socialemotional learning (SEL) and mental well being to teach youth skills needed to handle stress, resolve conflicts, and manage emotions and behaviors.	Mental health disparities among economically disadvantaged students and underserved student populations who report higher levels of sadness or hopelessness.	1. Total numberofschool staff trained-SPCNY(suicide prevention center of NY) - Annualreporting 2.Totalnumber of High Schoolstudents trained - AFSP(american foundation for suicideprevention) - Annualreporting 3.Totalnumber of resources shared with schools on coping,stress,MH- Annual reporting	7/1/2026	12/31/2030	Local government	Broome County Mental Health - BCSAFE
Social & Community Context	Anxiety & Stress		Promote and expand training opportunites to school staff and community partners to integrate SEL in school settings	Mental health disparities among economically disadvantaged students and underserved student populations who report higher levels of sadness or hopelessness.	1. Total number of individuals receiving training/professional development on SEL	7/1/2026	12/31/2030	Educational institution	BOCES