Hello,

Mental health has been a difficult topic for public health to fully realize its prevention role. Health care has similarly segregated mental health treatment as opposed to treating a person’s other health needs within the context of their mental health.

The prevalence of needs is alarming. In the Capital Region, 13% of adults had poor mental health for 14 or more days in the month prior to the survey. In New York, 18% of adults have a mental illness. Of New York high school students, 29% reported feeling sad or hopeless, 16% seriously thought about suicide, 10% attempted suicide and 4% have an injury from a suicide attempt all in the prior year!

This newsletter is loaded with data on mental disease, poor mental health days, suicide, self-inflicted injuries and depression for the region and at the county level. There are professional development opportunities on mental health for the public health workforce, including training, information and referral resources and our upcoming PHIP Advisory Committee where we will take a multi-sector look at the latest thinking on positively impacting mental health.

Keep up with DSRIP, grants, upcoming meetings and health literacy resources as well!

See you soon,
Kevin Jobin-Davis
Executive Director, HCDI
THE LATEST IN NEW YORK STATE HEALTH INITIATIVES

Population Health Improvement Program (PHIP)

The PHIP has established a Community Health Worker (CHW) Work Group, a subcommittee of the Care Coordination Task Force, to clarify the professional development needs for this segment of the workforce, accumulate online training resources, identify training programs in the region, and develop a speaker series of local experts on topics most pertinent to practitioners. See regional directories of Community College and other training organizations programs at the bottom of the page of our Care Coordination Resource Center.

The PHIP staff continue to build upon our directories of area resources to support the work of Health Coaches, Care Coordinators, Community Health Workers and the like, connect consumers with health insurance and discounted care, health care providers, social support services and self-management programs or tools. Recently, we have updated many of these resources to reflect available services in Fulton and Montgomery Counties.

The PHIP data team supported our Schenectady partners by examining the possible reasons for Schenectady's poor Health Outcomes scores from the County Health Rankings. Upon further analysis, the Years of Potential Life Lost (YPLL) was identified as the reason for the County's low scores. Examination of YPLL rates by neighborhood, Race/Ethnicity, SES, and cause of death clarified which sub-populations were the biggest contributors to the dropping ranking.

On March, 28, 2018, HCDI hosted the Population Health Improvement Program Advisory Committee PHIPAC meeting focused on Heart Disease and Stroke. Speakers for the event included John McDonald III, RPh, of the New York State Assembly 108th District who spoke on the importance of multi-disciplinary and multi-level collaboration when addressing individual health. Feng Qian, MD, PhD from SUNY Albany School of Public Health presented on challenges and opportunities for improving cardiovascular health in populations, followed by Margaret Casey RN, MPH, from the New York State Department of Health who shared preventative approaches, programs, and activities in the Capital Region that support cardiovascular health. The event concluded with Dawn Taggard RN, QM Manager of Columbia Memorial Hospital and Lillian Doskocz, RN, of Whitney Young Health, who spoke about the importance of Emergency Medical Services in time-sensitive stroke care and the successful implementation of a self-measuring blood pressure program respectively. Materials from this event are available upon request.
The next PHIPAC meeting will examine Mental Health in the Capital Region on June 27, 2018 at Saint Mary’s Hospital at 9:00am. PHIPAC speakers provide perspective on the quarterly topic from academia, public policy, local data, clinical practice and public health practice. Each of the speakers for the upcoming meeting will focus on mental health as it relates to suicide, self-inflicted injuries, depression, and other mental health diagnosis.

We are always looking to highlight community programs who are engaging in successful prevention initiatives. If you have a program you would like highlighted in the future please contact, Lauren Boyd at lboyd@hcdiny.org to join our network of PHIPAC presenters.

PHIP staff are forming a new workgroup to support capital region county health departments to become accredited through the Public Health Accreditation Board (PHAB). PHAB accreditation is currently a voluntary national accreditation with the goal to improve and protect the health of the public by advancing the quality and performance of public health departments.

With the support of the Alliance for Better Health, we have created a Health Care Selection Tool to help consumers clarify who is on their healthcare team and when it is advisable to choose one provider type over another. Feel free to print it out and use it!
Delivery System Reform Incentive Payment (DSRIP) Program

DSRIP Year 4
DSRIP Year 4 has officially begun! This fourth year of DSRIP is focused on thinking about the future and the legacy of the DSRIP programs, an idea that is reflected in this years’ theme: Start a Movement. Specific areas of focus in DSRIP Year 4 include performance, transition to Value Based Payments, and Planning for the Future. Jason Helgerson, former State Medicaid Director, states in his last whiteboard presentation “at the end of the day the success in DSRIP needs to be about more than just simply improving some performance metrics and launching some important projects. We want this to be about changing the culture of healthcare. We want this to be about communities galvanized together and seeing the mission of improving the health and well-being of the vulnerable in the community as a true higher purpose and building momentum off of what you’ve done so far through DSRIP, so that feeling, that culture change, will continue well into the future.”

See the whole whiteboard presentation here.

Other helpful links:
- DSRIP Year 4 Timeline
- Value Based Payment Information
- VBP University

News from Better Health for Northeast New York (BHNNY)
BHNNY Reorganizes to Support DSRIP Performance: As we move toward a Pay for Performance contracting model, we have made some changes to the structure of our Project Management Office (PMO) to support that model. The Clinical Transformation Team (CTT), under the direction of Kallanna Manjunath, MD, FAAP, CPE will move from a project-specific focus to a programmatic approach, with CTT members allocated accordingly: Behavioral Health Program - Brendon Smith, PhD, BH Clinical Director; Luke Popolizio, MBA, Project Manager; Care Coordination Care Management Program - Tara Foster, MS, RN, Clinical Director; Primary Care Program - Karla Powers, MBA, Program Director; Performance Improvement & Population Health Management Program - Shannon McWilliam, MPH, Program Director. BHNNY is thrilled to announce the arrival of Meg Wallingford, who joins us as the Chief Operating Officer for BHNNY. Previously, she held the position of Sr. Vice President of Transformation for the Alliance for Better Health.

See more at the BHNNY Website.

News from the Alliance for Better Health
Innovation Funds: Alliance for Better Health has awarded more than $5.6 million to 59 local organizations: 28 Community Based Organizations, 29 mainstream healthcare organizations, and two Pharmacies. Of the total, 19 have a focus on behavioral health. The money is from Alliance’s Innovation Fund, designed to encourage community based organizations and providers to think differently about how to address their patients’ and clients’ needs and model new ways of doing business in a changing healthcare environment.
Alliance has announced the launch of Innovation Funds for 2018, with a focus on collaboration between partners to address social determinants of health. The application period will open on May 1st and extend through June 11th. All interested applicants should plan to attend either of the upcoming Innovation Fund webinars to review the application requirements:
Innovation Fund Informational Session #2: Wednesday, May 23rd @ 12-1pm
Read more here.

Healthy Together is Live! If your organization is interested in participating in the Healthy Together Referral Network, you will first need to submit a Provider Interest Survey. Upon completion of the survey, your organization will be considered for the second phase of the roll out this summer.

For those engaged and actively referring through the Healthy Together Network, we encourage you to continue to enter all technical support questions through the in-app help desk chat function. All technical issues will be logged and reviewed on an ad-hoc basis during our May 2nd Town Hall session. For any non-technical questions, feedback, or additional network interest, please contact us via email at healthytogether@abhealth.us.
Keep up-to-date with the latest news at the Alliance for Better Health Website.

**New York State Department of Health Medicaid Redesign Team Innovations in Social Determinants of Health Initiative**

The New York Department of Health - Office of Health Insurance Programs (OHIP), Bureau of Social Determinants of Health, is launching a new initiative designed to identify innovative new or existing ideas for how to effectively address the Social Determinants of Health (SDH) for Medicaid members across New York. The State has launched a Request for Innovation (RFI) survey to solicit proposals from Community-based Organizations (CBOs) across New York, throughout the country, and from entities around the world that will be evaluated by a team of national experts. Top proposals will receive special recognition but all proposals will be made public.

The initiative's primary goal is to help healthcare providers, Managed Care Organizations (MCOs), and DSRIP Performing Provider Systems (PPS) as they seek creative ways to address SDH needs of the members they serve. This is a crucial time in the State's efforts to effectively address the Social Determinants of Health--PPS are in a vital performance phase and all providers and MCOs are actively moving into Value Based Payment (VBP) arrangements. It is important to note that New York is the only state in the nation that requires advanced VBP contractors to identify a social determinant of health relevant to the population they serve and contract with a CBO to address that need. This RFI will help all those entities identify new strategies that could be deployed successfully to assist them in their important population health work. Read more

**Social Determinants of Health Innovation application**
Due date: June 15th @ 5:00 p.m.
HEALTH DISPARITIES REPORT

MENTAL HEALTH in the CAPITAL REGION

Suicide mortality rates are **2.5 times** higher in males

<table>
<thead>
<tr>
<th>Gender</th>
<th>Rate per 100,000</th>
<th>Rate per 10,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
<td>16.9</td>
<td>5.8</td>
</tr>
<tr>
<td>Females</td>
<td>4.8</td>
<td>9.1</td>
</tr>
</tbody>
</table>

Self-inflicted injury hospitalization rates are **0.6 times** higher in females

Suicide mortality rates are highest among White non-Hispanics, with a rate of **11.6** per 100,000 non-Hispanic Whites

Hospitalization rates for mental diseases and disorders (MDD) are highest among Black non-Hispanics

<table>
<thead>
<tr>
<th>Race/Culture</th>
<th>Rate per 10,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black non-Hispanic</td>
<td>87.3</td>
</tr>
<tr>
<td>Other</td>
<td>69.4</td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>52.1</td>
</tr>
<tr>
<td>Hispanics</td>
<td>42.3</td>
</tr>
</tbody>
</table>

**1 in 7** Adults experienced **14 or more** poor mental health days in the past month

**All rates and percentages are age-adjusted and are calculated from 2013-2015**

Sources: NYS Vital Statistics
State Planning and Research Cooperative System (SPARCS)
HEALTH LITERACY

One of the biggest challenges faced in improving the health of our communities is addressing health literacy. Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. In the United States, nearly 90 million adults are considered to have limited health literacy. While limited health literacy spans all demographics, low literacy rates are disproportionately higher among those with a lower socioeconomic status, limited education, or limited English proficiency, as well as those who are elderly or receiving federal socioeconomic assistance.

Health literacy is a shared function of social and individual factors. While a consumer's health literacy skills and capacities are mediated by their education, culture, and language, it is also the responsibility of healthcare professionals and organizations to assess the literacy levels of their consumers and provide literacy-appropriate materials. With this, improved health literacy is not only the concern of consumers, but also of the organizations that aim to assist in the provision of comprehensive care.

There are several tools that are commonly used to assess the readability of text (by grade and age level); included below, is a link that will allow text to be inserted and appropriately assessed and graded using such tools. There is also a readability tool in Microsoft Word and Outlook; step-by-step instructions on how to enable this feature can be found here. Also included below, are guidelines for creating and revising literacy-sensitive material.

**Literacy Level Text Assessment Tool**

**Handouts for Creating and Reviewing Material**

Resources for creating literacy-sensitive materials
Resources for revising existing materials

References


UPCOMING EVENTS AND RESOURCES

Thursday, May 17, 2018
Albany Strategic Alliance Meeting
9:00 a.m. - 10:30 a.m.
Albany County Department of Health, Basement Auditorium
175 Green Street, Albany, NY 12206

Thursday, May 24, 2018
Schenectady Coalition for a Health Community Meeting
2:00 p.m. – 4:00 p.m.
Ellis McClellan Street Health Center Auditorium
600 McClellan Street, Schenectady, NY 12304

Tuesday, May 22, 2018
HCDI Care Coordination Task Force-Community Health Worker Workgroup
8:30 a.m. - 10:00 a.m.
Healthy Capital District Initiative, 3rd Floor Conference Room
175 Central Avenue, Albany, NY 12206

Wednesday, May 23, 2018
Rensselaer County Heroin Coalition
10:00 a.m. - 12:00 p.m.
Rensselaer County Department of Social Services, Administration Building, 2nd Floor
127 Bloomingrove Drive, Troy, NY 12180

Friday, June 1, 2018
Greene County MAPP Committee
1:00 p.m. - 3:00 p.m.
Greene County Office Building
411 Main Street, Catskill, NY 12414

Wednesday, June 6, 2018
Columbia-Greene Controlled Substance Awareness Prevention Workgroup
9:00 a.m. - 10:00 a.m.
Twin Counties Recovery Services
428 W Main Street, Catskill, NY 12414

Thursday, June 7, 2018
Saratoga Mental Health & Substance Abuse Coalition Meeting
8:00 a.m. - 10:00 a.m.
Saratoga Hospital
59D Myrtle Avenue, Saratoga Springs, NY 12866
Thursday, June 7, 2018
Columbia-Greene Suicide Prevention Coalition
3:00 p.m. - 4:00 p.m.
Greene County Mental Health Center, Room 222
905 Greene County Office Building, Cairo, NY 12413

Wednesday, June 13, 2018
HCDI Behavioral Health Task Force
8:30 a.m. - 10:00 a.m.
Healthy Capital District Initiative, 5th Floor Conference Room
175 Central Avenue, Albany, NY 12206

Tuesday, June 15, 2018
Saratoga County Suicide Coalition Meeting
2:30 p.m. - 3:30 p.m.
Saratoga County Veteran’s Agency, Conference Room
2144 Doubleday Avenue, Ballston Spa, NY 12020

Tuesday, June 19, 2018
Columbia-Greene County Controlled Substance Awareness Task Force Meeting
1:00 p.m. - 2:30 p.m.
Columbia Memorial Health
71 Prospect Avenue, Hudson, NY 12534

Thursday, June 21, 2018
Albany Strategic Alliance Meeting
9:00 a.m. - 10:30 a.m.
Albany County Department of Health, Basement Auditorium
175 Green Street, Albany NY 12206

Tuesday, June 26, 2018
HCDI Care Coordination Task Force-Community Health Worker Workgroup
8:30 a.m. - 10:00 a.m.
Healthy Capital District Initiative, 3rd Floor Conference Room
175 Central Avenue, Albany, NY 12206

Thursday, July 5, 2018
Saratoga Mental Health & Substance Abuse Coalition Meeting
8:00 a.m. - 10:00 a.m.
Saratoga Hospital
59D Myrtle Avenue, Saratoga Springs, NY 12866

Wednesday, July 11, 2018
Rensselaer County Heroin Coalition
10:00 a.m. - 12:00 p.m.
Rensselaer County Department of Social Services, Administration Building, 2nd Floor
127 Bloomingrove Drive, Troy, NY 12180
Wednesday, July 11, 2018
Columbia-Greene Controlled Substance Awareness Prevention Workgroup
9:00 a.m. - 10:00 a.m.
Twin Counties Recovery Services
350 Power Avenue, Hudson, NY 12534

Monday, July 16, 2018
Columbia County Chronic Disease Meeting
1:30 p.m. - 2:30 p.m.
Columbia County Department of Health, 2nd Floor Conference Room
325 Columbia Street, Hudson, NY 12534

Monday, July 16, 2018
Columbia County Public Health Leadership Team Meeting
2:30 p.m. - 3:30 p.m.
Columbia County Department of Health, 2nd Floor Conference Room
325 Columbia Street, Hudson, NY 12534

Thursday, July 19, 2018
Albany Strategic Alliance Meeting
9:00 a.m. - 10:30 a.m.
Albany County Department of Health, Basement Auditorium
175 Green Street, Albany NY 12206

Tuesday, July 24, 2018
HCDI Care Coordination Task Force-Community Health Worker Workgroup
8:30 a.m. - 10:00 a.m.
Healthy Capital District Initiative, 3rd Floor Conference Room
175 Central Avenue, Albany, NY 12206
Professional Development Opportunities

Mental Health First Aid – Project Aware
Take part in Mental Health Association in New York State Inc. (MHANYS) Capital Region Project AWARE Community grant. This project provides free training to individuals who work with (or support) transition-aged youth (16-25). MHANYS will train 750 individuals over the next three years across these four counties Albany, Rensselaer, Saratoga, and Schenectady. These 750 members of the public will train to improve mental health literacy – helping them identify, understand and respond to signs of mental illness. Mental Health First Aid (MHFA) is an 8-hour training certification course which teaches participants a five-step action plan to assess a situation, select and implement interventions and secure appropriate care for the individual. The program introduces participants to risk factors and warning signs of mental health problems, builds understanding of their impact and overviews common treatments. This evidence-based CPR-like program improves trainees’ knowledge of mental disorders, reduces stigma and increases the amount of help provided to others. The adult Mental Health First Aid course is appropriate for anyone who wants to learn how to help an individual who may be experiencing a mental health crisis or concern. MHANYS’ Capital Region Project Aware Community grant is supported by the Substance Abuse and Mental Health Services Administration (SAMHSA).

Tuesday, May 22, 2018
8:30 a.m. – 5:00 p.m.
Mental Health Association in New York State, Inc.
194 Washington Avenue, Suite 415, Albany, NY 12210
Registration

Wednesday, May 30, 2018
9:30 a.m. – 5:30 p.m.
Saratoga Springs Public Library
49 Henry Street, Saratoga Springs, NY 12866
Registration

Monday, June 11, 2018
8:30 a.m. – 5:00 p.m.
Mental Health Association in New York State, Inc.
194 Washington Avenue, Suite 415, Albany, NY 12210
Registration

Wednesday, June 27, 2018
8:30 a.m. – 5:00 p.m.
CEO – Commission on Economic Opportunity
2331 5th Avenue, Troy, NY 12180
Registration
Applied Suicide Intervention Skills Training (ASIST)
ASIST is a two-day interactive workshop in suicide first-aid. ASIST teaches participants to recognize when someone may be at risk of suicide and work with them to create a plan that will support their immediate safety. Although ASIST is widely used by healthcare providers, participants don’t need any formal training to attend the workshop—ASIST can be learned and used by anyone. More information and registration available [here](#).
- Attendance for two full days is required
- Social Work CEUs (15 hours) are available through the Suicide Prevention Center of NY for a small fee (email spcny@omh.ny.gov for information)
- CASAC/CPP/CPS credits (15 hours) are available at no cost through MHANYS

Wednesday – Thursday May 23 & 24, 2018
9:00 a.m. – 5:00 p.m.
Mental Health Association in New York State, Inc.
194 Washington Avenue, Suite 415, Albany, NY 12210

Value-Based Payment: A Guide for Direct Care Practitioners
Practitioners will be provided with an overview of the basics of value-based payment and explore the expanded role of the direct care practitioner as an essential part of quality, integrated care and improved health outcomes. This training is intended for direct care practitioners and their supervisors.

Wednesday May 30, 2018
10:00 a.m. – 1:00 p.m.
Albany Public Library
161 Washington Ave Albany, NY 12210
[Registration](#)

Value-Based Payment: A Guide for Managers in Behavioral Health
This training will provide an overview of VBP arrangement types and discuss integral aspects of successful implementation of VBP arrangements including using a team approach, how to use data to improve quality, designing staff roles and engagement strategies. This training is intended for managers and supervisors in behavioral health organizations.

Wednesday May 30, 2018
2:00 p.m. – 5:00 p.m.
Albany Public Library
161 Washington Ave Albany, NY 12210
[Registration](#)
Getting to the Heart of Motivational Interviewing
Motivational Interviewing is one of the most frequently mentioned techniques in the behavioral health world. But it is deceptively complicated - it is straightforward in concept, but really challenging to practice correctly. In this webinar, participants will learn about what MI is, and what it isn’t. Participants will also learn to avoid traps that even experienced MI practitioners fall into and will hear examples of MI from the mental health, addiction, and physical health worlds.

Wednesday, May 30, 2018
12:00 p.m. – 1:00 p.m.
Webinar Registration

Health Disparities in HIV: Supporting Adolescents through the HIV Care Continuum
Learning Objectives:
• Define the adolescent specific HIV-related health disparities in the United States
• Describe the individual and structural level factors impeding youth’s progress through the HIV Care Continuum
• Identify potential individual and structural level intervention points to support the health of youth living with HIV

Tuesday, June 5, 2018
12:00 p.m. – 1:00 p.m.
Webinar Registration

New Children’s Health and Behavioral Health State Plan Services In-Person Training
Full day training that will start by reviewing the new implementation timeline and next steps. Then there will be an in-depth training on the following SPA Services: OLP, CPST, PSR, FPSS. For each service, the training will discuss the service overview, billing review, as well as enrollment and credentialing rules. The training will also include strategies and next steps to help your organization with functional implementation. Target Audience: Providers, serving individuals under 21, who are designated to provide or plan to provide SPA Services. This includes ALL Providers of SPA services including those licensed by OMH, OASAS, OCFS and DOH (Medically Fragile).

Friday, June 8, 2018
9:30 a.m. – 3:30 p.m.
Albany Capital Center
55 Eagle Street, Albany, NY 12210
Registration
Youth Mental Health First Aid

Become a certified in Mental Health First Aider! You are more likely to encounter someone — friend, family member, coworker, neighbor, or member of the community — in an emotional or mental crisis than someone having a heart attack. Mental Health First Aid teaches a 5-step action plan to offer initial help to people with the signs and symptoms of a mental illness or in a crisis, and connect them with the appropriate professional, peer, social, or self-help care. Anyone can take the 8-hour Mental Health First Aid course — first responders, students, teachers, leaders of faith communities, human resources professionals, and caring citizens. Youth Mental Health First Aid reviews the unique factors and warning signs of mental health problems in adolescents age 12-18. It emphasizes the importance of early intervention and covers how to help an adolescent in crisis or experiencing a mental health challenge. The youth course is intended for anyone 18 years or older to learn how to help young people. This is an 8-hour class and runs from 8:15 am to 5:00 pm. This class is $100 which includes catered lunch from Café Lark. More information and registration available [here](https://www.youth-mentalhealthfirstaid.org).

Tuesday, July 24, 2018
8:15 a.m. – 5:00 p.m.
Mental Health Association in New York State, Inc.
194 Washington Avenue, Suite 415, Albany, NY 12210

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**GRANTS**

**Improving Access to Overdose Treatment**

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP), is accepting applications for Fiscal Year (FY) 2018 Improving Access to Overdose Treatment (Short Title: OD Treatment Access). SAMHSA will award OD Treatment Access funds to Federally Qualified Health Centers (FQHC), Opioid Treatment Programs, or practitioners who have a waiver to prescribe buprenorphine to expand access to Food and Drug Administration (FDA)-approved drugs or devices for emergency treatment of known or suspected opioid overdose. Recipients will partner with other prescribers at the community level to develop best practices for prescribing and co-prescribing FDA-approved overdose reversal drugs. After developing best practices, the recipients will train other prescribers in key community sectors as well as individuals who support persons at high risk for overdose. [Read more](https://www.samhsa.gov/grants/announcements/improving-access-overdose-treatment)

Applications are due: Monday, June 4, 2018
**Mental Health Awareness Training Grants**

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) is accepting applications for fiscal year (FY) 2018 Mental Health Awareness Training grants (Short Title: MHAT). The purpose of this program is to: (1) train individuals (e.g., school personnel, emergency first responders, law enforcement, veterans, armed services members and their families) to recognize the signs and symptoms of mental disorders, particularly serious mental illness (SMI) and/or serious emotional disturbance (SED); (2) establish linkages with school- and/or community-based mental health agencies to refer individuals with the signs or symptoms of mental illness to appropriate services; (3) train emergency services personnel, veterans, law enforcement, fire department personnel, and others to identify persons with a mental disorder and employ crisis de-escalation techniques; and (4) educate individuals about resources that are available in the community for individuals with a mental disorder. It is expected that this program will prepare and train others on how to appropriately and safely respond to individuals with mental disorders, particularly individuals with SMI and/or SED.

[Read more](#)

Applications are due: Friday, June 8, 2018

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**Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke-Financed in part by 2018 Prevention and Public Health funds (PPHF)**

This NOFO is non-competitive, and will support state investments in implementing and evaluating evidence-based strategies to prevent and manage cardiovascular disease (CVD) and diabetes in high-burden populations/communities within each state and the District of Columbia, contributing to improved health outcomes. High burden populations are those affected disproportionately by high blood pressure, high blood cholesterol, diabetes, or prediabetes due to socioeconomic or other characteristics, including inadequate access to care, poor quality of care, or low income. Category A strategies focus on diabetes management and type 2 diabetes prevention. Category B strategies focus on CVD prevention and management. In both categories, applicants will select from a menu of strategies, and should focus in areas where they have capacity, subject matter expertise, and potential to achieve greatest reach and impact. Where appropriate, applicants will apply their selected Category A and B strategies in the same targeted communities/settings, so that work on these strategies may be mutually reinforcing. Complementary strategies should be addressed in a way that benefits both people with prediabetes or diabetes and people with high blood pressure and with or at risk for high blood cholesterol. Funding, resources, and level of effort should be divided equally between Category A and B strategies.

[Read more](#)

Applications are due: June 11, 2019
Empire State Supportive Housing Initiative (ESSHI)
New York State is issuing this RFP, for the development and operation of at least 1200 new units of Supportive Housing for persons identified as homeless with special needs, conditions or other life challenges. This RFP seeks to award the third year’s commitment of Governor Cuomo’s plan to develop 6,000 units over five years. NYS will award service and operating funding for units of housing developed to support the needs of individuals residing in the units. Read more

Applications are due: June 19, 2018 at 2:00 p.m. ET

Rural Health Network Development Program
The New York State Department of Health is committed to promoting access to timely, quality and effective health care for all New Yorkers. The State has a long history of successful initiatives that have improved access in communities with provider shortages. Despite these successes, challenges remain, particularly in rural areas. In addition to provider shortages, people living in rural areas generally are older, have lower incomes, and experience higher rates of death than people living in the rest of the state. Further, most rural areas lack public transportation and are affected by geographic barriers and weather conditions that often make it difficult to access health care services.

In recognition of these challenges, the Charles D. Cook Office of Rural Health, situated within the Department of Health, administers the Rural Health Network Development Program (RHNDP). The overarching goal of the RHNDP is to improve the health of New Yorkers living in rural areas by supporting the development and operation of rural health networks. Rural health networks facilitate cooperative and collaborative efforts among rural health providers, which is vital to improve access to essential services, enhance coordination of services, increase the efficiency of service delivery, and preserve the stability and viability of rural communities. Read more

Applications are due: June 28, 2018 at 4:00 p.m. ET
MEET OUR NEW TEAM MEMBER

Jordyn Wartts

Jordyn Wartts joins the Population Health Improvement Program as the Public Health Planner for Saratoga and Schenectady Counties. As a graduate of Skidmore College and the SUNY Albany School of Public Health, Jordyn holds a B.S in Health and Exercise Sciences (with a minor in Management and Business), as well as a Master of Public Health Degree with a concentration in Social Behavior and Community Health. Prior to joining the HCDI, Jordyn led and contributed to several multi-disciplinary research efforts; She has worked with St. Louis Children's Hospital, Washington University's School of Medicine, the Community Care Physicians of Albany New York, the SUNY Albany School of Public Health, and the Bureau of Environmental Radiation Protection as part of the New York State Department of Health. Although her interests are ever-growing, Jordyn is most passionate about decreasing minority health disparities and increasing access to healthcare in underserved populations. Born and raised in St. Louis, MO, Jordyn has resided in the capital region for eight years. She enjoys reading, playing sports, spending time with loved ones, and being an active member of her communities.