# Warren County CHIC Meeting 8/10/21

## Nutrition Group Takeaways:

**NJHC – Nutrition Workgroup Breakout Meeting** (10 minutes)

**Present:** Sherri Cirignano, Helene Meissner, Michelle Jansen, Deborah Magalhaes, Christine Cameron

The group discussed food insecurity as the main issue with regard to nutrition currently in Warren County.

Helene cited the availability of food is not an issue, but rather that of people getting the food. NORWESCAP Food Bank has an abundance of food. WC pantries are complaining numbers of patrons are down.

Possible reasons for a decrease in accessing food at food pantries discussed:

* Delivery of food to doorsteps in the past 18 months has led to unwillingness to obtain the food themselves;
* Food insecurity numbers may be leveling off;
* Schools and other community organizations are providing meals;
* Additional Nutrition support benefits (i.e., SNAP, WIC) available.

A needs assessment would be helpful in determining reasons behind a decrease in accessing food. The practicalities of implementing this in WC were discussed including possible technology issues with this population.

Obesity rates discussed with questions raised on the accuracy of these rates in the county. BMI is the primary source of these rates.

The cancer link with obesity rates discussed with Michelle inviting the group to participate in the planning process of an event with Sussex County to be held in November.

Submitted: S. Cirignano (8/10/2021)

## Chronic Disease/Mental Health Workgroup

Attendees: Shawn Buskirk, Carolyn Giardano, Chris (do not have last name, Public Health, Morris County), Laura Hawkins, Lorraine Hubbard, Laura Richter

Lorraine – runs CEED program, preventative care, screening to prevent chronic disease but preventative care has significantly decreased since COVID; more concerns with where going to live, eat, etc. – focus on social determinants. Norwescap has COVID Special Needs program in which they can assist individuals seeking help with anything – ranges from finding cat food to housing. Are running Mobile Mammo Van – Warren County #1 in state for breast cancer screenings due to mobility option.

Mental Health Crisis increased over past year, particularly for adolescents.

Morris County is hosting a Back to Health event, will be small due to increase in Covid cases – determining who is still operating and can refer to/work with. Looking at areas of health that have been neglected for so long, think have mental health component, simple screenings increased

Jenn Carpinteri is representative from Atlantic Health to be on committee, Laura Hawkins sitting in for her today. Community outreach for behavioral health participating in cross collaborative work.

Concerns believe to focus on with chronic disease:

* Obesity
* Cancer prevention/cancer survivorship
* Heart disease
* Mental health
* Diabetes
* Stroke

Discussed integration of mental health with chronic disease: often those with mental health are marginalized/stigmatized due to their mental illness diagnose, where primary care/specialists do not respond to health issues because of their mental health. Can exacerbate chronic diseases. Additionally, those with a chronic illness may have mental health issues due to the chronic nature of their illness that may not be addressed through medical care.

Not managing/following through with chronic illness because of mental health & vice versa. Help communities bring wraparound support.

Screening important

Know numbers & get connected to care (referral resources) – understand how regular care benefits individual.

Disease is bio-social-physical faceted problem. Disease speaks to that. Question alluding to mental health, substance use is not in paperwork each client completes at primary care/medical appointments but should be.

## Transportation

From Jackie Leon & Xavier Martinez

-lack of communication of transportation services available

-lack of formal infrastructure - as in actual bus stops for shuttle pick ups and drop offs. Preferably a covered stop for inclement weather. We are aware funding could be an issue but not having a physical place for people to know where they can get transportation in their communities is an issue. Xavier mentioned how in Washington, for example, people wait on church steps for pick up and if anyone doesn't know that, they could miss out on available services.

-language barrier- when people call in for services, there is no information provided in Spanish or any Spanish speaking assistance. At the very least, they are instructed to leave a number and get a call back but it has been observed that these people do not get a call back.

## Access to Care:

* Language barrier and translation
* Prenatal Care for pregnant women (far drives)
* providers at Atlantic Health to get access to patients uninsured for colonoscopy etc.
* Division for aging (lack of transportation for access to care as well as assistance getting on/off bus, etc.)
* What is our baseline data of how many medical appointments are missed, for example? Capacity of system, number of trips, # of Lyft rides (and lack thereof), # of staff provided rides, etc. Making a note of why patients are cancelling appointments. Focus on interventions and find the right investment to solve the problem.
* Lack of Express Cares/Walk-in Center (Phillipsburg Area) so mostly go to hospital ER. Are people going out of the state? (Medicare/Medicaid)
* Data on the relative accessibility of different providers
* Access to Food and necessary basic needs/life events
* What other access issues they are hearing about and experiencing?

## Other Messages & Announcements

Note from Jaclyn Hudak:

As part of the Patient Protection and Affordable Care Act, all non-profit hospitals are required to conduct a Community Health Needs Assessment (CHNA) every three years. We would like to hear your voice. St. Luke’s University Health Network is conducting a survey to identify health needs within the community. As members of our community, we are asking for your feedback to assist us in data collection. The survey will take less than 15 minutes. We ask that surveys be completed by August 31, 2021. The survey is ANONYMOUS. You must be 18 or older to participate in the survey.   <https://redcap.slhn.org/surveys/?s=3RMHWDEFLW>   Thank you, St. Luke's University Health Network