



COMMUNITY HEALTH NEEDS ASSESSMENT & COMMUNITY SERVICE PLAN AUBURN COMMUNITY HOSPITAL

Service Area: Cayuga County and Auburn Community Hospital Service Area

Plan Type: Individual hospital plan

Organization: Auburn Community Hospital

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EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

- **Prevention Agenda Priorities:** Auburn Community Hospital (“ACH”) has identified Promoting Well-Being and Increasing Access to Mental Health and Promoting Healthy Women, Infants and Children as the major health challenges to be addressed for the 2025 – 2030 period. The priorities to be addressed will be the following:
 - **Promote Well-Being and Increase Access to Mental Health**
 - *Priority Poverty*
 - *Priority Suicide*
 - *Priority Primary Prevention, Substance Misuse, and Overdose Prevention*
 - **Promote Healthy Women, Infants and Children**
 - *Priority Nutrition Security*
 - *Priority Prevention of Infant and Maternal Mortality*

The priorities and challenges outlined above will help address various disparities including racial and ethnic disparities, socioeconomic disparities, gender disparities, age disparities, and stigma disparities.

- **Data Review:**
 - Primary data sources used include interviews with community stakeholders, community-wide survey results and discussions with Auburn Community Hospital leadership and administrative team. Secondary data sources included and are not limited to New York County Health Indicators by Race and Ethnicity (CHIRE), New York State Prevention Agenda Dashboard, New York State Community Health Indicator Reports (CHIRS), Centers for Medicare and Medicaid Services (CMS), American Community Survey (ACS) and the United States Census Bureau.
- **Partners and Roles:**
 - ACH solicited feedback via an online survey that was distributed to Cayuga County residents through social media posts, the ACH website, word of mouth, and a marketing campaign run by ACH. At the close of the survey, 88 community members had responded. In addition, ACH identified 12 people for in-person interviews with Stroudwater. These interviewees included community leaders, hospital leadership, public safety, physicians, and other health leaders.
 - Partner engagement for the Community Service Plan will expand in January 2026, at which time the ACH CHNA Committee will expand to incorporate additional key stakeholders from the broader community including ACH, Auburn Memorial Medical Services (“AMMS”), and various community partners.



EXECUTIVE SUMMARY CONT.

- **Interventions and Strategies:** Interventions were selected during ACH meetings. Partners were asked to identify interventions already in place as well as those that would be feasible to initiate, sustain, and measure. Input was compiled and summarized and a list of interventions, was created.
 - **Promote Well-Being and Increase Access to Mental Health**
 - **Priority Poverty**
 - Intervention: Conduct regular screening of patients at the hospital for SDOH factors like income and unemployment.
 - **Priority Suicide**
 - Intervention: Promote calling or texting 988 through social media, digital marketing campaigns, and other utilized marketing strategies.
 - Intervention: Promote and conduct comprehensive suicide prevention training for staff.
 - **Priority Primary Prevention, Substance Misuse, and Overdose Prevention**
 - Provide or expand access to naloxone to reduce overdose fatalities.
 - **Promote Healthy Women, Infants and Children**
 - **Priority Nutrition Security**
 - Expand or create access points to get affordable, high quality, nutritious food.
 - **Priority Prevention of Infant and Maternal Mortality**
 - Integrate hospital-based midwifery model of care that supports:
 - The employment of midwives in leadership roles
 - The institution of formal policies and practices supportive of midwives
 - The emphasis on the value and benefit of such programs
 - Implement ZERO TO THREE's Healthy Steps Program in pediatric primary care offices.

EXECUTIVE SUMMARY CONT.

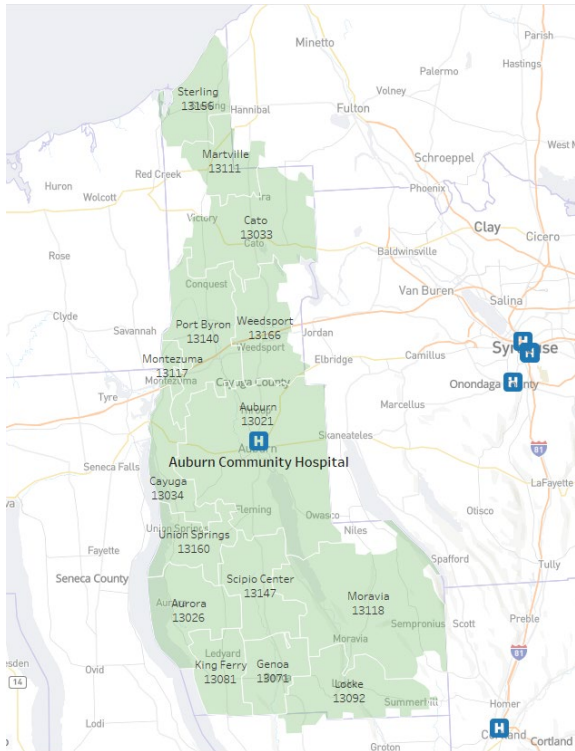
- **Progress and Evaluation:**

- Each intervention selected for each priority has a family of measures being used to monitor progress as reported in the Auburn CHNA Workplan.
- In January, detailed plans will be reviewed by the larger group and adjusted as needed. Each deliverable will have a responsible party assigned to it. In quarter 1 of 2026, the team will meet monthly to assess the plan, report off on their progress, and adjust course as needed. After quarter one, the meetings will transition to be quarterly with the same agenda of reviewing the plan, reporting out, and making any necessary adjustments.



COMMUNITY DESCRIPTION

SERVICE AREA



Cayuga County is located in central New York State. Auburn (ZIP Code 13021) is the county's largest city and is home to approximately 53.8% of the county's population.

Other communities in the county include Aurora (13026), Cato (13033), Cayuga (13034), Genoa (13071), King Ferry (13081), Locke (13092), Martville (13111), Montezuma (13117), Moravia (13118), Port Byron (13140), Scipio Center (13147), Sterling (13156), Union Springs (13160), and Weedsport (13166).

As of 2024, nearly 84% of Auburn Community Hospital's patients are from Cayuga County.

Medicare Patients by County by Year

County	Medicare Cases					Percent of Total					Running Total				
	2020	2021	2022	2023	2024	2020	2021	2022	2023	2024	2020	2021	2022	2023	2024
Grand Total	2,408	2,638	2,387	2,366	2,293	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Cayuga	1,987	2,222	2,005	1,995	1,914	82.5%	84.2%	84.0%	84.3%	83.5%	82.5%	84.2%	84.0%	84.3%	83.5%
Onondaga	233	260	259	254	254	9.7%	9.9%	10.9%	10.7%	11.1%	92.2%	94.1%	94.8%	95.1%	94.5%
Wayne	27	42	41	38	34	1.1%	1.6%	1.7%	1.6%	1.5%	93.3%	95.7%	96.6%	96.7%	96.0%
Oneida	38	51	33	19	30	1.6%	1.9%	1.4%	0.8%	1.3%	94.9%	97.6%	97.9%	97.5%	97.3%
Seneca	40	30	26	37	38	1.7%	1.1%	1.1%	1.6%	1.7%	96.6%	98.7%	99.0%	99.0%	99.0%
All others	83	33	23	23	23	3.4%	1.3%	1.0%	1.0%	1.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Source: CMS Hospital Service Area File

POPULATION DEMOGRAPHICS: GROWTH

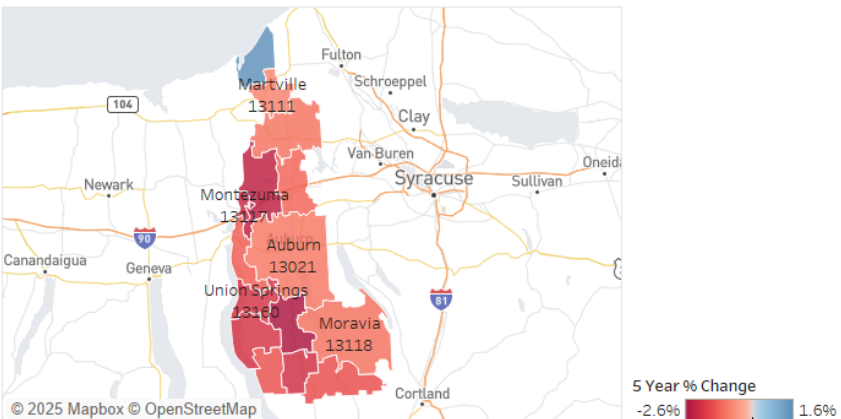


- The current population in Cayuga County is **71,473** residents and is estimated to decrease slightly by 1.2%, or 841 individuals, in the next five years. However, the age 65+ cohort is expected to increase by 12%.

Current			Projected		
71,473			70,632		
Age Group Detail			5 Year (#)		5 Year (%)
Age	Current	Projected			
0-17	13,227	12,563	-664		-5.0%
18-44	23,178	22,715	-463		-2.0%
45-64	18,464	16,756	-1,708		-9.3%
65+	16,604	18,598		1,994	12.0%

			5 Year Change (#)		5 Year Change (%)	
			-841		-1.2%	
ZIP Code Population Detail						
County	ZIP Name	ZIP Code				
Cayuga County	Auburn	13021	<div><div></div></div> 38,449	<div><div></div></div> 38,047	<div><div></div></div> -402	<div><div></div></div> -1.0%
	Aurora	13026	<div><div></div></div> 1,458	<div><div></div></div> 1,429	<div><div></div></div> -29	<div><div></div></div> -2.0%
	Cato	13033	<div><div></div></div> 3,563	<div><div></div></div> 3,524	<div><div></div></div> -39	<div><div></div></div> -1.1%
	Cayuga	13034	<div><div></div></div> 1,713	<div><div></div></div> 1,689	<div><div></div></div> -24	<div><div></div></div> -1.4%
	Genoa	13071	<div><div></div></div> 861	<div><div></div></div> 843	<div><div></div></div> -18	<div><div></div></div> -2.1%
	King Ferry	13081	<div><div></div></div> 1,017	<div><div></div></div> 1,001	<div><div></div></div> -16	<div><div></div></div> -1.6%
	Locke	13092	<div><div></div></div> 2,553	<div><div></div></div> 2,512	<div><div></div></div> -41	<div><div></div></div> -1.6%
	Martville	13111	<div><div></div></div> 1,669	<div><div></div></div> 1,654	<div><div></div></div> -15	<div><div></div></div> -0.9%
	Montezuma	13117	<div><div></div></div> 269	<div><div></div></div> 263	<div><div></div></div> -6	<div><div></div></div> -2.2%
	Moravia	13118	<div><div></div></div> 5,657	<div><div></div></div> 5,594	<div><div></div></div> -63	<div><div></div></div> -1.1%
	Port Byron	13140	<div><div></div></div> 3,803	<div><div></div></div> 3,712	<div><div></div></div> -91	<div><div></div></div> -2.4%
	Scipio Center	13147	<div><div></div></div> 1,098	<div><div></div></div> 1,069	<div><div></div></div> -29	<div><div></div></div> -2.6%
	Sterling	13156	<div><div></div></div> 2,266	<div><div></div></div> 2,302	<div><div></div></div> 36	<div><div></div></div> 1.6%
	Union Springs	13160	<div><div></div></div> 1,809	<div><div></div></div> 1,773	<div><div></div></div> -36	<div><div></div></div> -2.0%
	Weedsport	13166	<div><div></div></div> 5,288	<div><div></div></div> 5,220	<div><div></div></div> -68	<div><div></div></div> -1.3%
			Current	5yr Est.	# Change	% Change

5-Year Change (%) by ZIP Code



Source: Claritas 2025

POPULATION DEMOGRAPHICS: SEX



- The male-to-female ratio in the county is roughly equal, with only slightly more males.
- Growth patterns within the sex categories are similar, with population increases expected only within the 65+ cohort.

<i>Female</i>				
	Current	Projected	5 Year Change (#)	5 Year Change (%)
Grand Total	34,995	34,617	-378	-1.1%
0-17	6,440	6,149	-291	-4.5%
18-44	10,822	10,533	-289	-2.7%
45-64	8,951	8,092	-859	-9.6%
65+	8,782	9,843	1,061	12.1%

<i>Male</i>				
	Current	Projected	5 Year Change (#)	5 Year Change (%)
Grand Total	36,478	36,015	-463	-1.3%
0-17	6,787	6,414	-373	-5.5%
18-44	12,356	12,182	-174	-1.4%
45-64	9,513	8,664	-849	-8.9%
65+	7,822	8,755	933	11.9%

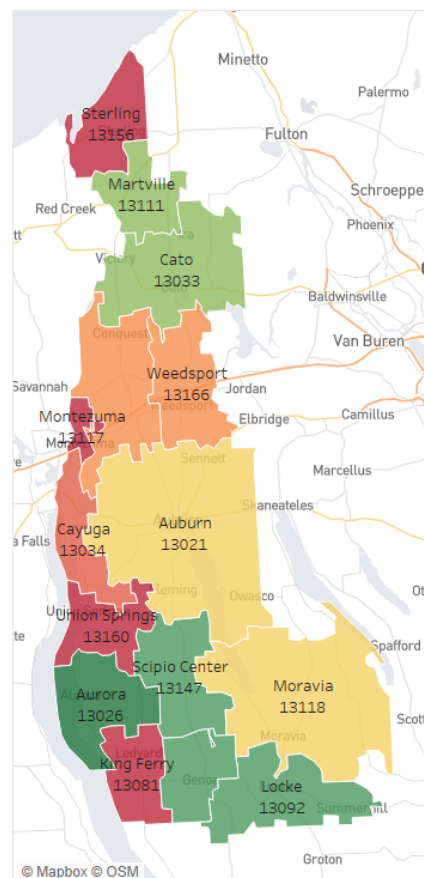
Source: Claritas 2025

POPULATION DEMOGRAPHICS: DISTRIBUTION AND MEDIAN AGE

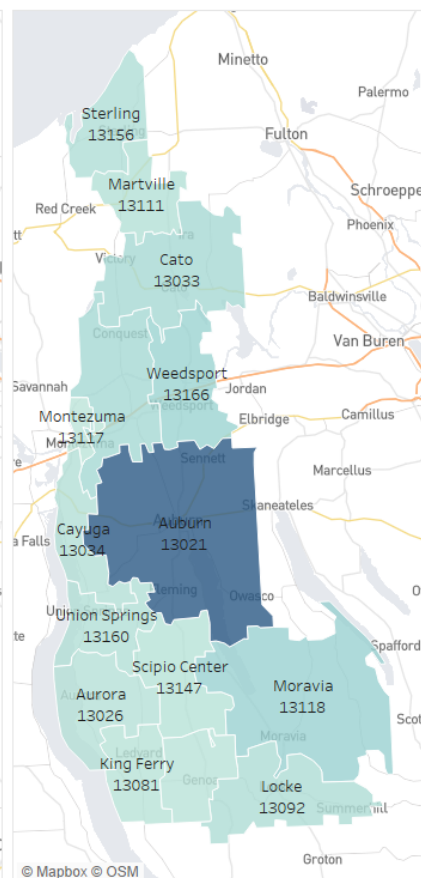


- The Auburn ZIP Code is the most populated in the county, with just under 38,449 residents. ZIP Codes with the oldest median populations include Sterling, Union Springs, and King Ferry.

Median Age



Population Distribution



ZIP Code Population Detail

County	ZIP Name	ZIP Code	Median Age	Current Population
Cayuga County	Auburn	13021	44.1	38,449
	Aurora	13026	38.9	1,458
	Cato	13033	42.4	3,563
	Cayuga	13034	47.5	1,713
	Genoa	13071	41.1	861
	King Ferry	13081	47.9	1,017
	Locke	13092	41.7	2,553
	Martville	13111	43	1,669
	Montezuma	13117	47.9	269
	Moravia	13118	43.7	5,657
	Port Byron	13140	45.9	3,803
	Scipio Center	13147	40.4	1,098
	Sterling	13156	49.1	2,266
	Union Springs	13160	47.9	1,809
	Weedsport	13166	45.6	5,288

Current Population

Source: Claritas 2025

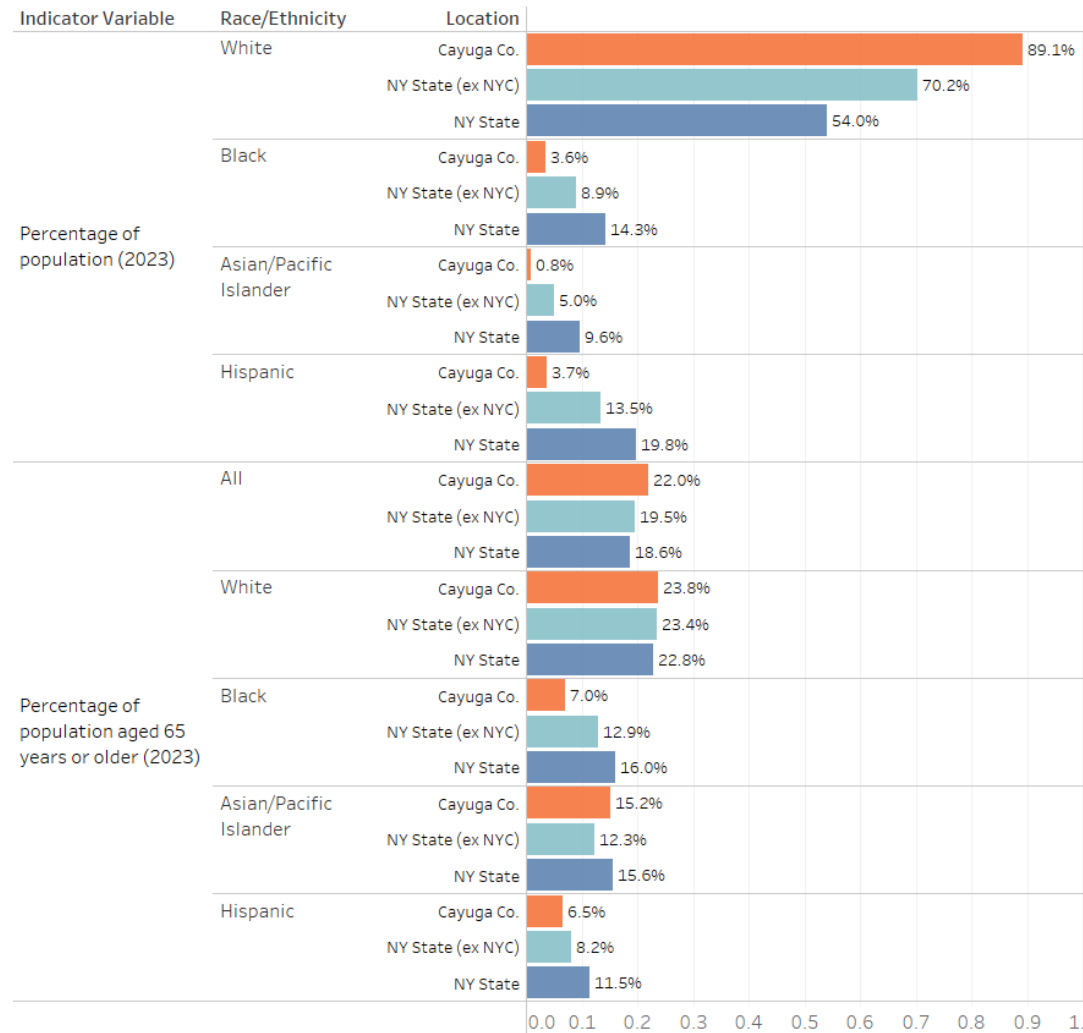


POPULATION DEMOGRAPHICS: RACE/ETHNICITY



- 89.1% of the Cayuga County population is white, which is a higher percentage than both New York State (excluding New York City) at 70.2% and New York State combined at 54.0%.
- Hispanic residents (of any race) make up roughly 3.7% of the population.
- 22% of the population is aged 65 or older, which is higher than the state benchmarks.

Population



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

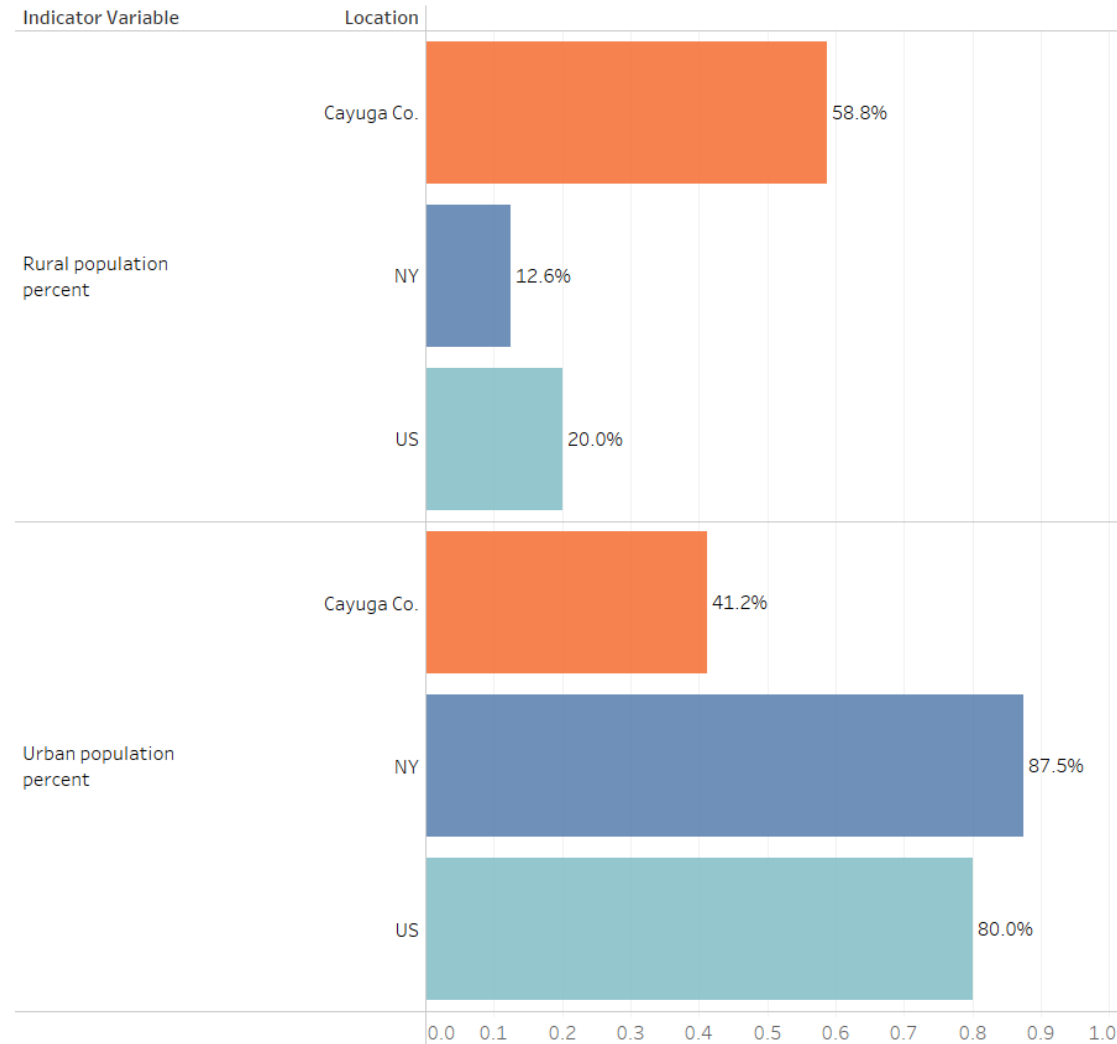


POPULATION DEMOGRAPHICS: RURAL AND URBAN POPULATIONS



- Cayuga County has a much higher percent of its population that is considered rural compared to state and national benchmarks.
- Rurality can pose challenges for healthcare organizations in recruiting providers, particularly specialists, to the area.

Rural and Urban Population



Source: US Census Bureau, Decennial Census. 2020

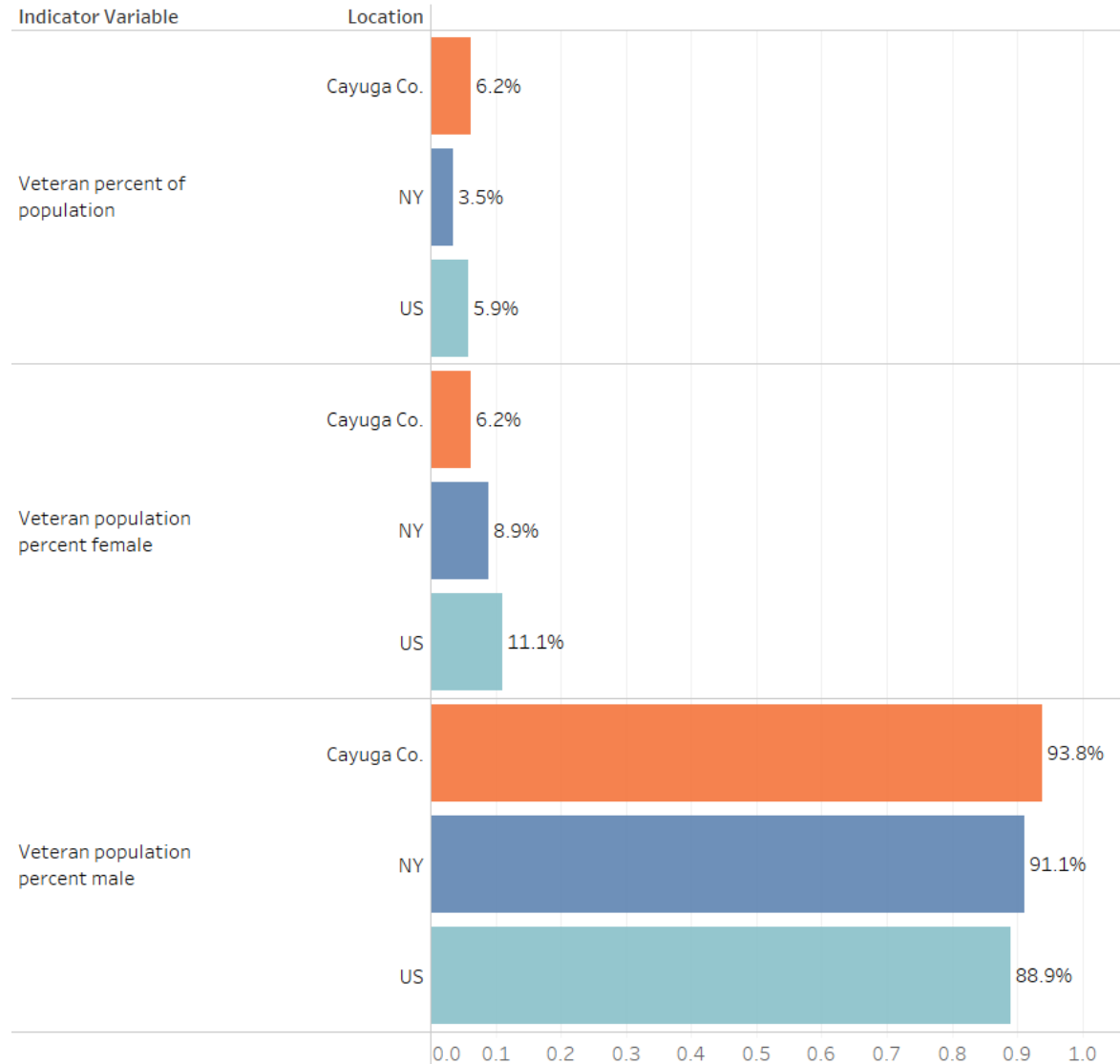


POPULATION DEMOGRAPHICS: VETERANS



- Cayuga County has a higher percentage of veterans among its population – nearly double the New York state percentage and slightly larger than the national average.
- The vast majority of veterans (93.8%) are male.

Veterans



Source: 2024 American Community Survey 1-Year Estimates

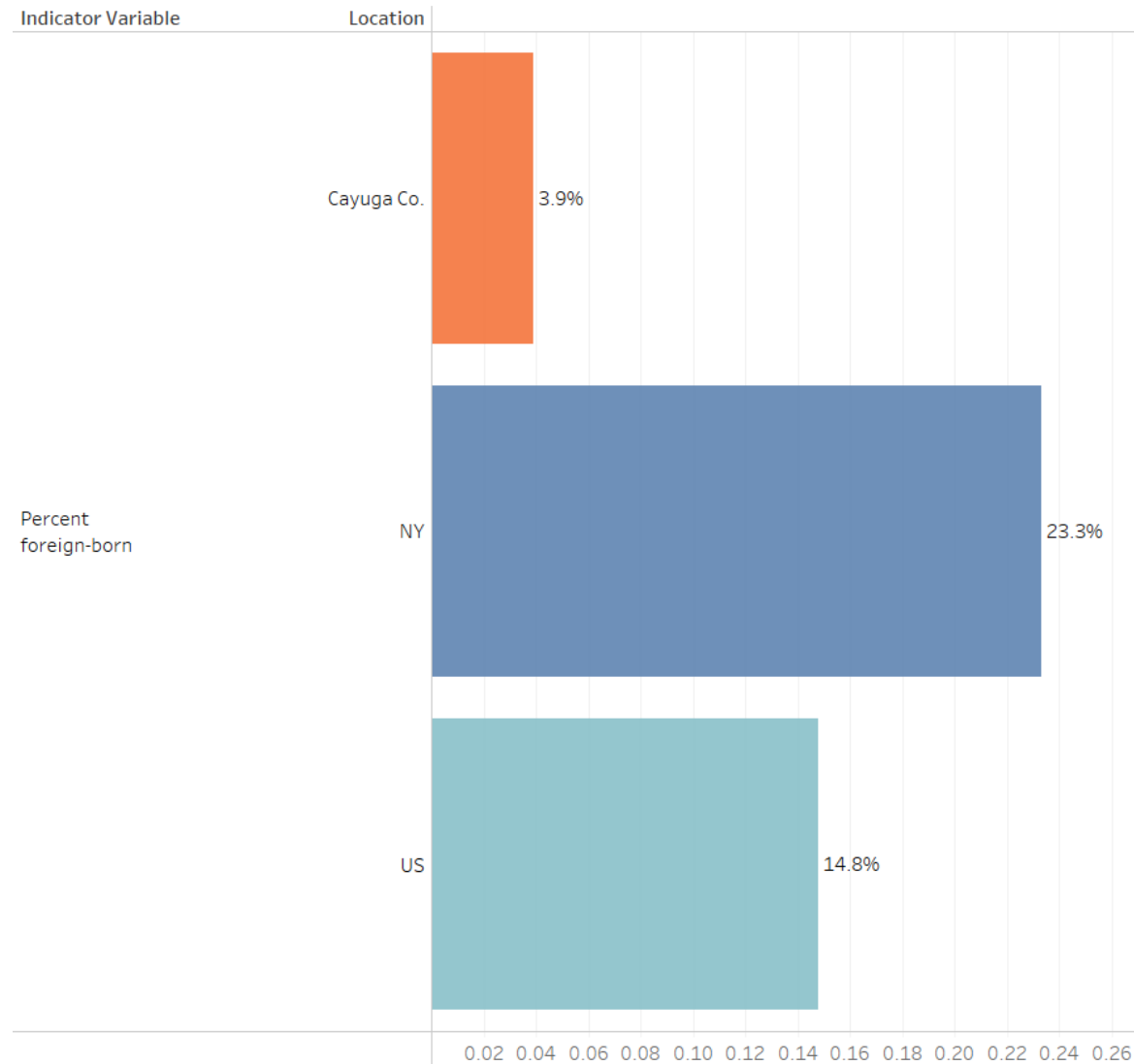


IMMIGRANT/MIGRANT STATUS



- Only a small percentage of the population in Cayuga County is foreign-born at 3.9% compared to 23.3% in New York state, and 14.8% nationally.

Foreign-Born Population



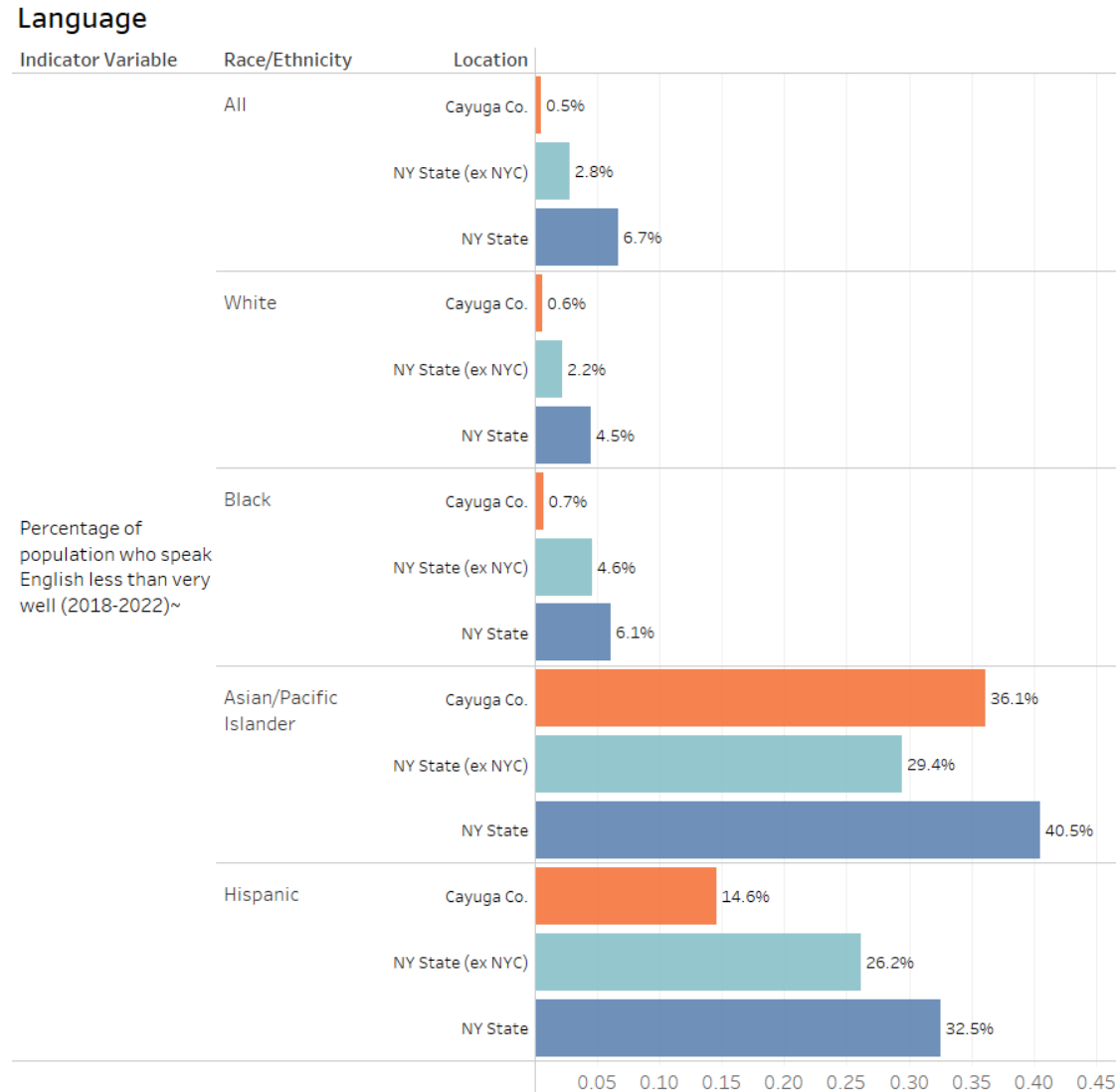
Source: 2024 American Community Survey 1-Year Estimates



POPULATION DEMOGRAPHICS: LANGUAGE



- Overall, only 0.5% of the population of Cayuga County has difficulty speaking English.
- Among racial and ethnic categories, Asian/Pacific Islander and Hispanic populations have higher percentages of people who speak English less than very well, at 36.1% and 14.6%, respectively.



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

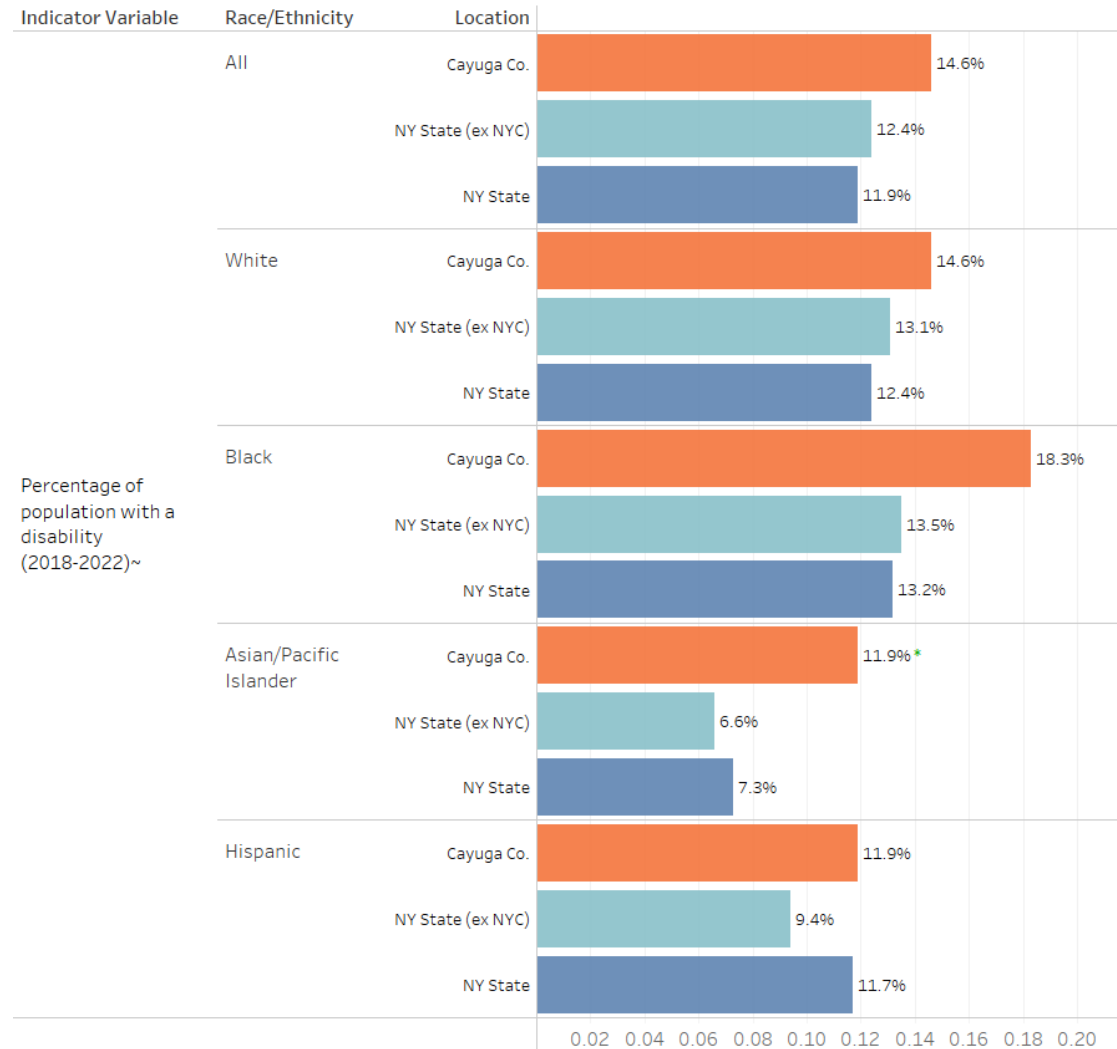


POPULATION DEMOGRAPHICS: DISABILITY



- The county has a higher percentage of disabled residents (14.6%) compared to state benchmarks.
- Percentages are higher than state and national benchmarks among each of the racial and ethnic population cohorts, particularly for Black residents.

Disability



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

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~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

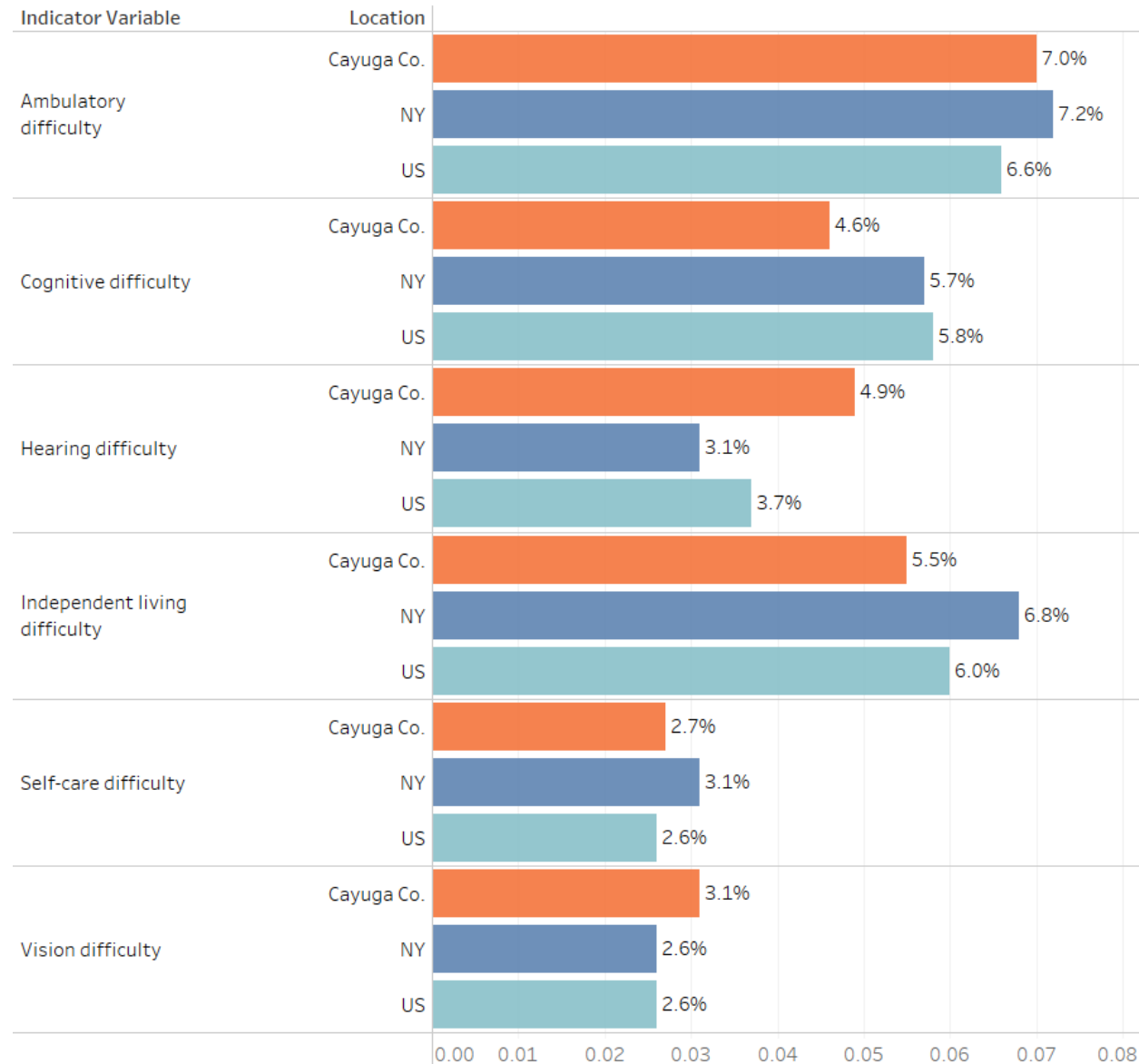


DISABILITY POPULATIONS

- Hearing and vision difficulties are higher than state and national benchmarks for Cayuga County residents, which may be due to the higher percentage of older residents compared to state benchmarks.



Disability



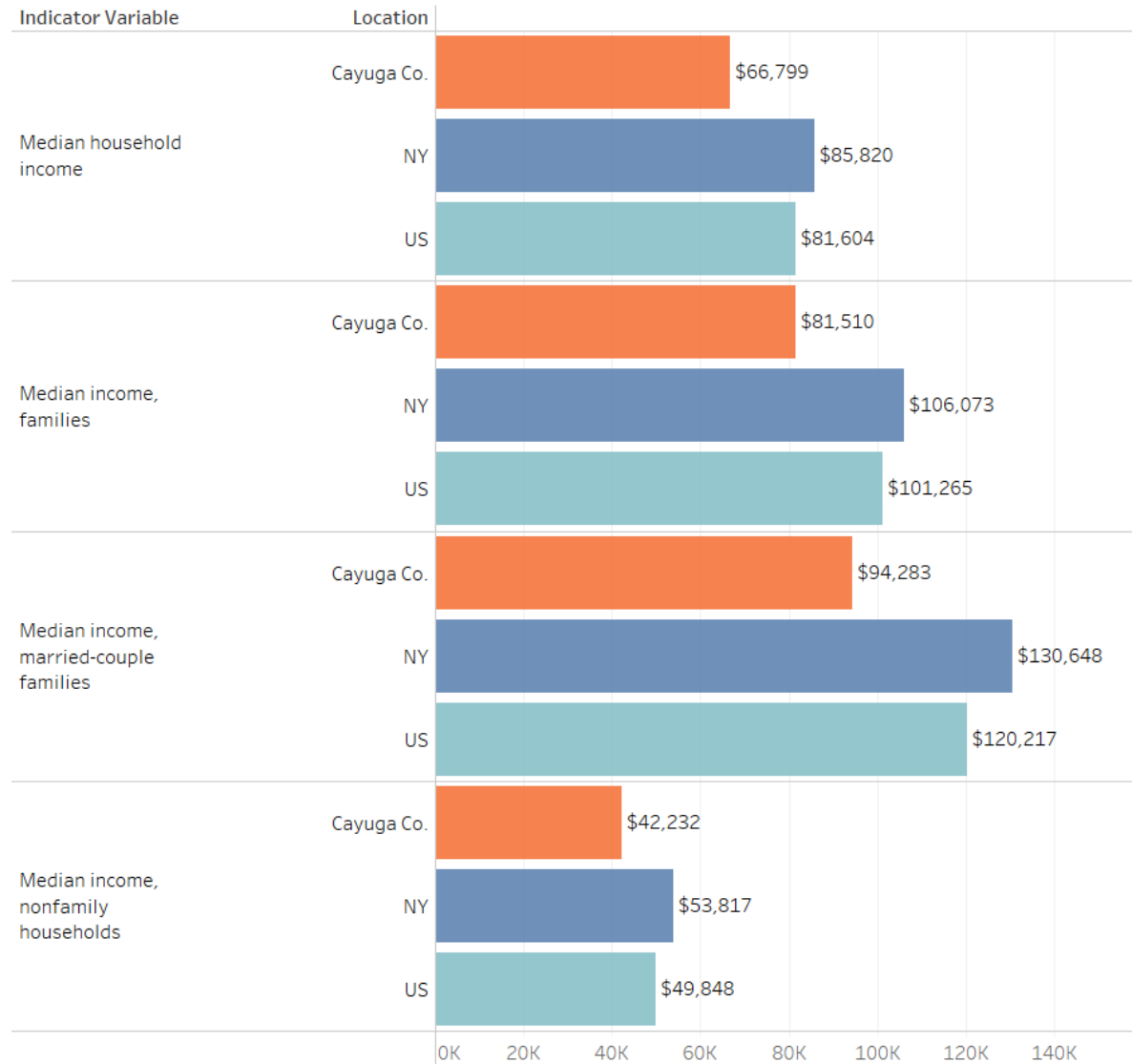
Source: 2024 American Community Survey 1-Year Estimates

INCOME: MEDIAN INCOMES



- Median household income overall is lower than state and national benchmarks, including among families, married-couple families, and nonfamily households

Income and Earnings



2024 American Community Survey 1-Year Estimates

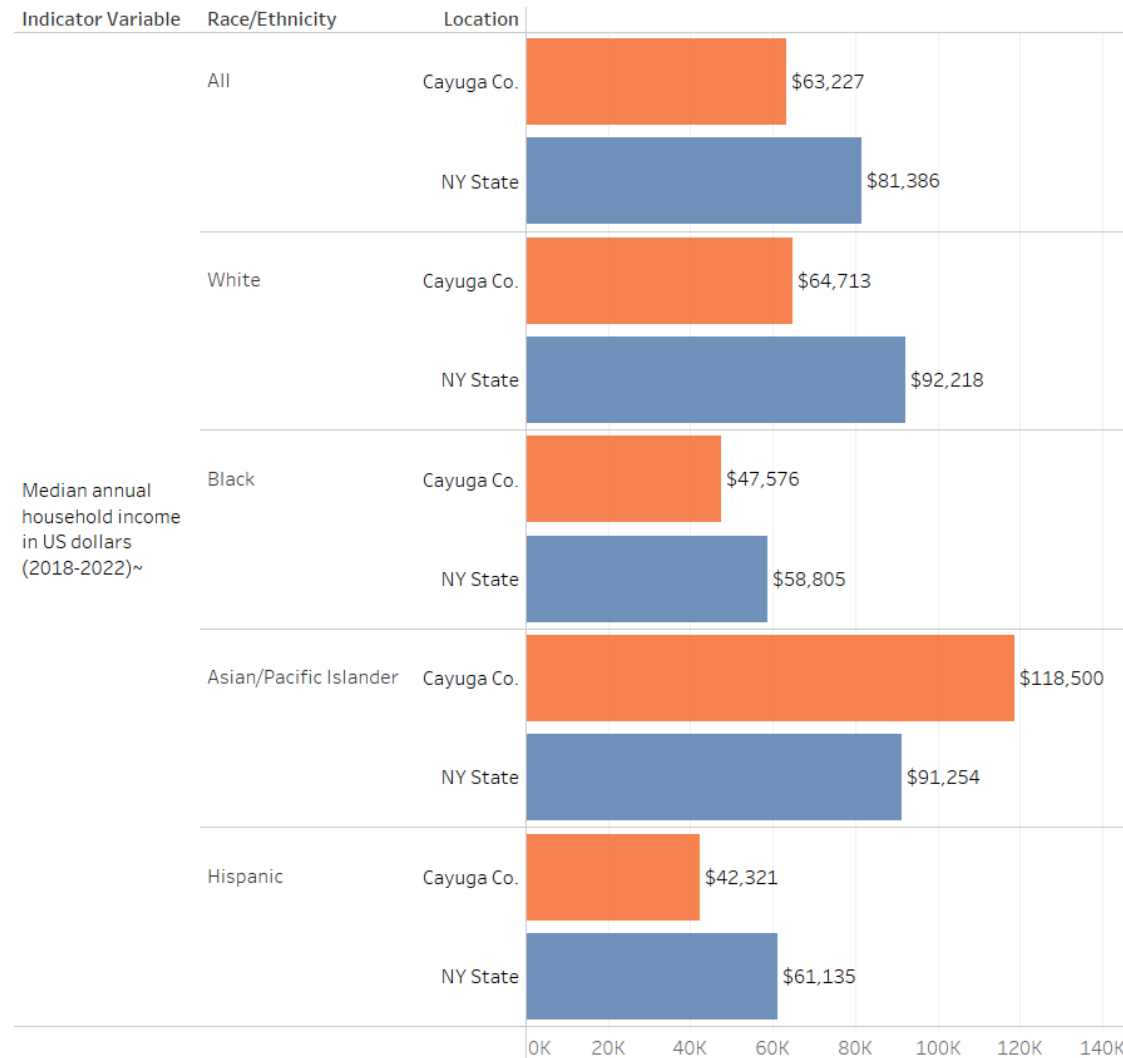


INCOME: MEDIAN INCOME BY RACE/ETHNICITY



- Compared to the state benchmark, income across all racial/ethnic groups is lower in Cayuga County, except for Asian/Pacific Islander residents.
- Median income is a useful indicator for assessing the level of poverty within a community.

Median Income



NY County Health Indicators by Race and Ethnicity (CHIRE)

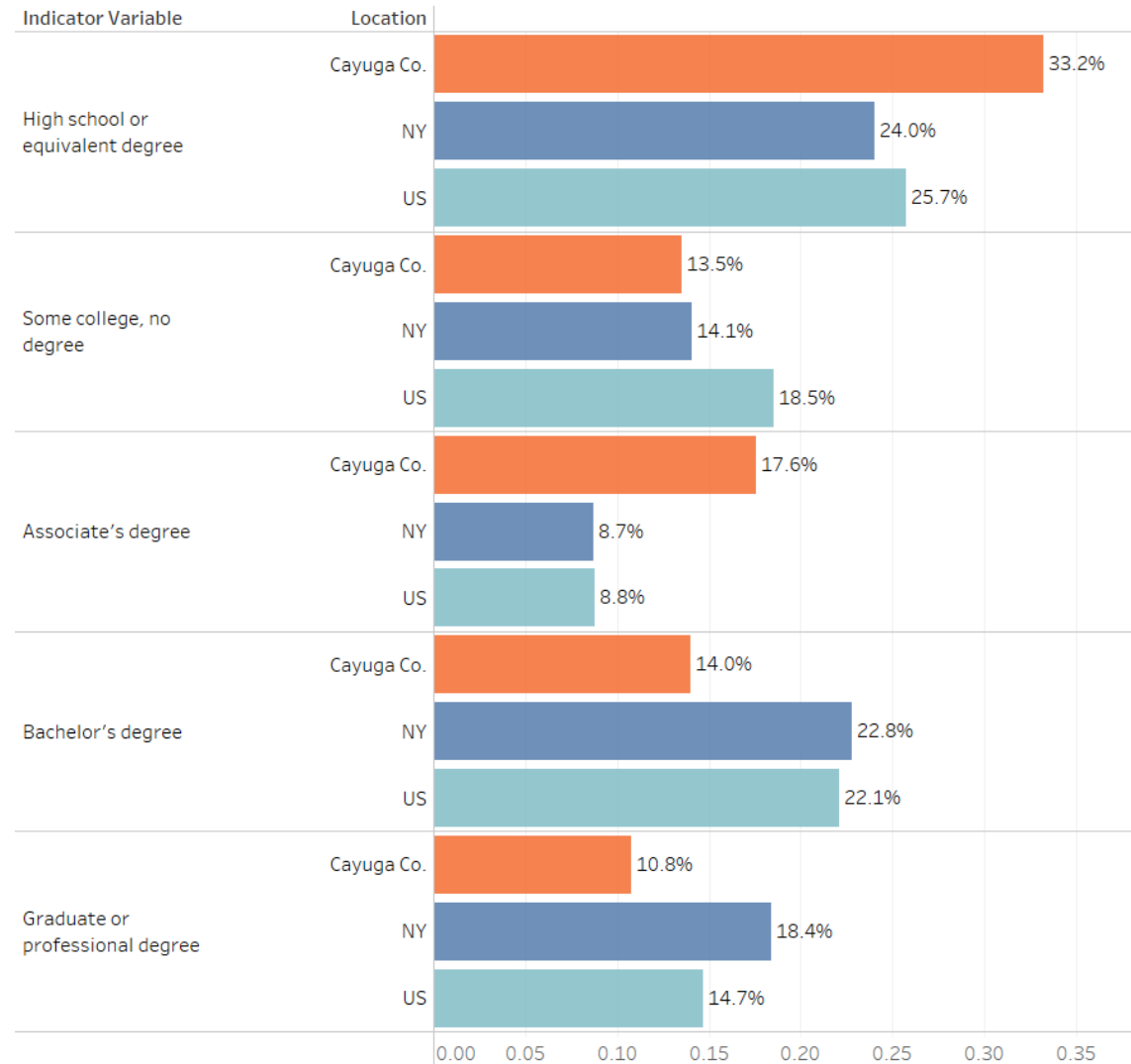


EDUCATIONAL ATTAINMENT



- Cayuga County has a higher proportion of residents whose highest level of education is a high school diploma or equivalent at 33.2% compared to 24% for New York State, with fewer residents holding bachelor's or graduate/professional degrees.

Attainment



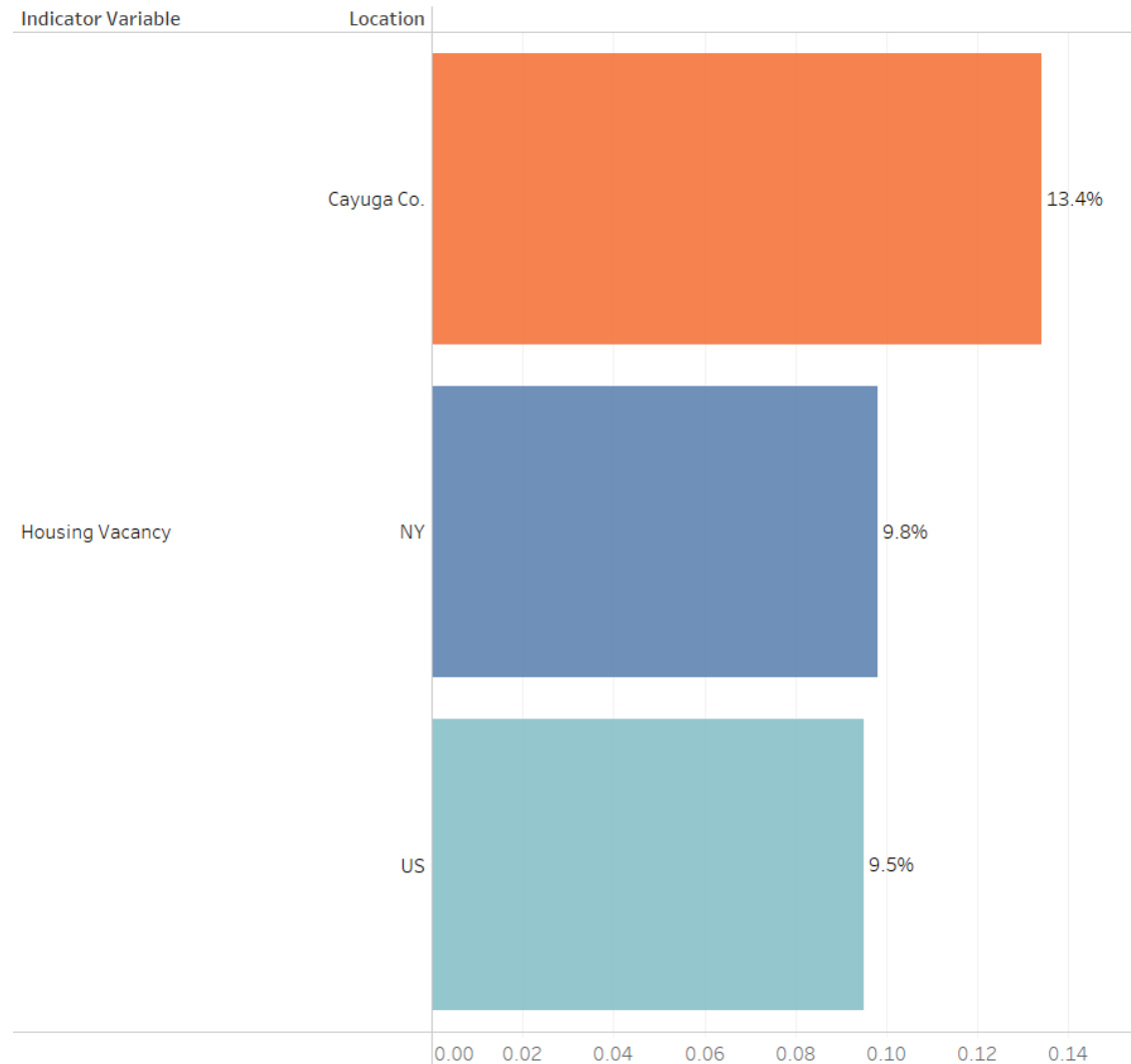
Source: 2024 American Community Survey 1-Year Estimates



HOUSING STABILITY

- The availability of housing in Cayuga County is greater on average than state and national benchmarks.
- Higher housing vacancy can indicate weak demand in the market, oversupply, or unappealing housing conditions.

Housing Vacancy



Source: 2024 American Community Survey 1-Year Estimates

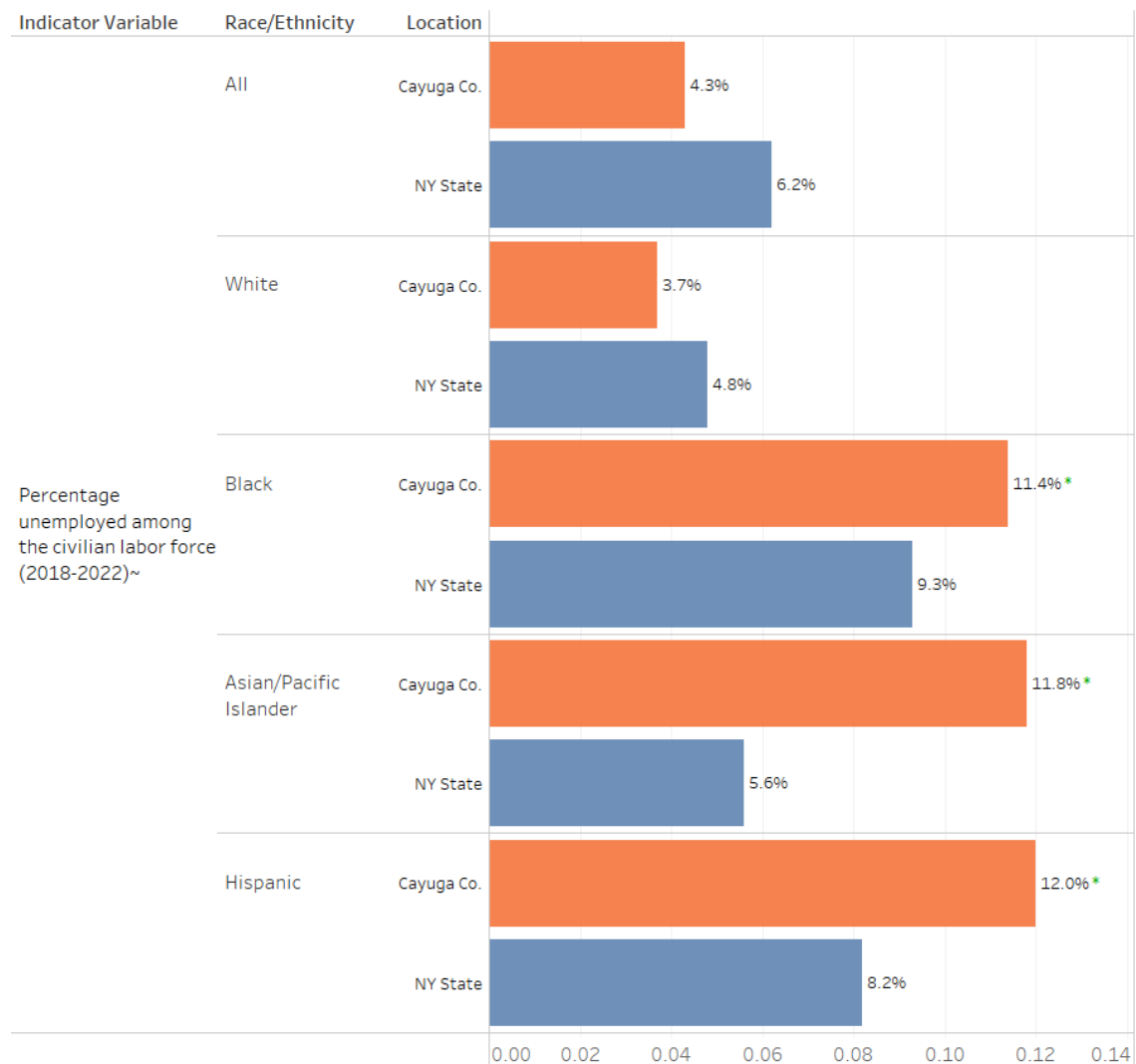


EMPLOYMENT STATUS

- Unemployment rates for all residents are lower than state benchmarks.
- However, the unemployment rate for Black, Asian/Pacific Islander, and Hispanic residents is much higher than the state benchmark.



Employment



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).



HEALTH INSURANCE STATUS

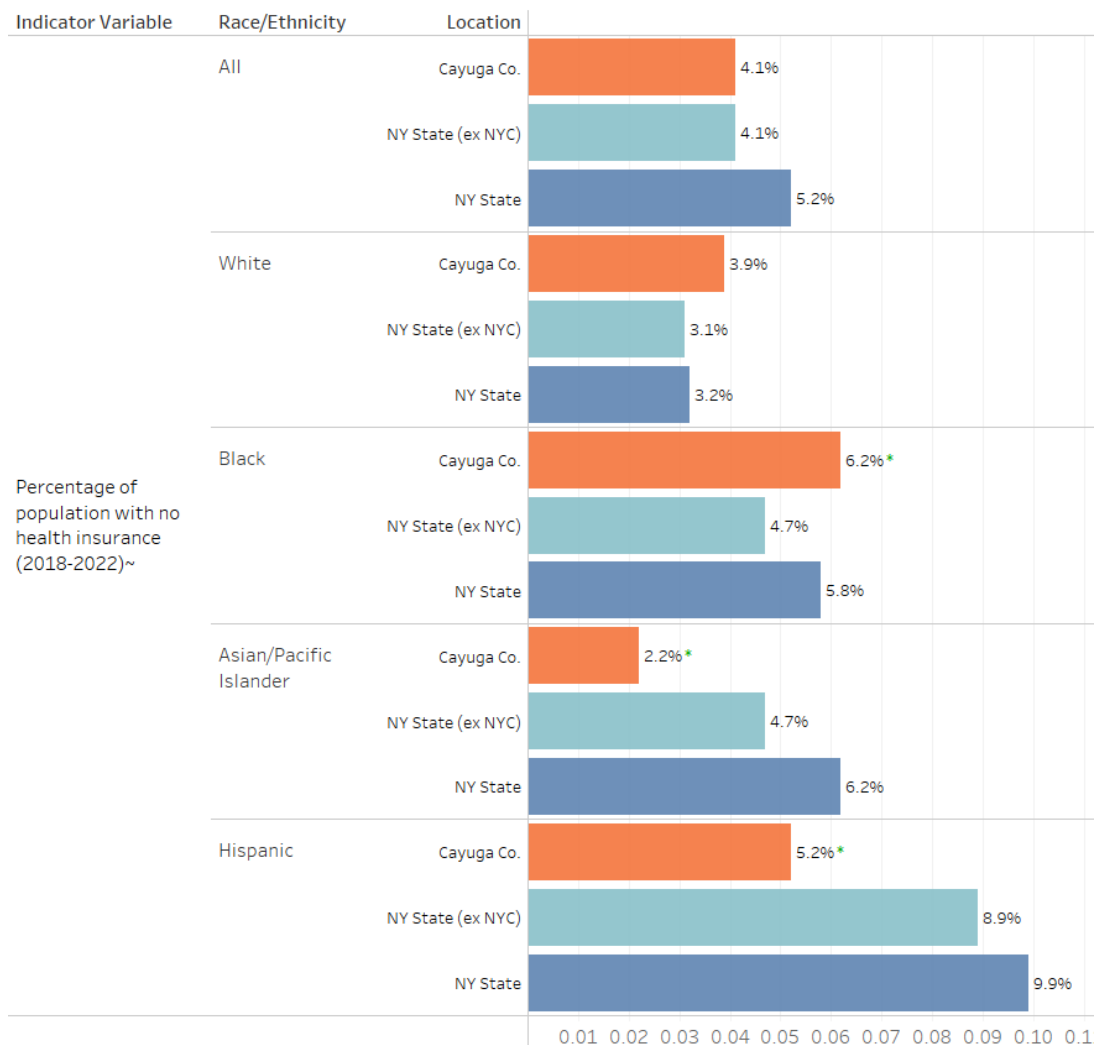


- Across all cohorts, the percentage of uninsured residents is comparable to the state average (excluding New York City); however, when stratified by race and ethnicity, uninsured rates are higher among White and Black residents.

“Many individuals cannot afford the deductibles that are required so therefore defer care that is needed as a result.”

– Survey Respondent

Insurance



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

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~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).



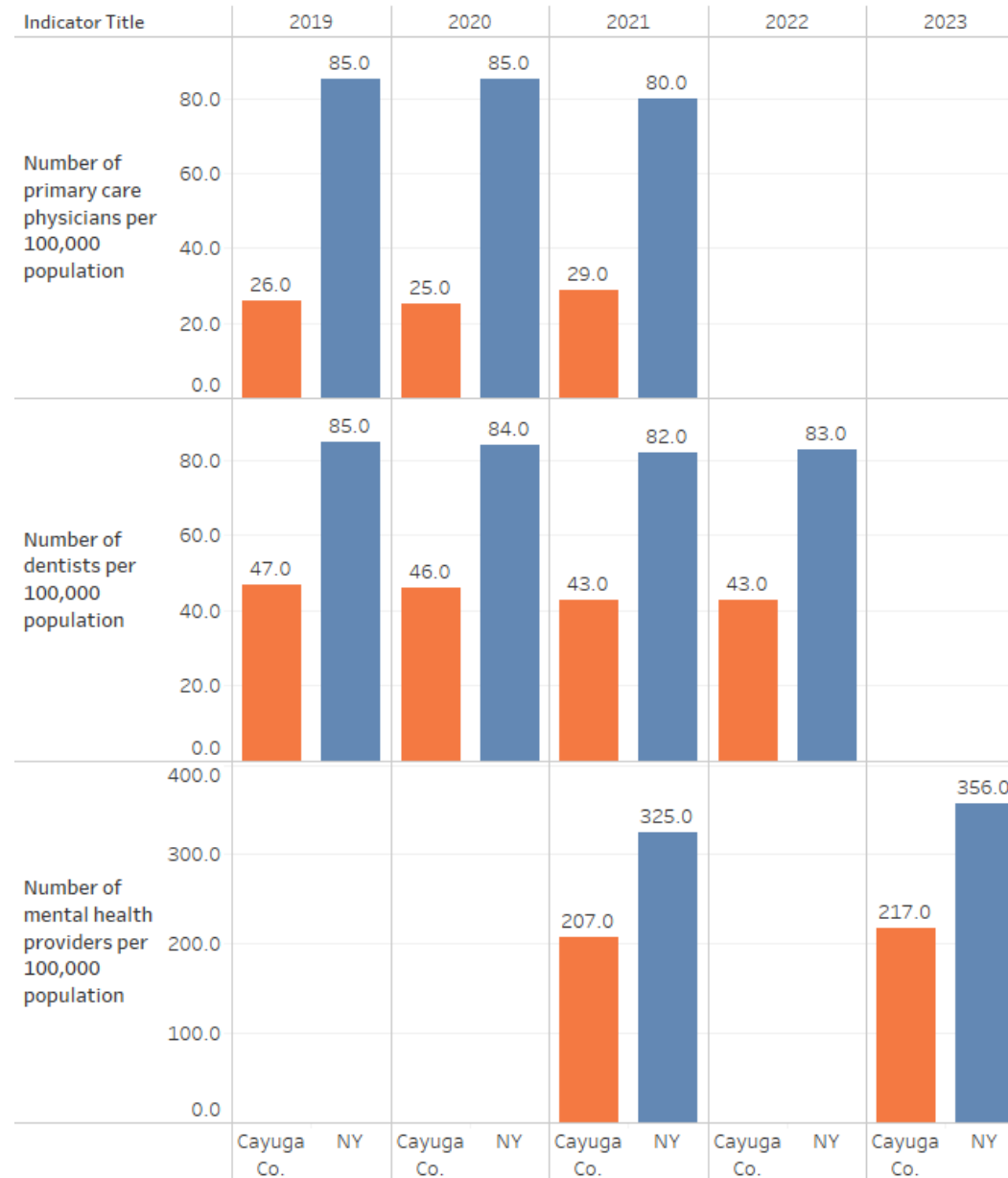
ACCESS TO REGULAR CARE

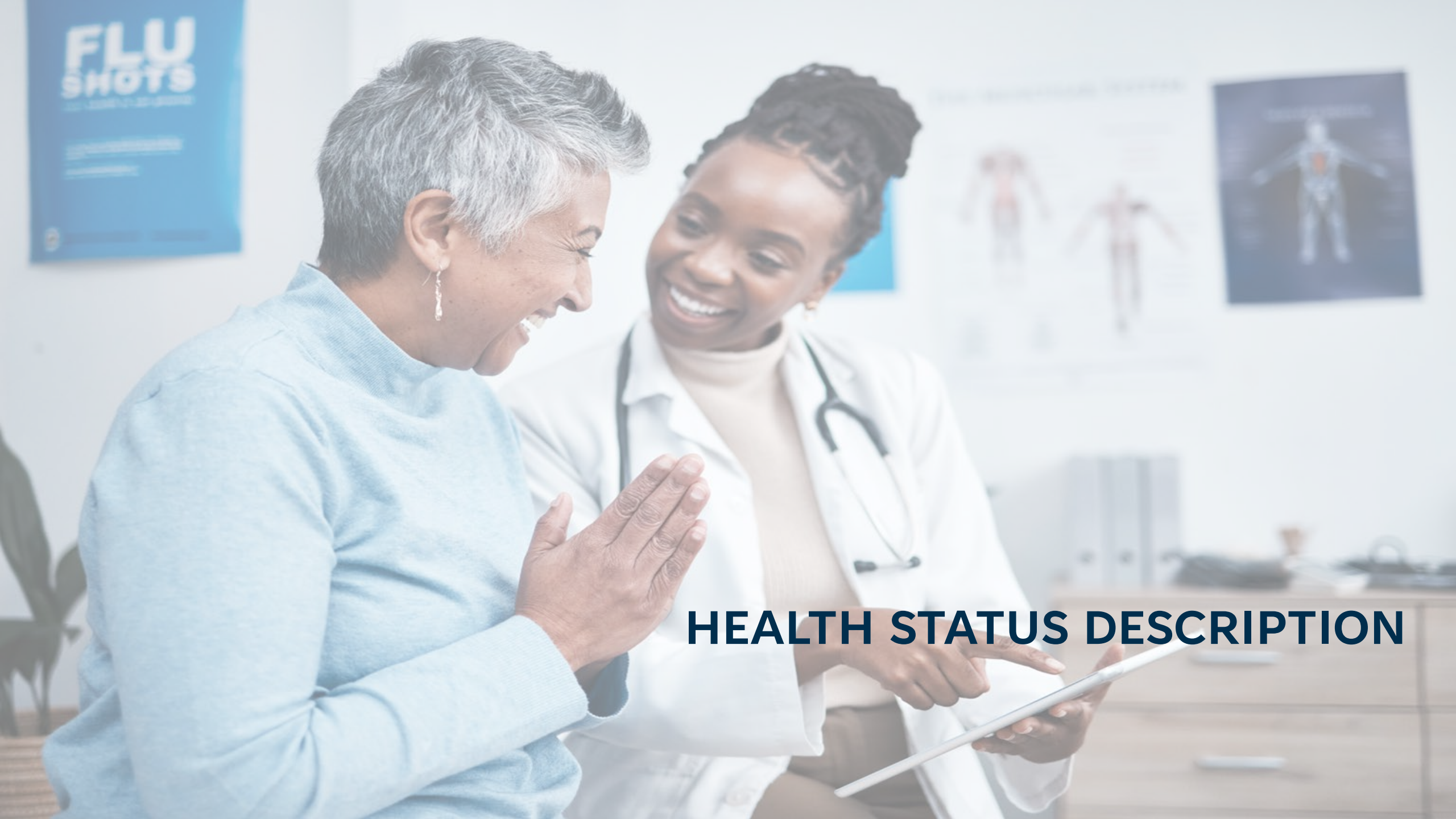
- Cayuga County has much lower rates of primary care physicians, dentists, and mental health providers per 100,000 population compared to the New York state benchmark.

***“Outside of Auburn,
access to services is
a challenge.”***

- Survey Respondent

Health Status and Social Determinants of Health





HEALTH STATUS DESCRIPTION



DATA SOURCES

The data informing this assessment consisted of both primary and secondary sources, as listed below. Where possible, data provided by New York State or Cayuga County, New York, were used.

Primary Data

- Interviews with community stakeholders
- Community-wide survey results
- Discussions with Auburn Community Hospital leadership and administrative team

Secondary Data

- *New York State data sources*
 - New York County Health Indicators by Race and Ethnicity (CHIRE)
 - New York Behavioral Risk Factor Surveillance System (BRFSS) Health Indicators by County and Region
 - New York State Prevention Agenda Dashboard
 - New York State Community Health Indicator Reports (CHIRS)
 - CayugaCatalyst.org
 - Cayuga County Sheriff
- *Non-New York State data sources*
 - Centers for Medicare and Medicaid Services (CMS)
 - American Community Survey (ACS)
 - United States Census Bureau
 - National Center for Education Statistics
 - United States Department of Agriculture
 - Claritas
 - Federal Bureau of Investigation Unified Crime Reports
 - Health Resources and Services Administration (HRSA)



DATA COLLECTION

Primary Data collection methods included developing an online survey that was opened on October 14, 2025, and closed on December 8, 2025. Response data was downloaded on or around December 10, 2025. Where necessary, weighted averages were used to present results, with N/A responses filtered out to avoid skewing the averages.

Additionally, remote interviews were offered to 21 people, selected by ACH staff as representatives of various health-related interests and constituencies within Cayuga County. These qualitative interviews were used by Stroudwater to better understand the community's personal opinions on its health status and challenges.

Anonymous quotes from these interviews and the open-ended response questions in the survey have been included in this document as appropriate.

Secondary Data collection methods involved accessing and downloading data from New York State web resources for Community Health Assessments, including 2025-2030 Prevention Agenda data indicators for Cayuga County, as well as other publicly available data from national sources like the U.S. Census. For a small portion of the analysis, Claritas, a commercial dataset purchased by Stroudwater, was used. Where possible, the most recent data available was used. Initial data downloads began in October 2025 and continued through December 2025 with the release of the 2025-2030 Prevention Agenda indicators.

Downloaded datasets, in either text or Excel formats, were unedited except to be made readable by data visualization software to create maps, charts, and graphs.



COMMUNITY ENGAGEMENT

Stroudwater Associates, on behalf of Auburn Community Hospital (“ACH”), created a 37-question online survey, which was distributed to Cayuga County residents through social media posts, the ACH website, word of mouth, and a marketing campaign run by ACH.

Surveys were available in both English and Spanish. The survey was open for responses from October 14, 2025, through December 8, 2025. At the close of the survey, 88 community members had responded. In addition, ACH identified 12 people for in-person interviews with Stroudwater. These interviewees included community leaders, hospital leadership, public safety, physicians, and other health leaders.

Slot	Title	Person 1	Person 2	Person 3
1	Auburn Community Hospital Leadership	Scott Berlucchi		
2	Community Members	Jack Hardy	Elane Daly	
3	Community Services Group 1		Laurie Piccolo	Lauren Walsh
4	Community Services Group 2	Debbie Patrick	Brian Hartwell	Brenda Wiemann
5	City of Auburn Manager and Fire Chief	Jenny Haines	Mark Fritz	
6	Auburn Community Hospital Medical Staff	Dr. Jamie Syrett	Dr. Sultan Ripon	
7	Finger Lakes Community Health	Ellen Hey		
8	Cayuga Community Health Network	Shari Weiss		
9	Auburn Veterans Administration Clinic	Dr. Christian Holcomb		
10	Cayuga County Health Department	Kathleen Cuddy		
11	Cayuga County Sherriff	Brian Schenck		
12	East Hill Medical Center/CHAD counseling	April Miles	JoLynn Mulholland	
13	Auburn Chief of Police	Matthew Androsko		
14	YMCA CEO	Scott Sincerbeaux		

Preliminary findings of the assessment were shared with the ACH leadership, staff, and board of directors for input and collaboration.

SURVEY RESULTS

SURVEY RESULTS



An online survey helped to capture a broader understanding of the community's perception of healthcare issues and challenges for Cayuga County residents. Auburn Community Hospital distributed the survey via weblink, email, and local postings. Additionally, a QR Code was created and posted for users to easily access the survey from their mobile phones. The survey was open for approximately 90 days. Key facts about the survey respondents include:

- **88** people responded to the survey
- Over **55%** of respondents were between the ages of 45 and 80. **43%** were under age 45.
- **88%** were female
- **95%** were residents of Cayuga County.
- **96%** described themselves as White, 1.3% were Hispanic or Latino, and 1.2% were Multiracial or Multicultural
- **52%** were married, **16%** were single, and **8%** were divorced
- **71%** had employer-sponsored insurance as their primary insurance, **11%** had Medicare, **10%** had Medicaid, and **6%** had privately purchased insurance. None were uninsured
- **30%** of insurance plans were high-deductible plans, although **5%** weren't sure. **35%** said their deductible was between \$1,000 and \$2,999. **15%** said their deductible was \$4,000 or more
- **84%** indicated that their insurance coverage was adequate for their health needs
- **35%** had at least some college education. **59%** had either a bachelor's, post-grad, or doctorate degree
- **81%** reported an annual income of more than \$50,000, and **16%** were less than \$50,000. The highest number of respondents (27) chose \$100,000 - \$150,000 as their annual household income.



SURVEY RESULTS

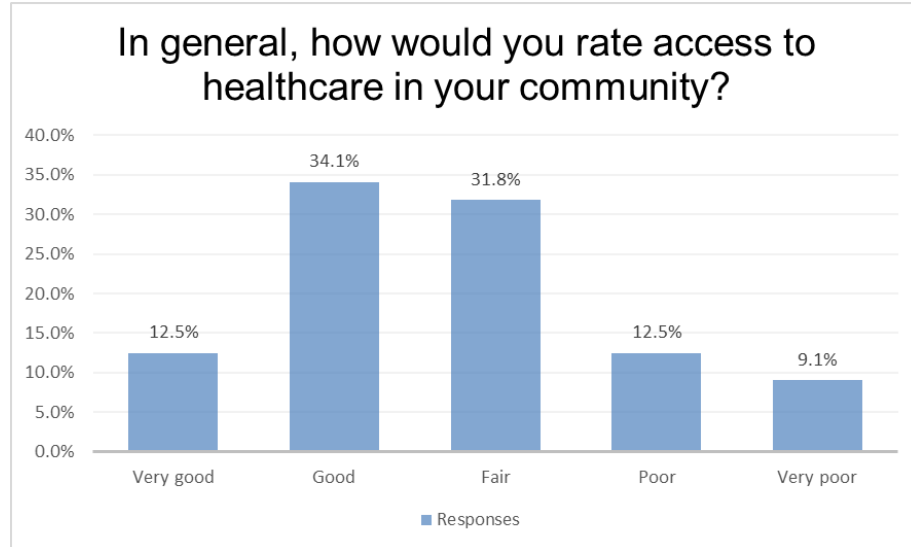


Key Findings
46.6% rate access to healthcare in the community as Good or Very Good
35.2% rate the overall quality of healthcare in the community as Good of Very Good
Among the top least-accessible services in the community were Mental Health Services, Nursing Homes, Hospital/Inpatient Services, and Emergency Room Services
84% have received healthcare services outside of Cayuga County, with 79.7% seeking specialist care, and 54.0% seeking hospital care, and 46% seeking emergency room care. 62% of individuals sought care outside Cayuga County for quality reasons, and 57% did so for specialist care.
70.5% had received care at ACH or its affiliates at some time in the past 12 months. 43.7% indicated they were satisfied or very satisfied with the care they received.
Issues described as major problems in the community are Opioids (such as oxycodone, fentanyl, heroin), Obesity, Anxiety Disorders, Mood Disorders (ex. Depression), and Diabetes
Behavioral Health/Mental Health, Child Care, Poverty, Obesity, and Aging were identified as major health challenges
92.9% percent of respondents said the community needs more healthcare providers. The top providers needed were Primary Care, Behavioral/Mental Health Specialists, Specialist Care, and Dentists.

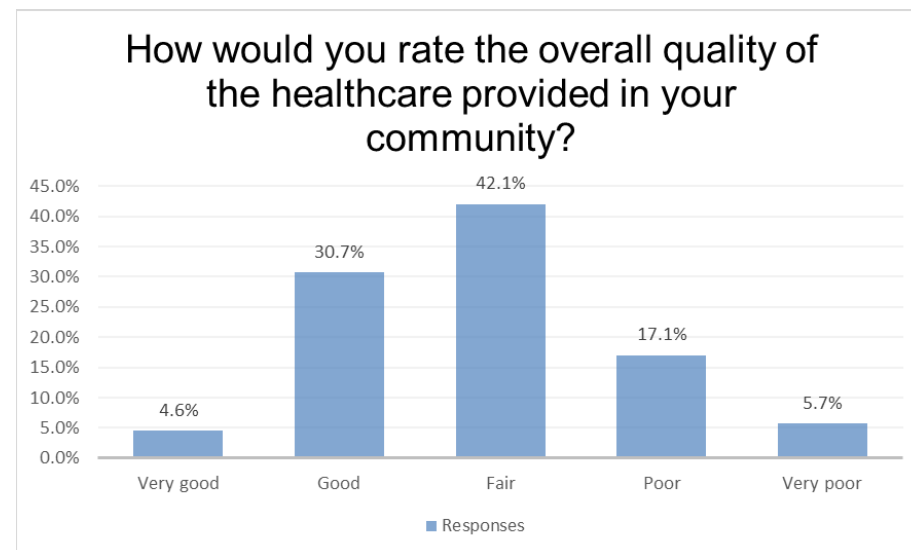




SURVEY RESULTS



Answer Choices	Responses	
Very good	12.5%	11
Good	34.1%	30
Fair	31.8%	28
Poor	12.5%	11
Very poor	9.1%	8
Answered		88
Skipped		0

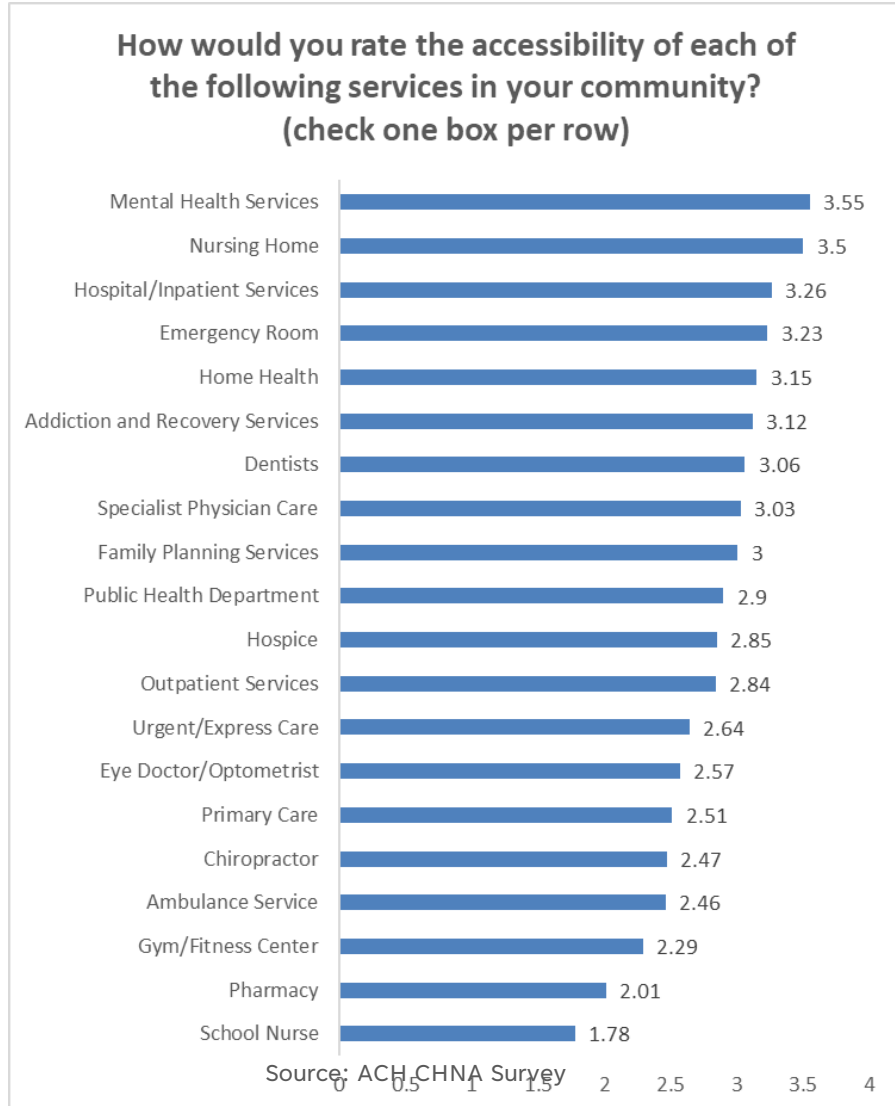


Answer Choices	Responses	
Very good	4.6%	4
Good	30.7%	27
Fair	42.1%	37
Poor	17.1%	15
Very poor	5.7%	5
Answered		88
Skipped		0

Source: ACH CHNA Survey



SURVEY RESULTS



KEY	
Very Poor	5
Poor	4
Fair	3
Good	2
Very Good	1

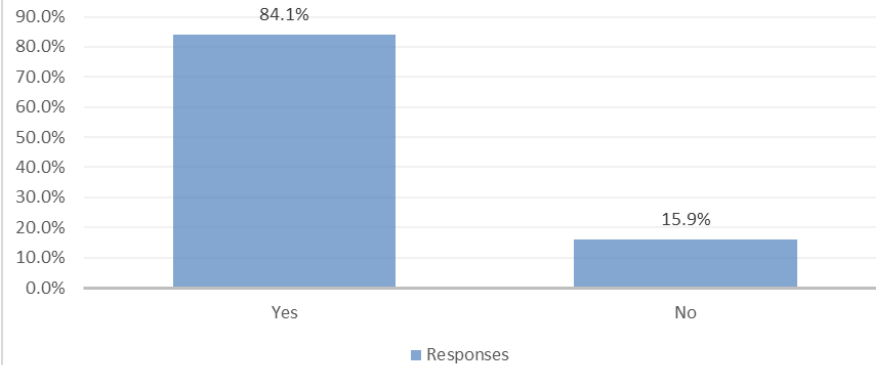
- The higher the weighted average, the poorer the access.



SURVEY RESULTS

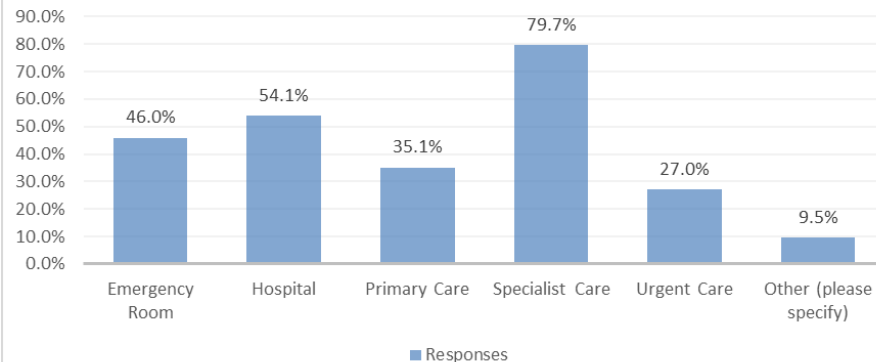


Over the past three years, did you or your household receive health services outside of Cayuga County?



Answer Choices	Responses	
Yes	84.1%	74
No	15.9%	14
Answered		88
Skipped		0

If you answered Yes to Question 4, what types of services did you or your household receive?



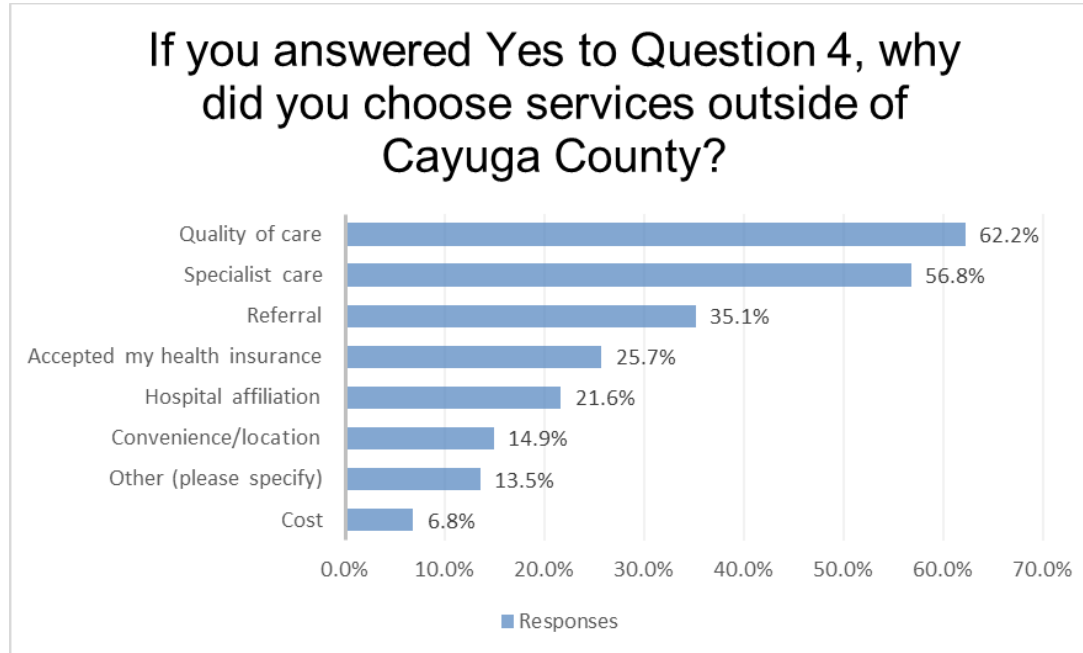
Answer Choices	Responses	
Emergency Room	46.0%	34
Hospital	54.1%	40
Primary Care	35.1%	26
Specialist Care	79.7%	59
Urgent Care	27.0%	20
Other (please specify)	9.5%	7
Answered		74
Skipped		14

Other (please specify)

Often leave the area due to complacency of care provided by ACH services
Dentist
My dentist is in Manlius, New York.
Dentist
Pediatric specialists
Imaging, bone scan, X-ray, mammogram
Open heart surgery

Source: ACH CHNA Survey

SURVEY RESULTS



Source: ACH CHNA Survey

Other (please specify)

I did not like the gastroenterologist in Auburn.

Family discount.

Pediatrician

They had a pediatric specific urgent care

Dr moved out of Cayuga county

Availability an Dr don't want to to listen or the hospital is a death sentence

Recommended by several friends

ACH booked out too far, months ahead vs short time at st joes imaging

No Rheumatologist here

Services not available in Cayuga County

Answer Choices

Responses

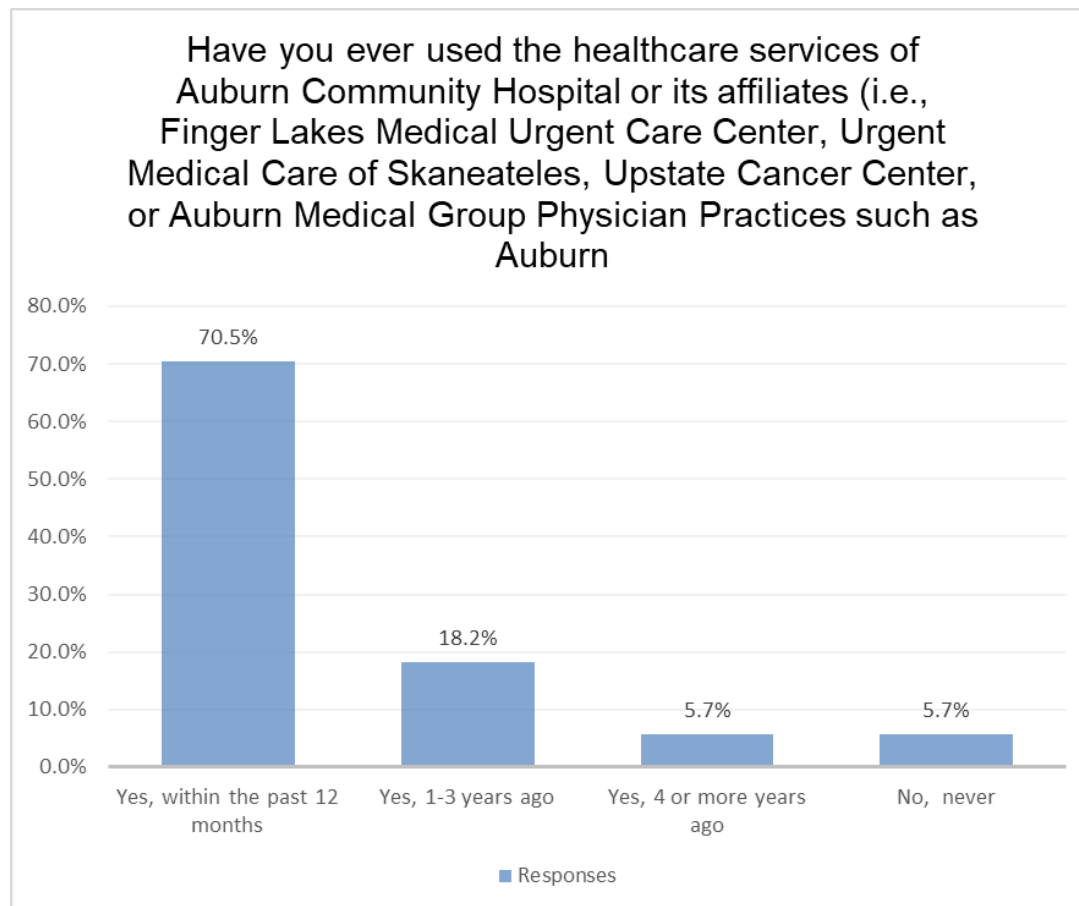
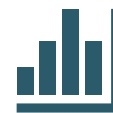
Quality of care	62.2%	46
Specialist care	56.8%	42
Referral	35.1%	26
Accepted my health insurance	25.7%	19
Hospital affiliation	21.6%	16
Convenience/location	14.9%	11
Other (please specify)	13.5%	10
Cost	6.8%	5

Answered 74

Skipped 14



SURVEY RESULTS

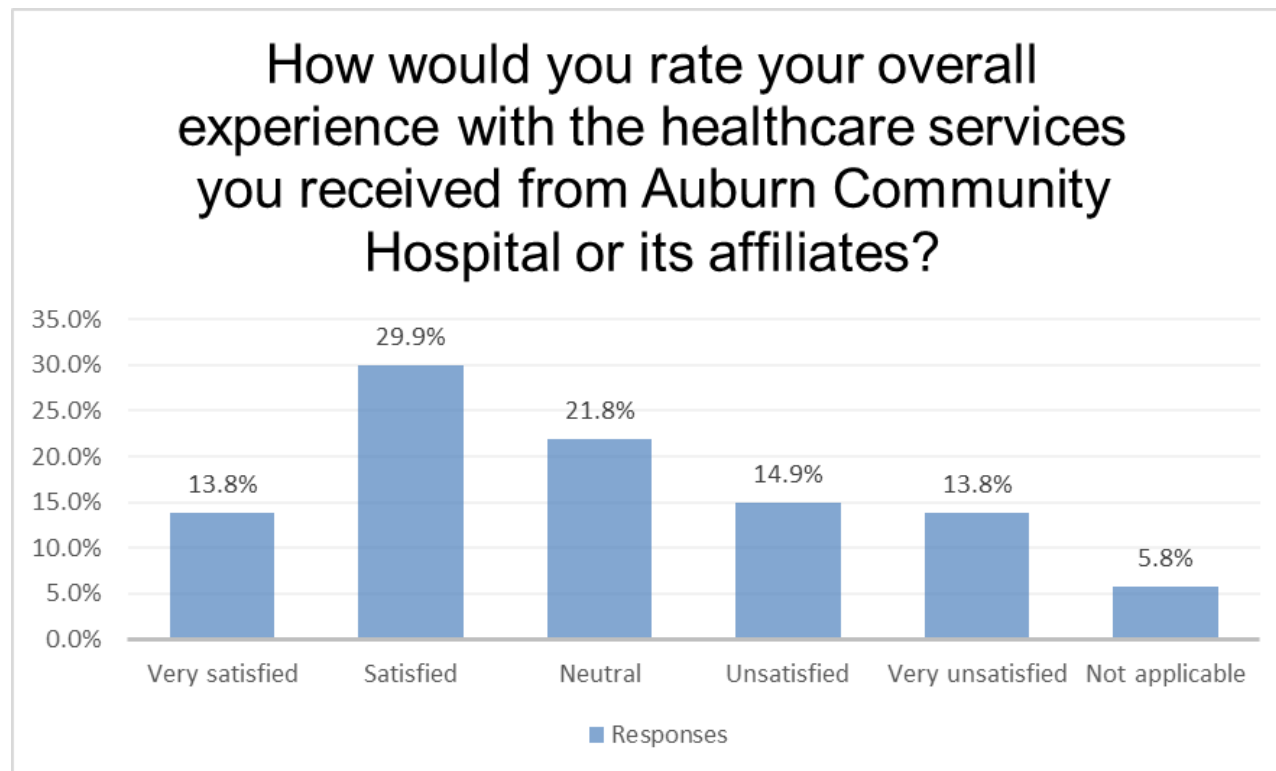
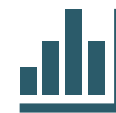


Source: ACH CHNA Survey

Answer Choices	Responses	
Yes, within the past 12 months	70.45%	62
Yes, 1-3 years ago	18.18%	16
Yes, 4 or more years ago	5.68%	5
No, I've never used the health services at Auburn Community Hospital or its affiliates	5.68%	5
Answered		88
Skipped		0



SURVEY RESULTS

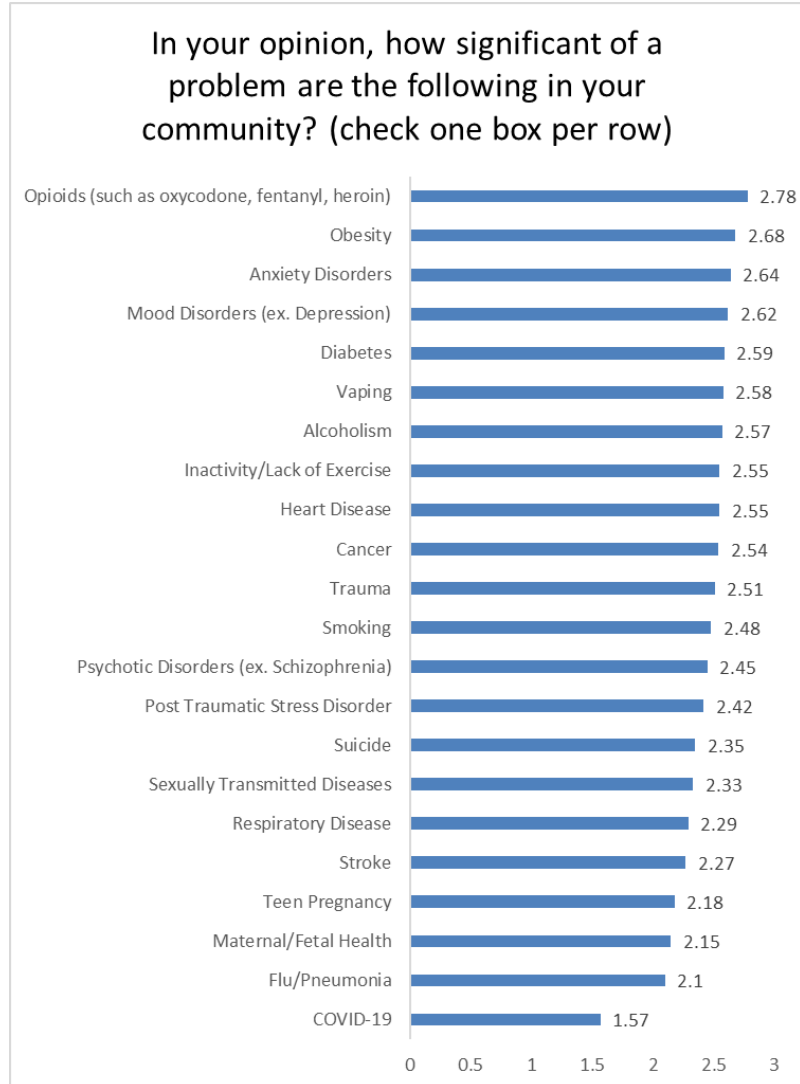


Answer Choices	Responses	
Very satisfied	13.8%	12
Satisfied	29.9%	26
Neutral	21.8%	19
Unsatisfied	14.9%	13
Very unsatisfied	13.8%	12
Not applicable	5.8%	5
Answered		87
Skipped		1

Source: ACH CHNA Survey



SURVEY RESULTS

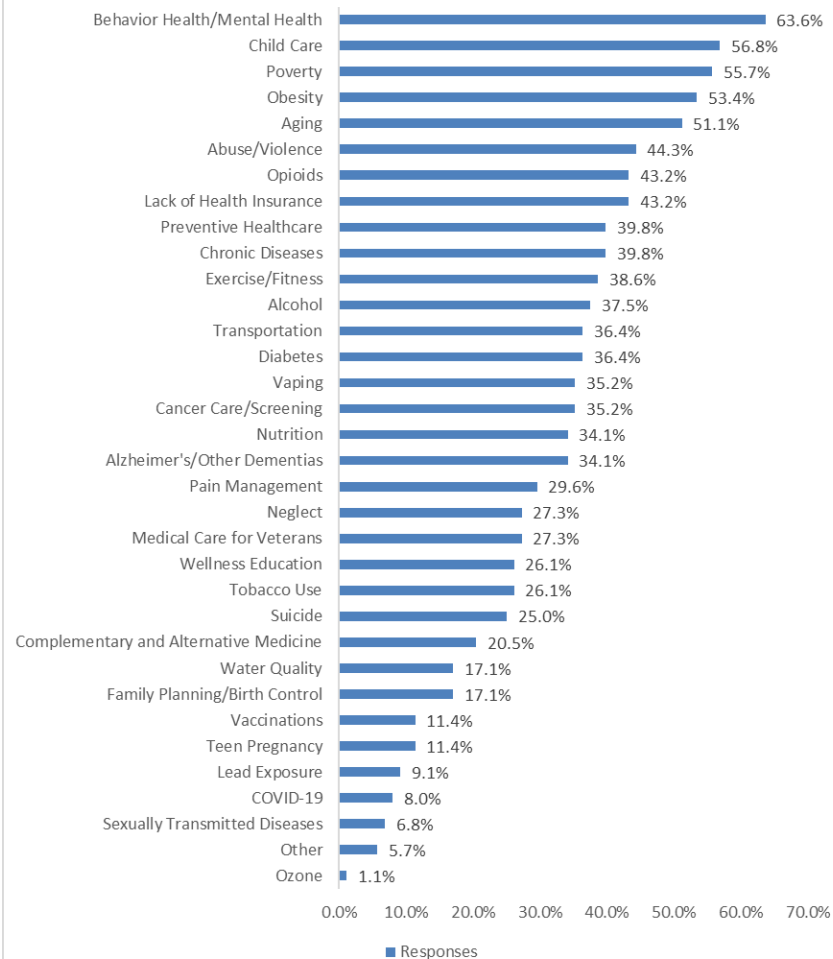


- The higher the weighted average, the more significant the problem.

SURVEY RESULTS



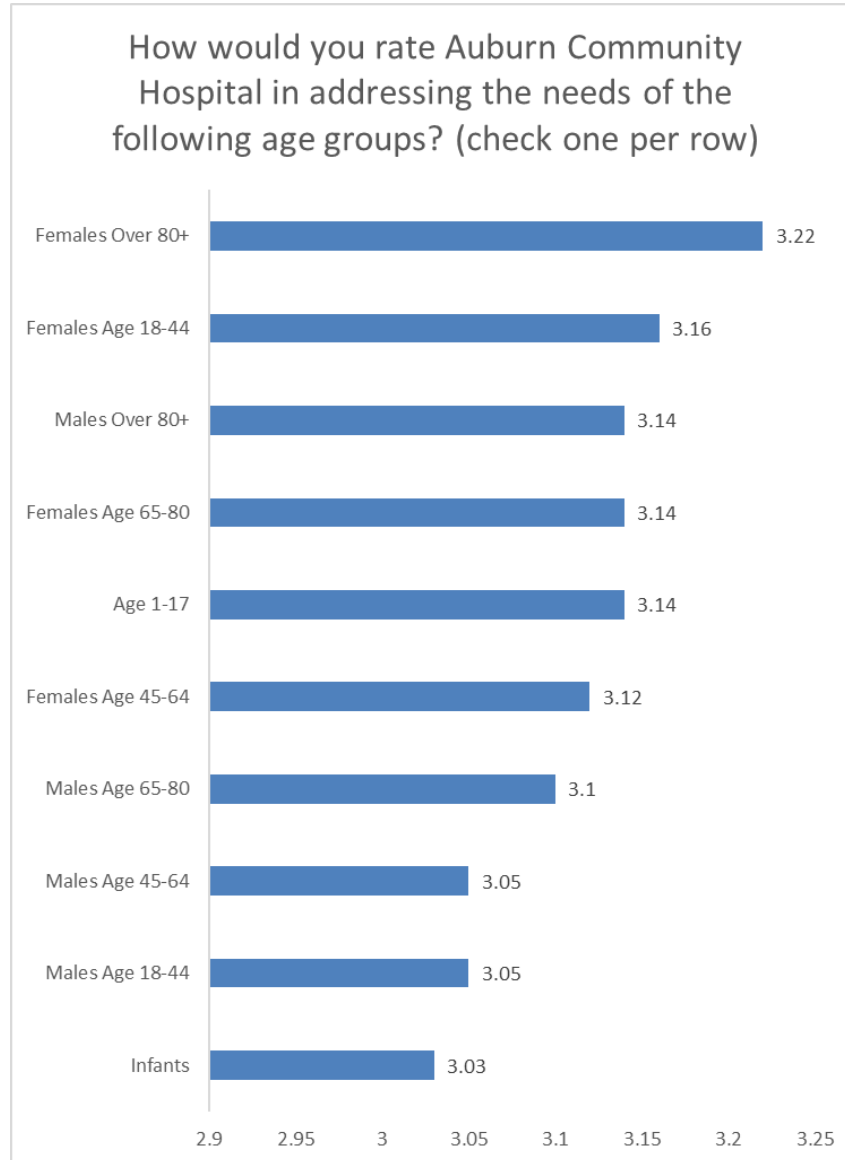
In your opinion, what are the major health challenges facing your community?
(check all that apply)



Source: ACH CHNA Survey



SURVEY RESULTS



- The higher the weighted average, the poorer the rating for addressing needs.

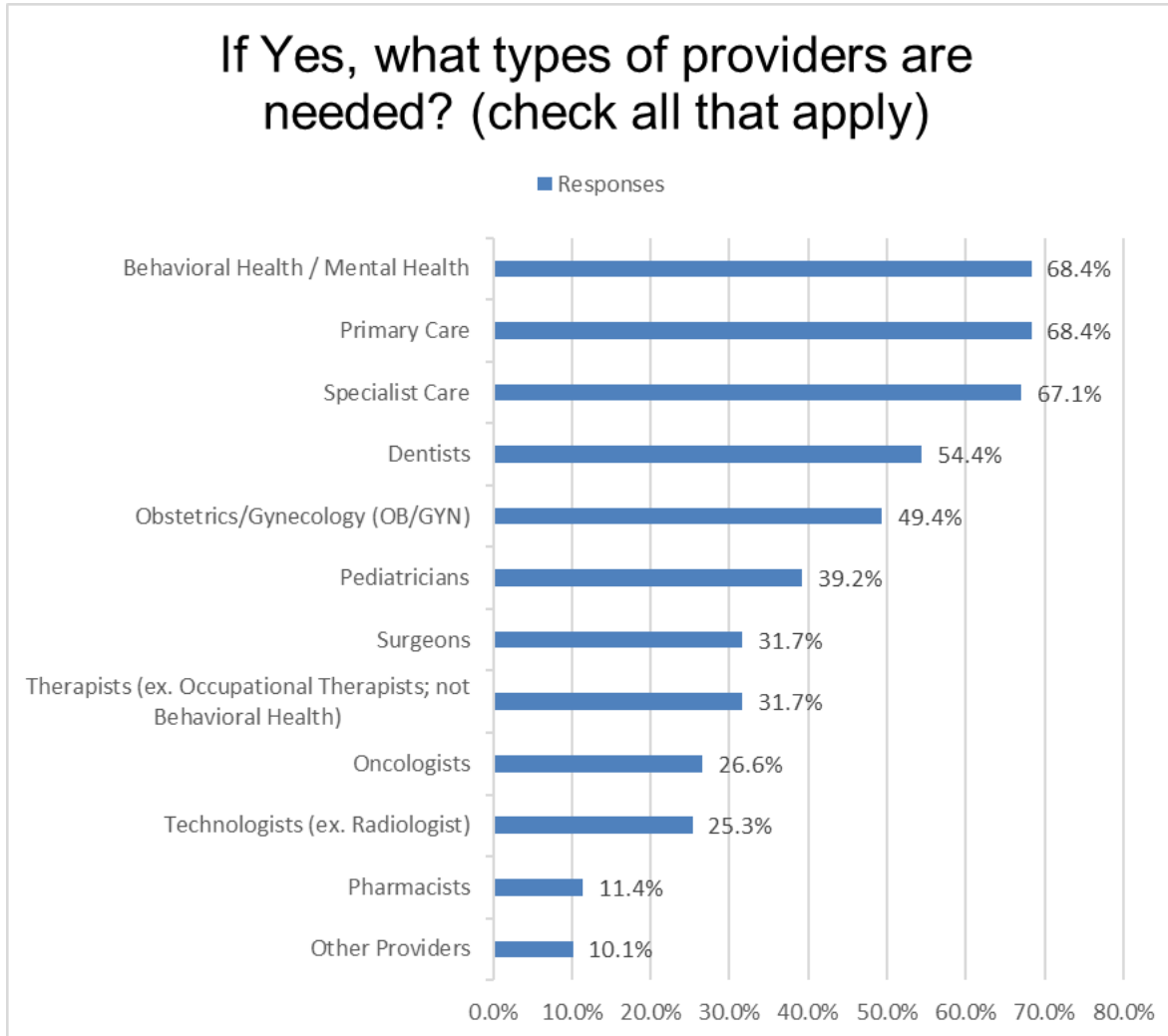
Source: ACH CHNA Survey



SURVEY RESULTS

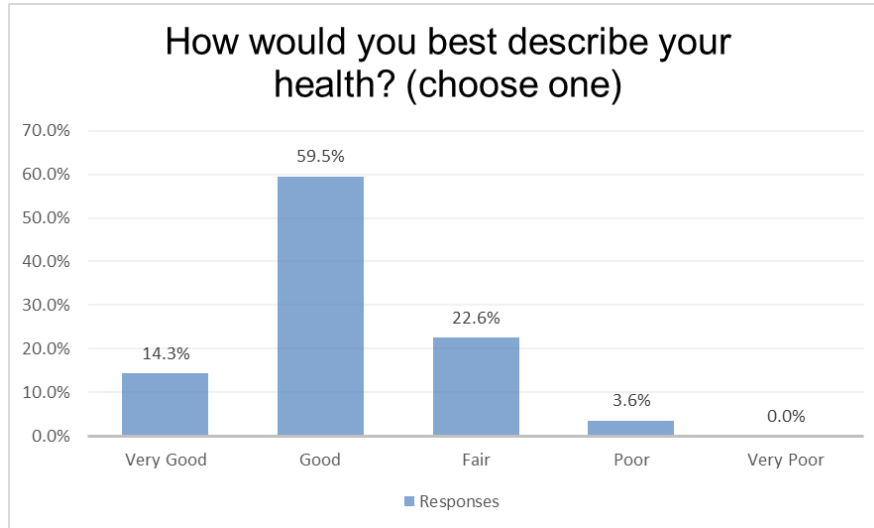


- **92.9%** of respondents answered “Yes” to the question: “Do you think your community needs additional healthcare providers?”

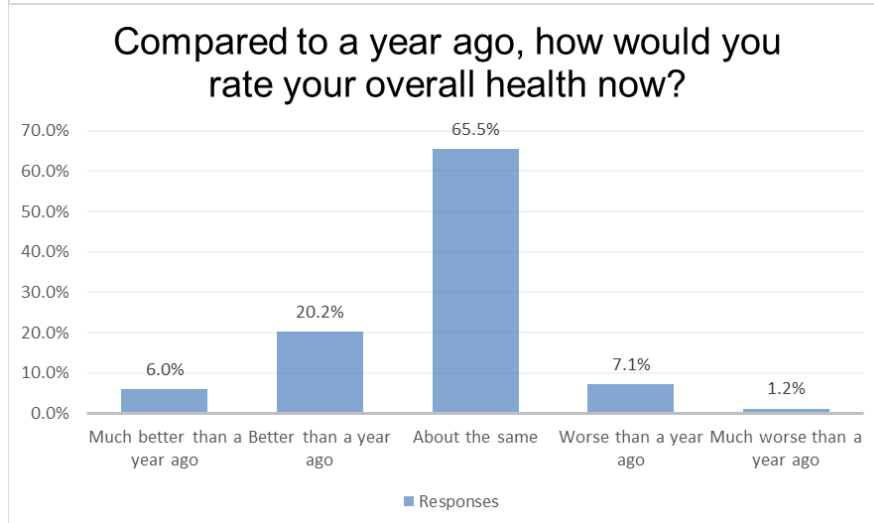


Source: ACH CHNA Survey

SURVEY RESULTS



Answer Choices	Responses	
Very Good	14.3%	12
Good	59.5%	50
Fair	22.6%	19
Poor	3.6%	3
Very Poor	0.0%	0
Answered		84
Skipped		4

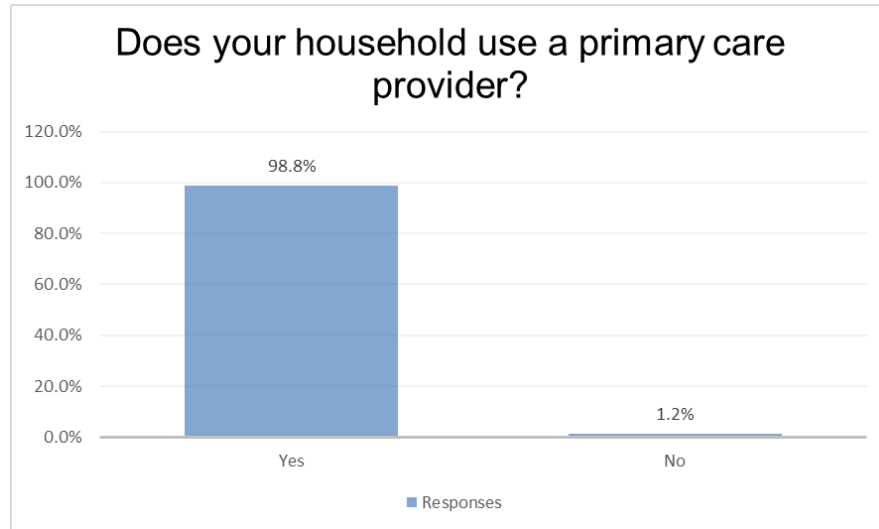


Answer Choices	Responses	
Much better than a year ago	6.0%	5
Better than a year ago	20.2%	17
About the same	65.5%	55
Worse than a year ago	7.1%	6
Much worse than a year ago	1.2%	1
Answered		84
Skipped		4

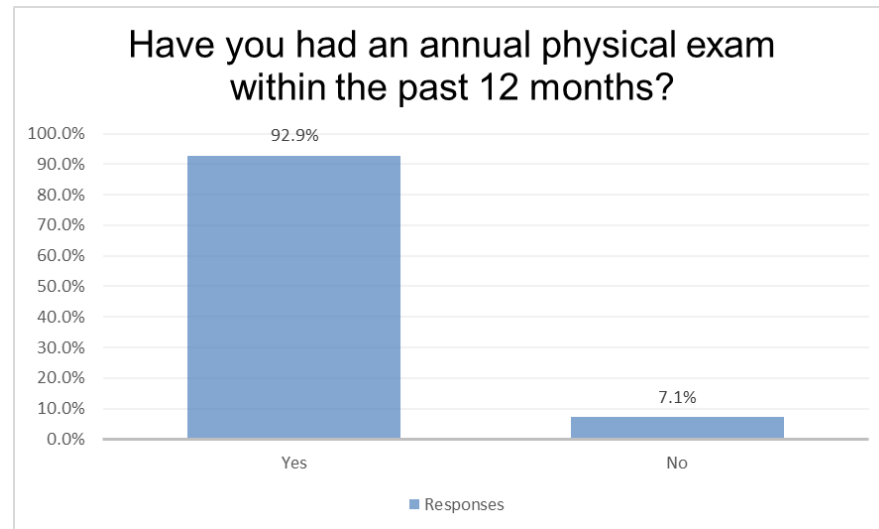




SURVEY RESULTS



Answer Choices	Responses	
Yes	98.8%	83
No	1.2%	1
Answered		84
Skipped		4



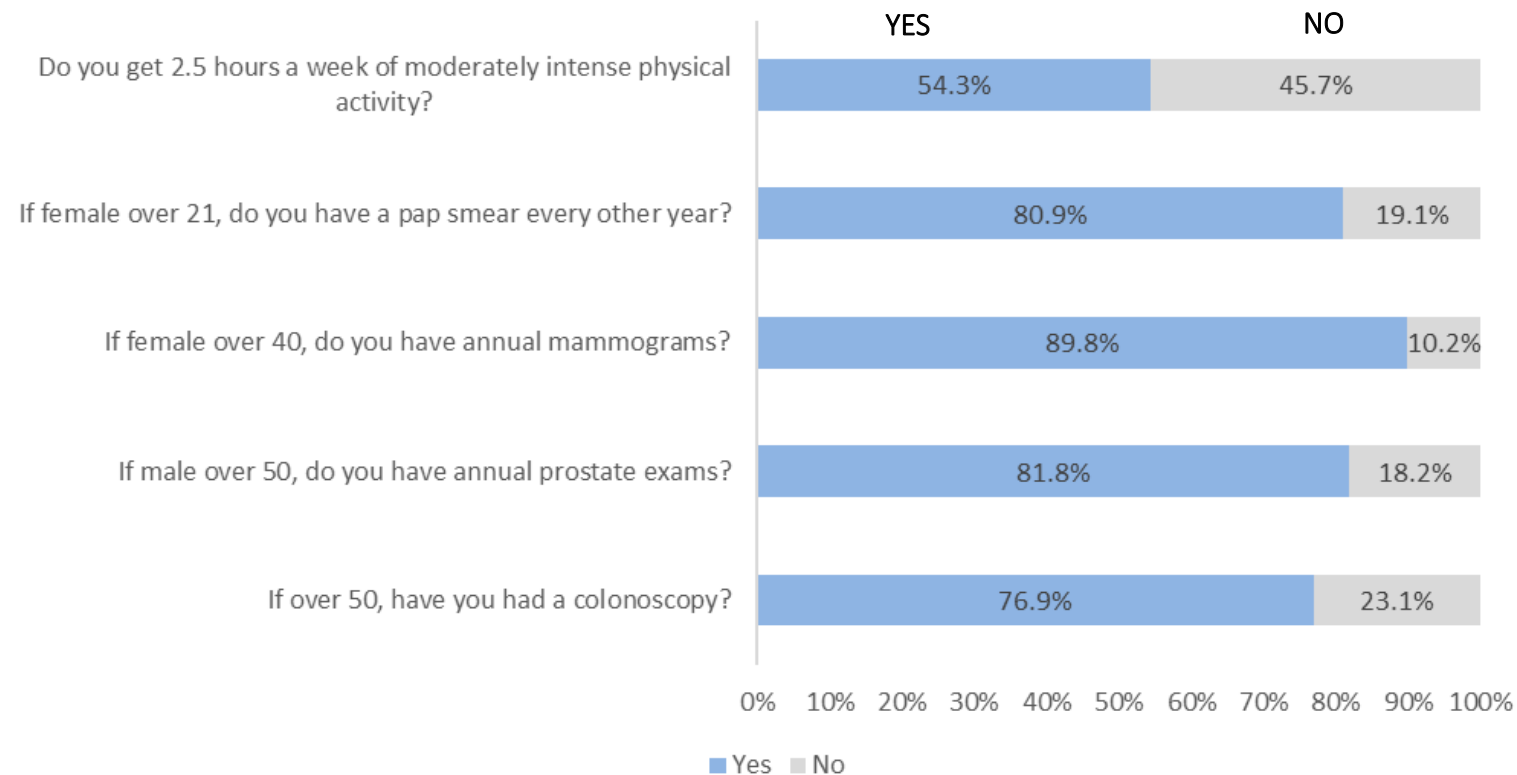
Answer Choices	Responses	
Yes	92.9%	78
No	7.1%	6
Answered		84
Skipped		4



SURVEY RESULTS



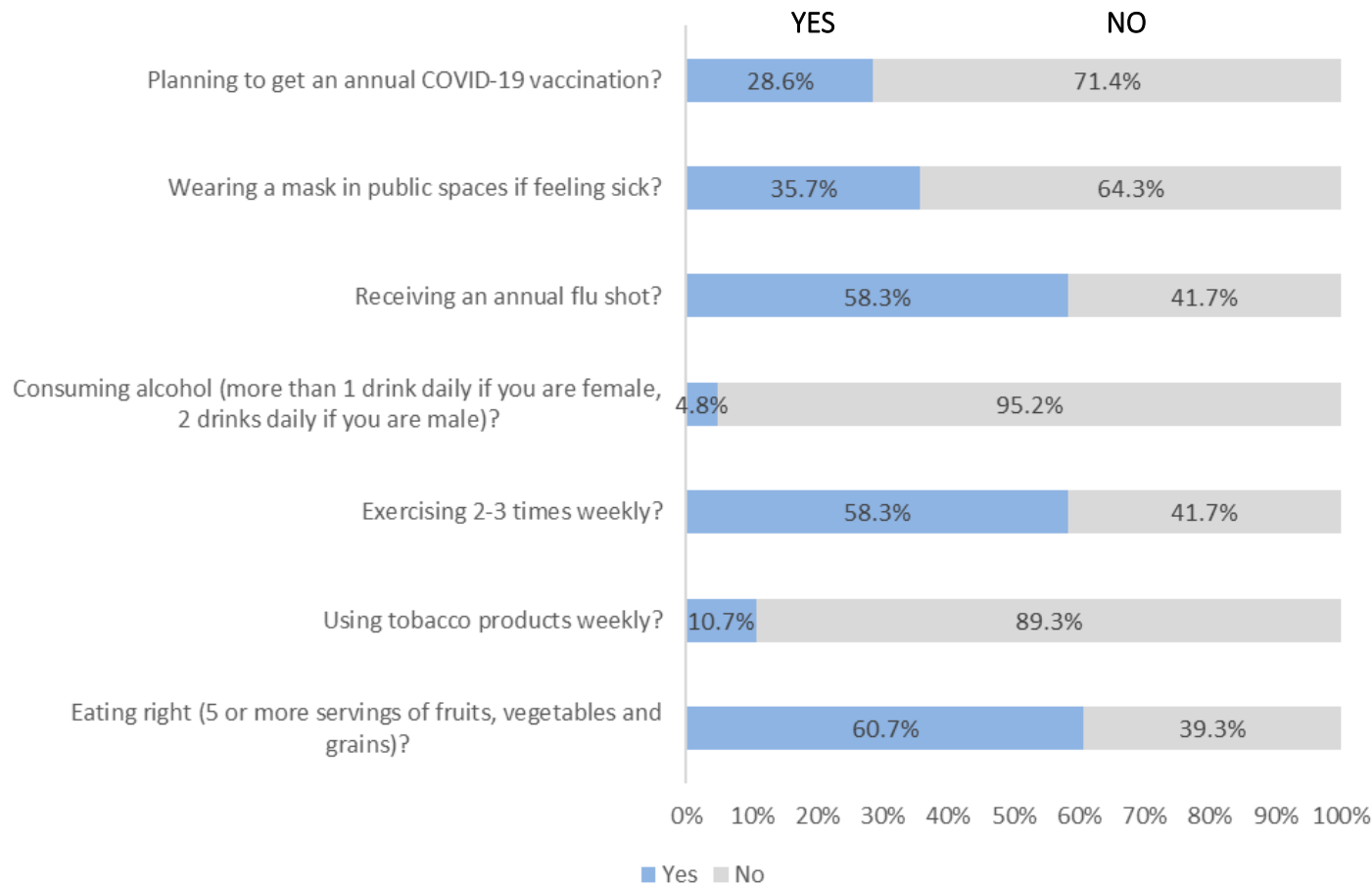
Please answer the following questions. (check one box per row)



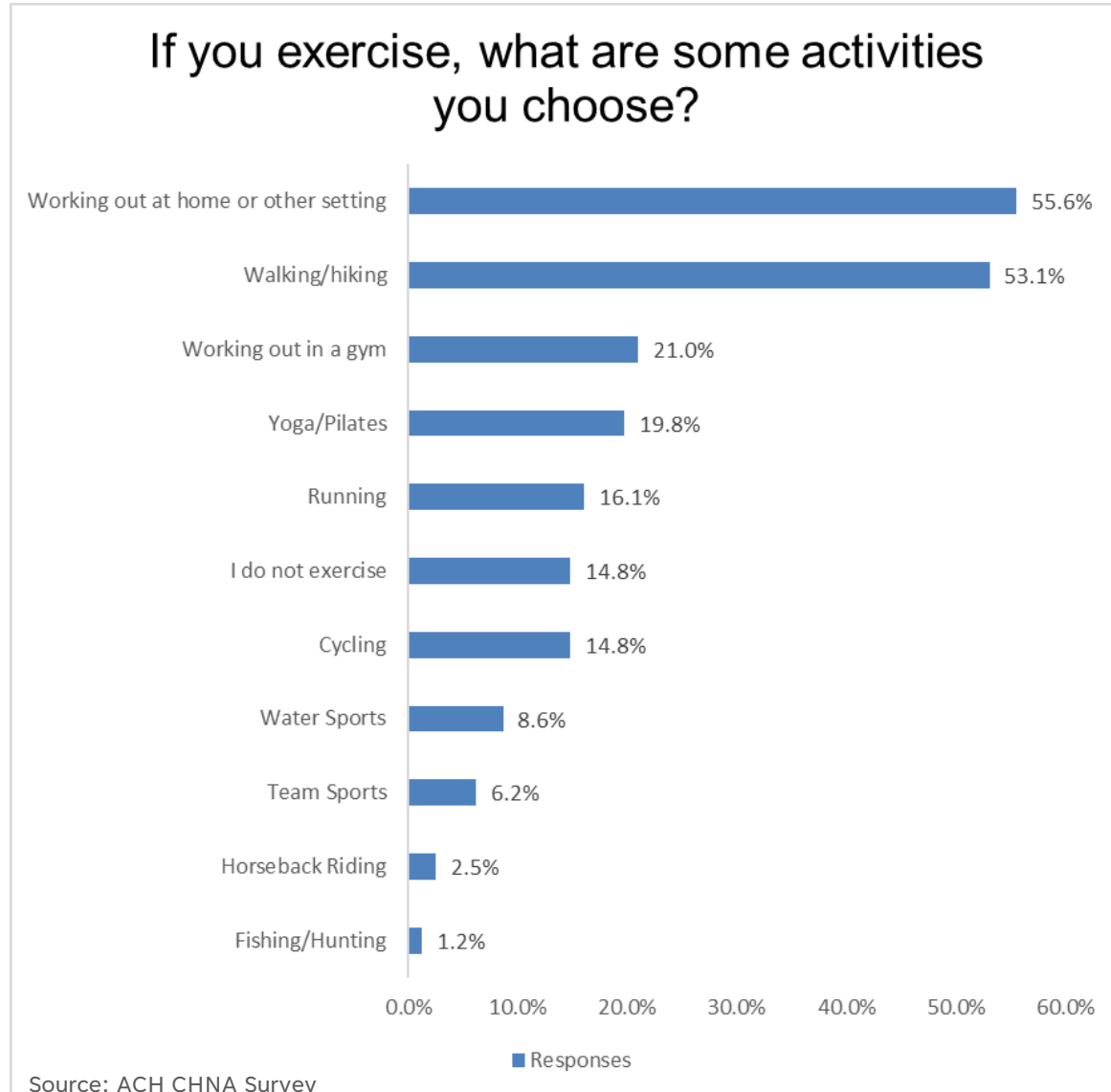
SURVEY RESULTS



Please answer the following questions. (check one box per row)



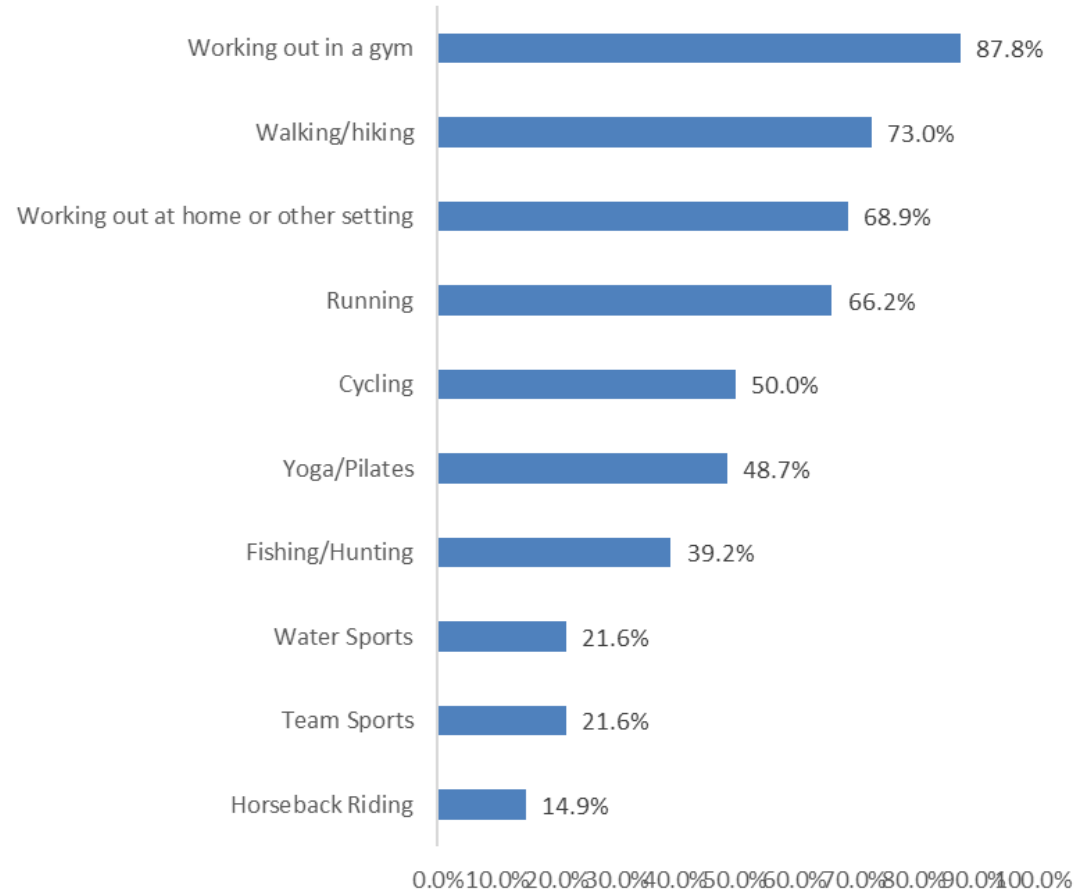
SURVEY RESULTS



SURVEY RESULTS



What are some activities that are available to you in your community?



Source: ACH CHNA Survey

■ Responses



RELEVANT HEALTH INDICATORS

GENERAL HEALTH INDICATORS



GENERAL HEALTH INDICATORS



The 2025-2030 Prevention Agenda for New York State identifies General Health Indicators for addressing resident health. General Health Indicators include access to regular care, health insurance coverage, premature deaths, and preventable hospitalizations. The following statistics related to Prevention Agenda priorities were examined for Cayuga County using data from the 2025-2030 Prevention Agenda dashboard and supplemented by other data sources and statistics:

Improve Health Status and Reduce Disparities

Percentage of adults who have a regular health care provider, age-adjusted, aged 18 years and older

Percentage of adults with health insurance, aged 18-64 years

Percentage of deaths that are premature (before age 65 years)

Potentially preventable hospitalizations among adults, age-adjusted rate per 10,000, aged 18 years and older

Potentially preventable hospitalizations among adults, difference in age-adjusted rates per 10,000 between Black, non-Hispanic adults and White, non-Hispanic adults, aged 18 years and older

Potentially preventable hospitalizations among adults, difference in age-adjusted rates per 10,000 between Hispanic individuals and White, non-Hispanic individuals, aged 18 years and older

Premature deaths (before age 65 years), difference in percentages between Black, non-Hispanic individuals and White, non-Hispanic individuals

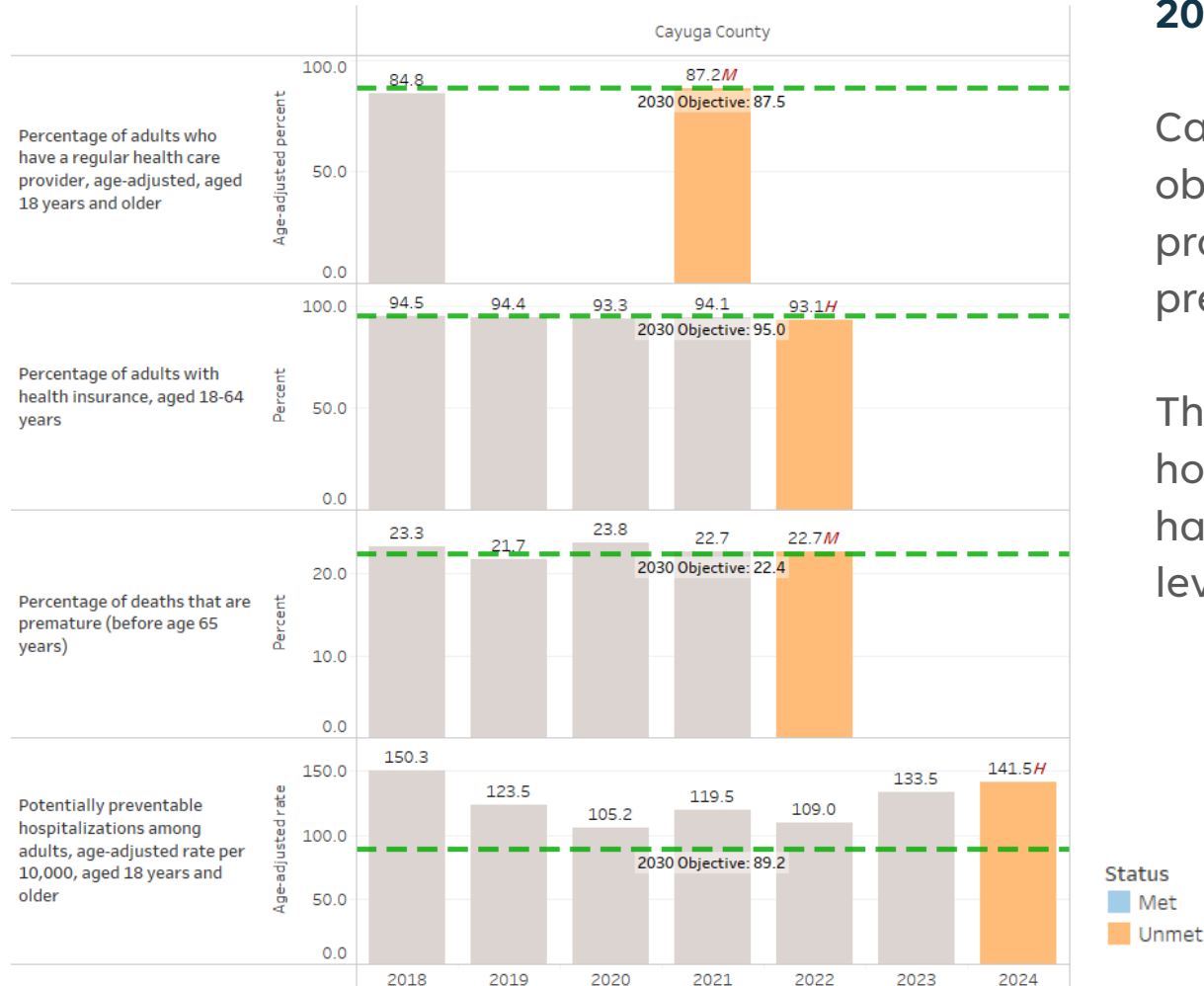
Premature deaths (before age 65 years), difference in percentages between Hispanic individuals and White non-Hispanic individuals



IMPROVE HEALTH STATUS AND REDUCE DISPARITIES



Domain: General Health Indicators
Priority Area: Improve Health Status and Reduce Disparities



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Cayuga County is close to meeting the 2030 objectives for adults with a regular healthcare provider, adults with health insurance, and premature death prevention.

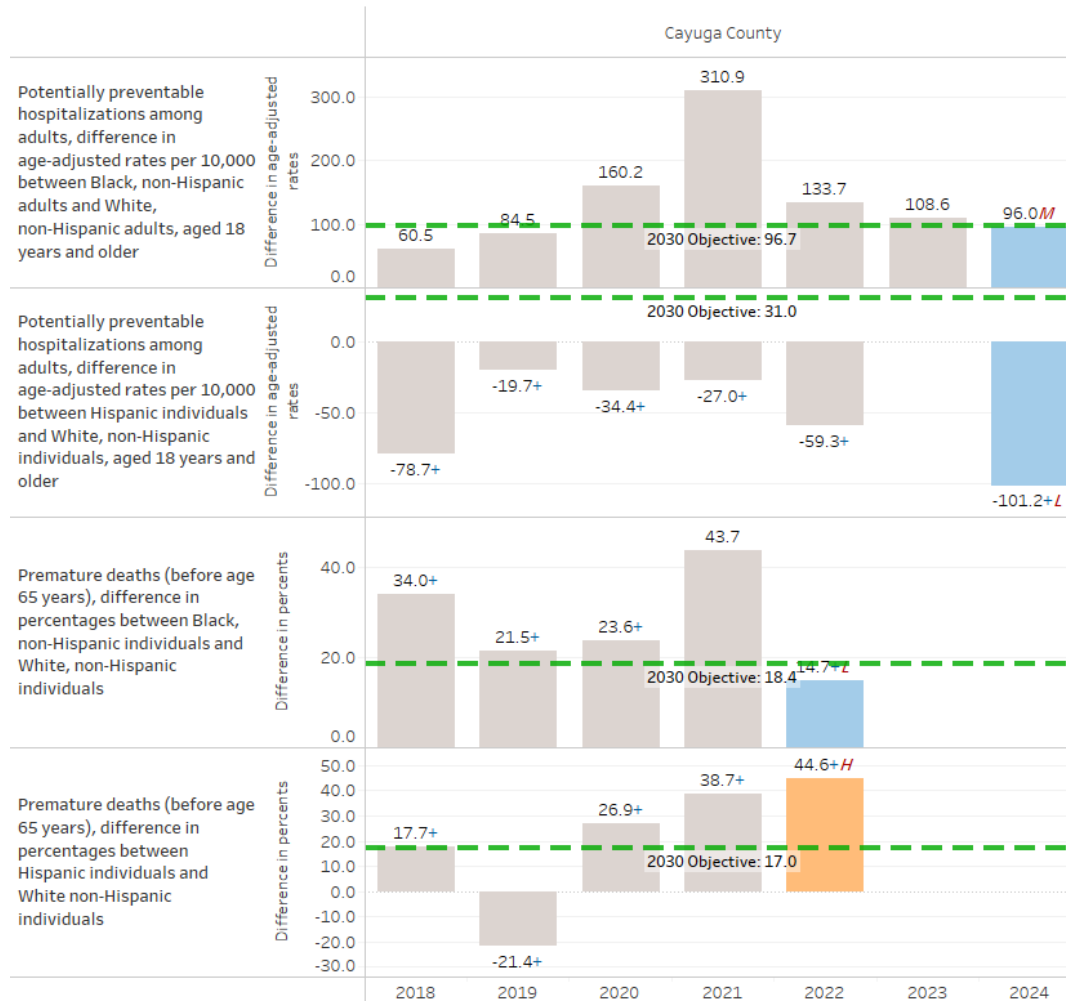
The county rate for preventable hospitalizations, however, is well above the 2030 objective, and has been tagged by the state as a high concern level.



IMPROVE HEALTH STATUS AND REDUCE DISPARITIES



Domain: General Health Indicators
Priority Area: Improve Health Status and Reduce Disparities



Source: New York State Prevention Agenda dashboard (NY.gov)
+ Indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Cayuga County meets the 2030 objectives for preventable hospitalizations and for premature death disparities across most racial and ethnic cohorts; however, the gap in premature death rates between Hispanic individuals and White non-Hispanic individuals does not meet the target and is designated by the state as an area of high concern.

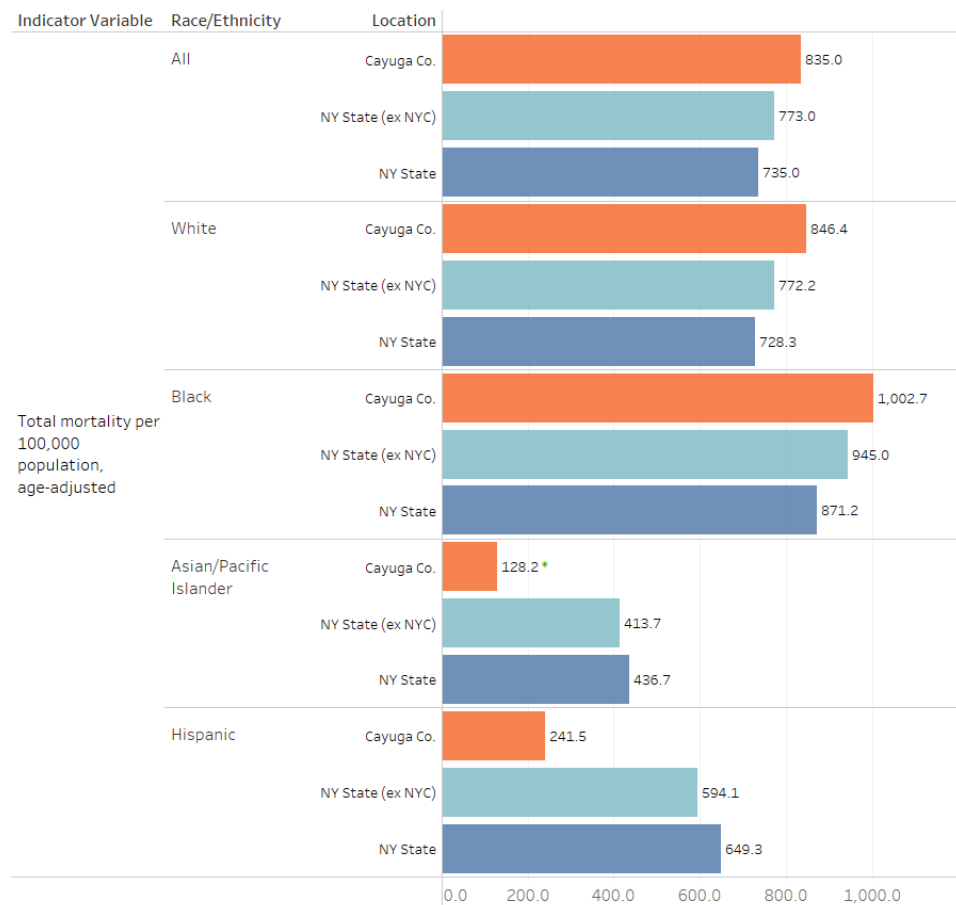
Status
Met
Unmet



GENERAL HEALTH INDICATORS: MORTALITY



Mortality



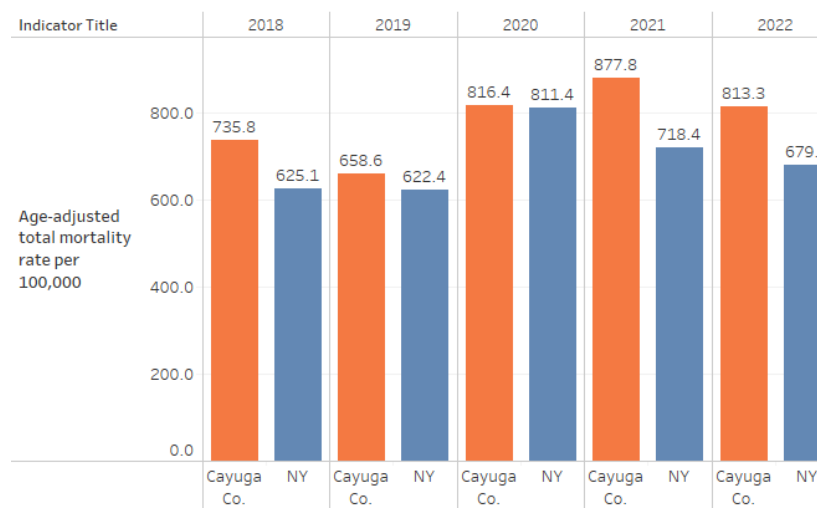
Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race)
 ~ White non-Hispanic, Black (including Hispanic), Asian/Pacific Islander (including Hispanic), and Hispanic (of any race)

- Total mortality in Cayuga County has increased since 2018 to the most recent year data is available in 2022, with a peak in 2021. Rates are above state benchmarks for White and Black population cohorts.
- The most recent data available was collected during the 2020 – 2022 period. It should be noted that these levels may be elevated due to the COVID-19 pandemic.

Health Status and Social Determinants of Health



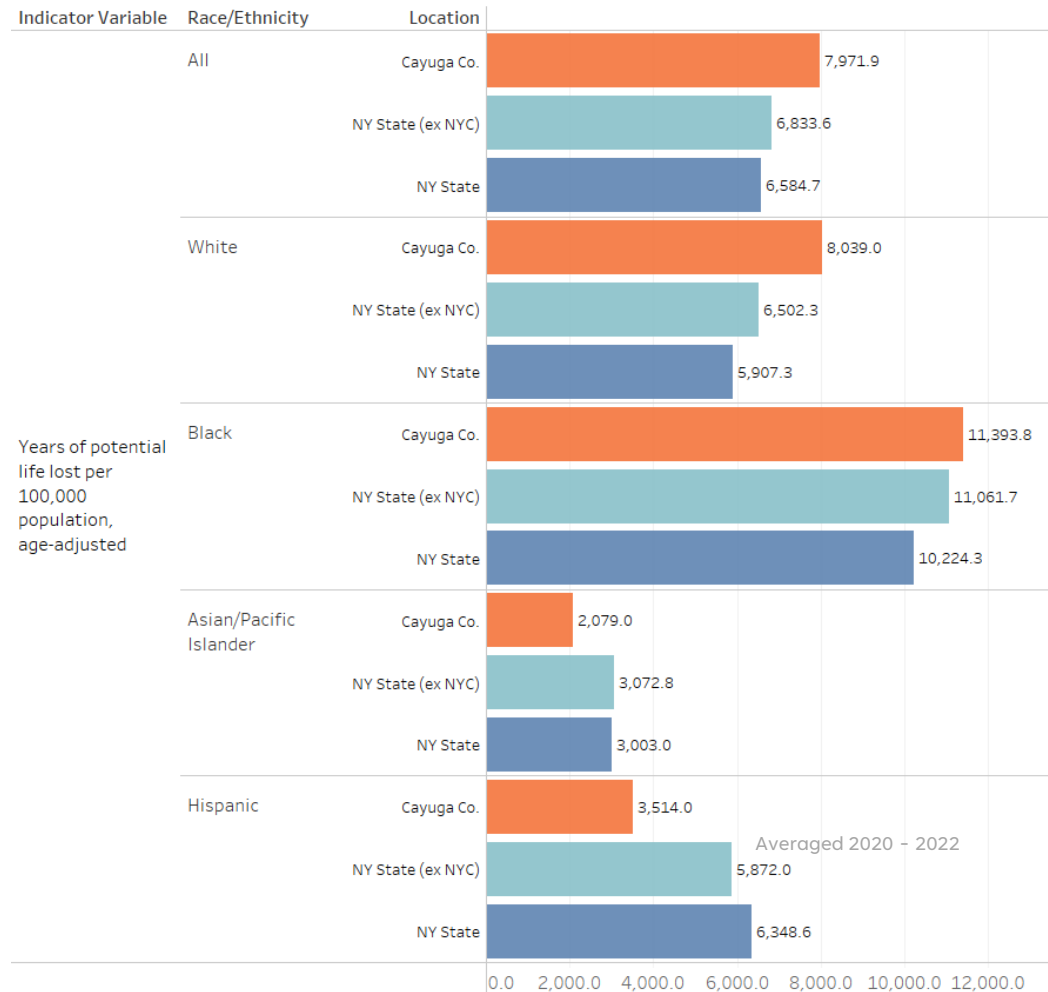
Source: CHIRS Dashboard (ny.gov)



GENERAL HEALTH INDICATORS: POTENTIAL LIFE LOST



Potential Life Lost



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

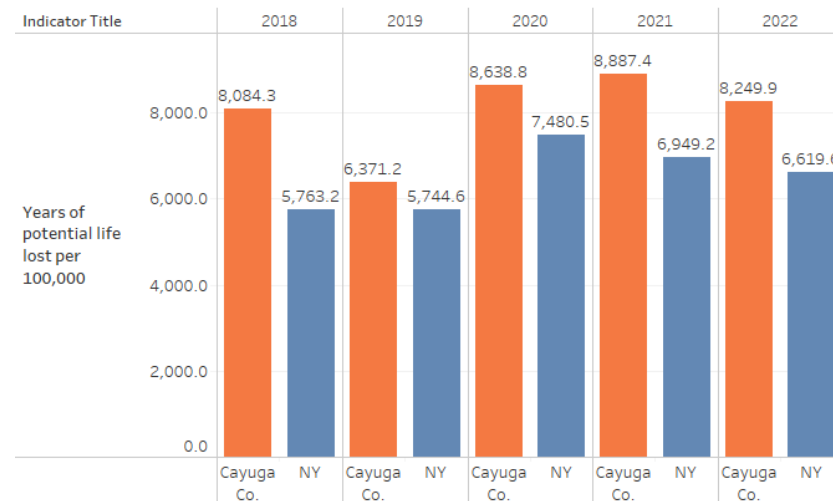
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Years of potential life lost among county residents exceed state benchmarks, overall and among White and Black population cohorts.

Health Status and Social Determinants of Health



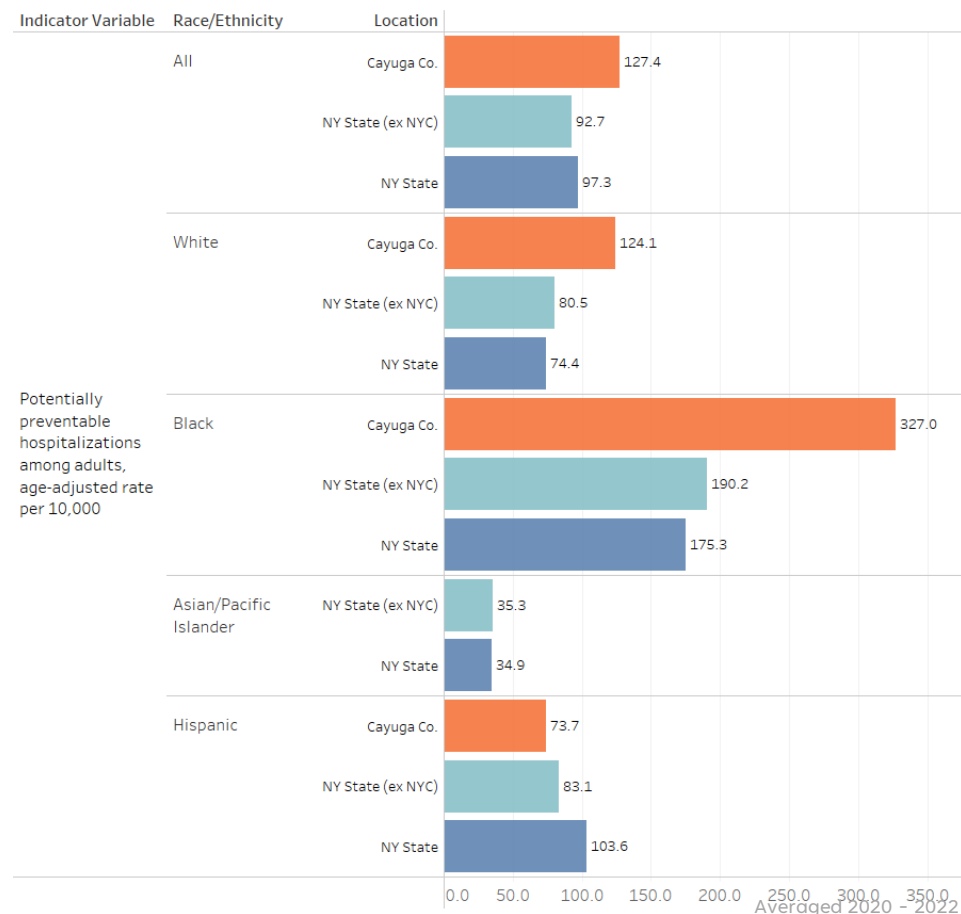
Source: CHIRS Dashboard (ny.gov)



GENERAL HEALTH INDICATORS: PREVENTABLE HOSPITALIZATIONS



Preventable Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

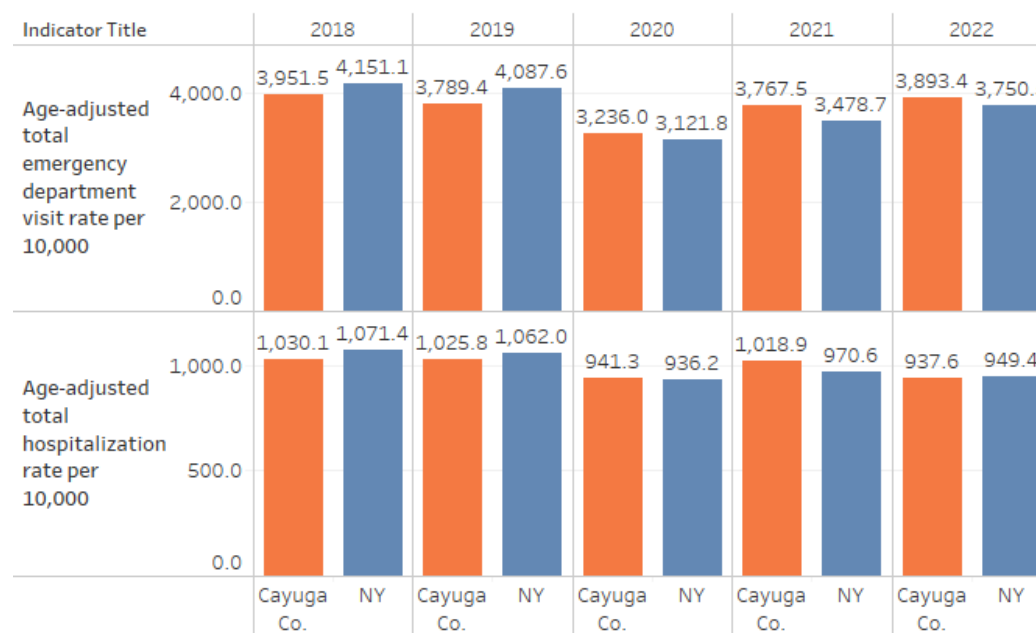
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Preventable hospitalization rates are higher than state benchmarks, particularly among the Black population cohort.

Health Status and Social Determinants of Health



Source: CHIRS Dashboard (ny.gov)

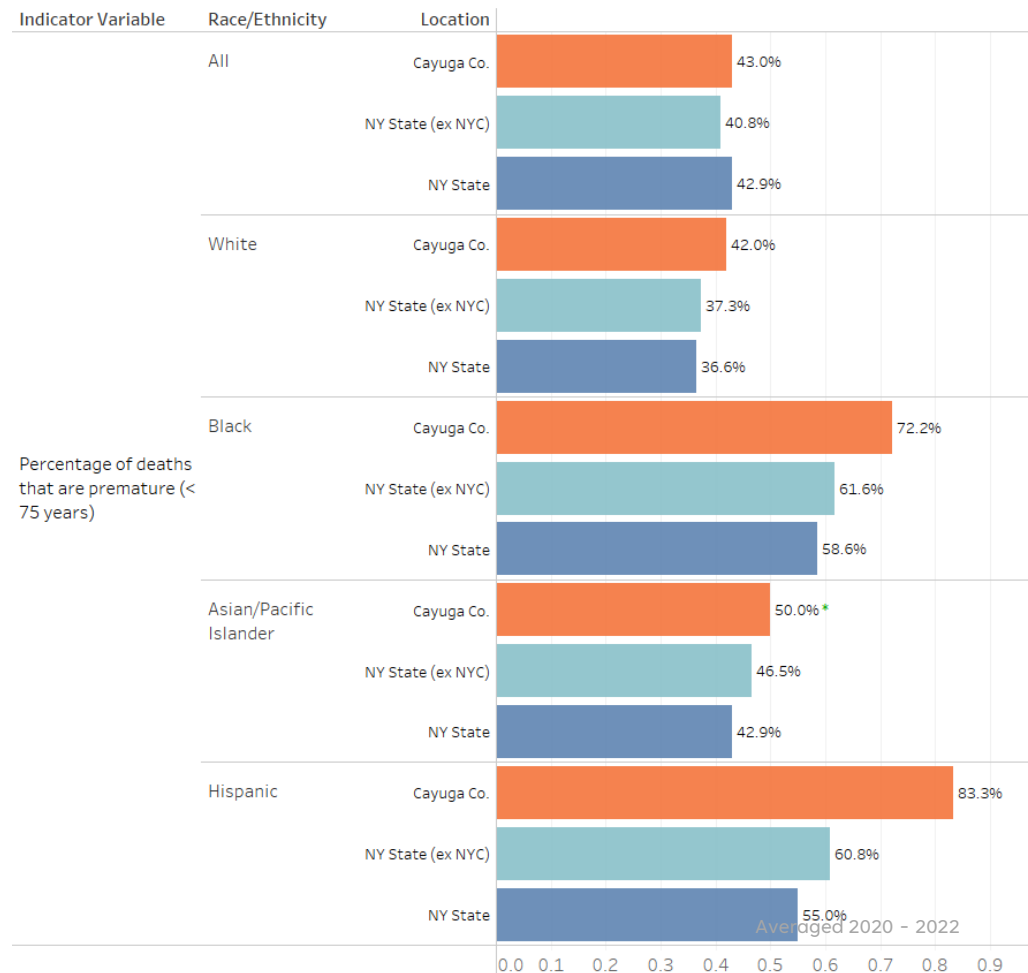
“Be proactive about advertising hospital services to the community.” - Community Stakeholder



GENERAL HEALTH INDICATORS: PREMATURE DEATHS



Premature Deaths



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

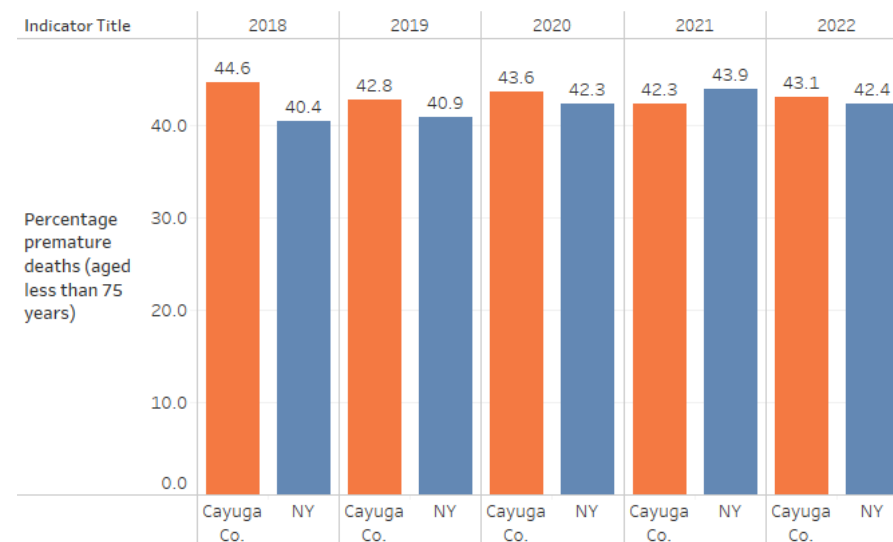
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- In Cayuga County, the overall percentage of premature deaths among individuals aged 75 and older is elevated and is even higher among Black and Hispanic population cohorts.

Health Status and Social Determinants of Health



Source: CHIRS Dashboard (ny.gov)





ECONOMIC STABILITY

- 2025-2030 Prevention Agenda





ECONOMIC STABILITY

The 2025-2030 Prevention Agenda for New York State identifies Economic Stability as a priority domain for addressing resident health. Economic stability examines issues pertaining to income, poverty, unemployment, nutrition security, and housing stability and affordability within a community. Economic stability directly impacts an individual's or community's health, and lower-income communities are often at greater risk of poor health outcomes. The following statistics related to Prevention Agenda priorities were examined for Cayuga County using data from the 2025-2030 Prevention Agenda dashboard and supplemented by other data sources:

Housing and Affordability

Number of people living in HUD-subsidized housing in the past 12 months

Nutrition Security

Percentage of adults who were food secure in the past 12 months, aged 18 years and older

Poverty

Percentage of people living in poverty

Percentage of people living in poverty, aged 65 years and older

Unemployment

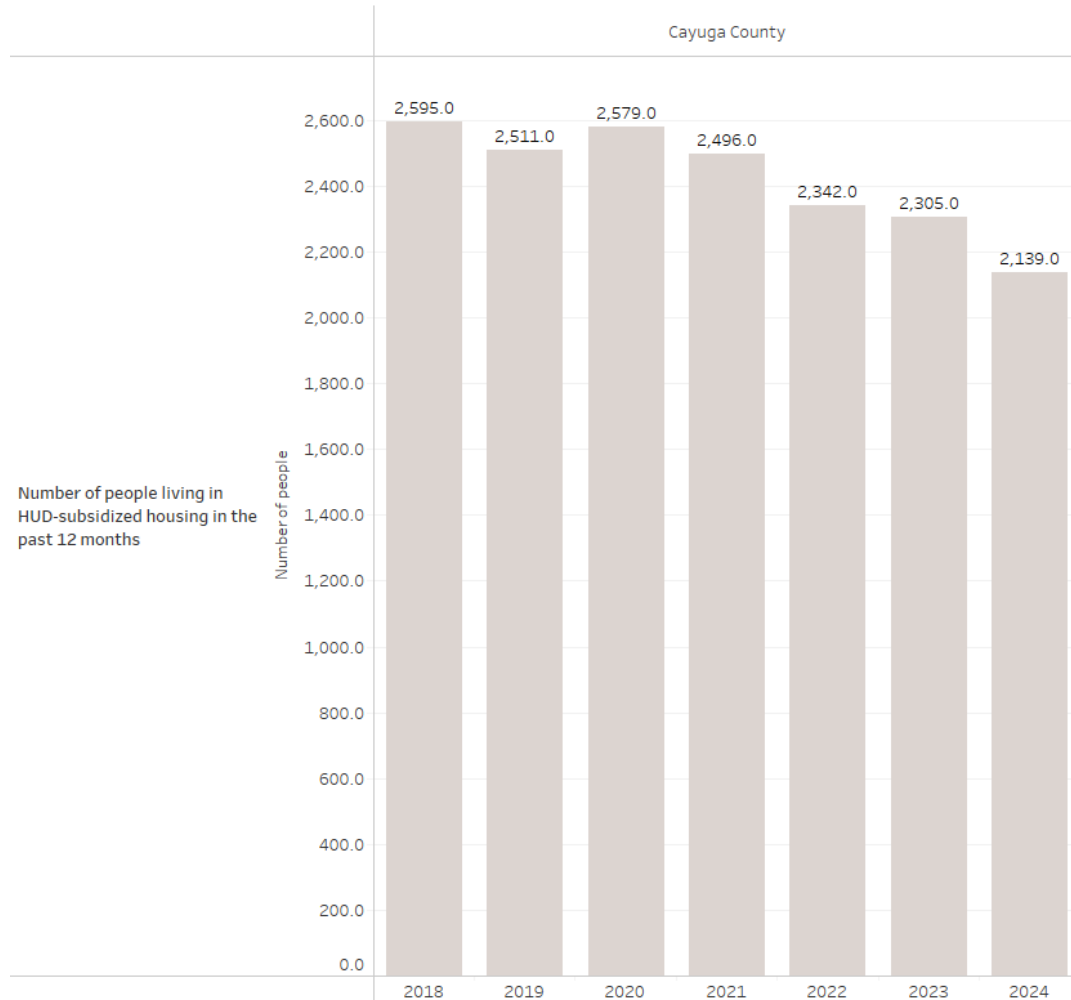
Percentage unemployed, aged 16 years and older

Percentage unemployed, Black residents, aged 16 years and older



HOUSING AND AFFORDABILITY

Domain: Economic Stability
Priority Area: Housing and Affordability



Source: New York State Prevention Agenda dashboard (NY.gov)

+ indicates unstable estimate

Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

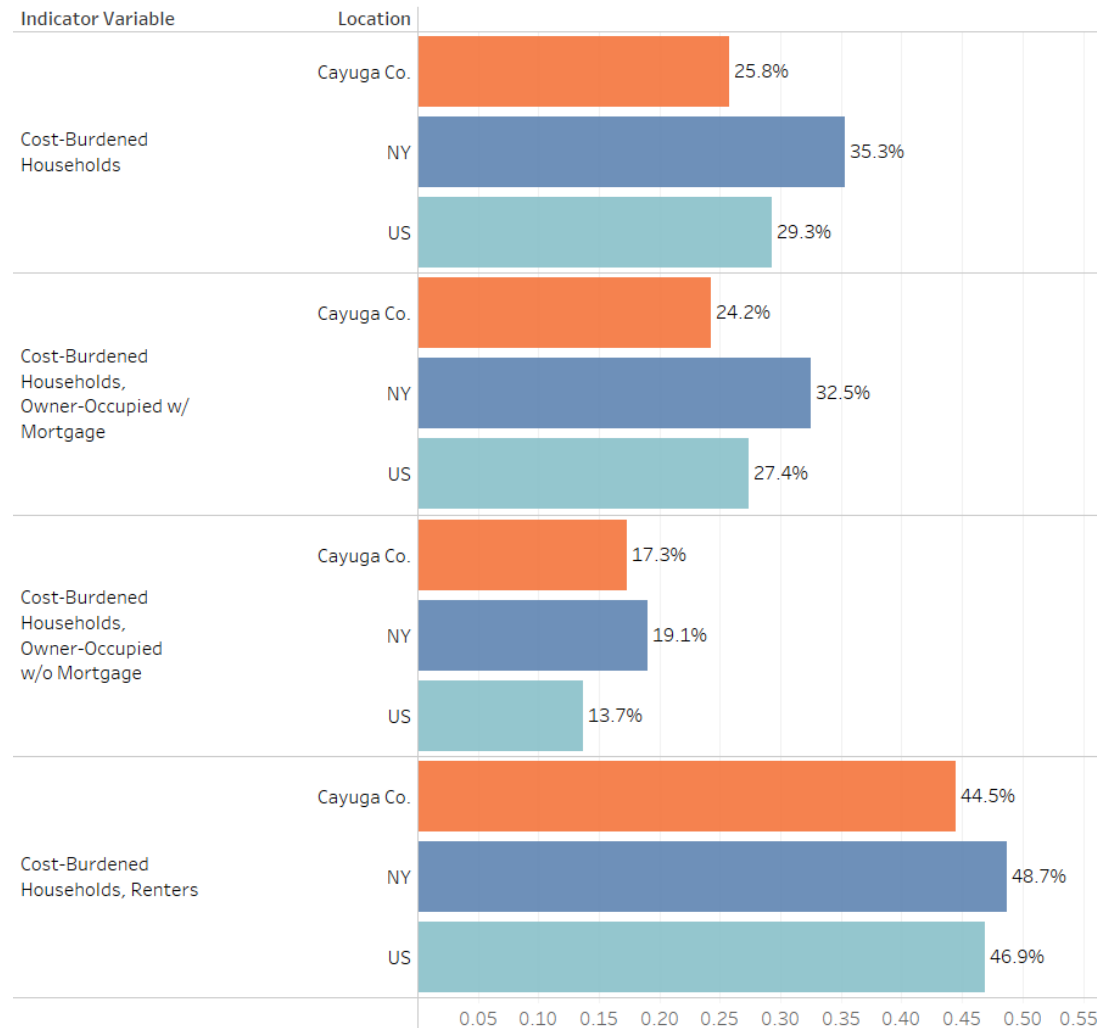
Since 2018, Cayuga County has seen a decrease in the number of people living in subsidized housing. This decrease contributes to the overall reduction of this indicator within New York State, which is a 2030 objective.





HOUSING STABILITY AND AFFORDABILITY: COST BURDENED HOUSEHOLDS

Household Indicators



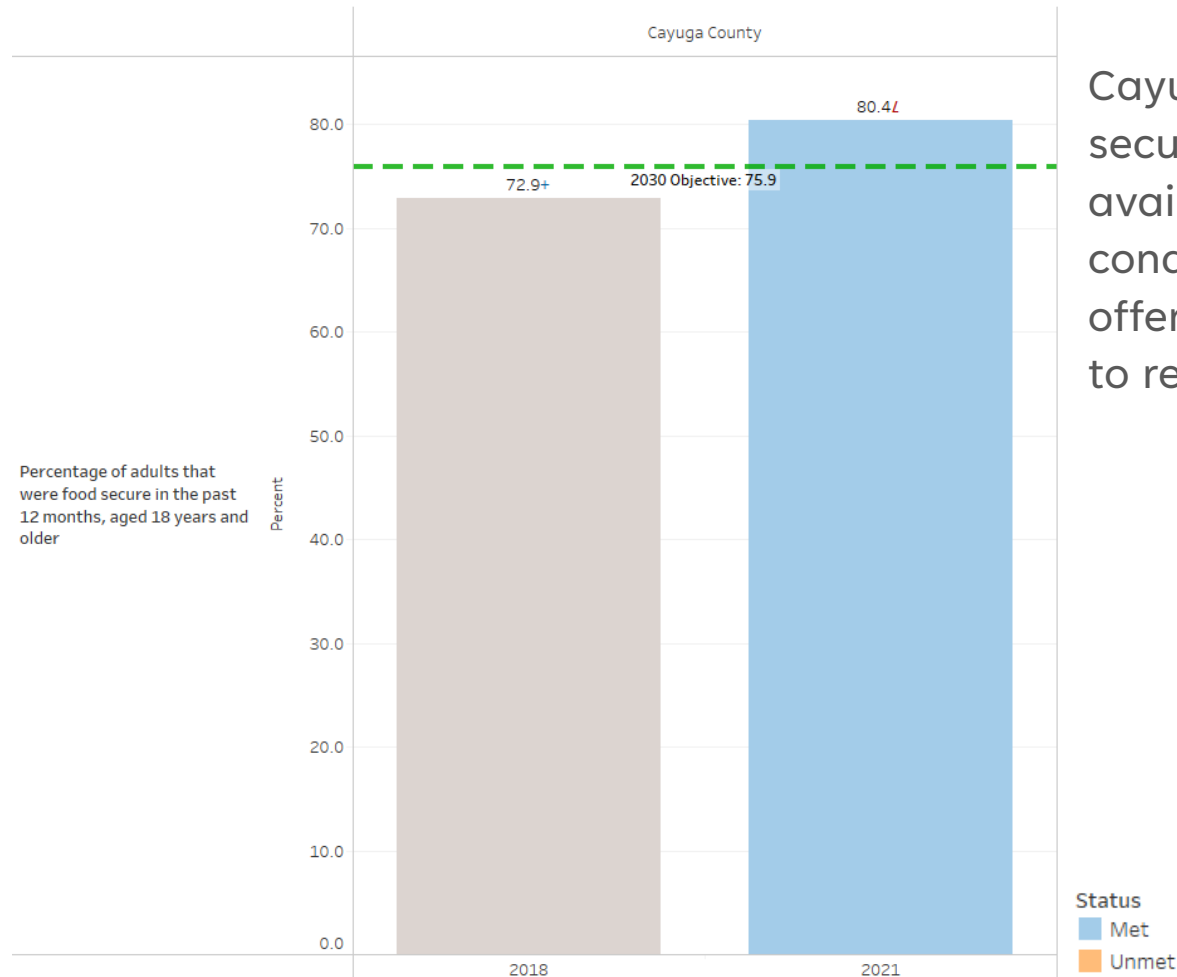
Source: US Census Bureau, American Community Survey, 2019-23

- Fewer households in Cayuga County are considered cost-burdened than the state and national percentages.
- This reflects better economic conditions for county residents than in other areas of the country.
- While more renters report being cost-burdened compared to homeowners, the percentage of cost-burdened renters in Cayuga County is lower than state benchmarks.



NUTRITION SECURITY

Domain: Economic Stability
Priority Area: Nutrition Security



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

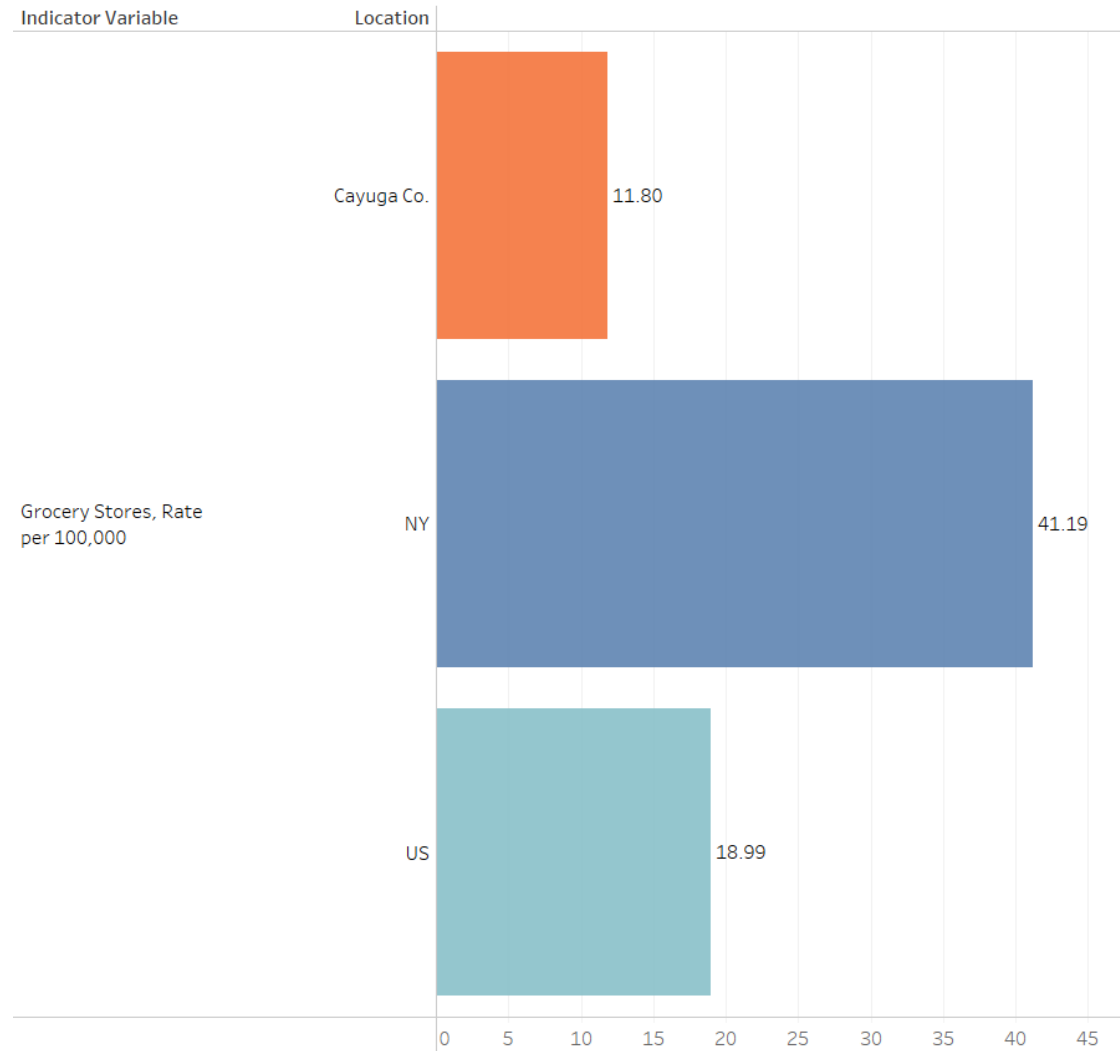
Cayuga County meets the 2030 objective for food-secure adults, based on the most recent data available (2021). However, more recent economic conditions could affect this measure. The county offers a robust array of food assistance organizations to residents.





NUTRITION SECURITY: GROCERY STORE RATE

Grocery Stores

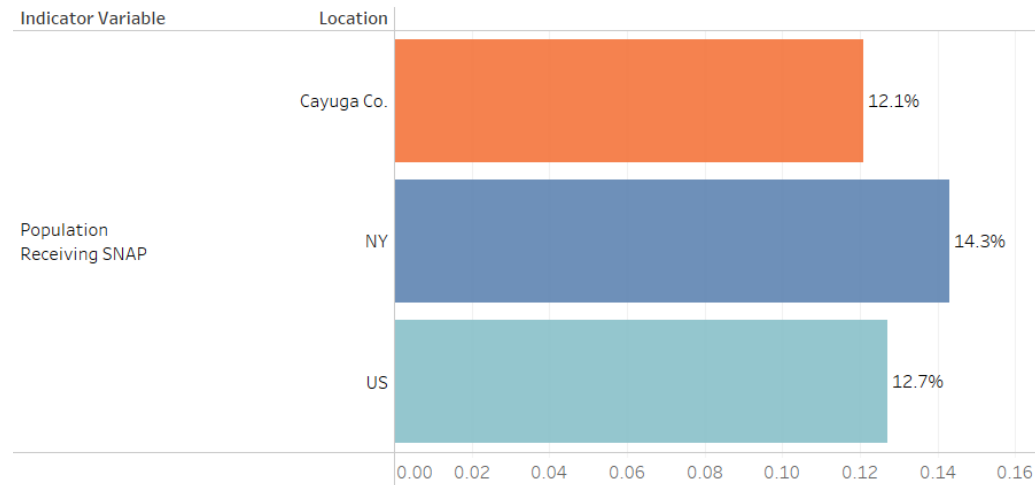


- Cayuga County has a much lower rate of grocery stores available to residents, which can affect the ability to access healthy food items.



NUTRITION SECURITY: SNAP BENEFITS

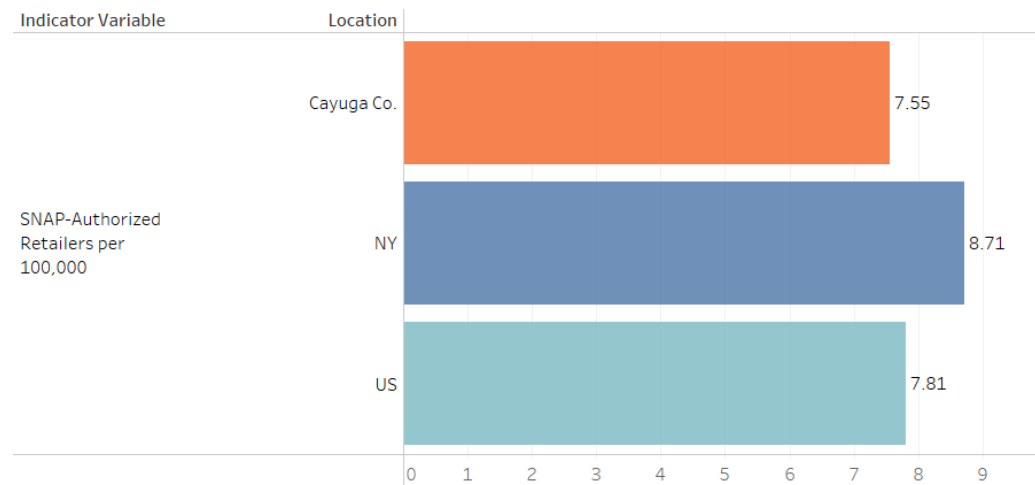
SNAP Benefits



Source: US Census Bureau, Small Area Income and Poverty Estimates. 2022

- Cayuga County has a lower percentage of population receiving Supplemental Nutrition benefits than both the state and national averages.
- Additionally, the rate of SNAP-Authorized retailers is also lower than both state and national averages. Limited access can hinder SNAP recipients' ability to obtain food.

SNAP Benefits



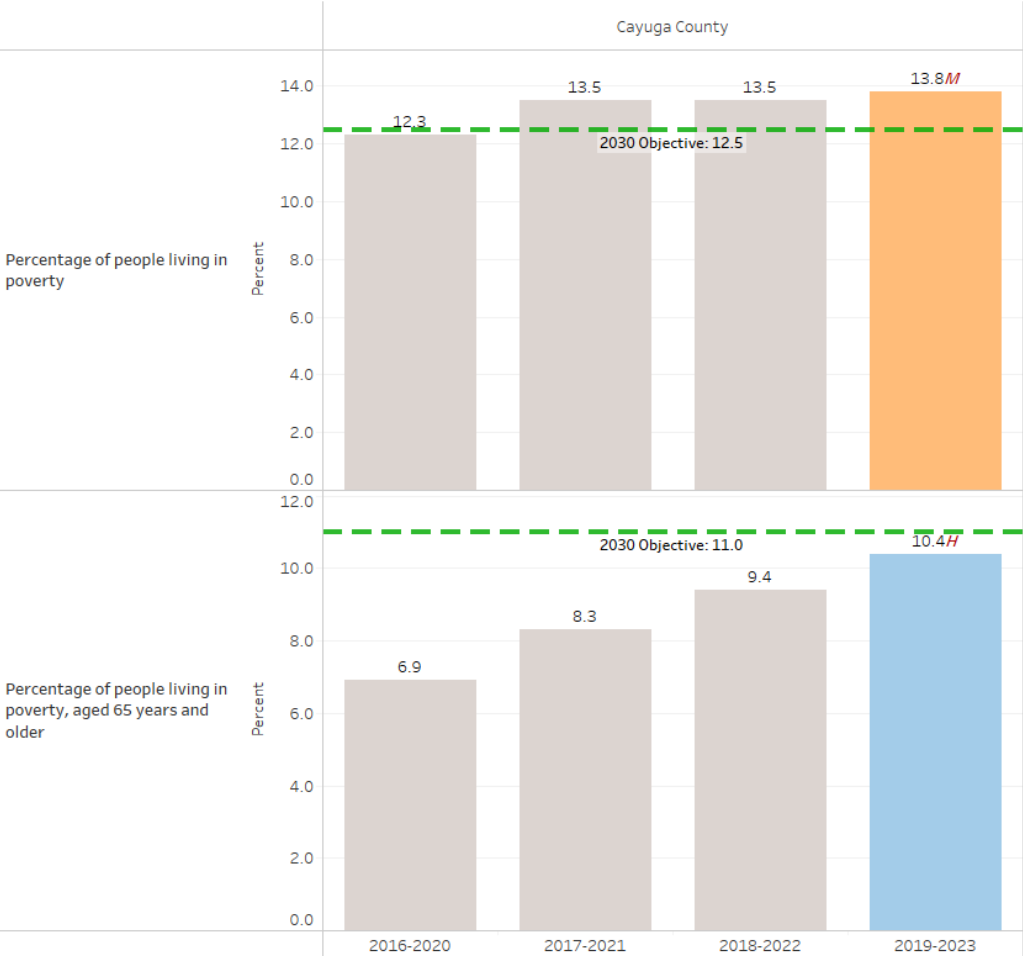
Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. 2025





POVERTY

Domain: Economic Stability
Priority Area: Poverty



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Cayuga County has not yet met the 2030 poverty objective, and the percentage of residents living in poverty has increased since the 2016–2020 measurement period.

A similar trend is shown in those 65 and older. Although the percentage currently meets the 2030 objective, it has been steadily increasing.

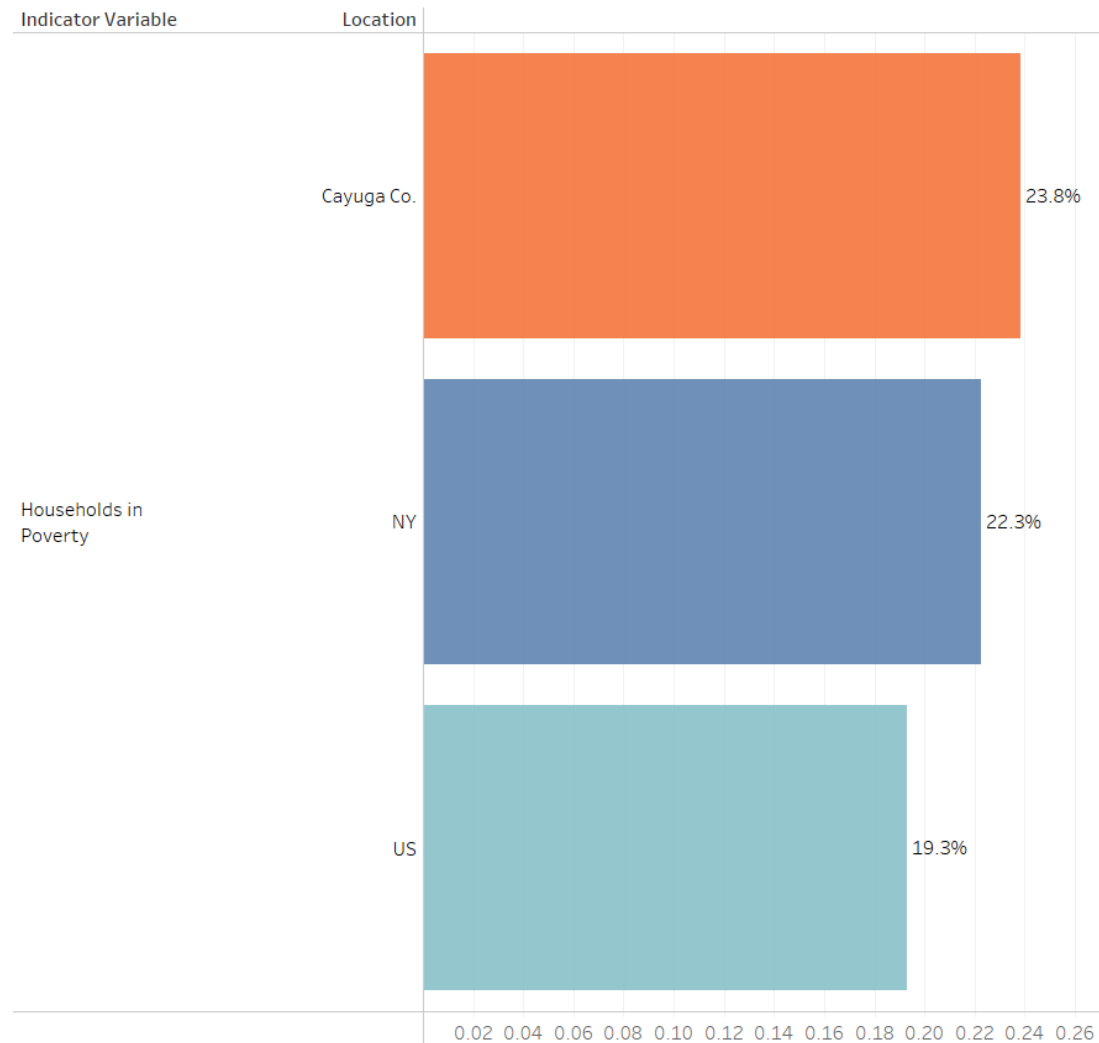
Status
Met
Unmet





POVERTY: HOUSEHOLDS IN POVERTY

Poverty

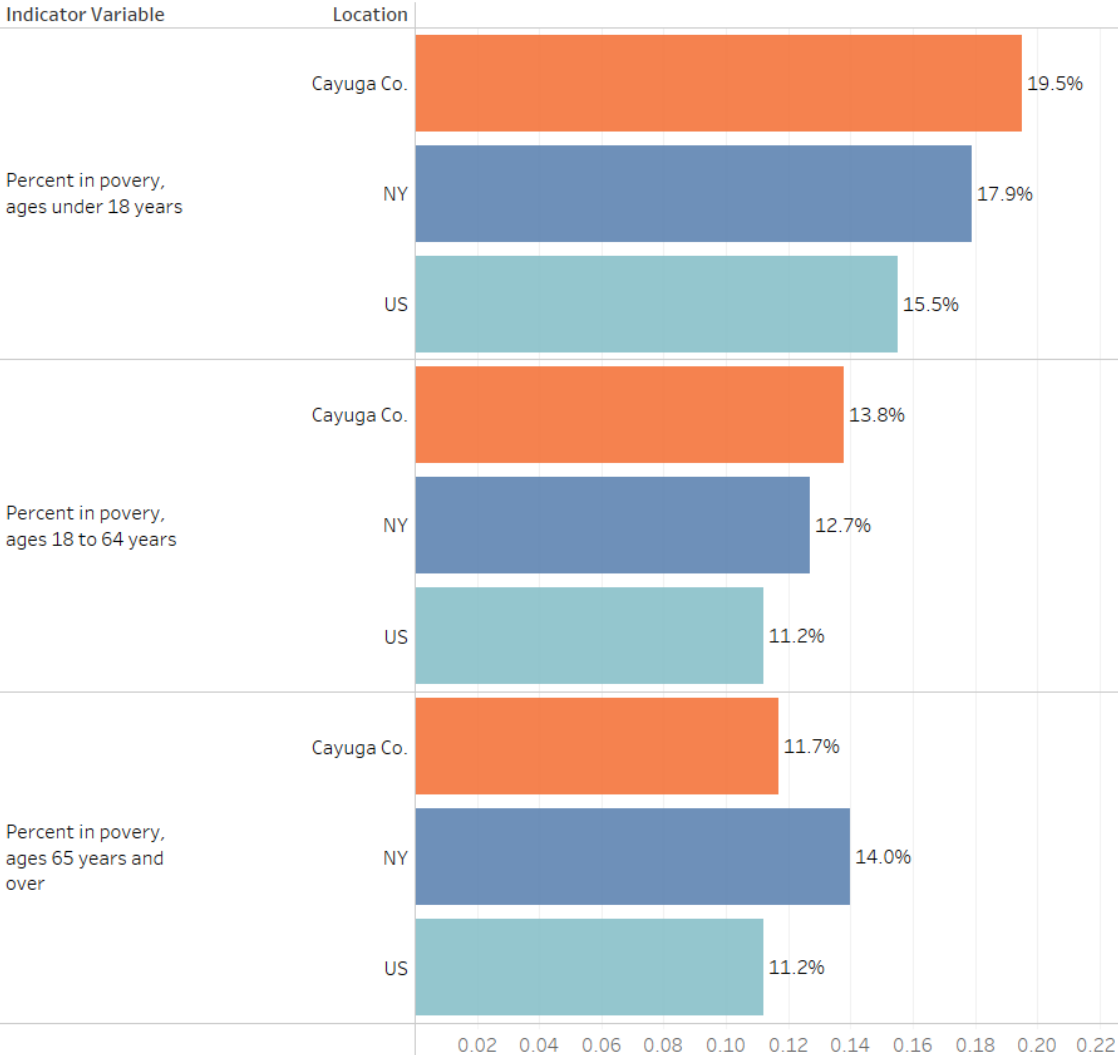


- Almost 24% of Cayuga County households are in poverty, according to Census Bureau calculations. This percentage is slightly higher than state and national benchmarks.



POVERTY: PERCENT IN POVERTY

Poverty



Source: 2024 American Community Survey 1-Year Estimates

- Poverty percentages within the under-18 and 18-64 age cohorts both exceed state and national benchmarks. However, the 65+ age cohort is in line with the national average and below the state average.

“If you can’t put food on the table or a roof over your head, you’re not going to worry about A1c or heart health.”

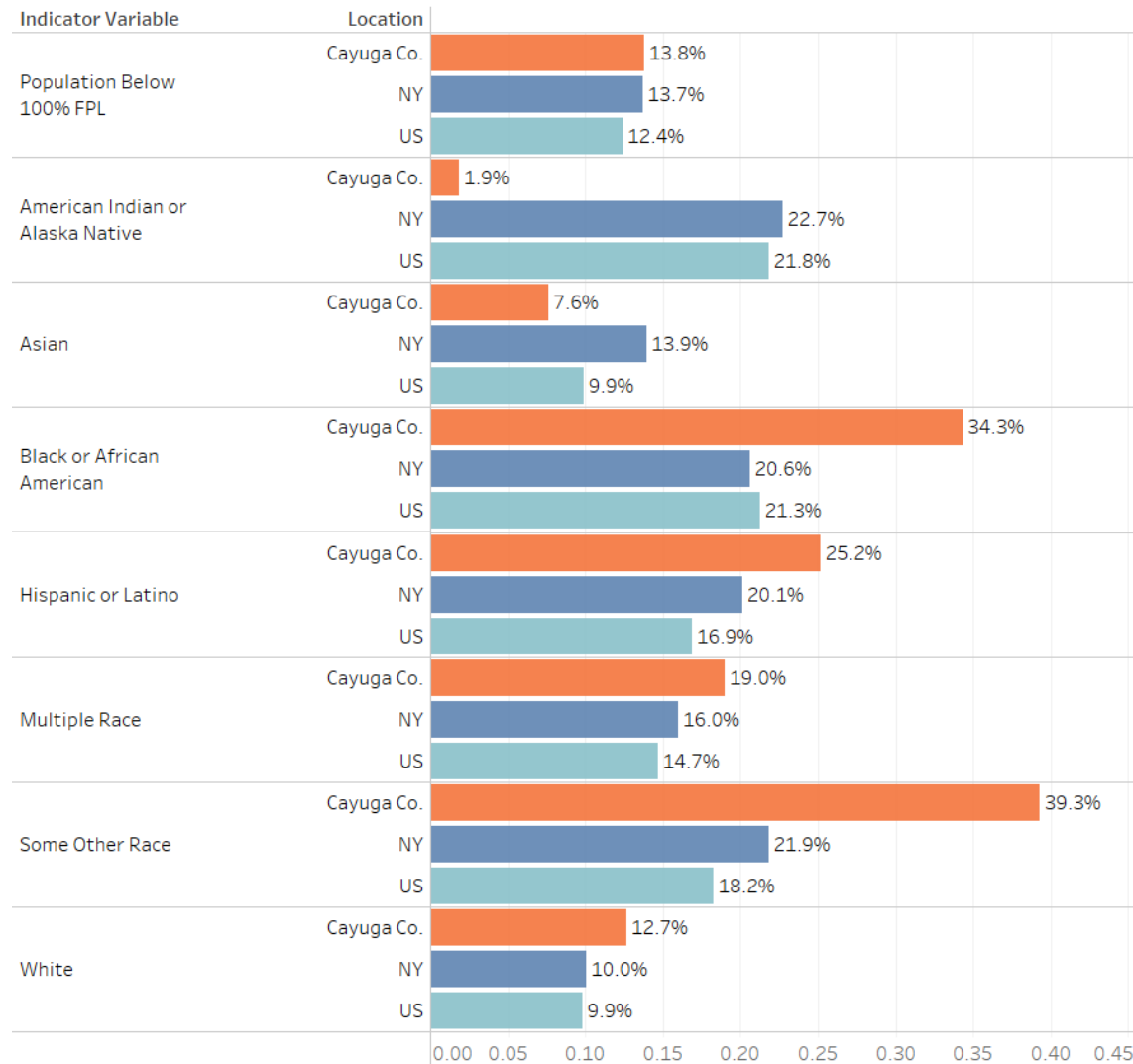
- Community Stakeholder





POVERTY: POVERTY BY RACIAL GROUP

Poverty

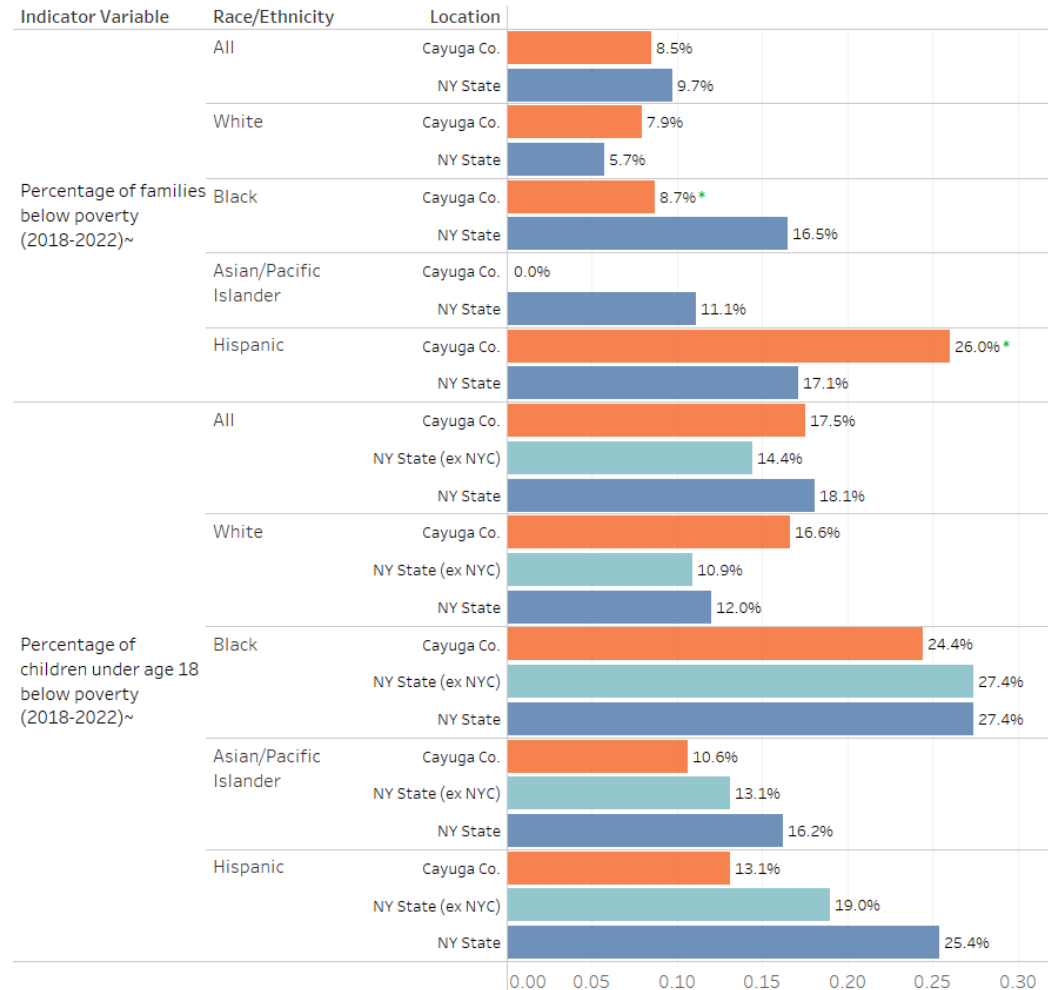


- Population percentages below 100% of the federal poverty level are in line with the state average and slightly higher than the national average for the overall population.
- Percentages are particularly higher than benchmarks for Black or African American residents and for those who identify as Some Other Race.



POVERTY: FAMILIES IN POVERTY

Poverty



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

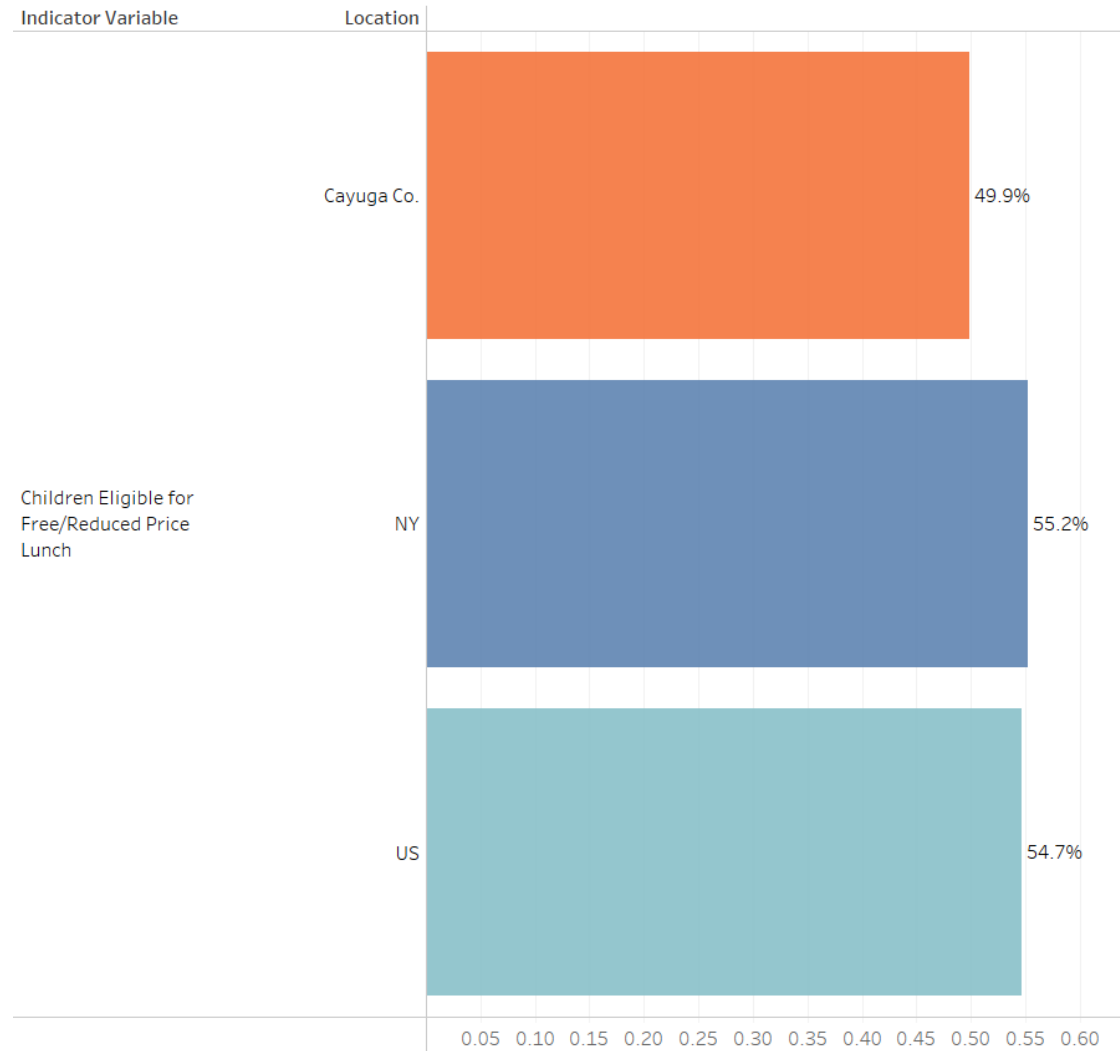
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Compared to New York state benchmarks, the percentage of families below poverty is lower overall, but elevated among White and Hispanic families.
- For children, the county has an overall lower percentage of those in poverty compared to benchmarks among all racial and ethnic categories.



POVERTY: CHILDREN IN POVERTY

Poverty



Source: National Center for Education Statistics, NCES - Common Core of Data. 2023-24

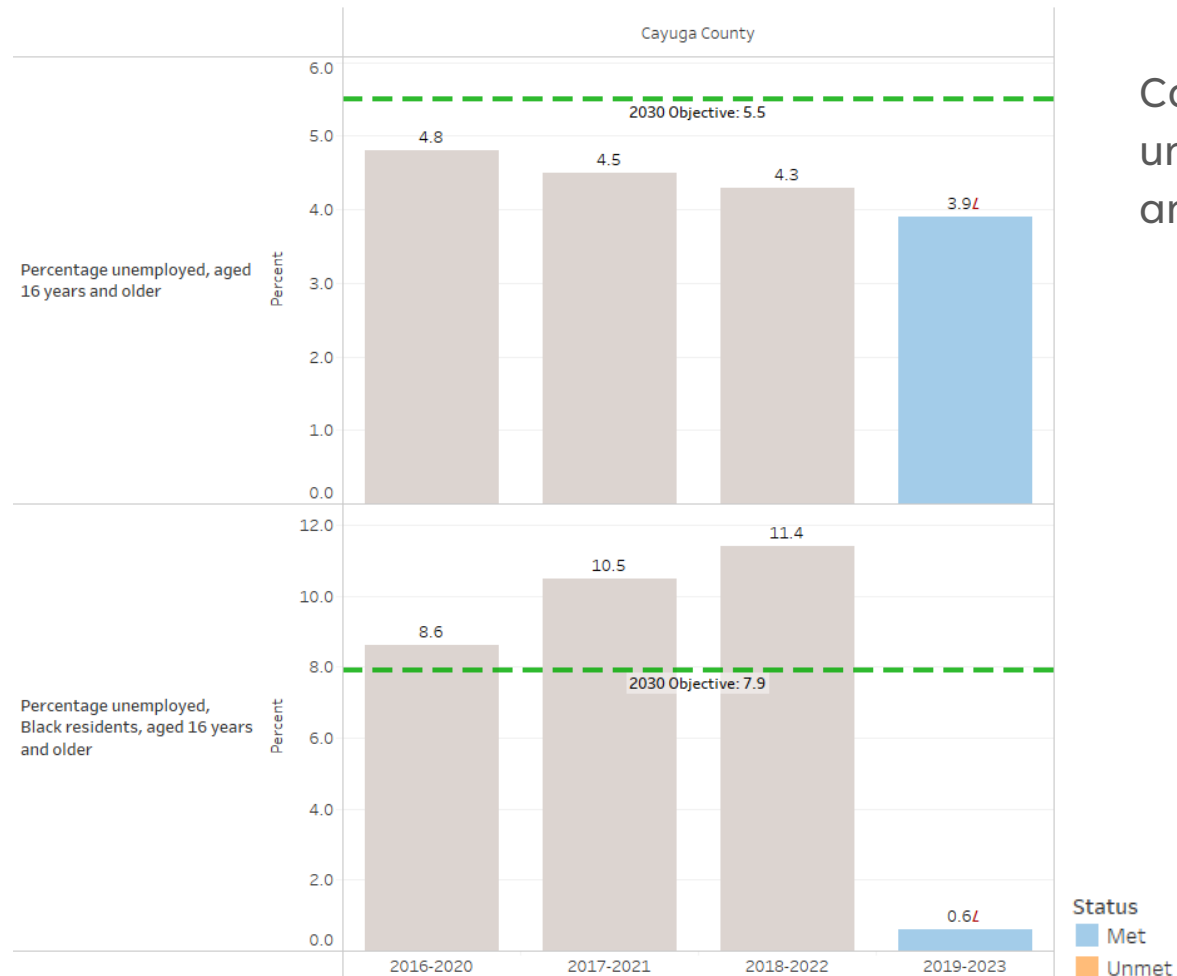
- A lower percentage of children in Cayuga County are eligible for free or reduced lunch, compared to state and national benchmarks.





UNEMPLOYMENT

Domain: Economic Stability
Priority Area: Unemployment



Source: New York State Prevention Agenda dashboard (NY.gov)

+ indicates unstable estimate

Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

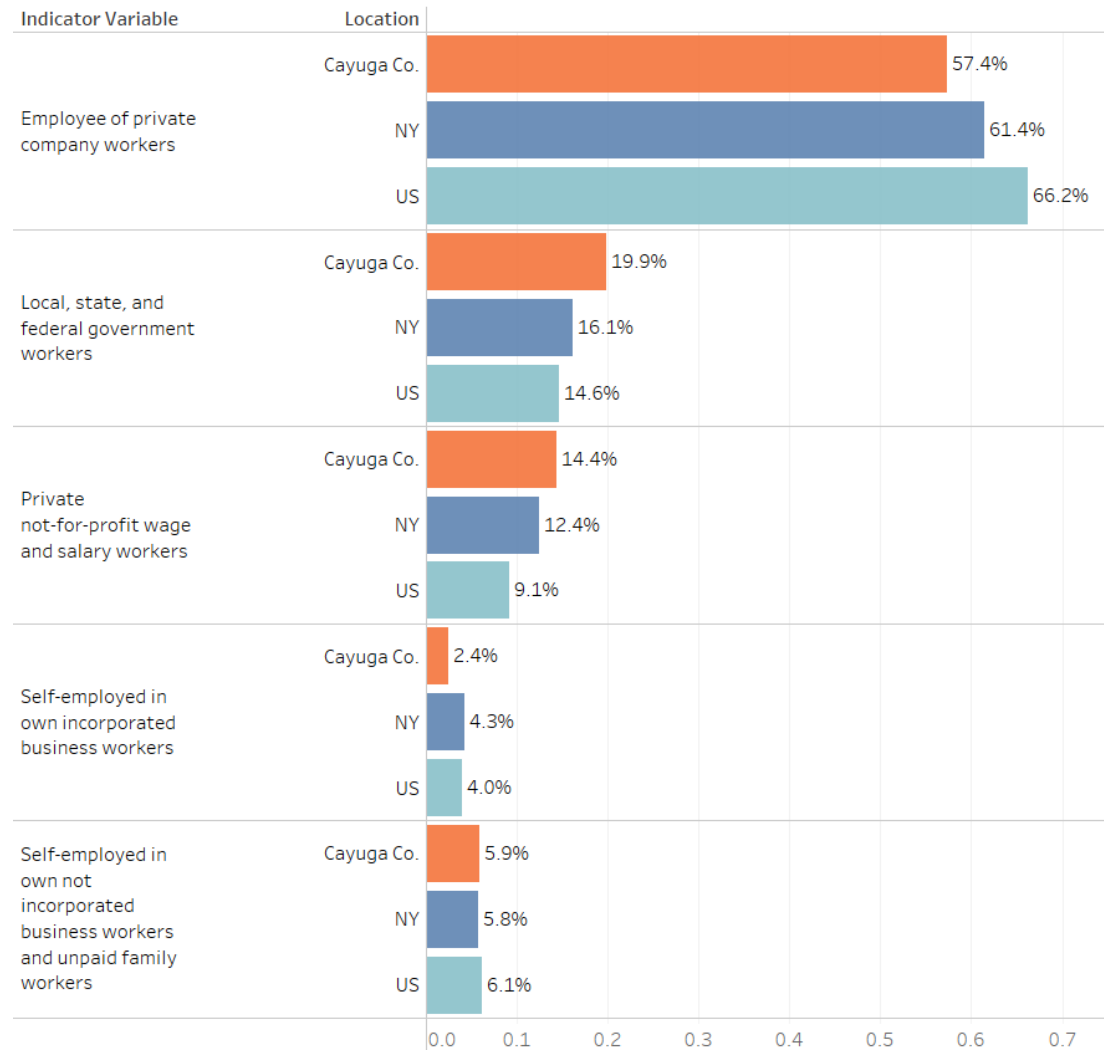
Cayuga County meets the 2030 objective for unemployment percentages both overall and among Black residents.





UNEMPLOYMENT: CLASS OF WORKER

Class of Worker



Source: 2024 American Community Survey 1-Year Estimates

- Over 57% of all workers in Cayuga County are employed by private companies, which is lower than state averages.
- The county has higher percentages of government workers (local, state, and federal) and private non-profit workers.



SOCIAL AND COMMUNITY CONTEXT

- 2025-2030 Prevention Agenda



SOCIAL AND COMMUNITY CONTEXT



The 2025-2030 Prevention Agenda for New York State identifies Social and Community Context as a priority domain for addressing resident health. Social cohesion, social isolation, mental illness, drug usage, adverse childhood experiences, and healthy eating are examples of indicators that comprise the Community aspect of social determinants of health. The following statistics related to Prevention Agenda priorities were examined for Cayuga County using data from the 2025-2030 Prevention Agenda dashboard and supplemented by other data sources:

Adverse Childhood Experiences (ACEs)

- Indicated reports of abuse/maltreatment, rate per 1,000 Black, non-Hispanic children and youth, aged 0-17 years

- Indicated reports of abuse/maltreatment, rate per 1,000 children and youth, aged 0-17 years

- Indicated reports of abuse/maltreatment, rate per 1,000 Hispanic children and youth, aged 0-17 years

- Percentage of adults who, as a child, experienced three or more adverse childhood experiences (ACEs), aged 18 years and older

Alcohol

- Prevalence of binge or heavy drinking among adults, aged 18 years and older

Anxiety and Stress

- Percentage of adults experiencing frequent mental distress during the past month, age-adjusted, aged 18 years and older

Healthy Eating

- Percentage of adults who consumed fewer than one fruit and fewer than one vegetable daily (no fruits or vegetables), aged 18 years and older

- Percentage of infants who are exclusively breastfed in the hospital among all infants

Primary Prevention Substance Misuse and Overdose Prevention

- Episodes when an opioid-naïve patient received an initial opioid prescription, rate per 1,000 population

- Number of naloxone kits distributed (New York State outside New York City)

- Overdose deaths involving drugs among Black, non-Hispanic residents, crude rate per 100,000 population

- Overdose deaths involving drugs, crude rate per 100,000 population

- Patients who received at least one buprenorphine prescription for opioid use disorder, crude rate per 100,000 population

- Percentage of episodes when patients were opioid naïve and received an opioid prescription of more than seven days

- Unique individuals enrolled in OASAS treatment programs who reported any opioid as the primary substance, rate per 100,000 population

Suicide

- Suicide mortality, age-adjusted rate per 100,000 population

Tobacco and eCigarettes

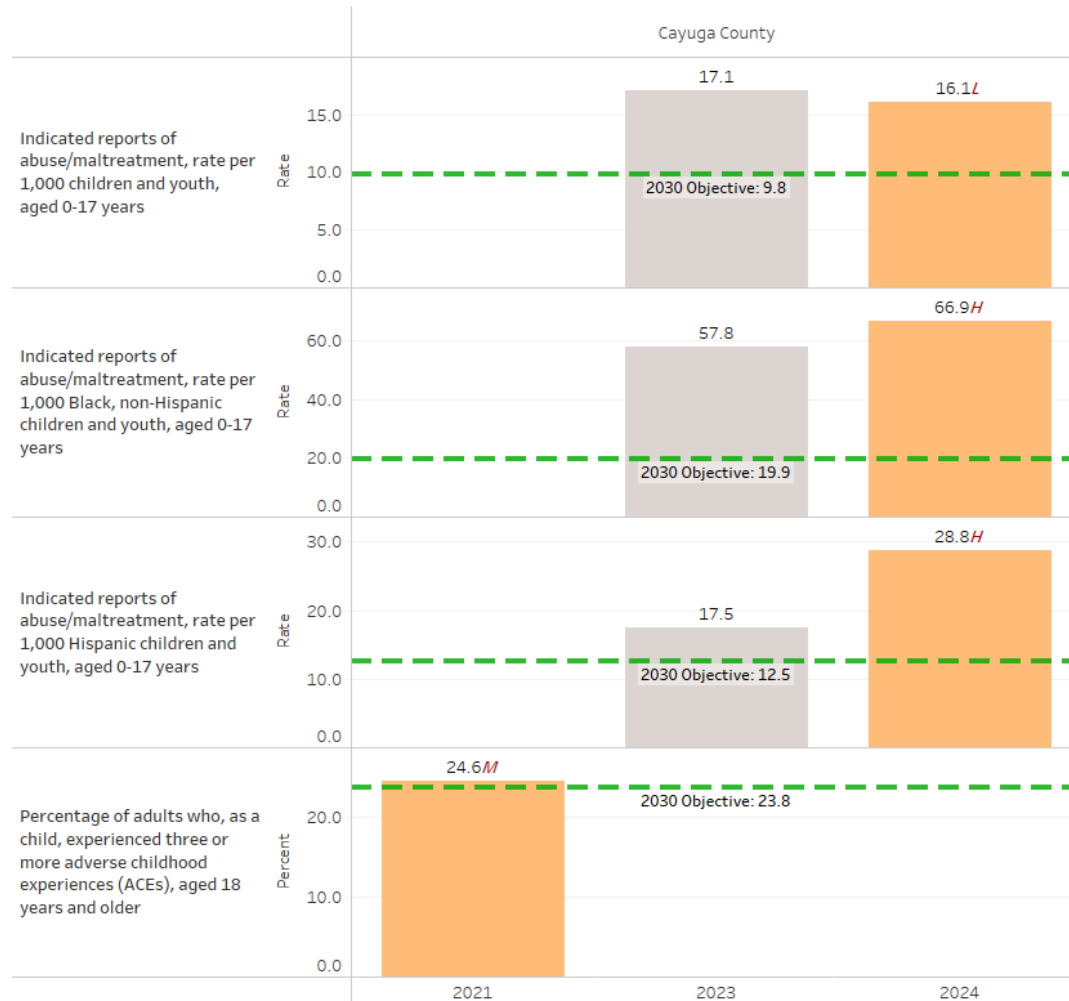
- Prevalence of cigarette smoking among adults, aged 18 years and older



ADVERSE CHILDHOOD EXPERIENCES



Domain: Social and Community Context
Priority Area: Adverse Childhood Experiences



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Cayuga County does not currently meet the 2030 objectives for abuse/maltreatment rates for all children and youth, Black non-Hispanic children and youth, or Hispanic children and youth.

The percentage of adults who reported ACEs is also below the state objective for 2030.

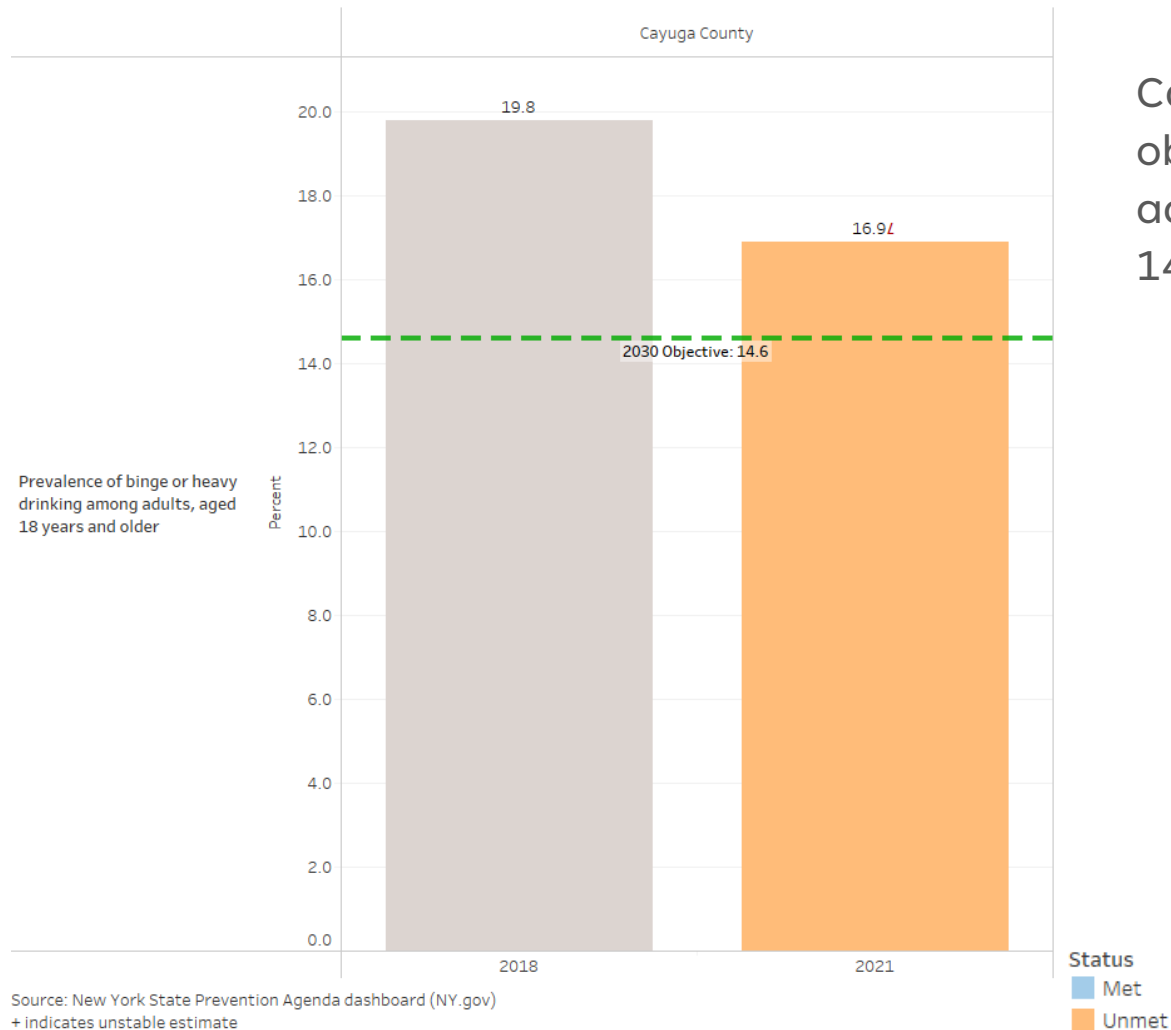
Status
■ Met
■ Unmet



ALCOHOL



Domain: Social and Community Context
Priority Area: Alcohol



Source: New York State Prevention Agenda dashboard (NY.gov)

+ indicates unstable estimate

Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

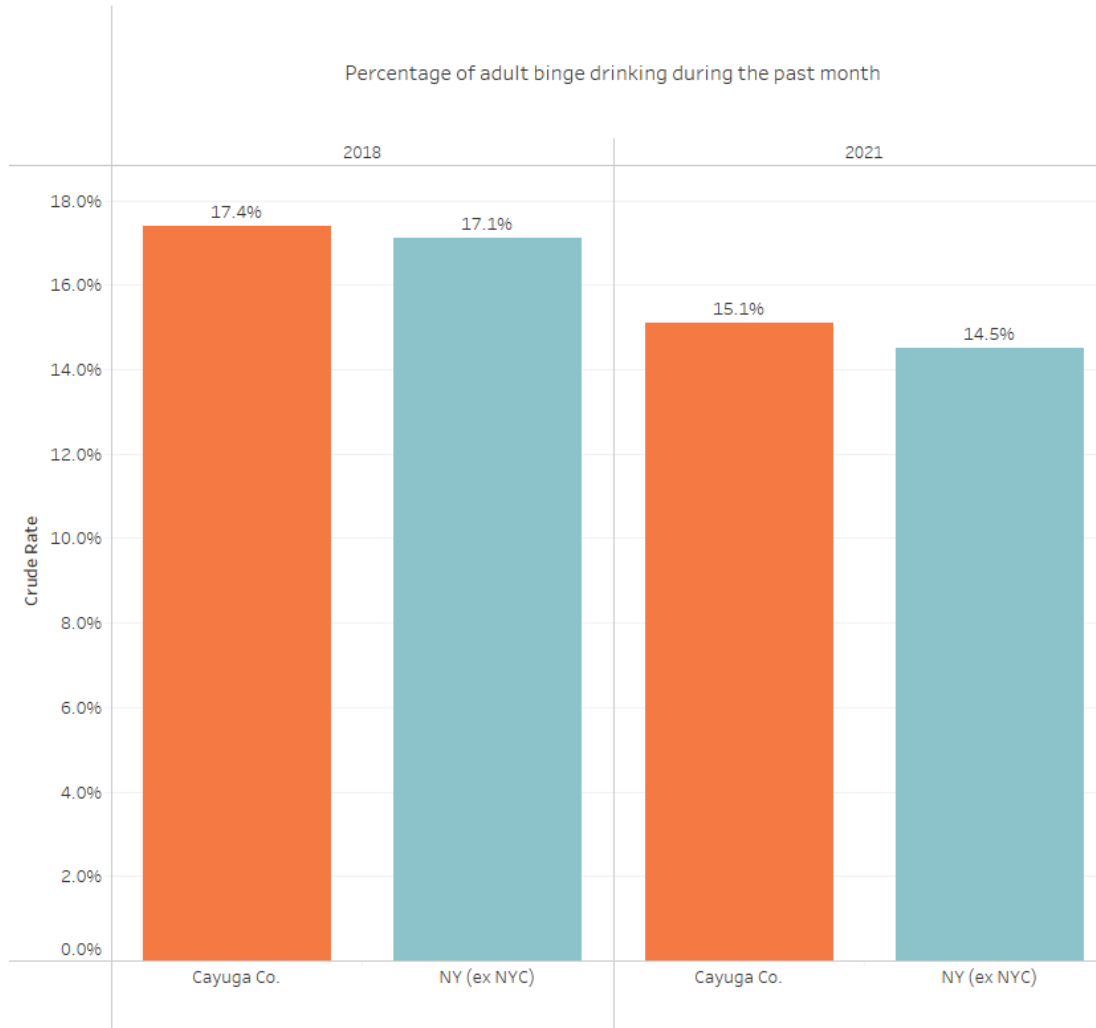
Cayuga County does not currently meet the 2030 objectives for binge or heavy drinking among adults, although the percentage has declined by 14.6% since 2018.



PRIORITY ALCOHOL USE: BINGE DRINKING



Health Domain: Promote Mental Health and Prevention Substance Abuse



- Alcohol abuse among county residents, represented by adults who binge drink, is slightly above state benchmarks.
- Both the county and state percentages have declined from 2018 reporting.

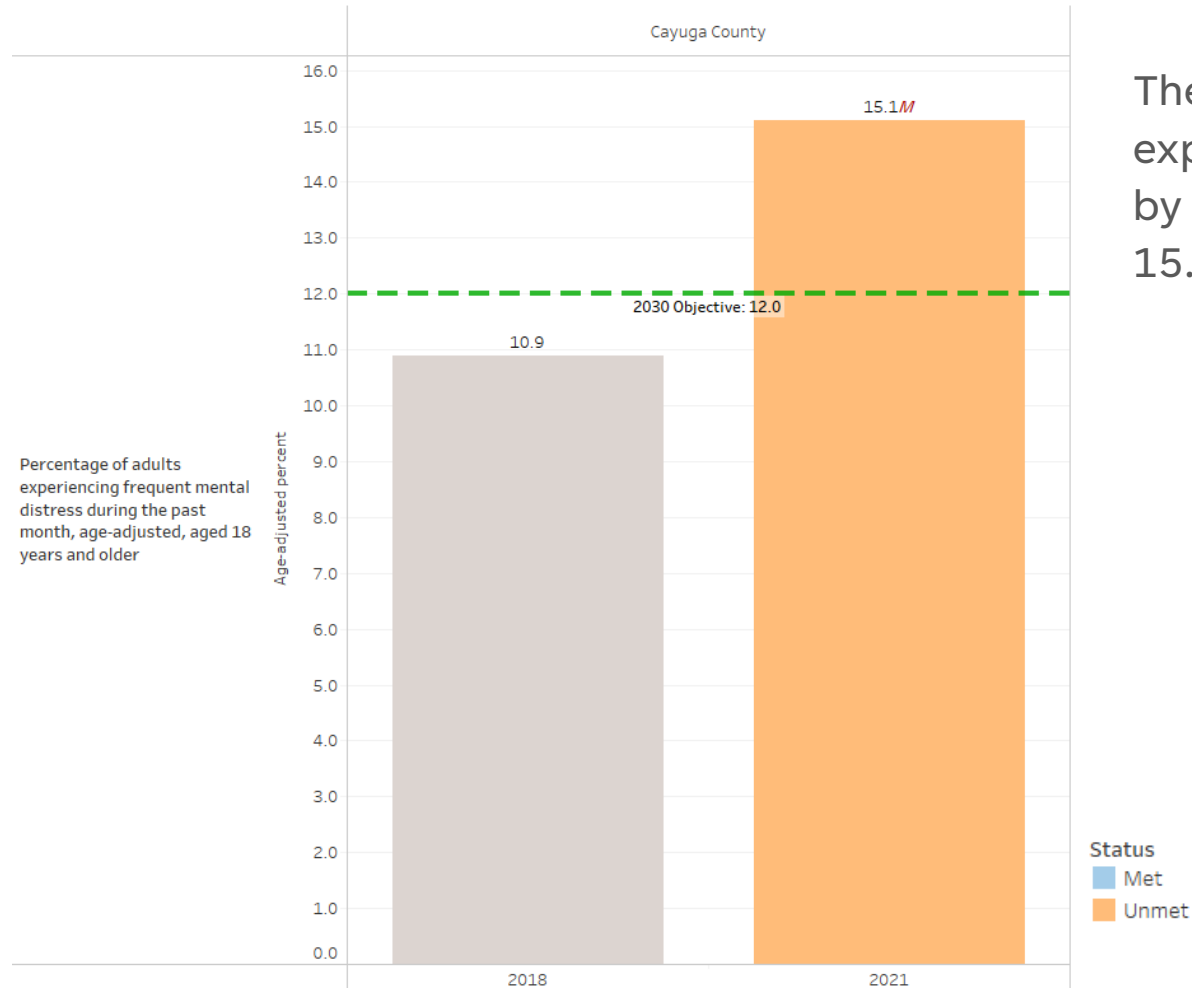
Source: Behavioral Risk Factor Surveillance System (BRFSS) Health Indicators by County and Region (ny.gov)
Shows Crude Rate



ANXIETY AND STRESS



Domain: Social and Community Context
Priority Area: Anxiety and Stress



Source: New York State Prevention Agenda dashboard (NY.gov)

+ indicates unstable estimate

Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

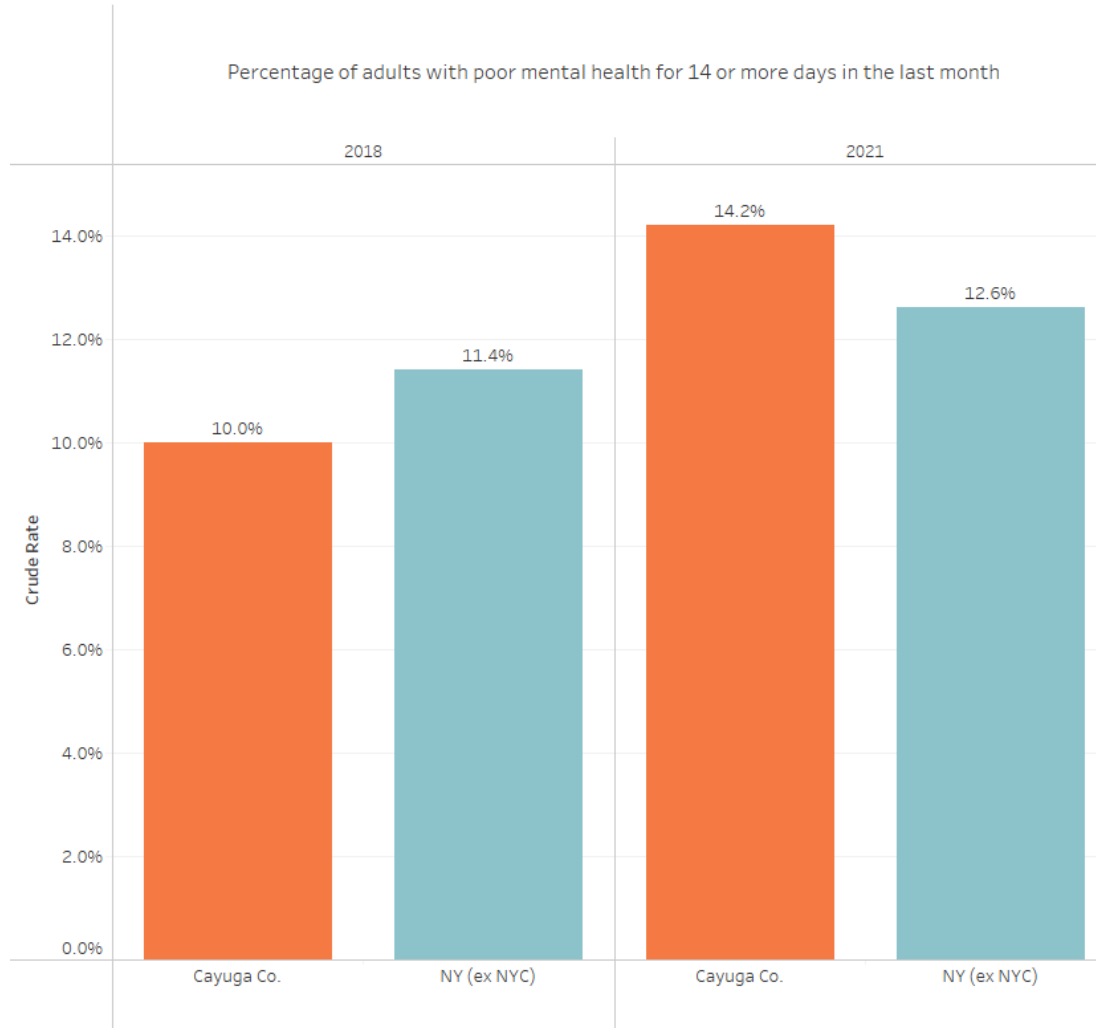
The percentage of adults in Cayuga County experiencing frequent mental distress has increased by 39.5% since 2018. The most recent percentage of 15.1 exceeds the 2030 objective of 12.0.



ANXIETY AND STRESS: POOR MENTAL HEALTH



Health Domain: Promote Mental Health and Prevention Substance Abuse



- The percent reporting poor mental health for 14 or more days in a month has increased among Cayuga County adults from 2018 to 2021 and has exceeded the state benchmark.

“I’ve seen a significant increase in mental health needs, especially among children, and a lack of services/supports.”

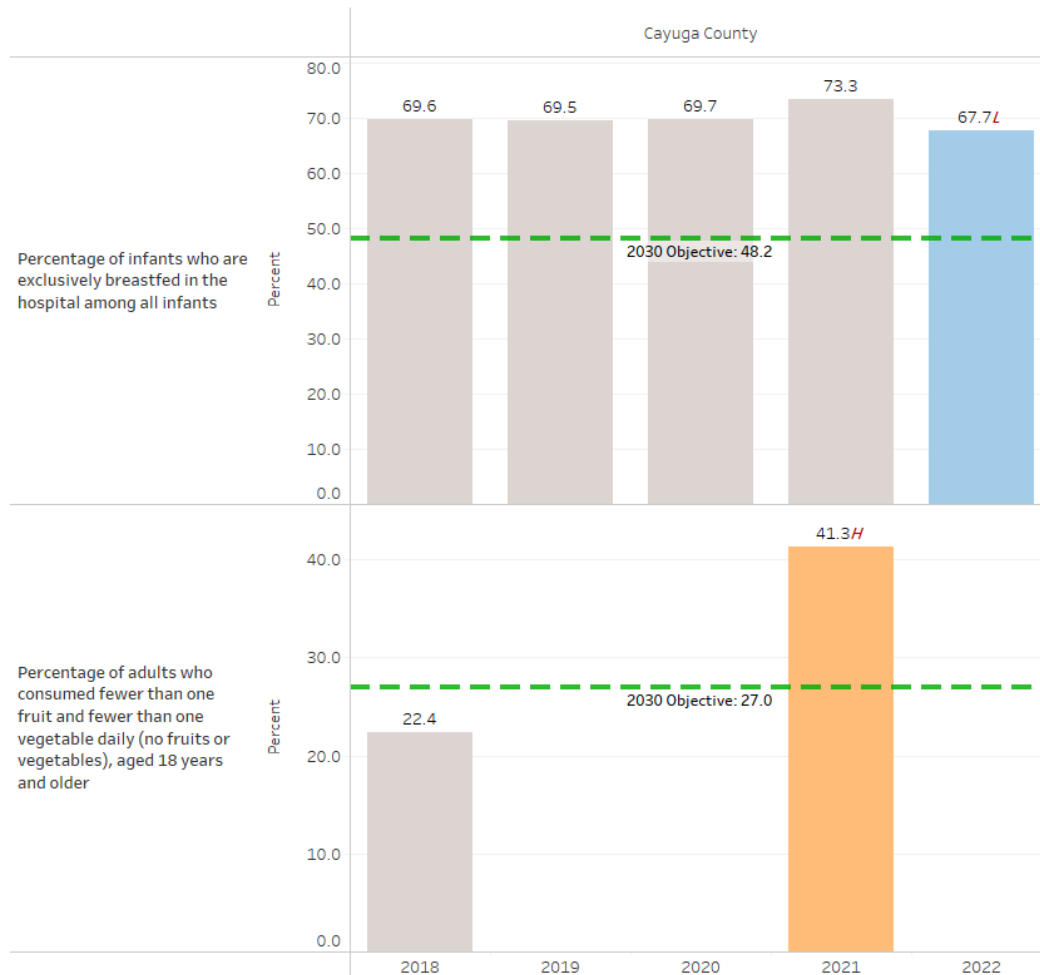
– Survey Respondent



HEALTHY EATING



Domain: Social and Community Context
Priority Area: Healthy Eating



Source: New York State Prevention Agenda dashboard (NY.gov)

+ indicates unstable estimate

Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Prevention Agenda objectives for breastfed infants in Cayuga County meet the state's 2030 goal. This percentage has been consistently high year over year.

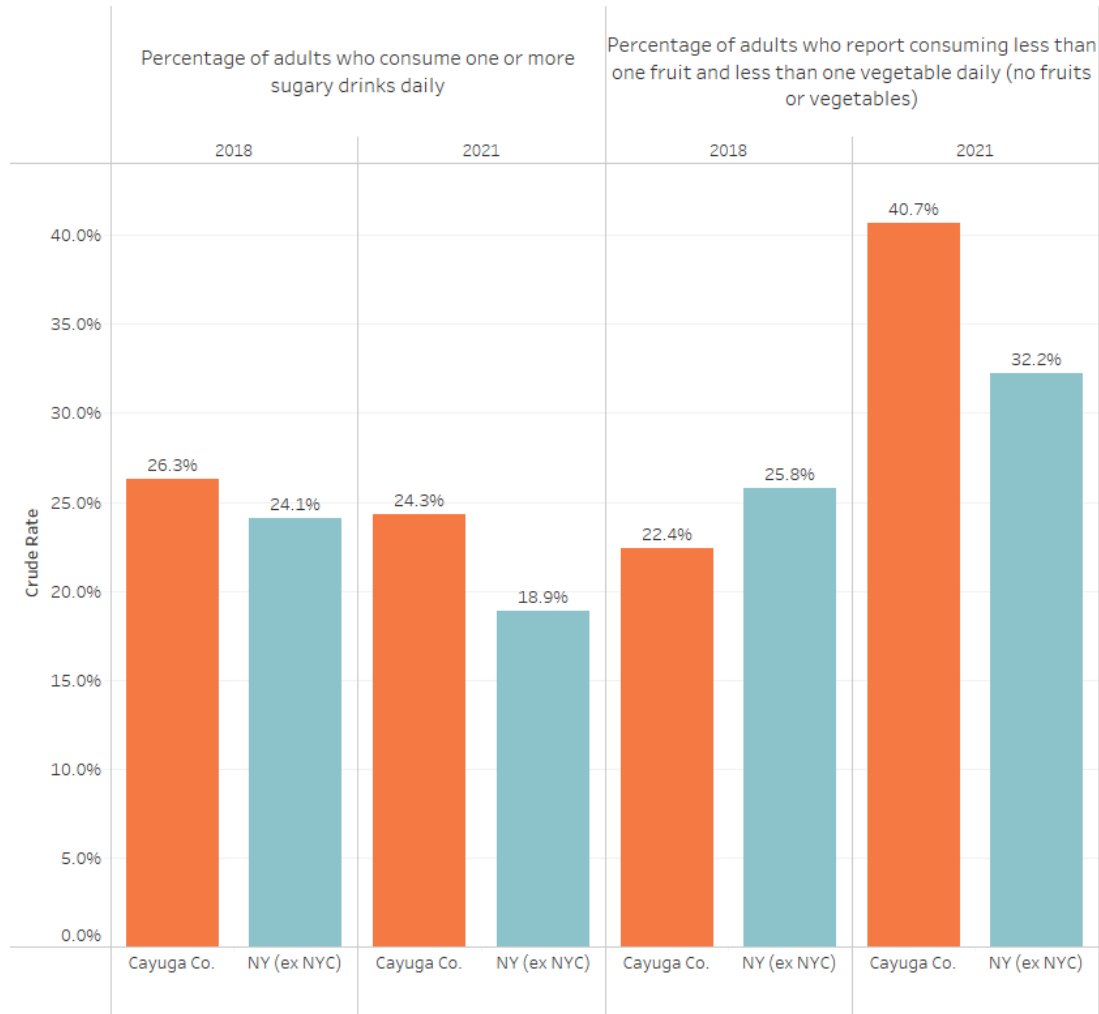
The objective for healthy eating targets among adults is unmet, and is 53% above the 2030 Objective of 27. This indicator is considered a high concern for the county.



HEALTHY EATING: EATING HABITS



Health Domain: Prevent Chronic Diseases



Source: Behavioral Risk Factor Surveillance System (BRFSS) Health Indicators by County and Region (ny.gov)
Shows Crude Rate

- The percentage of adults who consume one or more sugary drinks a day remains higher than the state benchmark, which has declined from 2018.
- The percentage of adults consuming no fruits or vegetables daily increased between 2018 and 2021 and far exceeds the state benchmark.



PRIMARY PREVENTION SUBSTANCE MISUSE AND OVERDOSE PREVENTION



Domain: Social and Community Context
Priority Area: Primary Prevention Substance Misuse and Overdose Prevention



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Buprenorphine prescription rates and OASAS treatment rates in Cayuga County meet the 2030 objectives.

Relatedly, drug overdose death rates in Cayuga County have shown a positive declining trend since 2020, meeting the 2030 objective as of 2023.

“Our addiction problem was addressed jointly with ACH. It was a community effort.”

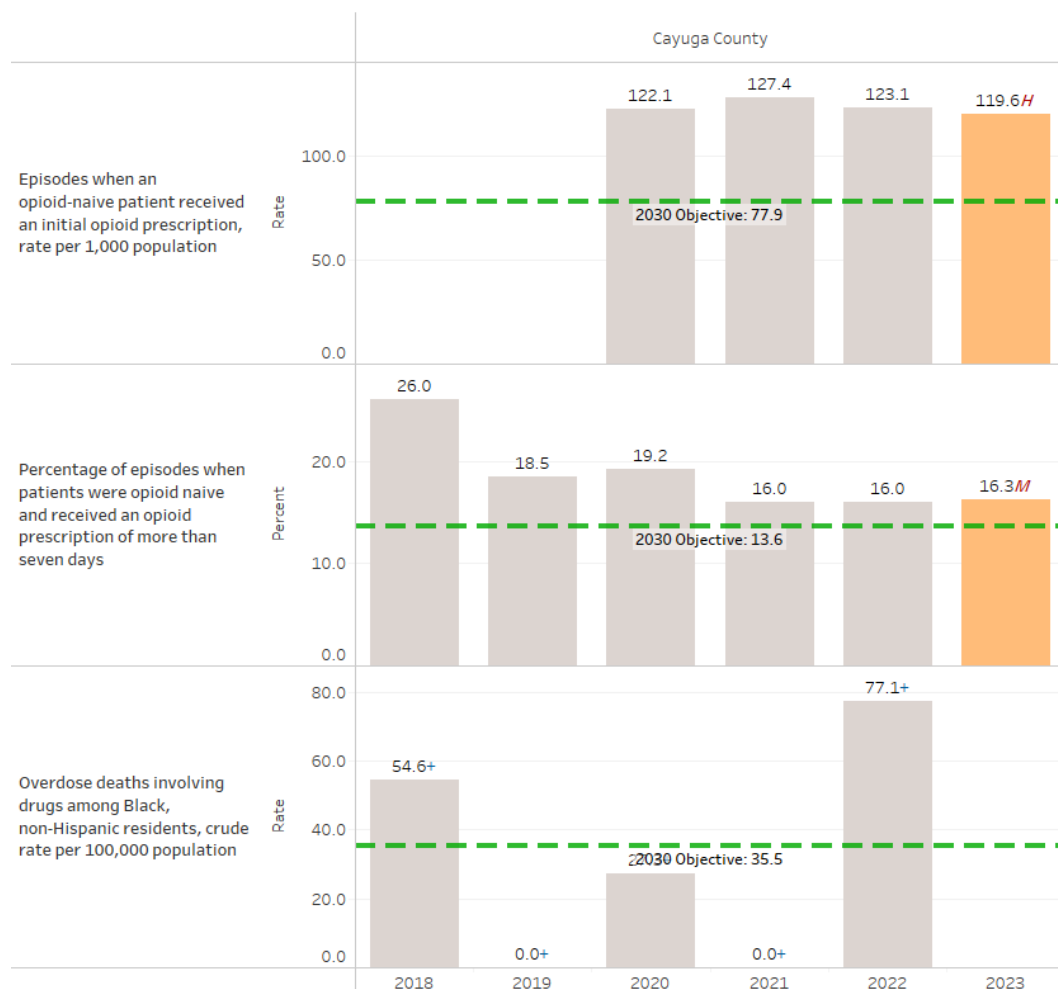
- Community Stakeholder



PRIMARY PREVENTION SUBSTANCE MISUSE AND OVERDOSE PREVENTION



Domain: Social and Community Context
Priority Area: Primary Prevention Substance Misuse and Overdose Prevention



Source: New York State Prevention Agenda dashboard (NY.gov)

+ indicates unstable estimate

Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Preventative measure objectives for 2030 for initial opioid prescriptions are currently unmet within Cayuga County.

Episodes where an opioid- naïve patient received an initial opioid prescription rates are 53.5% higher than the 2030 Objective. Additionally, the percentage of episodes when patients were opioid naïve and received an opioid prescription of more than seven days, while it has declined from 2018 to 2023, is still 19.9% higher than the 2030 Objective.

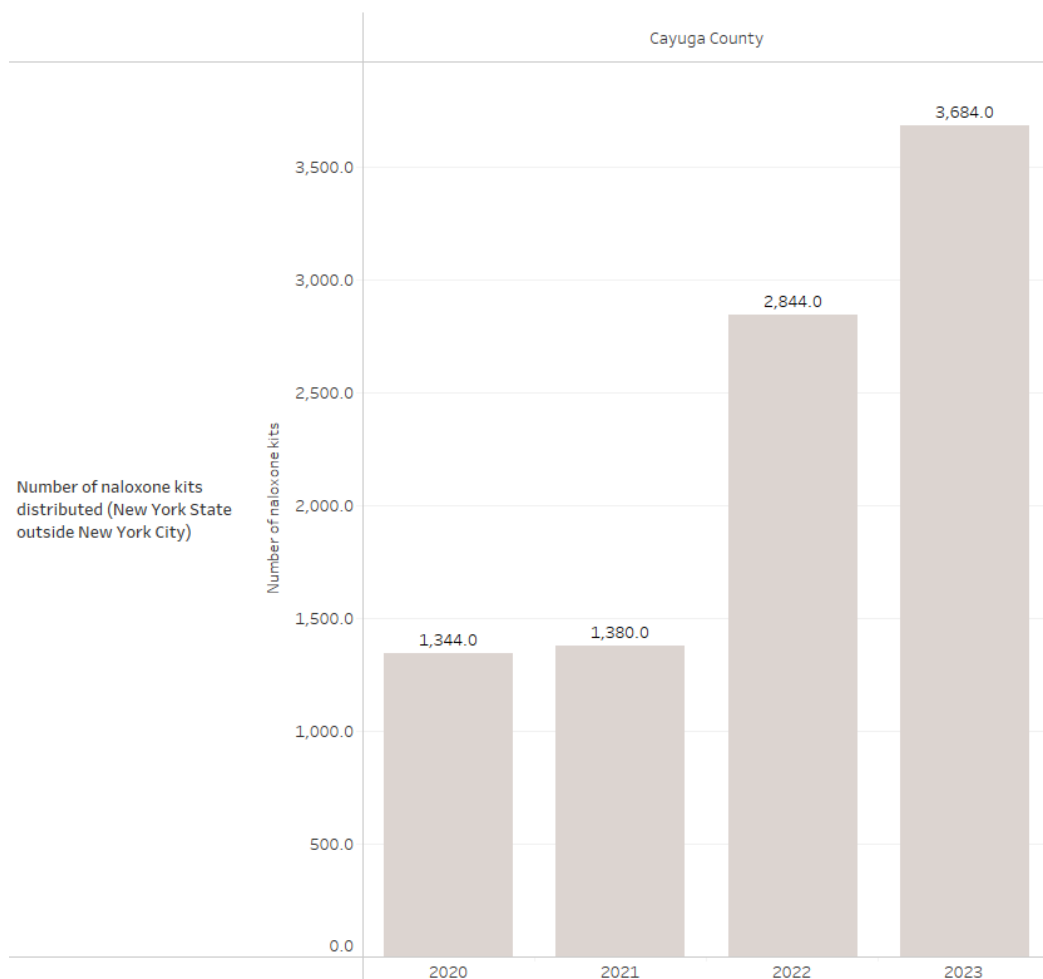
Data Status
Suppressed Met
Unmet



PRIMARY PREVENTION SUBSTANCE MISUSE AND OVERDOSE PREVENTION



Domain: Social and Community Context
Priority Area: Primary Prevention Substance Misuse and Overdose Prevention



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Cayuga County has greatly increased the number of naloxone kits distributed.

“Community collaboration amongst health and human service organizations, including the hospital, has been good. We’re a rare breed when it comes to that.”

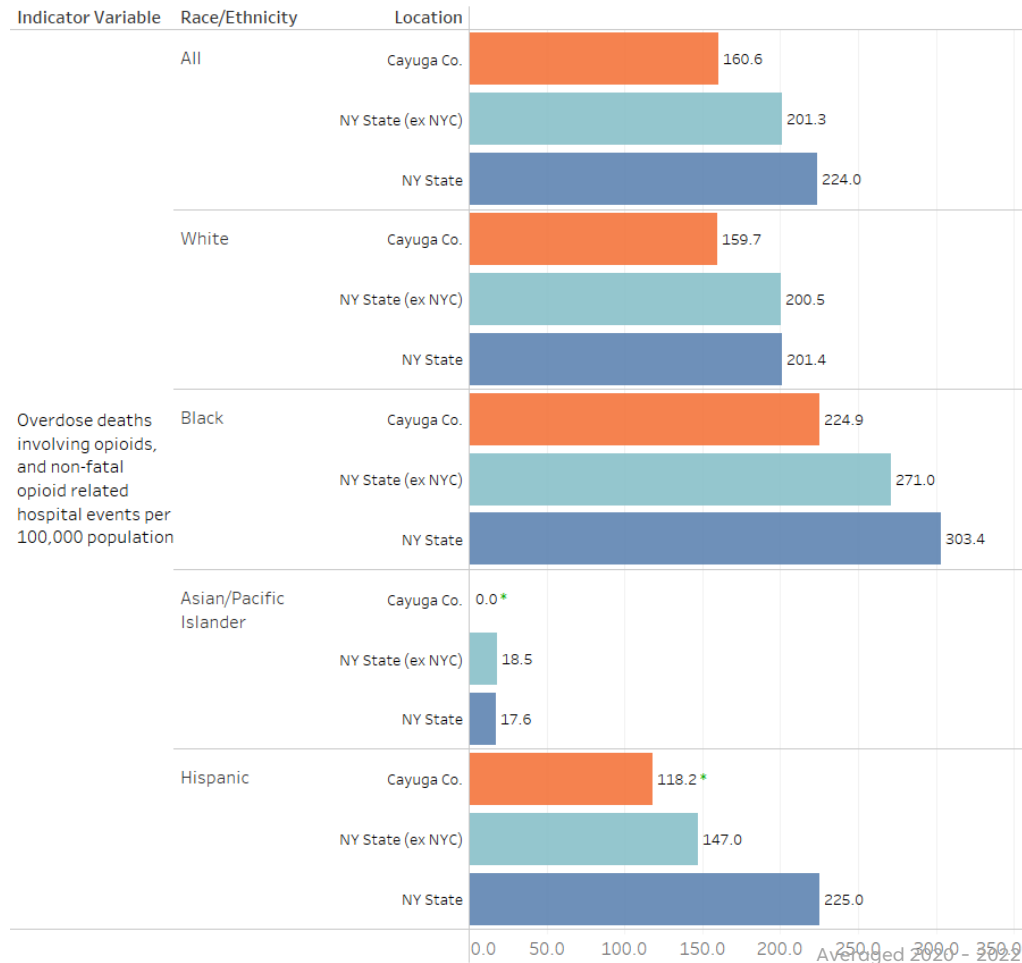
- Community Stakeholder



PRIMARY PREVENTION, SUBSTANCE MISUSE, AND OVERDOSE PREVENTION: OPIOID DEATHS



Deaths



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

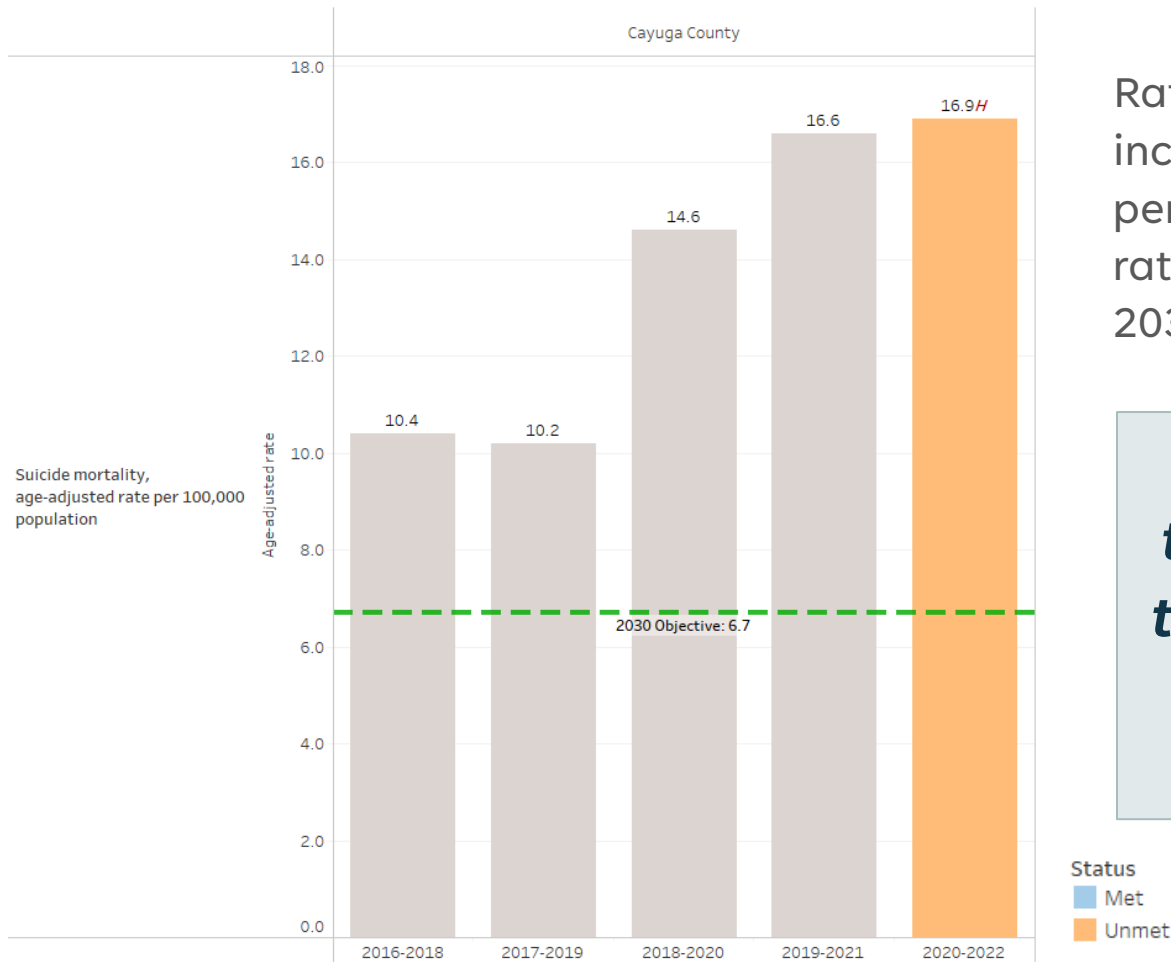
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Deaths and non-fatal opioid-related hospitalizations are below the state benchmarks, within the overall population, and among the different racial/ethnic cohorts.

SUICIDE



Domain: Social and Community Context
Priority Area: Suicide



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Rates of suicide mortality in Cayuga County have increased since the 2016-2018 data collection period. Currently, the suicide mortality age-adjusted rate per 100,000 individuals is 16.9, 152% above the 2030 objective of 6.7.

“We don’t have the beds for treatment and not enough providers to address the [mental health] issue.

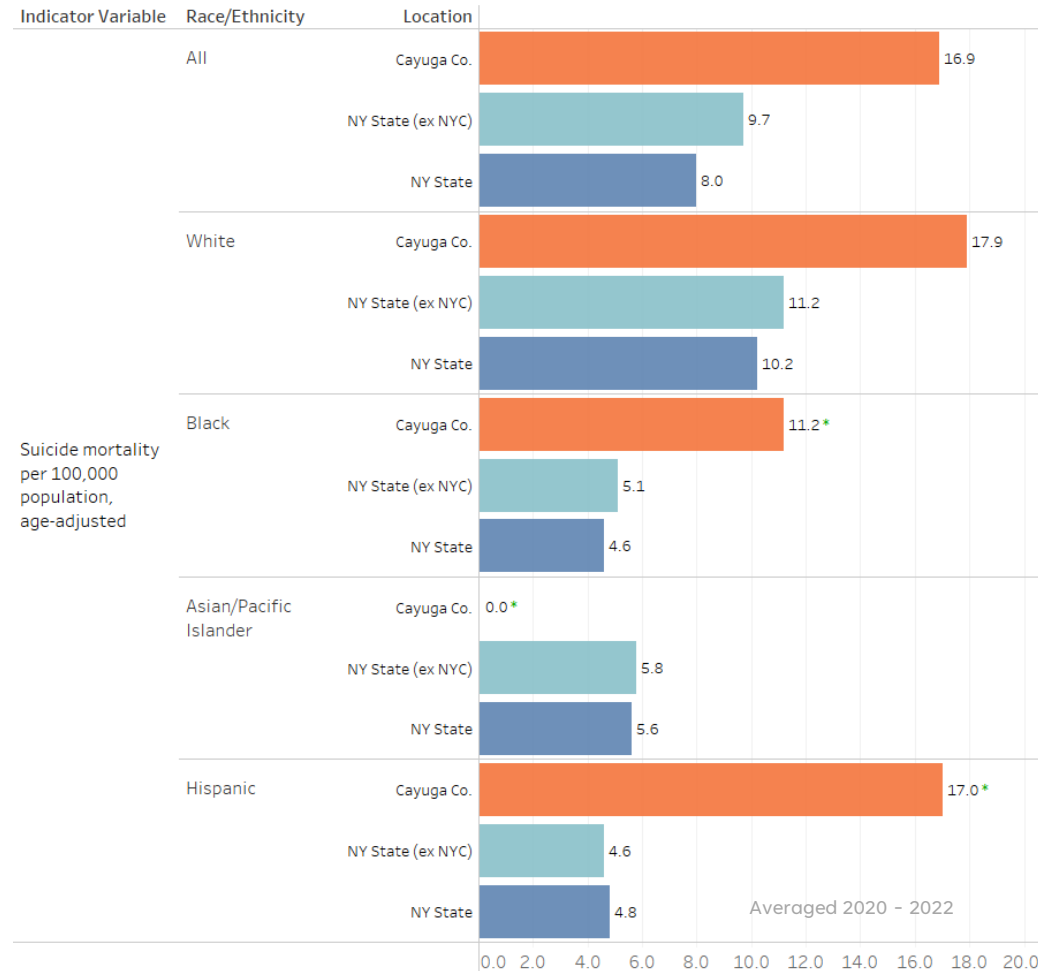
- Community Stakeholder



SUICIDE: SUICIDE MORTALITY



Mortality



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

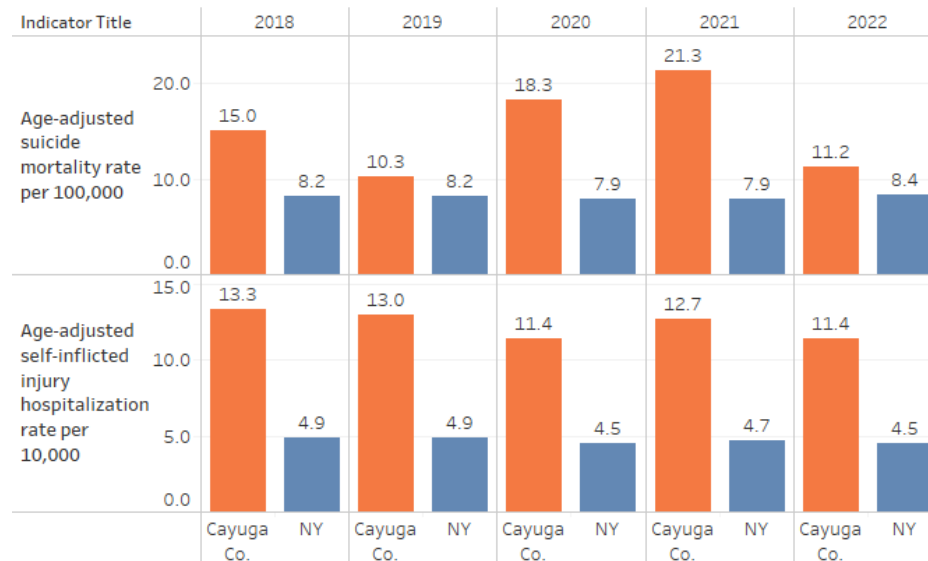
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian/Pacific Islander (including Hispanic), and Hispanic (of any race).

- Suicide mortality rates are much higher in Cayuga County compared to state benchmarks and are elevated among all racial/ethnic cohorts where data is available.

Injury Indicators



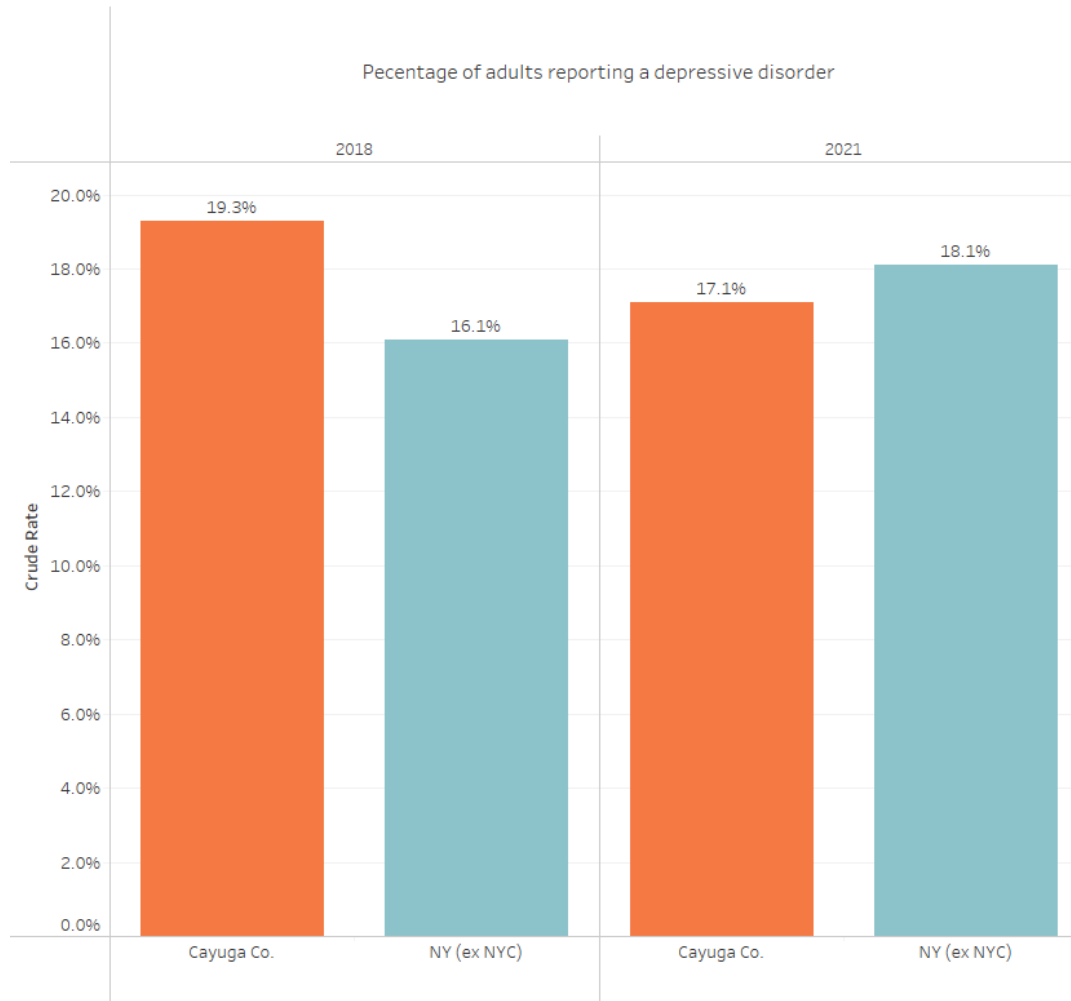
Source: CHIRS Dashboard (ny.gov)



PERCENTAGE OF DEPRESSIVE DISORDER



Health Domain: Promote Mental Health and Prevention Substance Abuse



- The percentage of adults reporting a depressive disorder has declined, based on the 2018 and 2021 data periods reported by the New York Behavioral Risk Factor Surveillance System (BRFSS).

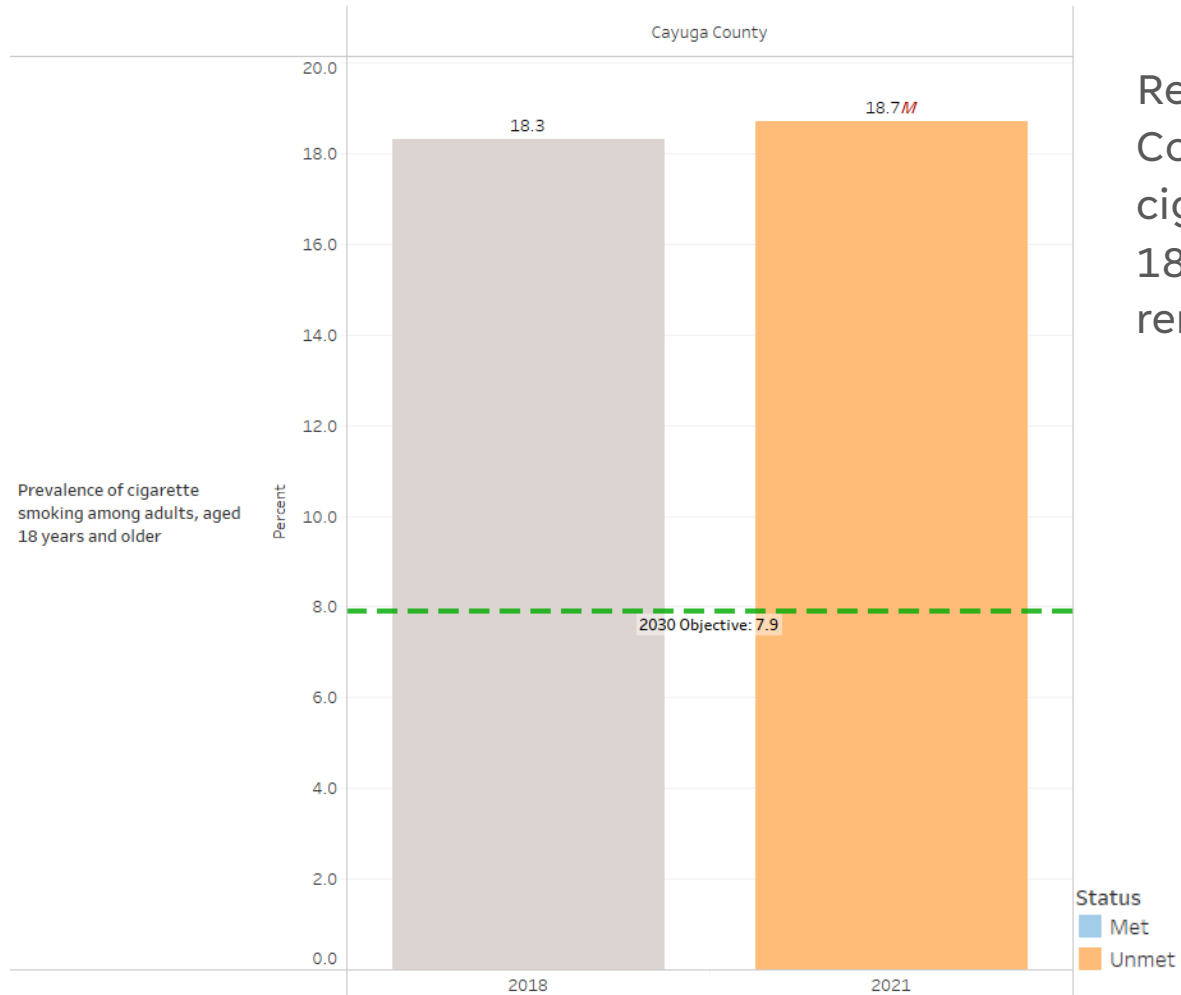
Source: Behavioral Risk Factor Surveillance System (BRFSS) Health Indicators by County and Region (ny.gov)
Shows Crude Rate



TOBACCO AND E-CIGARETTES



Domain: Social and Community Context
Priority Area: Tobacco and eCigarettes



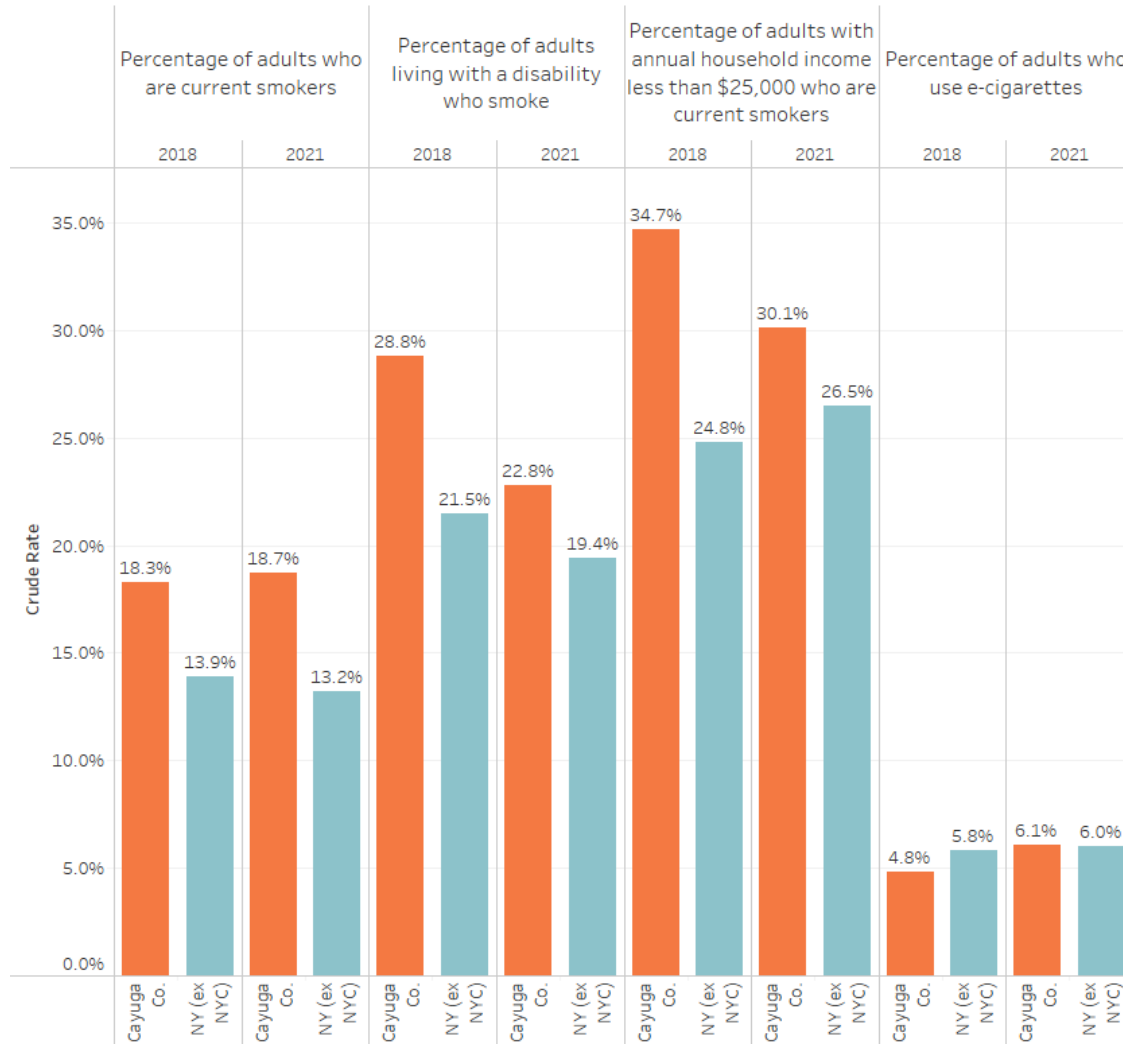
2025-2030 Prevention Agenda Indicators

Reducing the prevalence of smoking in Cayuga County remains a challenge. The prevalence of cigarette smoking among adults increased from 18.3% to 18.7% from 2018 to 2021 and currently remains 136% above the 2030 objective of 7.9.

TOBACCO/E-CIGARETTE USE: SMOKING



Health Domain: Prevent Chronic Diseases



- Cayuga County continues to have a higher percentage of adults who smoke tobacco compared to the state benchmark, especially among disabled adults and adults with an annual household income of less than \$25,000. However, those percentages have declined from 2018 to 2021, indicating some progress toward the prior CHNA goals.
- E-cigarette use is increasing within the county and the state.





NEIGHBORHOOD AND BUILT ENVIRONMENT

- 2025-2030 Prevention Agenda





NEIGHBORHOOD AND BUILT ENVIRONMENT

The 2025-2030 Prevention Agenda for New York State identifies Neighborhood and Built Environment as a priority domain for addressing resident health. Where individuals live and how they access care are critical to the overall health of a community. Insufficient housing leads directly to poor health outcomes as it can expose individuals to harsh environmental elements. Public transportation availability enables the community to access not only health services but proper food sources as well. Injuries from assaults and motor vehicle-related incidents are preventable with proper interventions and safeguards. The following statistics related to Prevention Agenda priorities were examined for Cayuga County using data from the 2025-2030 Prevention Agenda dashboard and supplemented by other data sources:

Access to Community Services and Support

Percentage of higher vulnerability areas that have a cooling center

Injuries and Violence

Rate of emergency department (ED) visits of assault-related injuries per 10,000 New York residents

Rate of emergency department (ED) visits of motor vehicle-related pedestrian injuries per 10,000 New York Residents

Ratio of rates of assault-related emergency department (ED) visits of Black, non-Hispanic individuals compared to White, non-Hispanic individuals

Opportunities for Active Transportation and Physical Activity

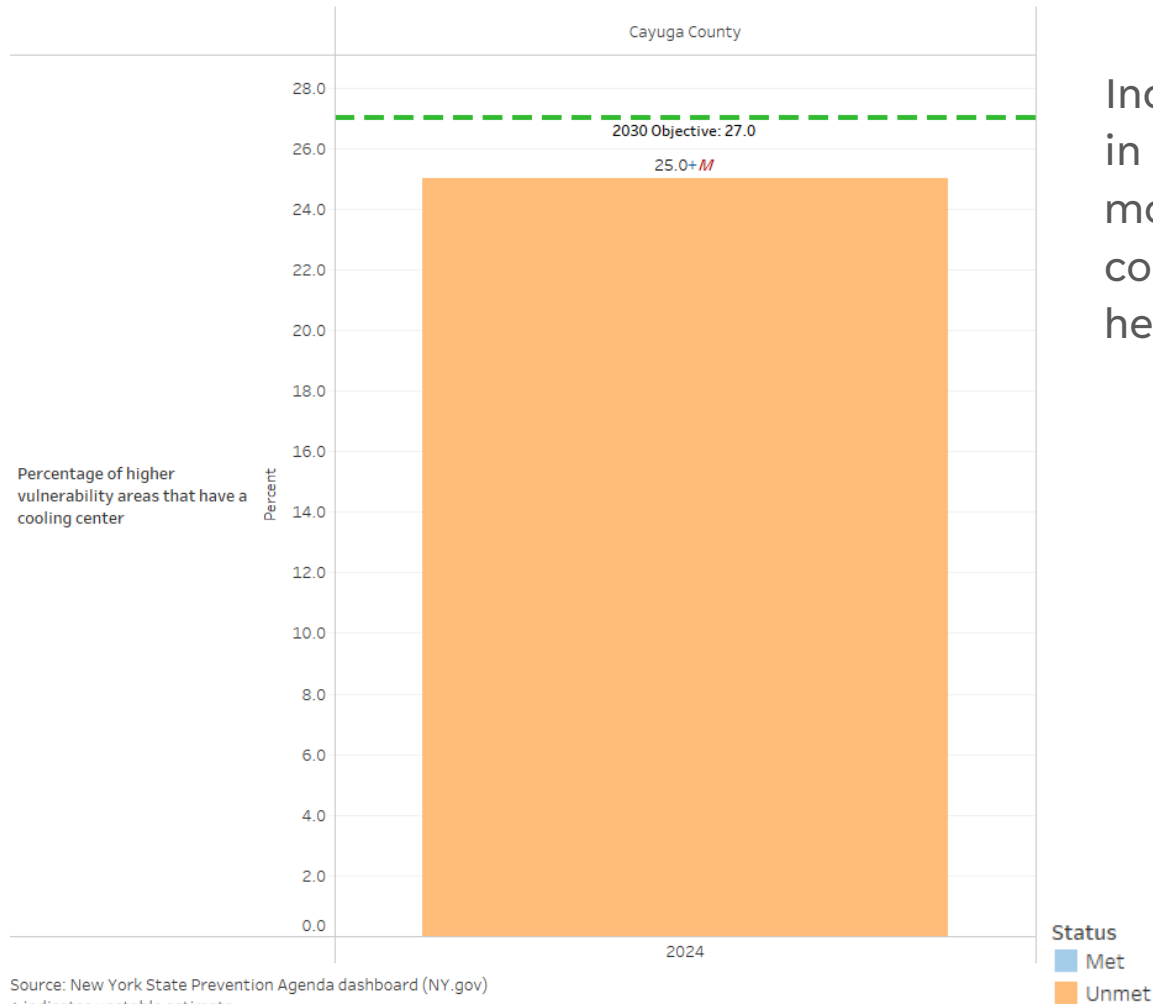
Percentage of adults who are physically active, aged 18 years and older





ACCESS TO COMMUNITY SERVICES AND SUPPORT

Domain: Neighborhood and Built Environment
Priority Area: Access to Community Services and Support



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

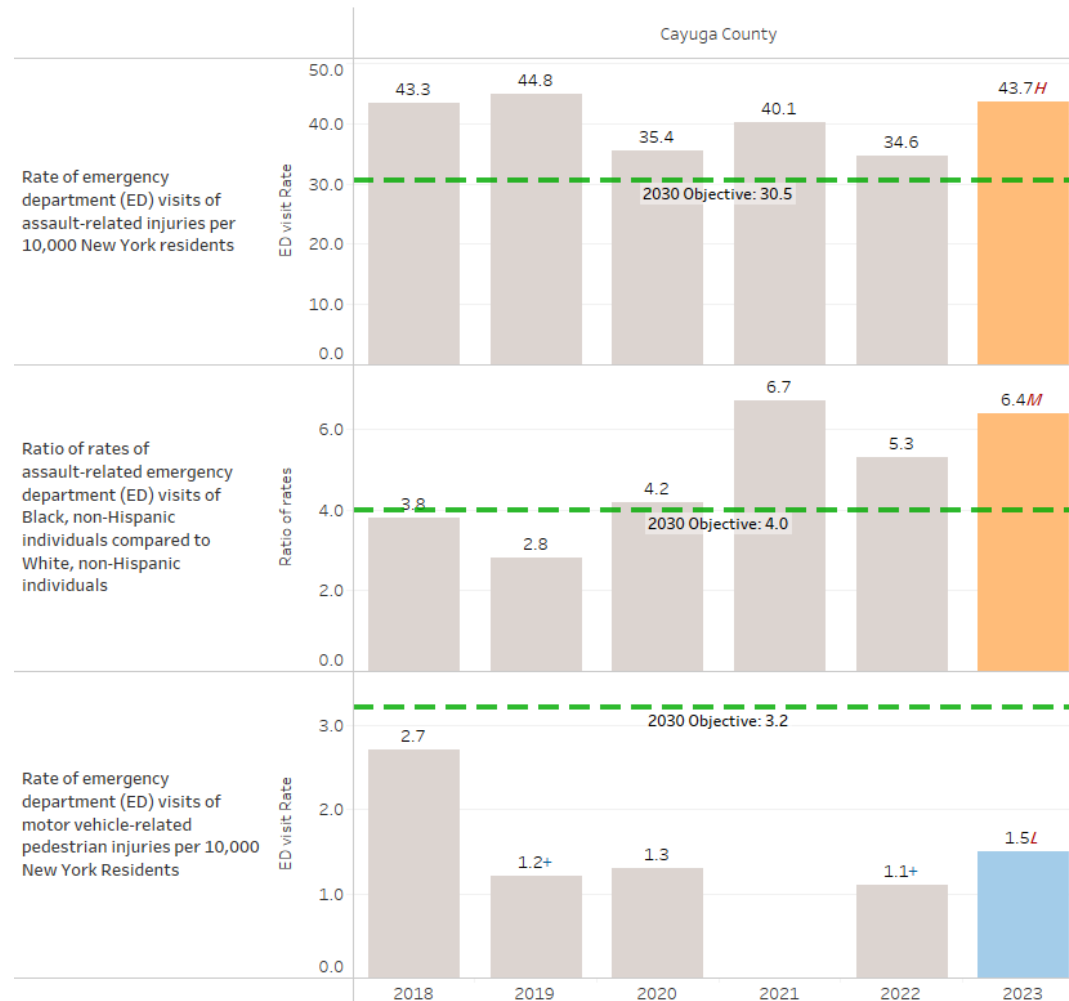
Increasing exposure to extreme weather is a concern in Cayuga County, particularly among older and more vulnerable populations. The availability of cooling centers during high heat events can prevent health-related episodes.





INJURIES AND VIOLENCE

Domain: Neighborhood and Built Environment
Priority Area: Injuries and Violence



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Assault-related emergency visit rates in Cayuga County, overall and in comparison between Black non-Hispanic and White non-Hispanic individuals, do not currently meet 2030 objectives.

Motor vehicle-related pedestrian injury ED visit rates are well below the 2030 objective.

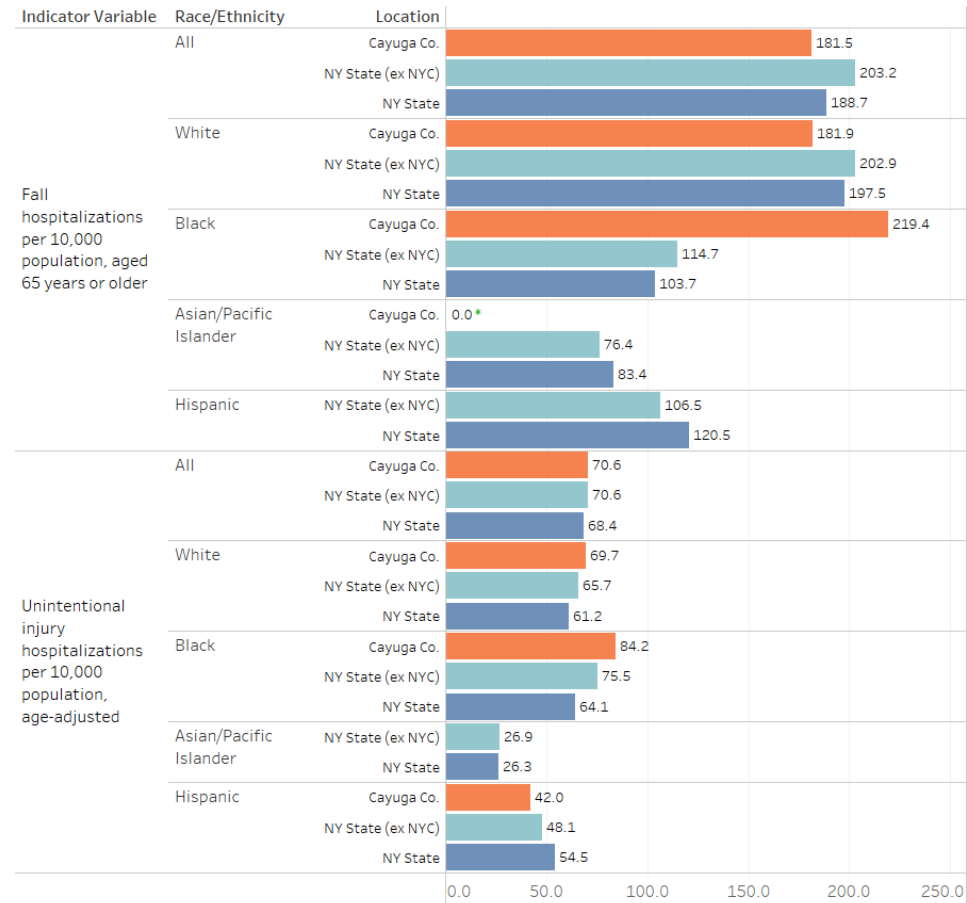
Status
Met
Unmet





INJURIES AND VIOLENCE: HOSPITALIZATIONS

Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

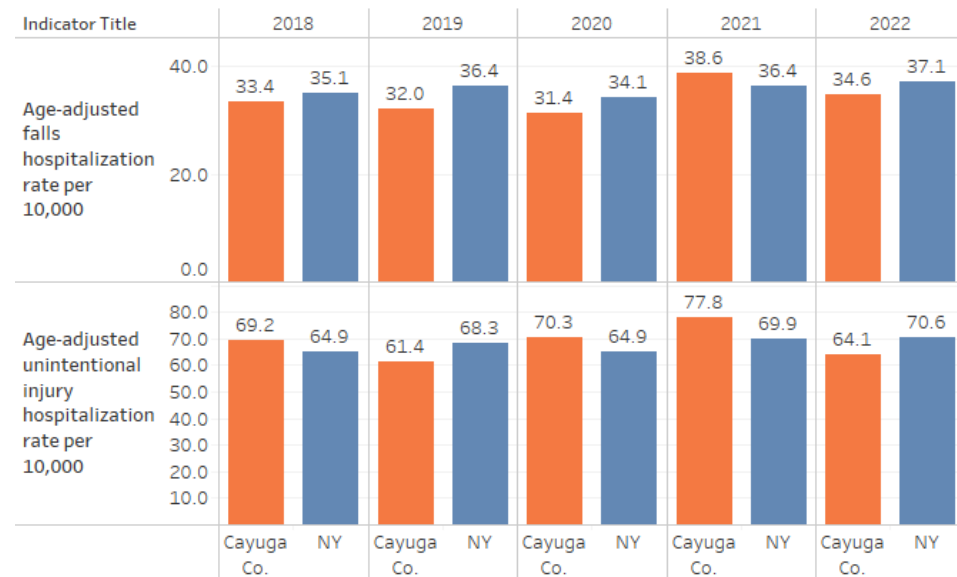
~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

Averaged 2020 - 2022

- Hospitalizations for persons aged 65 and older due to falls is lower than state benchmarks overall, except among the Black population.
- Overall unintentional injury hospitalization rates are in line with state benchmarks, but elevated among White and Black cohorts.

Injury Indicators



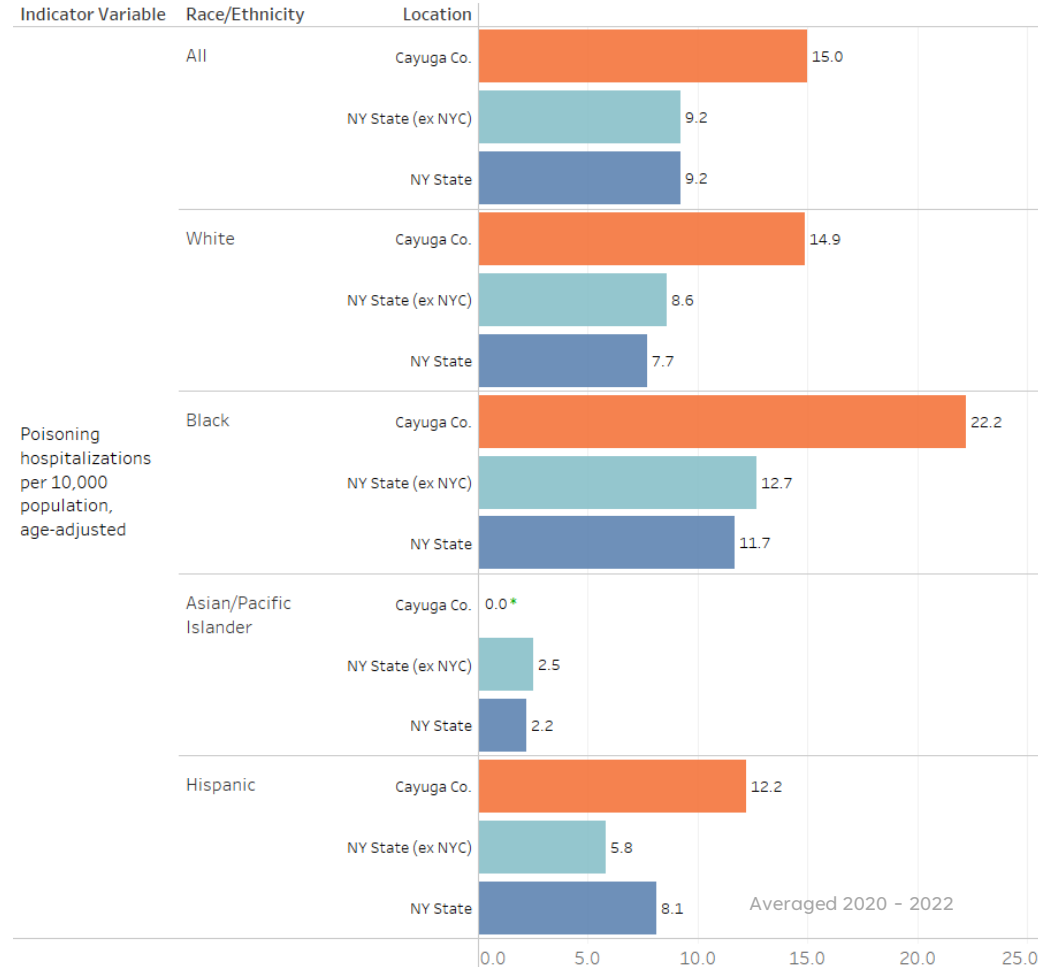
Source: CHIRS Dashboard (ny.gov)





INJURIES AND VIOLENCE: HOSPITALIZATIONS

Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

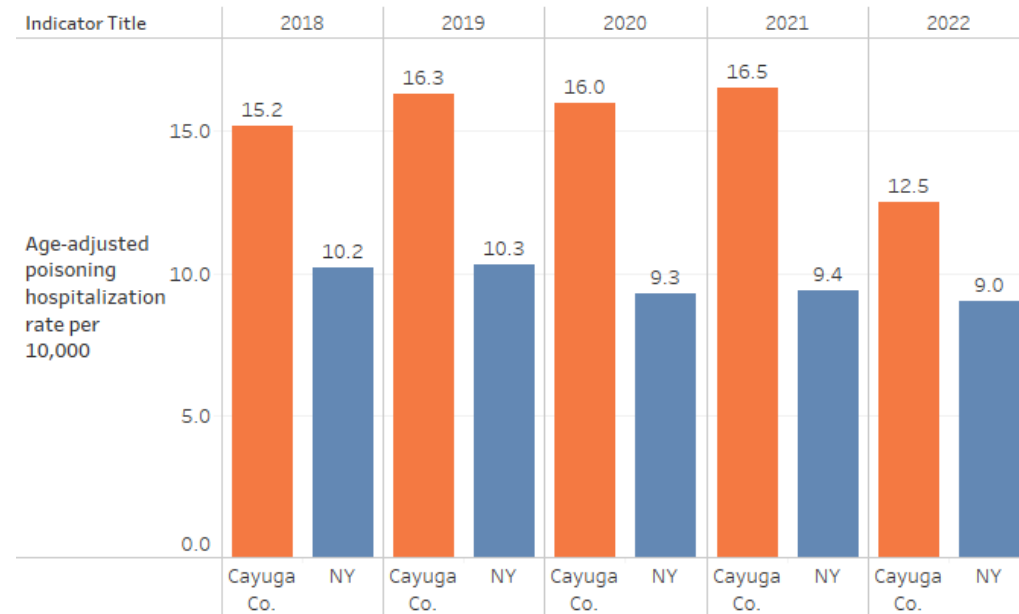
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian/ Pacific Islander (including Hispanic), and Hispanic (of any race).

- Rates of hospitalizations due to accidental poisonings are higher in Cayuga County among the overall population and each racial and ethnic cohort.

Injury Indicators



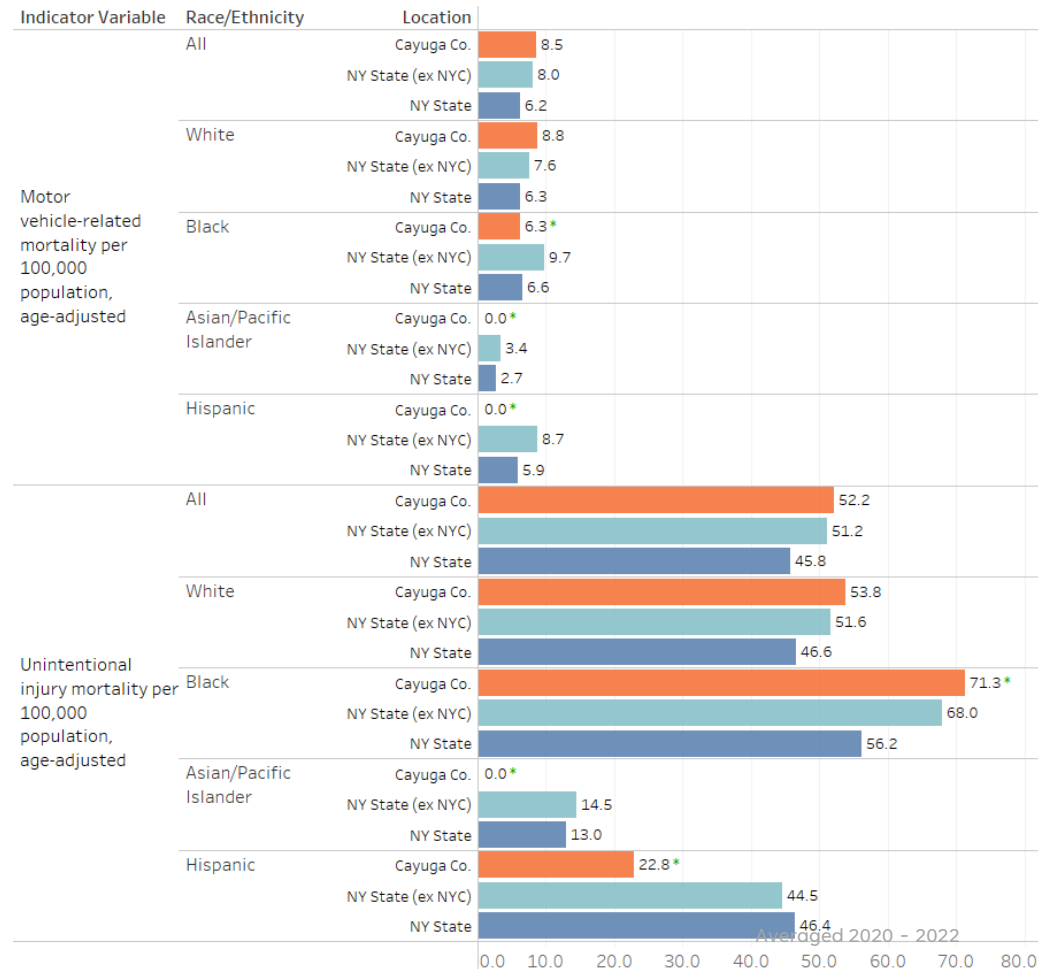
Source: CHIRS Dashboard (ny.gov)





INJURIES AND VIOLENCE: MORTALITY

Mortality



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

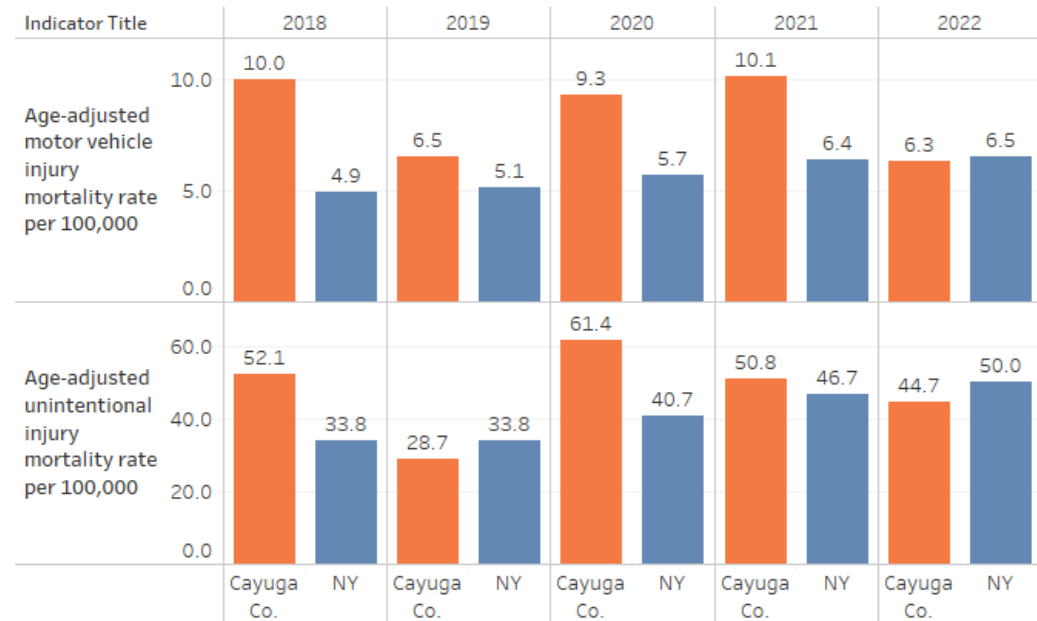
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Motor vehicle-related mortality in Cayuga County is slightly higher than state benchmarks, as is the mortality rate for unintentional injuries.
- Unintentional injury mortality within the black population is 4% higher in Cayuga County.

Injury Indicators



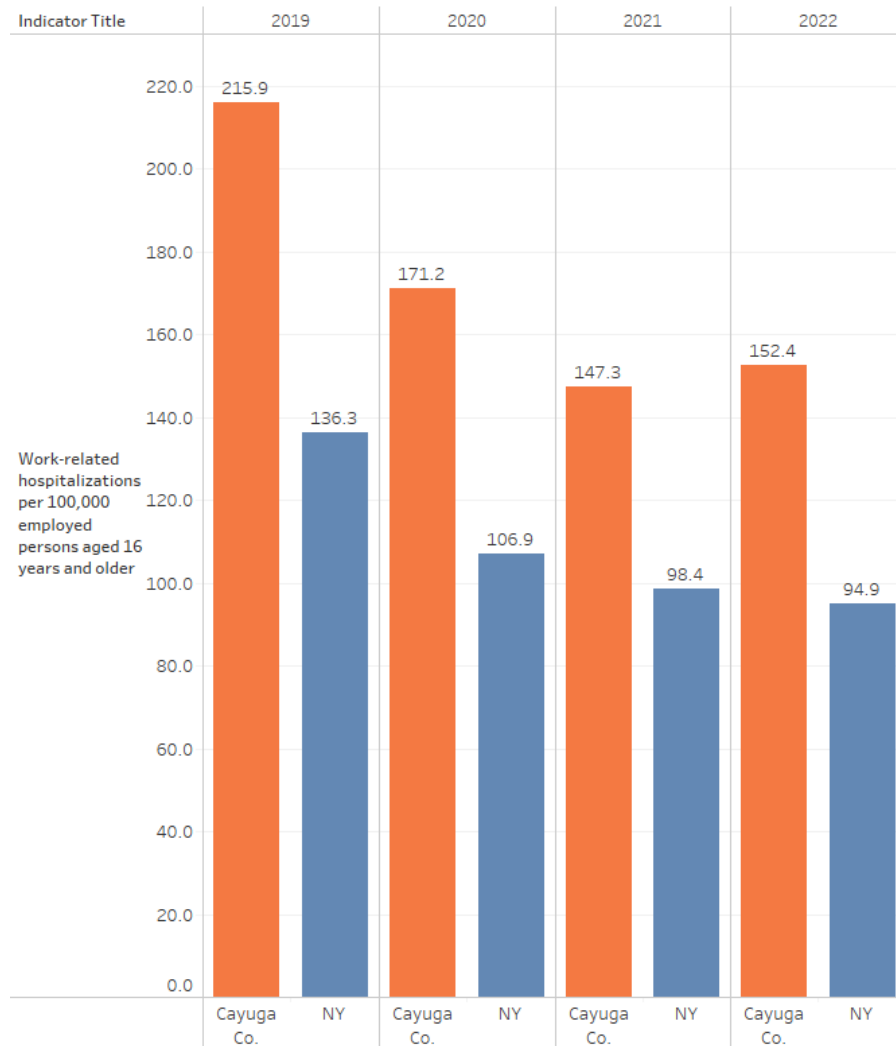
Source: CHIRS Dashboard (ny.gov)





INJURIES AND VIOLENCE: WORK-RELATED HOSPITALIZATIONS

Occupational Health Indicators



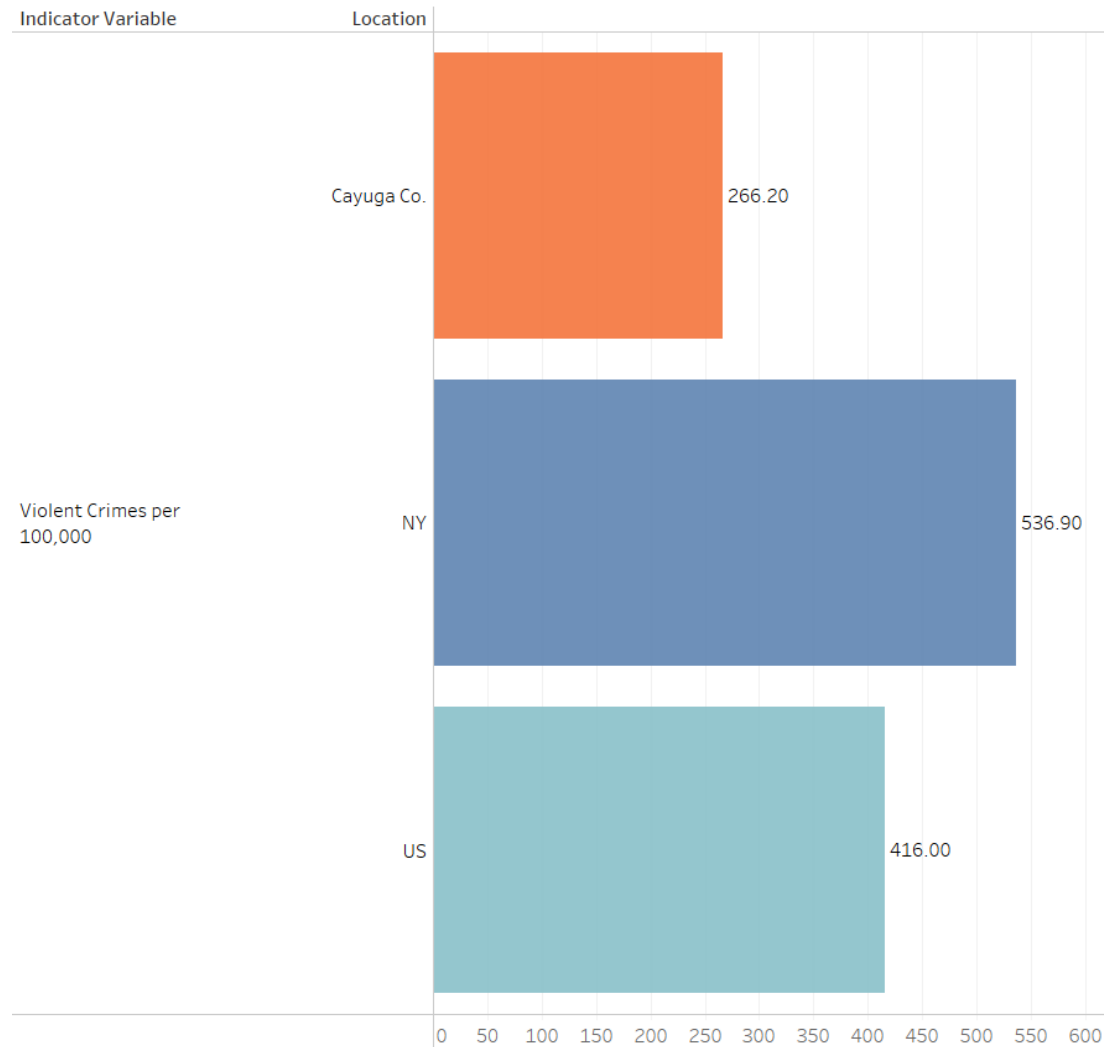
- Work-related hospitalization rates per 100,000 in Cayuga County have declined since 2019, but remain 60.6% higher than the New York state benchmark of 94.9 at 152.4.





INJURIES AND VIOLENCE: CRIME

Crime



Source: FBI Uniform Crime Reports. 2015-2017

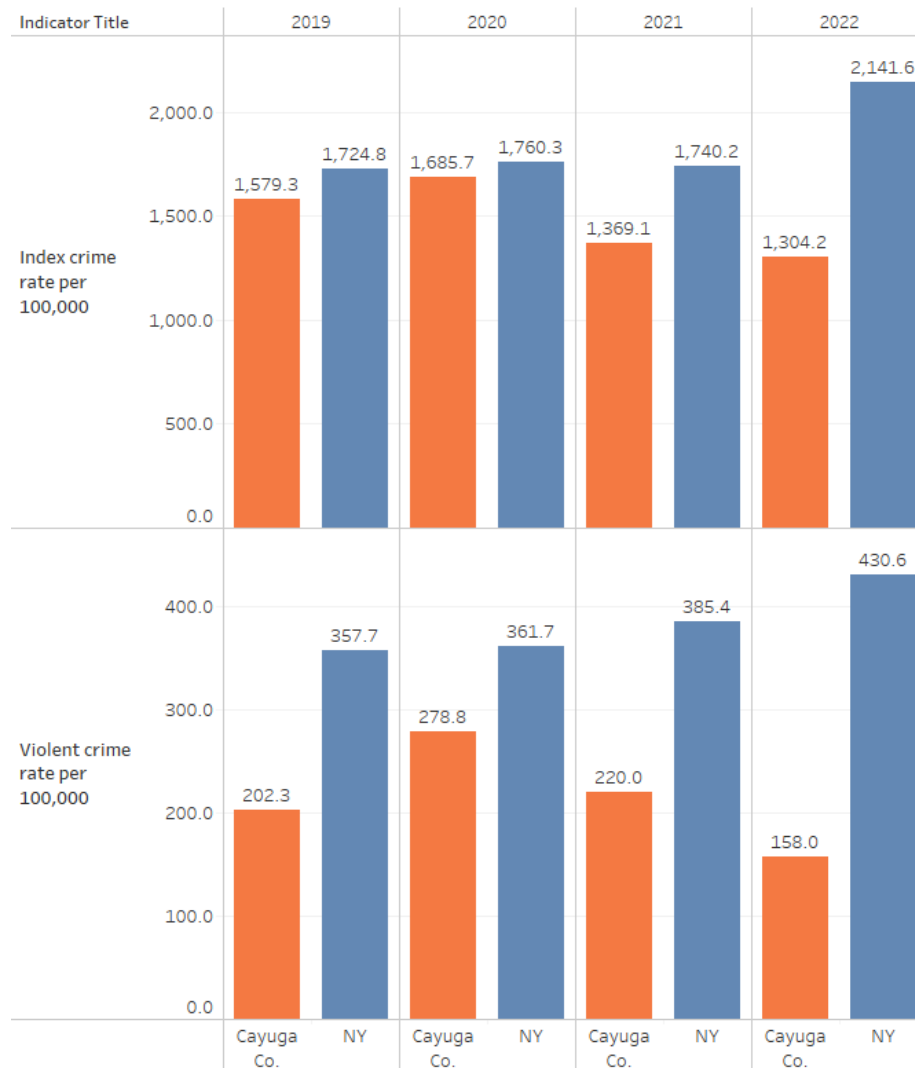
- Violent crime per 100,000 individuals in Cayuga County is considerably lower than state and national rates.





INJURIES AND VIOLENCE: CRIME

Health Status and Social Determinants of Health



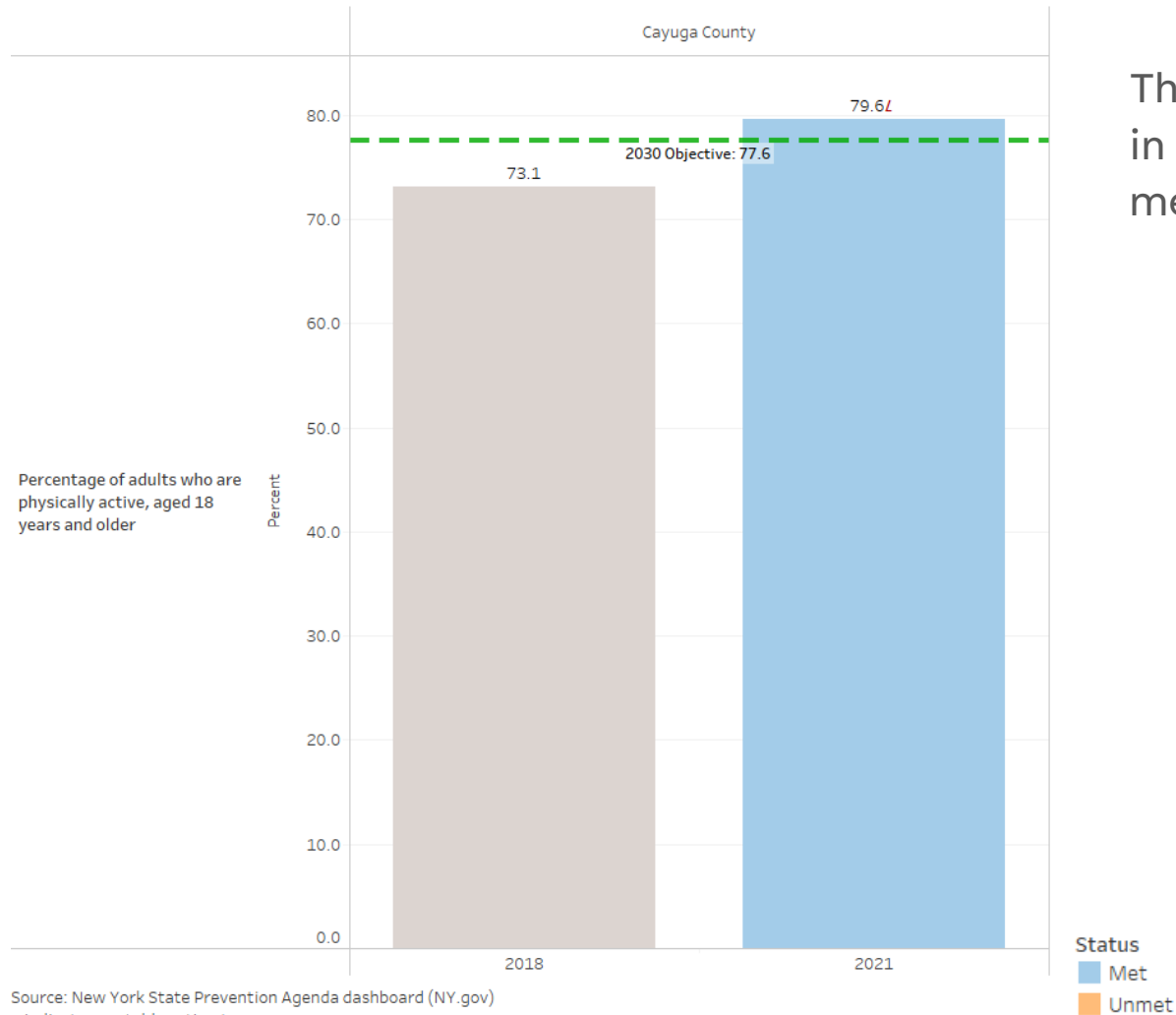
- Both the index crime rate and violent crime rate in Cayuga County have declined since 2019, in contrast to state benchmarks for both indicators, which have increased.





OPPORTUNITIES FOR ACTIVE TRANSPORTATION AND PHYSICAL ACTIVITY

Domain: Neighborhood and Built Environment
Priority Area: Opportunities for Active Transportation and Physical Activity



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

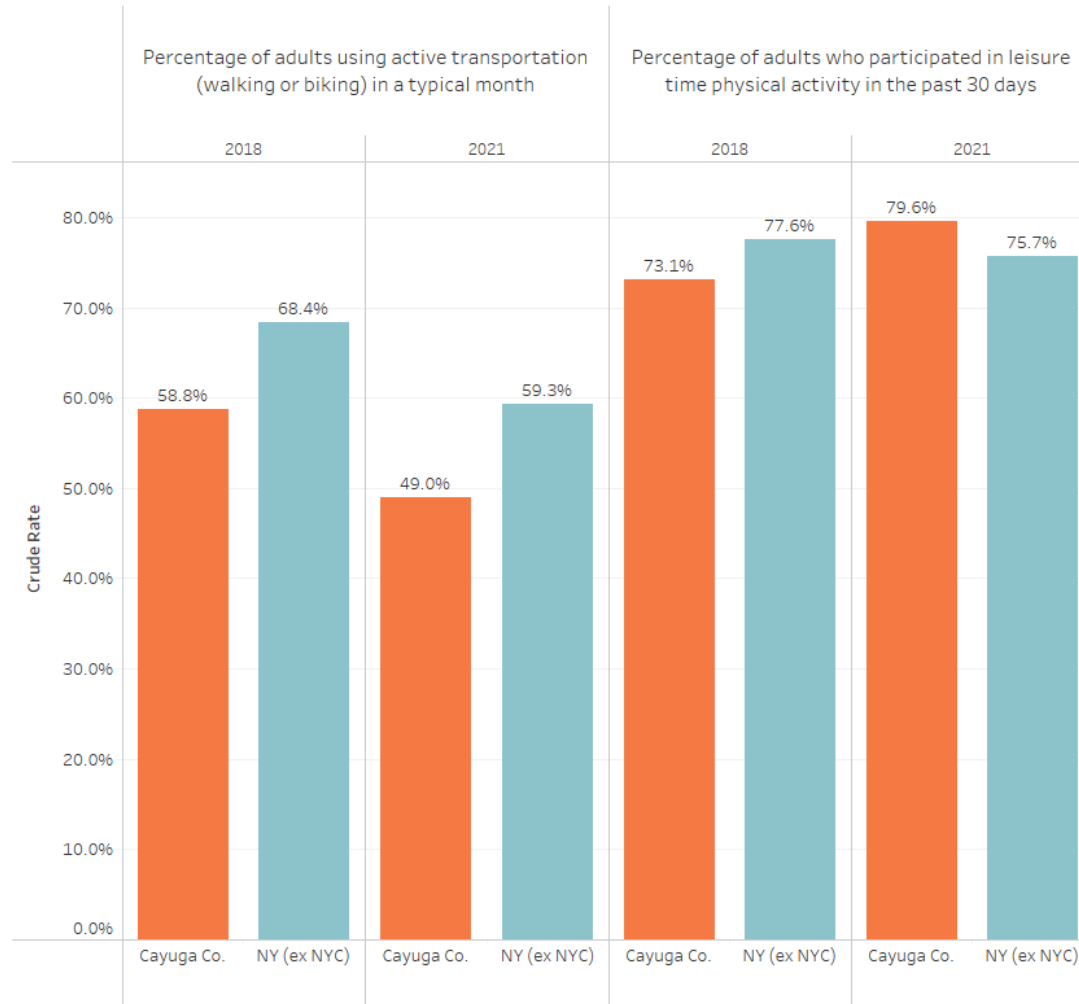
The percentage of adults who are physically active in Cayuga County has increased from 2018-2021, meeting the 2030 objective.





OPPORTUNITIES FOR ACTIVE TRANSPORTATION AND PHYSICAL ACTIVITY: ACTIVITY AND LEISURE TIME

Health Domain: Prevent Chronic Diseases & Promote a Healthy and Safe Environment



- A lower percentage of adults in Cayuga County walk or bike in a typical month compared to state benchmarks, a decline since 2018.
- However, more reported in 2021 that they participated in leisure time physical activity, exceeding the state benchmark.

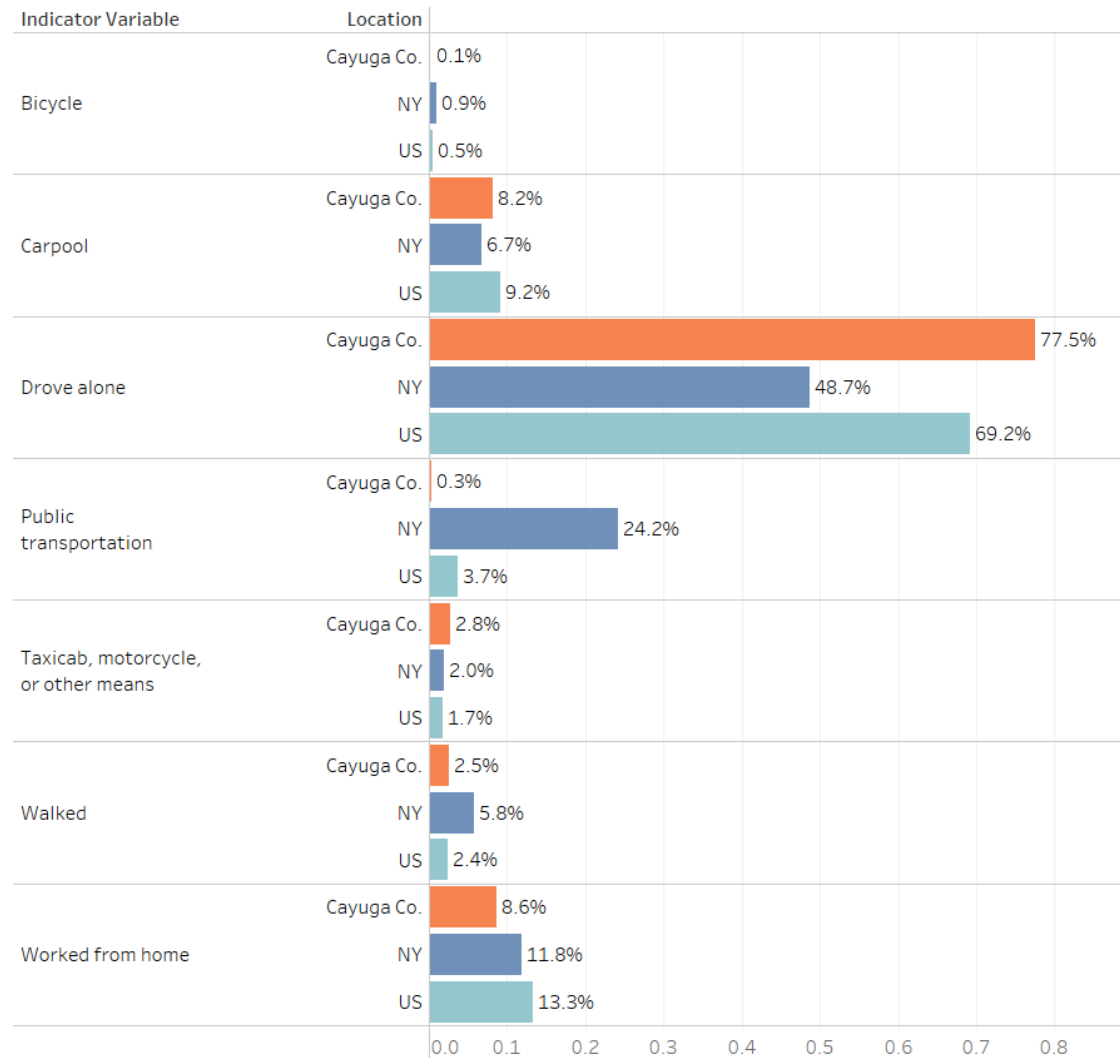
Source: Behavioral Risk Factor Surveillance System (BRFSS) Health Indicators by County and Region (ny.gov)
Shows Crude Rate





OPPORTUNITIES FOR ACTIVE TRANSPORTATION AND PHYSICAL ACTIVITY: COMMUTING HABITS

Means of Commuting



Source: 2024 American Community Survey 1-Year Estimates

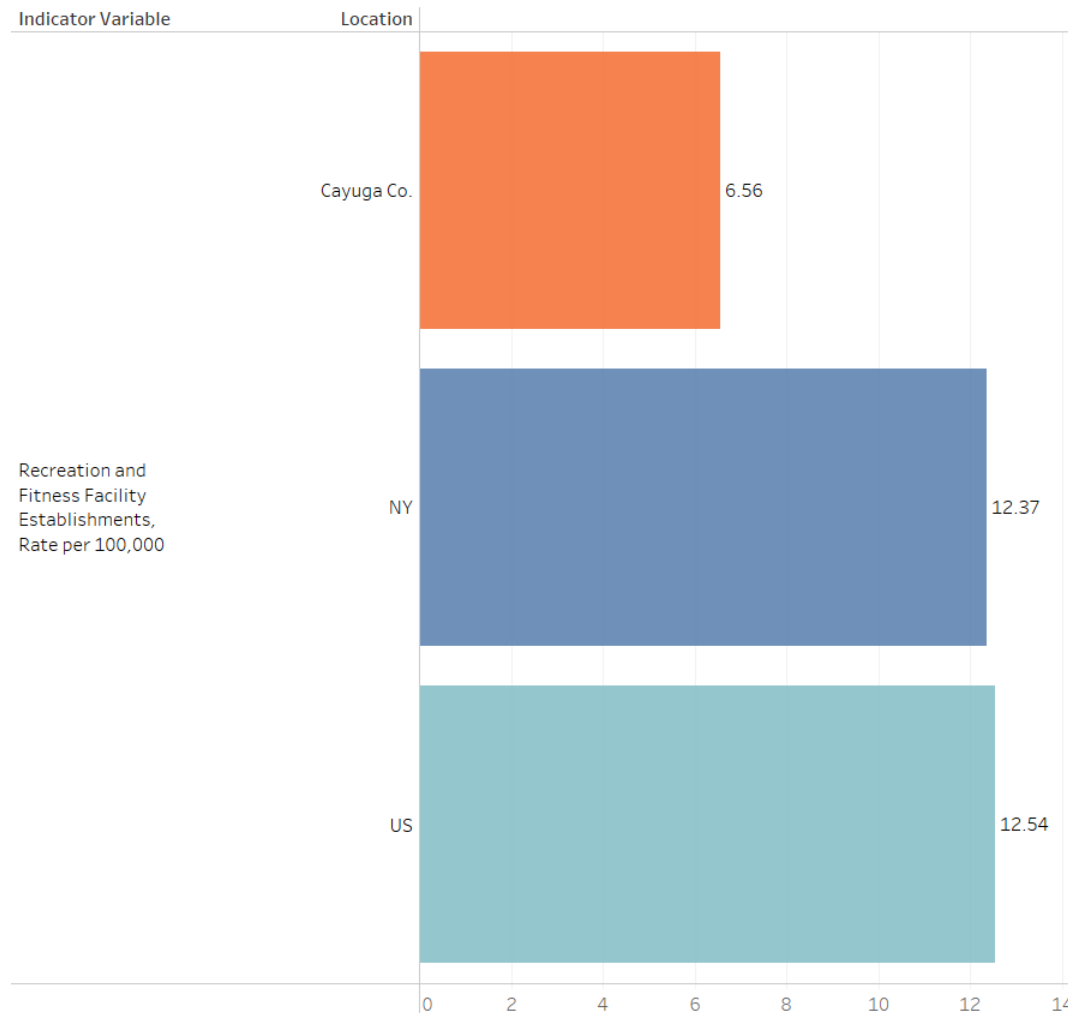
- Driving alone is the means of commuting for more than 77% of Cayuga County residents, a percentage that is higher than state and national averages.
- Rural counties can have limited options for non-motorized travel or public transportation due to small populations and less dense development.





OPPORTUNITIES FOR ACTIVE TRANSPORTATION AND PHYSICAL ACTIVITY: RECREATION AND FITNESS

Recreation and Fitness Facility Access



Source: US Census Bureau, County Business Patterns, 2023

- Cayuga County has a lower rate of recreation and fitness establishments than state and national benchmarks, which can pose a challenge for residents seeking physical activity and staying fit.





HEALTHCARE ACCESS AND QUALITY

- 2025-2030 Prevention Agenda





HEALTH CARE ACCESS AND QUALITY

The 2025-2030 Prevention Agenda for New York State identifies Healthcare Access and Quality as a priority domain for addressing resident health. Access and quality refer to the health services available to the community, including preventive medicine and treatment. Access to health services affects both health behaviors and health outcomes within a community. The following statistics related to Prevention Agenda priorities were examined for Cayuga County using data from the 2025-2030 Prevention Agenda dashboard and supplemented by other data sources:

Access and Use of Prenatal Care

Percentage of births with early (1st trimester) prenatal care

Early Intervention

Percentage of Black, non-Hispanic children under 3 with an Individualized Family Service Plan (IFSP)

Percentage of children under 3 with an Individualized Family Service Plan (IFSP)

Oral Health Care

Percentage of Medicaid enrollees with at least one preventive dental visit within the last year

Percentage of Medicaid enrollees with at least one preventive dental visit within the last year, aged 2-20 years

Prevention of Infant and Maternal Mortality

Infant mortality rate per 1,000 live births

Maternal mortality rate per 100,000 live births

Preventive Services (Immunization)

Percentage of 13-year-old adolescents with a complete HPV vaccine series

Percentage of 24- to 35-month-old children with the 4:3:1:3:3:1:4 combination series by their 2nd birthday

Preventive Services (Lead Screening)

Percentage of children in a single birth cohort year tested at least twice for lead before 36 months of age

Preventive Services for Chronic Disease Prevention and Control

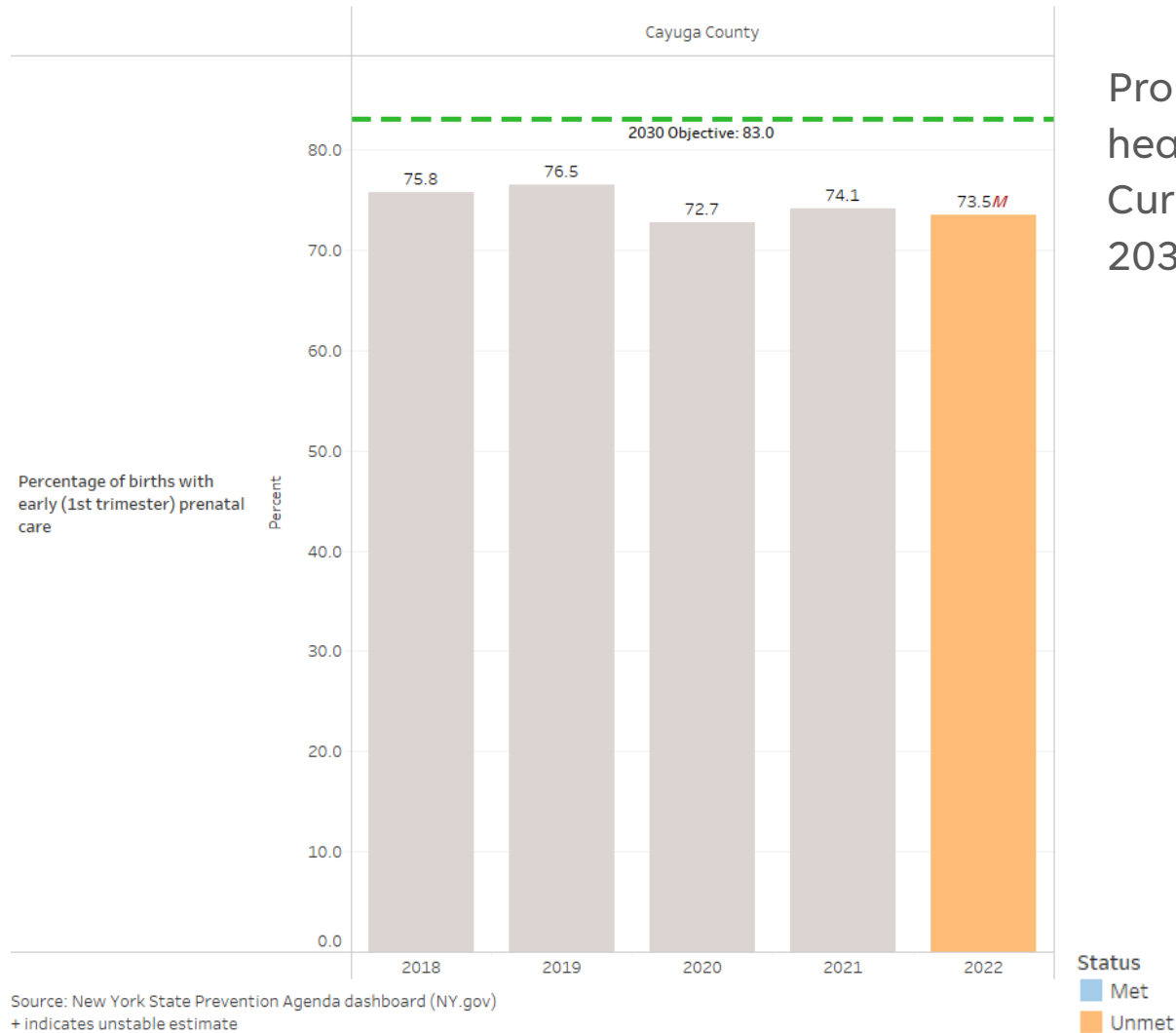
Asthma emergency department visit rate per 10,000, aged 0-17 years

Hypertension management (percentage of adults reporting medication use to manage their hypertension, aged 18 years and older)



ACCESS AND USE OF PRENATAL CARE

Domain: Health Care Access and Quality
Priority Area: Access and Use of Prenatal Care



2025-2030 Prevention Agenda Indicators

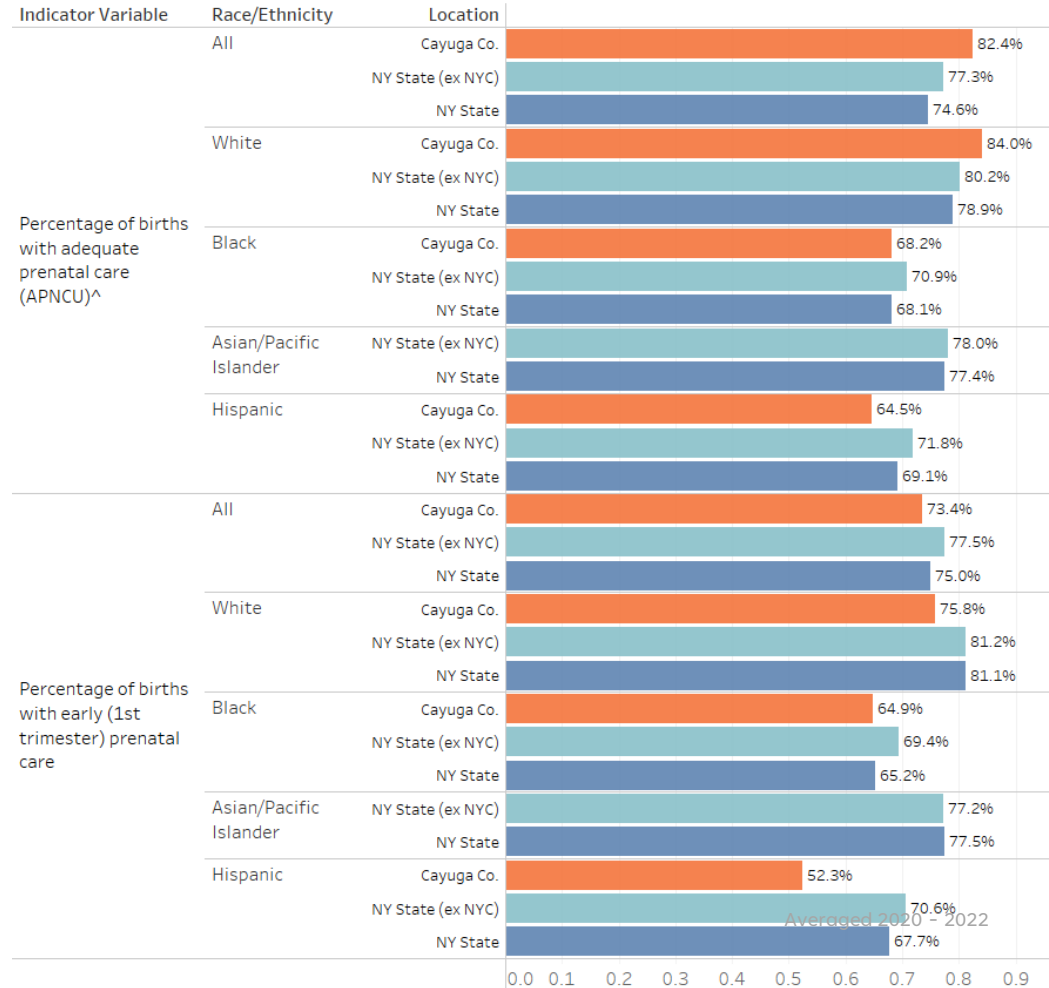
Proper prenatal care can help alleviate potential health-related issues for women and children. Currently, Cayuga County falls 11.4% below the 2030 objective of 83 for early prenatal care.





ACCESS AND USE OF PRENATAL CARE

Births



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

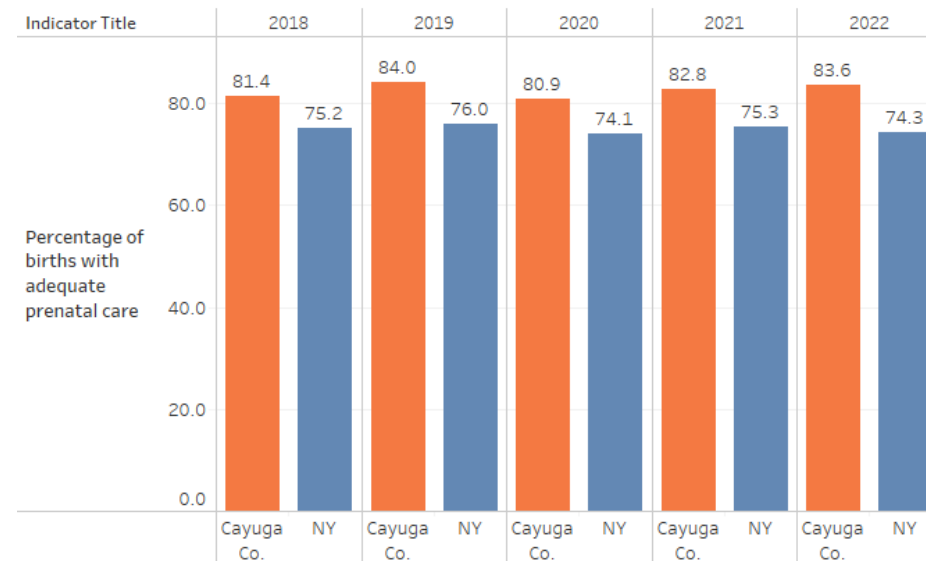
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Cayuga County has a high percentage of births that were recipients of adequate prenatal care among the whole population, but percentages for Hispanic births are slightly lower than state benchmarks.
- Early trimester care percentages are slightly lower than state benchmarks, and are notably lower for Black and Hispanic cohorts.

Maternal and Infant Health Indicators



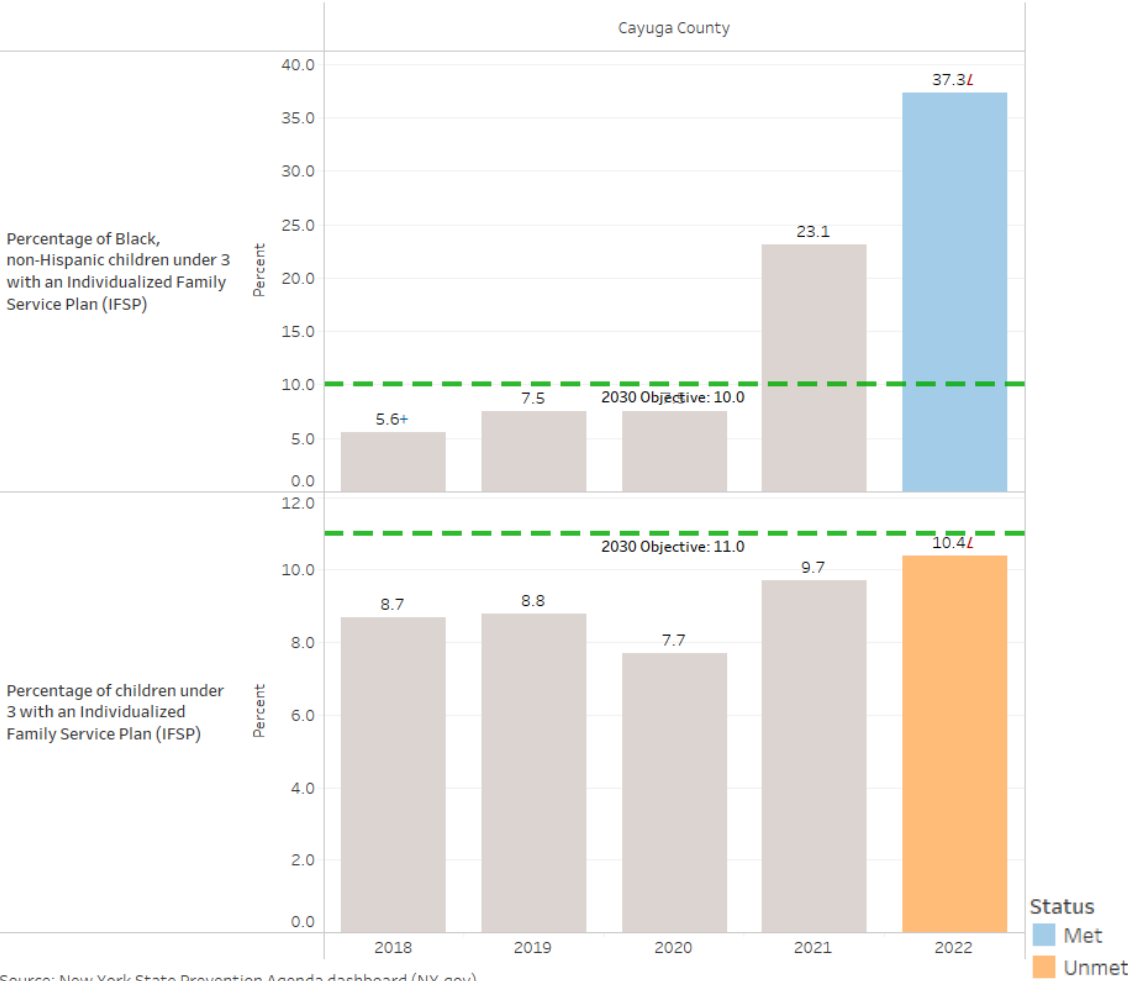
Source: CHIRS Dashboard (ny.gov)





EARLY INTERVENTION

Domain: Health Care Access and Quality
Priority Area: Early Intervention



2025-2030 Prevention Agenda Indicators

Cayuga County far exceeds the 2030 objective for Individualized Family Service Plans (IFSP) among Black non-Hispanic children under 3.

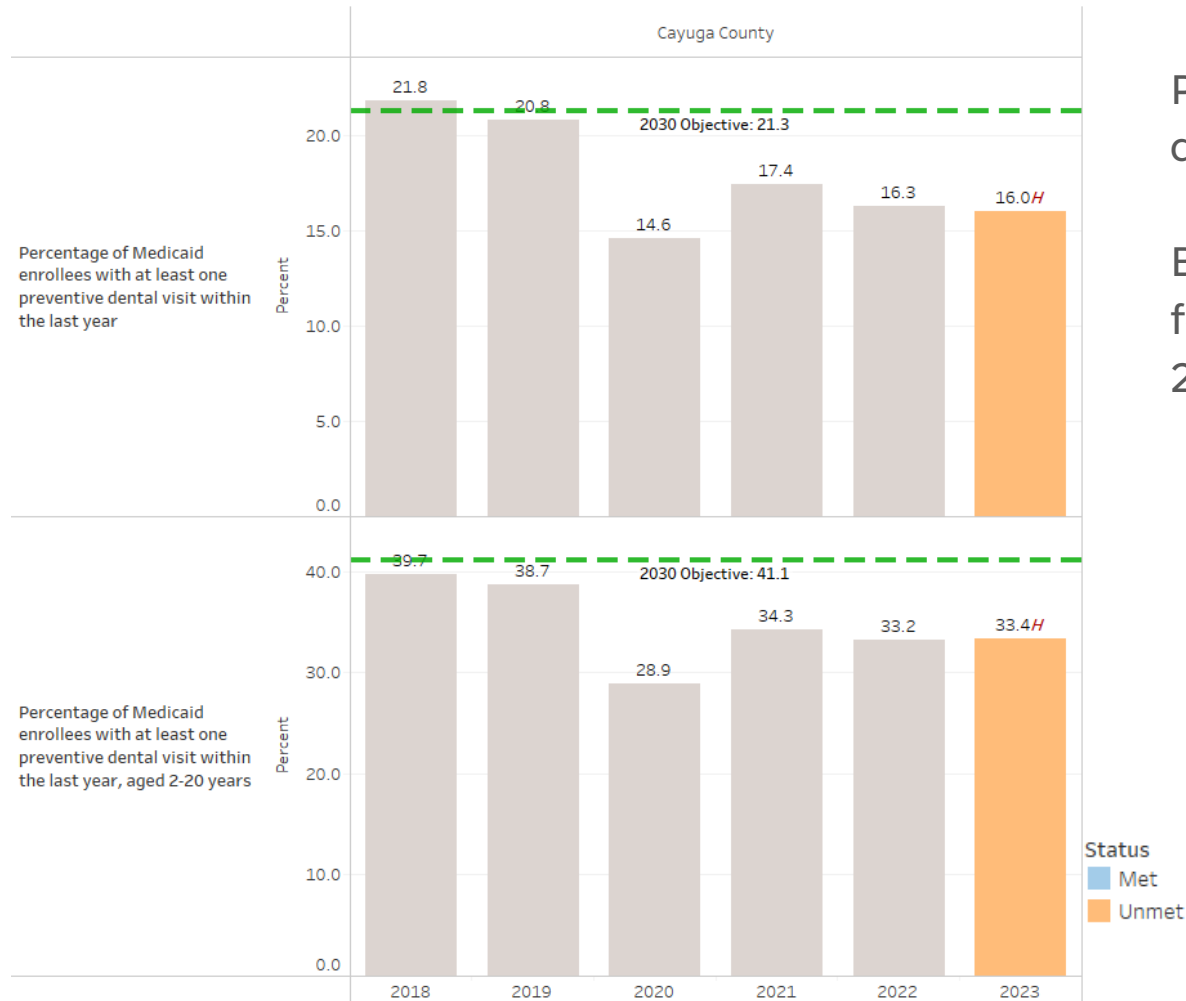
However, the percentage of IFSPs for all children is 5.5% below the 2030 objective of 11.0% at 10.4%.





ORAL HEALTH CARE

Domain: Health Care Access and Quality
Priority Area: Oral Health Care



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

Preventive dental visits for Medicaid enrollees are a major concern for Cayuga County.

Both objectives are unmet, and the percentages for both tracked indicators have declined since 2018.





ORAL HEALTH CARE

Topic Area: Oral Health Indicators



Source: CHIRS Dashboard (ny.gov)

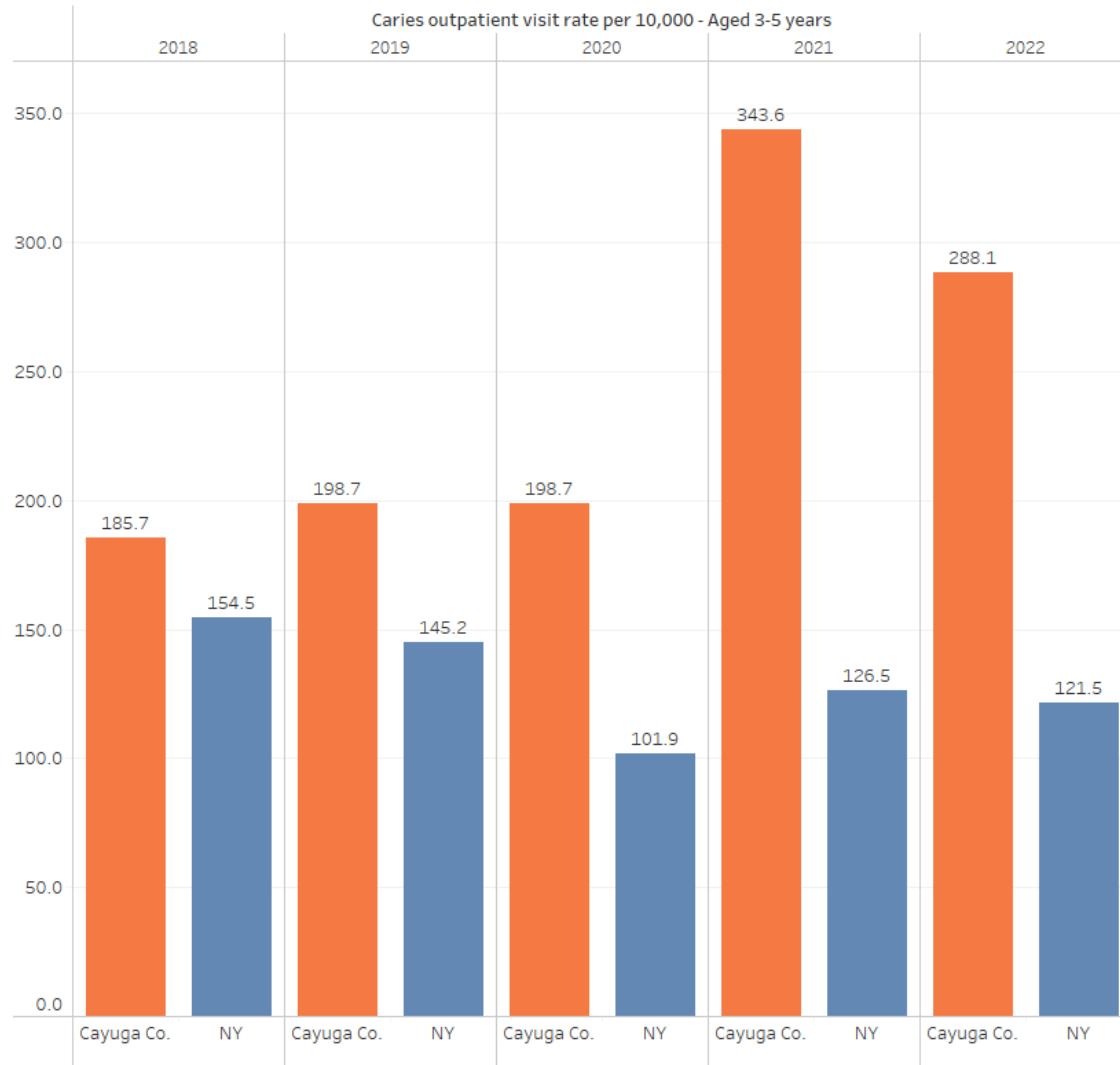
- The percentage of oral care preventive services in Cayuga County among children and Medicaid enrollees is generally lower than the state benchmark, and all indicators appear to show worsening percentages since 2018, but slight rebounds since 2020 and the COVID-19 pandemic.





ORAL HEALTH CARE

Topic Area: Oral Health Indicators



Source: CHIRS Dashboard (ny.gov)

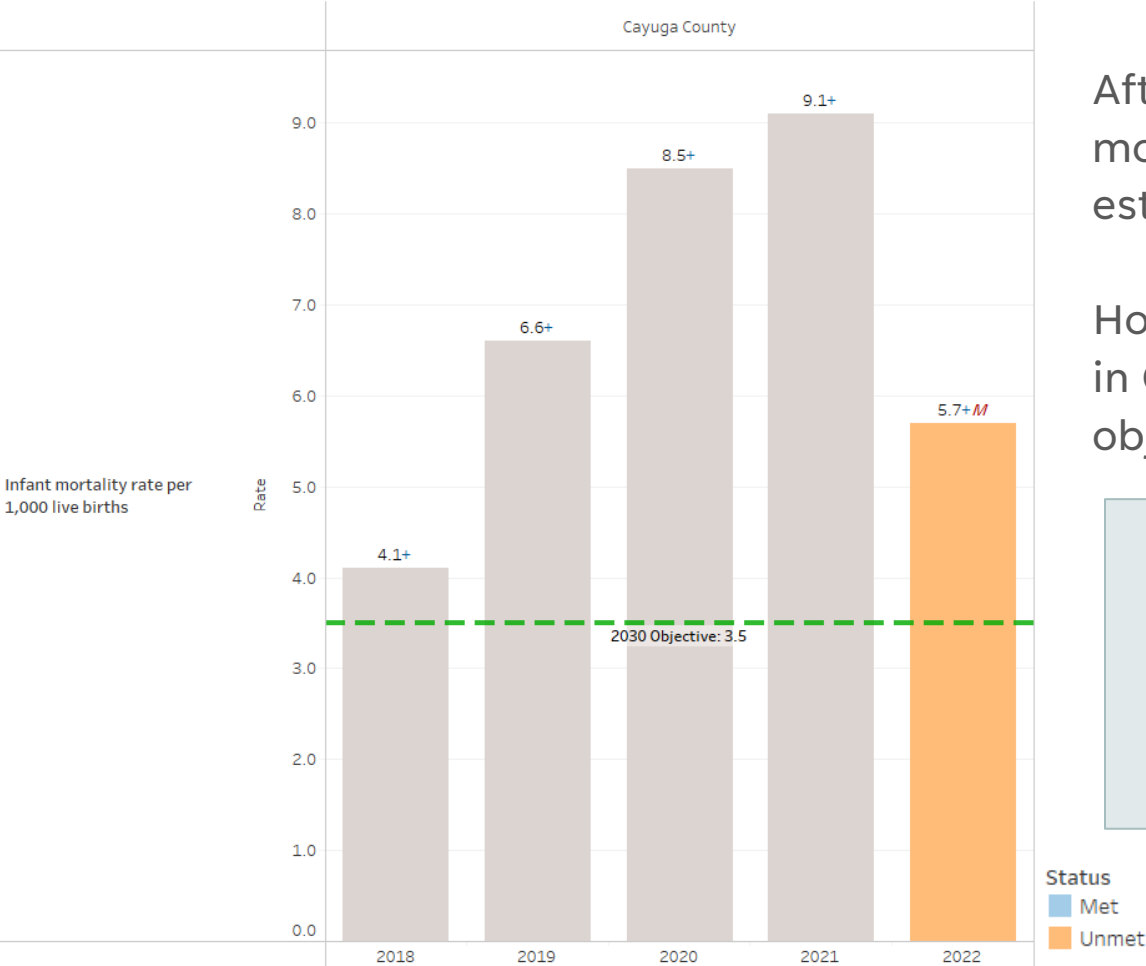
- The dental caries (tooth decay) outpatient visit rate among very young children (age 3-5) is much higher than the state rate. It has been increasing, suggesting a lack of preventative pediatric dental care.





PREVENTION OF INFANT AND MATERNAL MORTALITY

Domain: Health Care Access and Quality
Priority Area: Prevention of Infant and Maternal Mortality



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

After increasing from 2019 through 2021, the infant mortality rate in Cayuga County decreased to an estimated 5.7 per 1,000 live births in 2022.

However, infant mortality rates per 1,000 live births in Cayuga County remains 62.9% above the 2030 objective of 3.5 to 5.7.

“There is no children’s hospital and limited children’s services.”

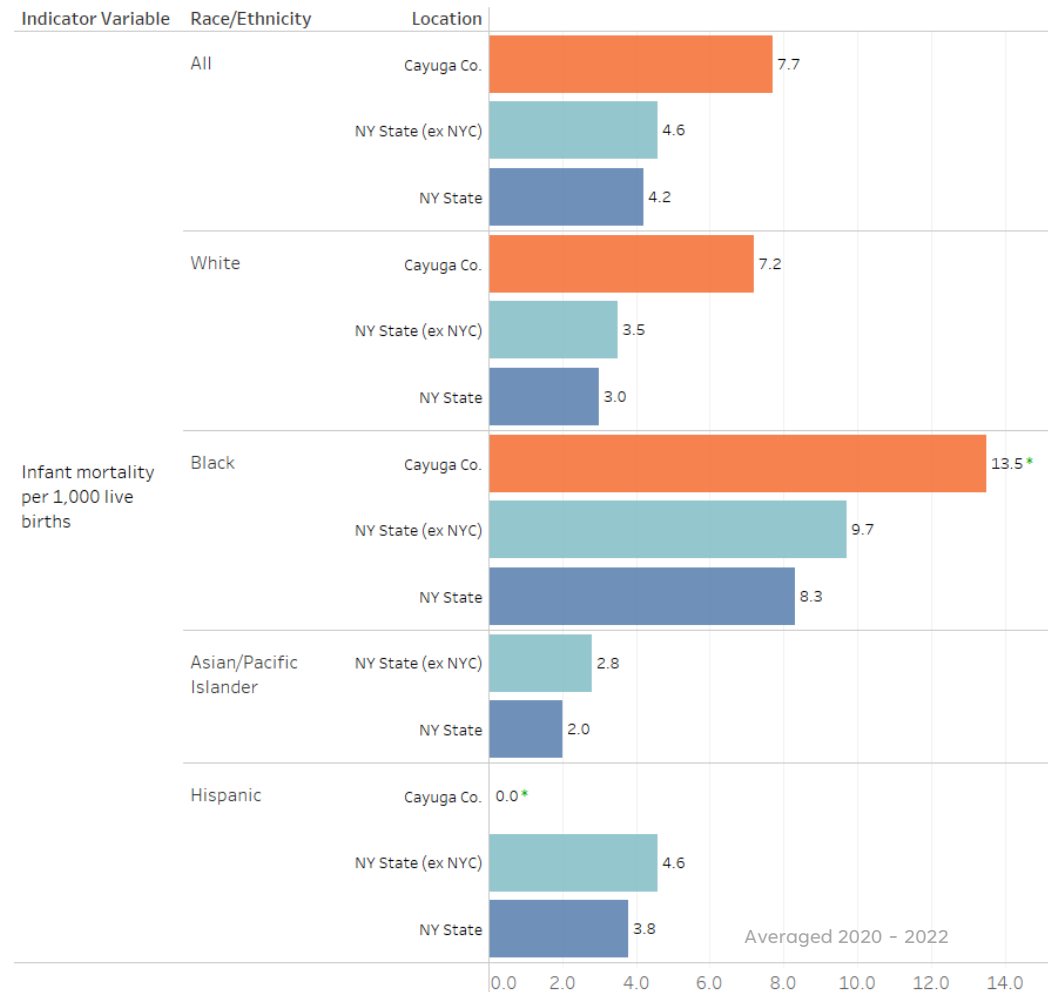
– Survey Respondent





PREVENTION OF INFANT AND MATERNAL MORTALITY: INFANT MORTALITY

Infant Mortality



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

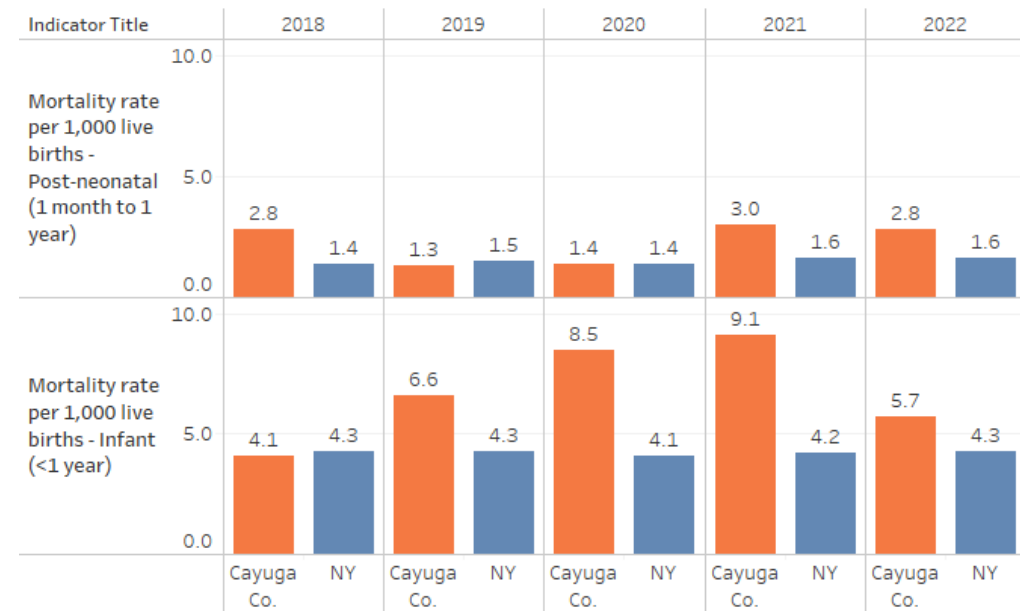
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- The infant mortality rate in Cayuga County exceeds state benchmarks.
- Mortality for White infants is more than double that of the state. Mortality for Black infants in New York is higher overall and is especially elevated in Cayuga County.

Maternal and Infant Health Indicators



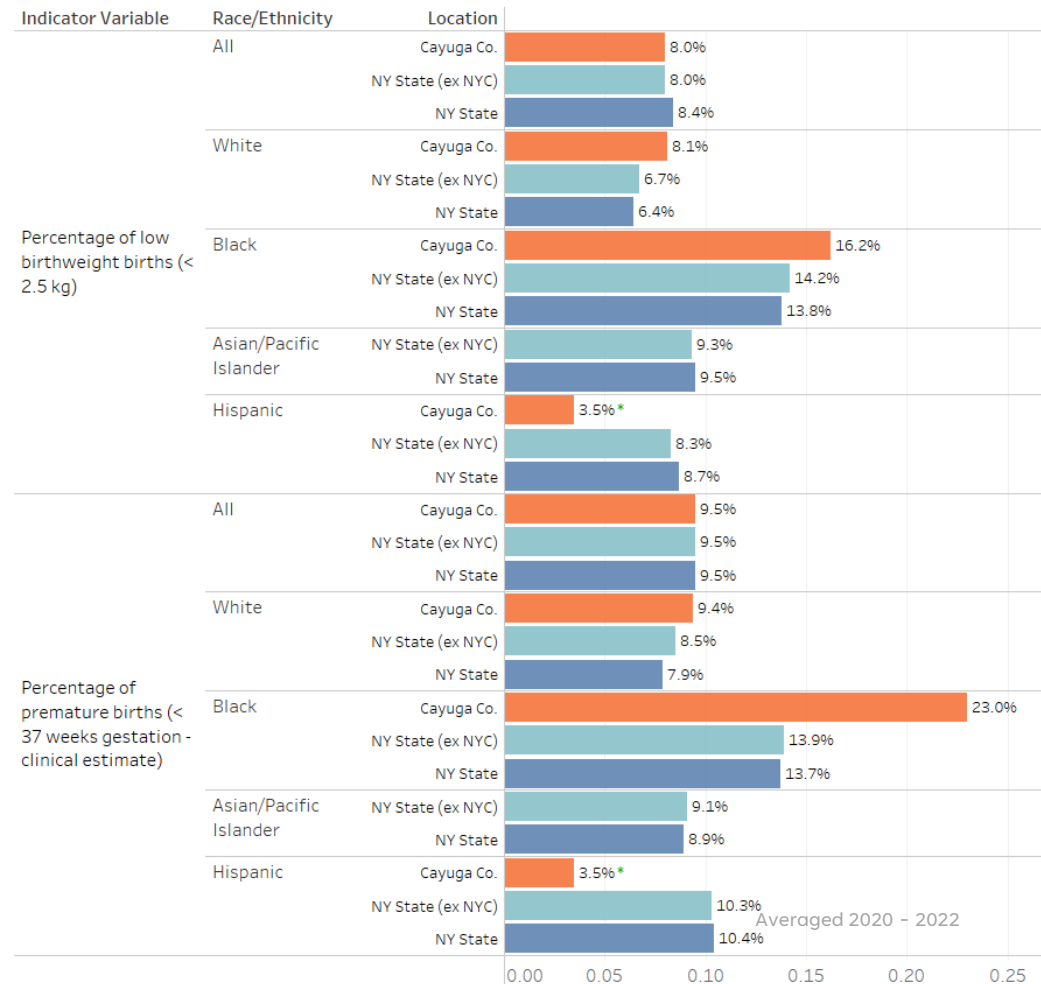
Source: CHIRS Dashboard (ny.gov)





PREVENTION OF INFANT AND MATERNAL MORTALITY: LOW BIRTH WEIGHT AND PREMATURE BIRTHS

Births



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

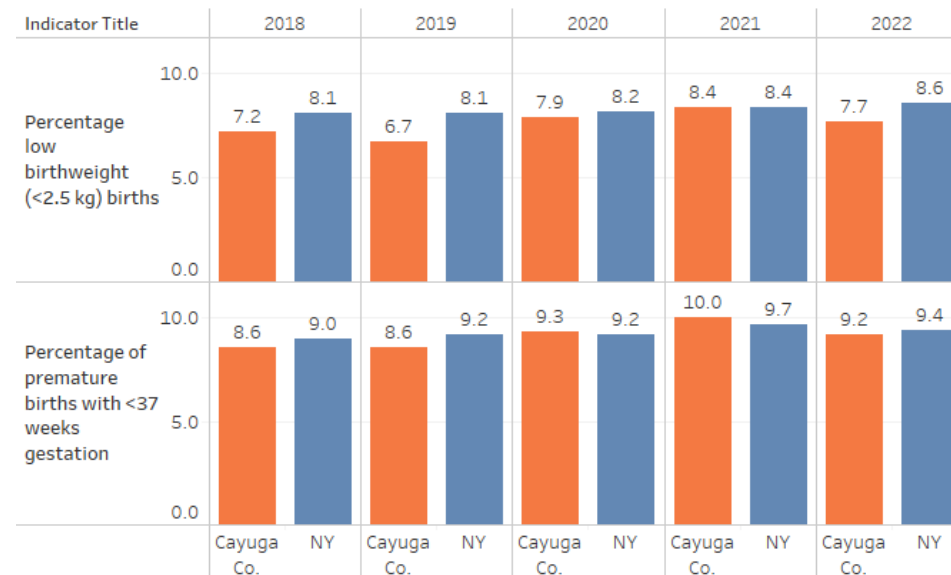
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Overall percentages of low birth weights and premature births in Cayuga County are within state benchmarks. However, rates for both indicators among Black infants are elevated, particularly for premature births, where Black infants are 9.1 percentage points higher than the state average.

Maternal and Infant Health Indicators



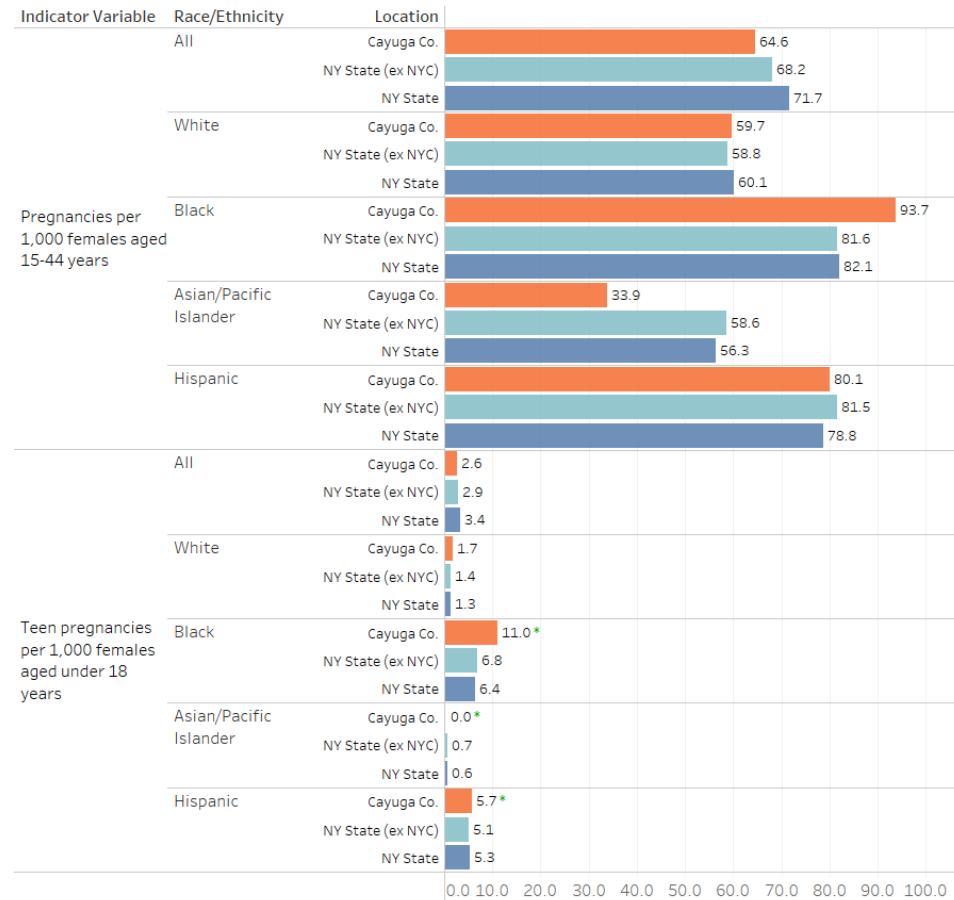
Source: CHIRS Dashboard (ny.gov)





PREVENTION OF INFANT AND MATERNAL MORTALITY: PREGNANCIES/FERTILITY

Pregnancies/Fertility



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

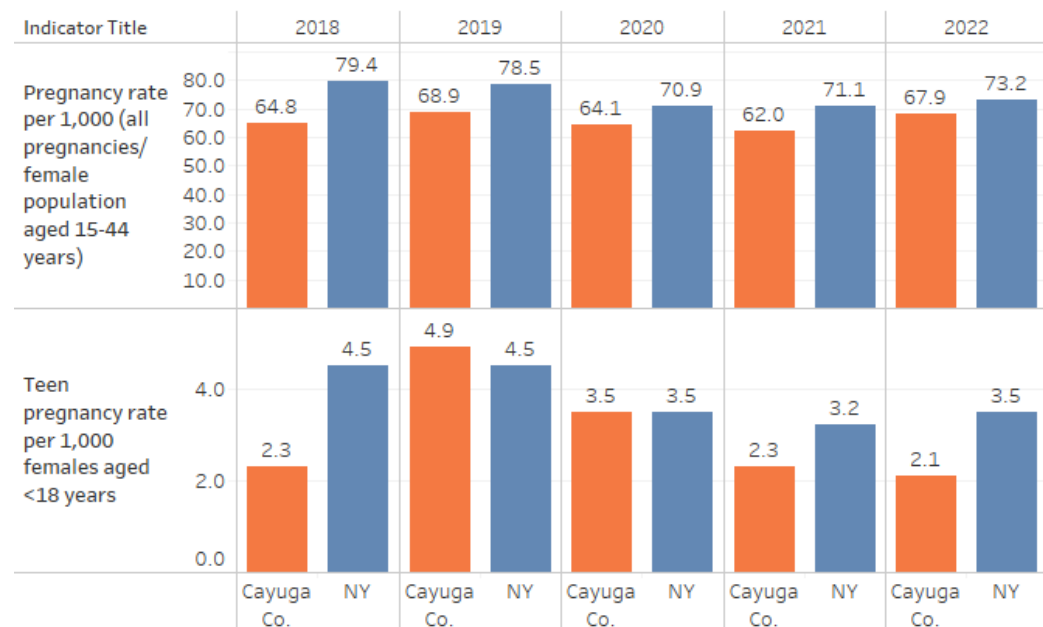
~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

Averaged 2020 - 2022

- Pregnancies for females aged 19-44 are slightly lower in Cayuga County compared to state benchmarks; however, rates are higher among the Black population.
- Similarly, pregnancies among Black teens (aged under 18 years) are higher than state benchmarks.

Family Planning/Natality Indicators



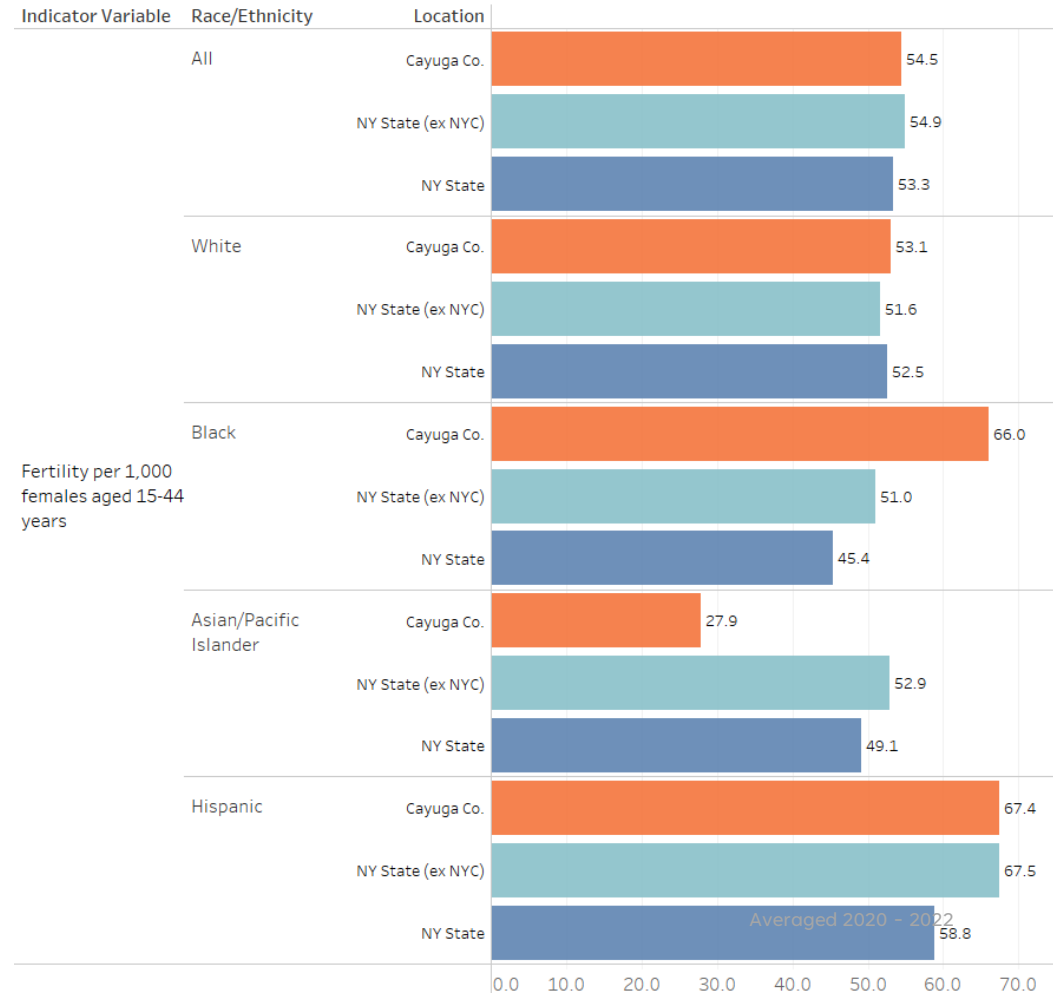
Source: CHIRS Dashboard (ny.gov)





PREVENTION OF INFANT AND MATERNAL MORTALITY: PREGNANCIES/FERTILITY

Pregnancies/Fertility



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

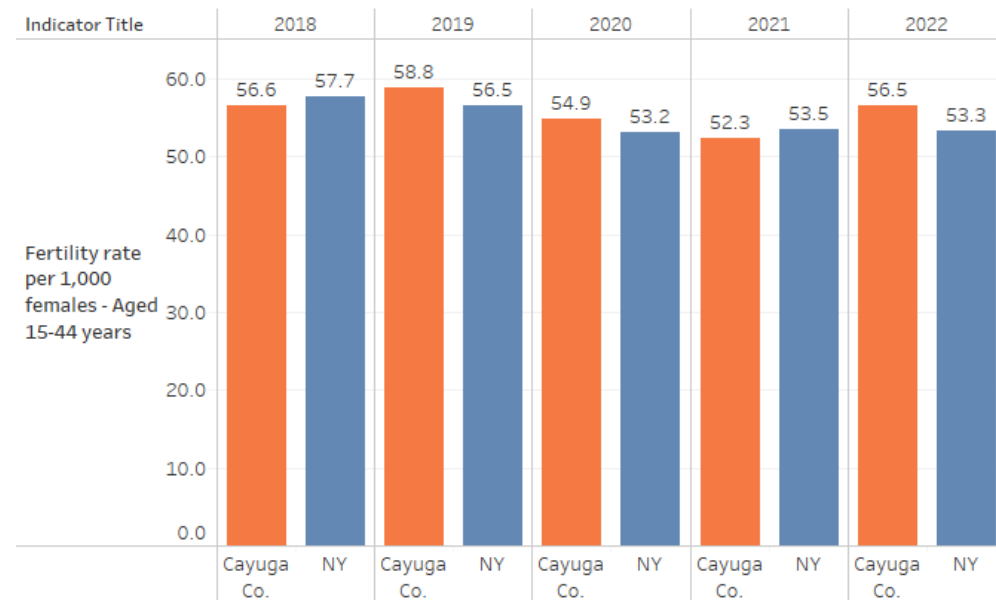
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- The fertility rate for females aged 15-44 in Cayuga County is in line with state benchmarks.
- Within racial and ethnic cohorts, the rate among Blacks is 29.4% higher than the state benchmark, while Asian/Pacific Islander rates are much lower than both state and national rates.

Family Planning/Natality Indicators



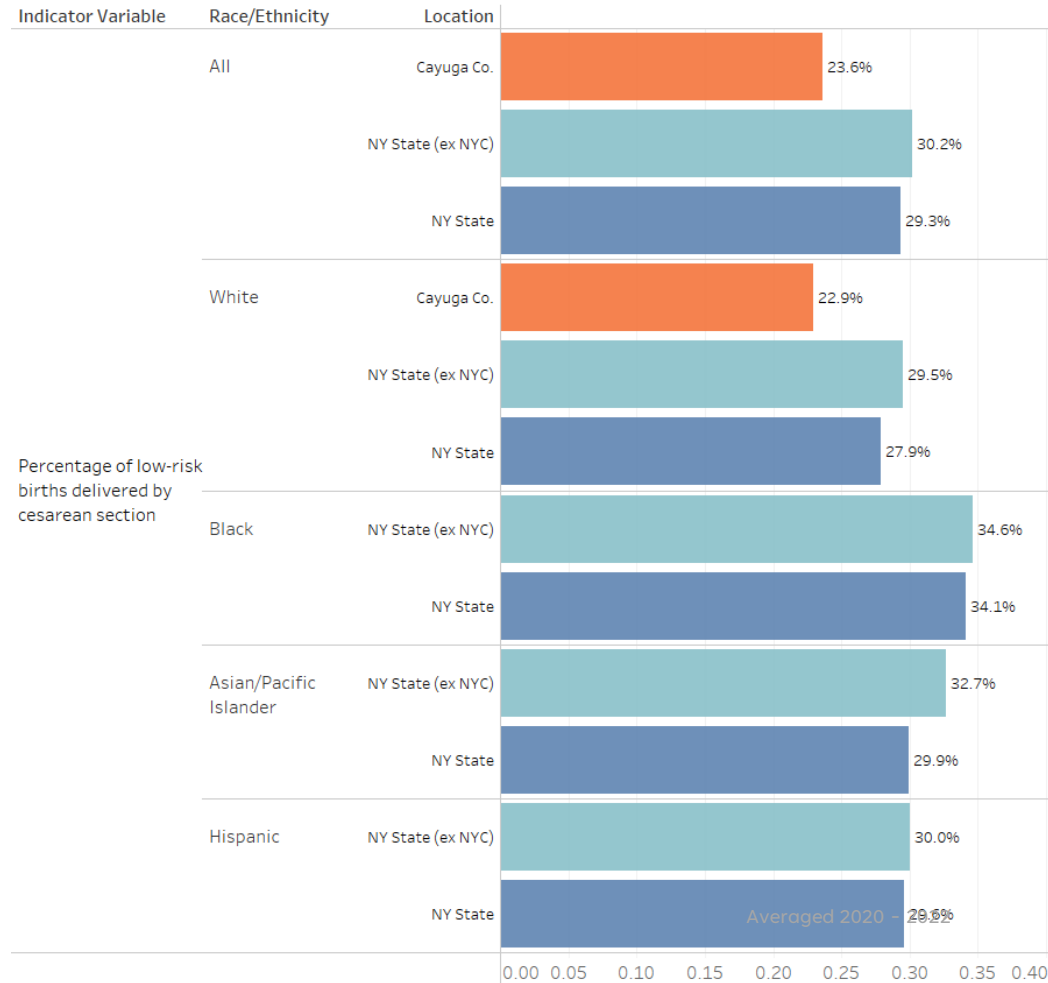
Source: CHIRS Dashboard (ny.gov)





PREVENTION OF INFANT AND MATERNAL MORTALITY: LOW-RISK CESAREAN SECTION DELIVERIES

Births



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

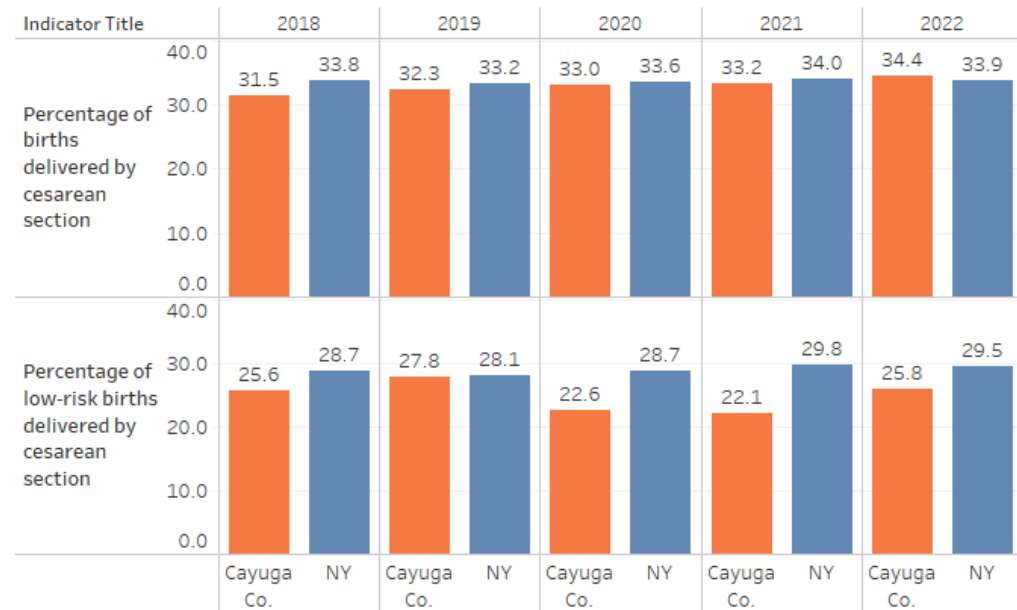
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Rates for cesarean section deliveries for low-risk births are below state benchmarks.

Maternal and Infant Health Indicators



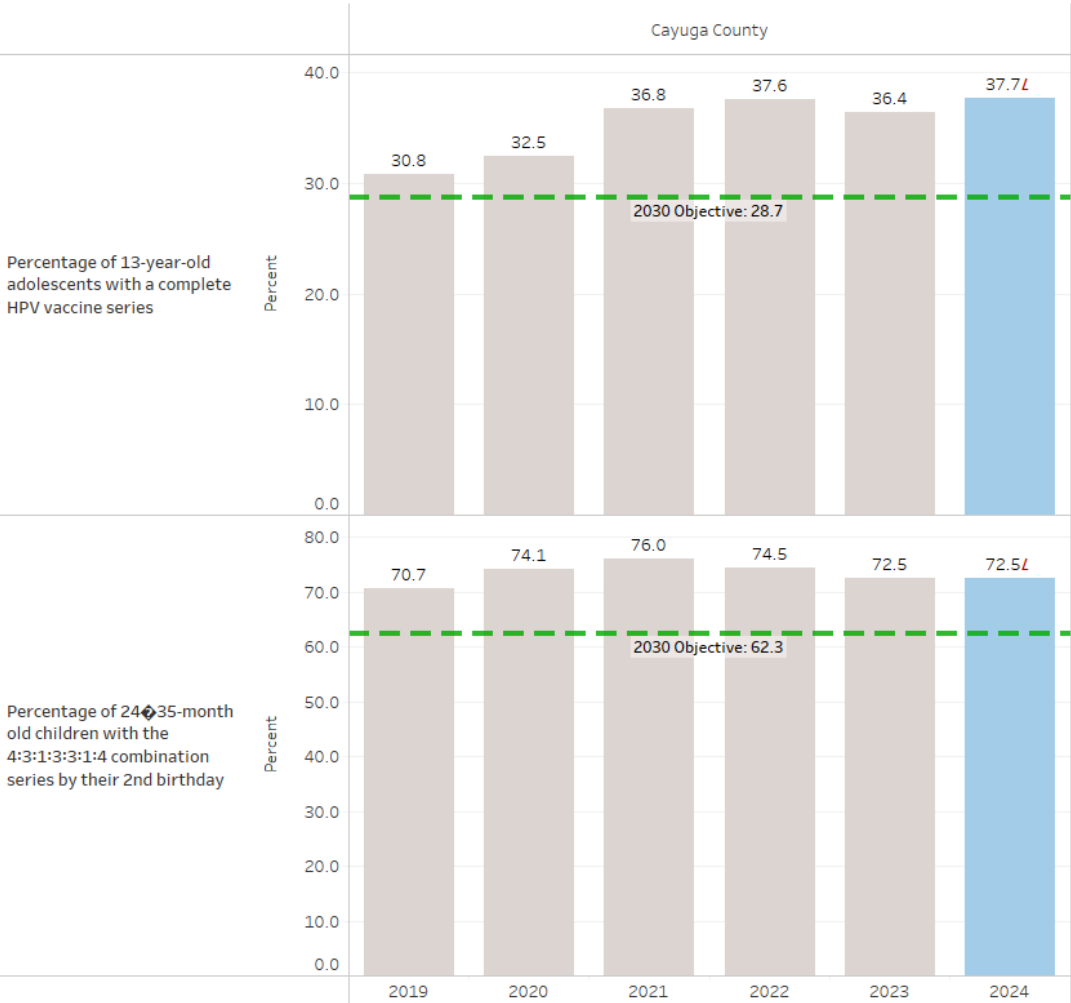
Source: CHIRS Dashboard (ny.gov)





PREVENTATIVE SERVICES (IMMUNIZATION)

Domain: Health Care Access and Quality
Priority Area: Preventive Services (Immunization)



Source: New York State Prevention Agenda dashboard (NY.gov)
+ indicates unstable estimate
Concern level in comparison to other counties: H (high), M (moderate), L (low)

2025-2030 Prevention Agenda Indicators

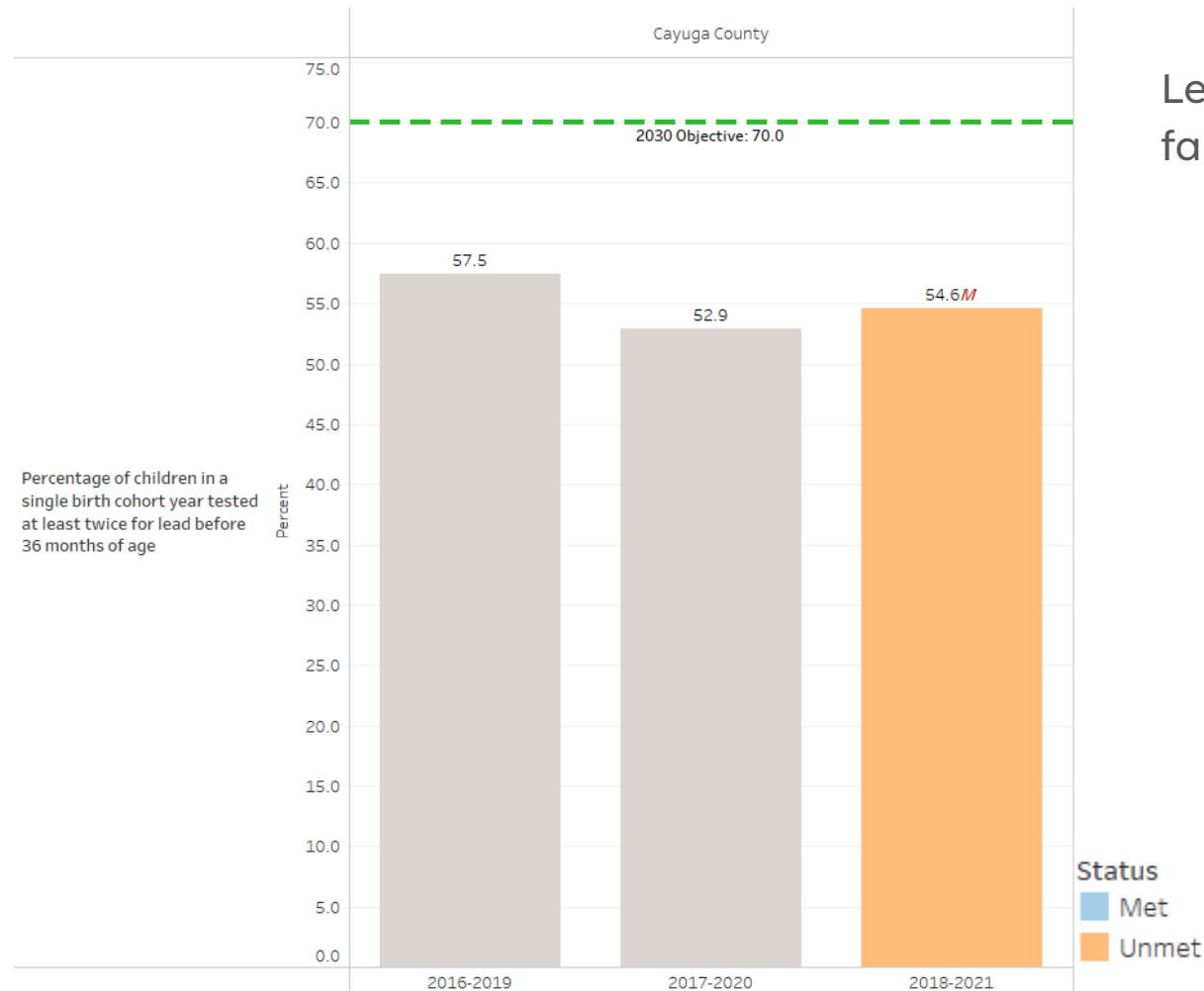
Cayuga County currently meets the 2030 objective for both childhood immunization indicators.





PREVENTATIVE SERVICES (LEAD SCREENING)

Domain: Health Care Access and Quality
Priority Area: Preventive Services (Lead Screening)



2025-2030 Prevention Agenda Indicators

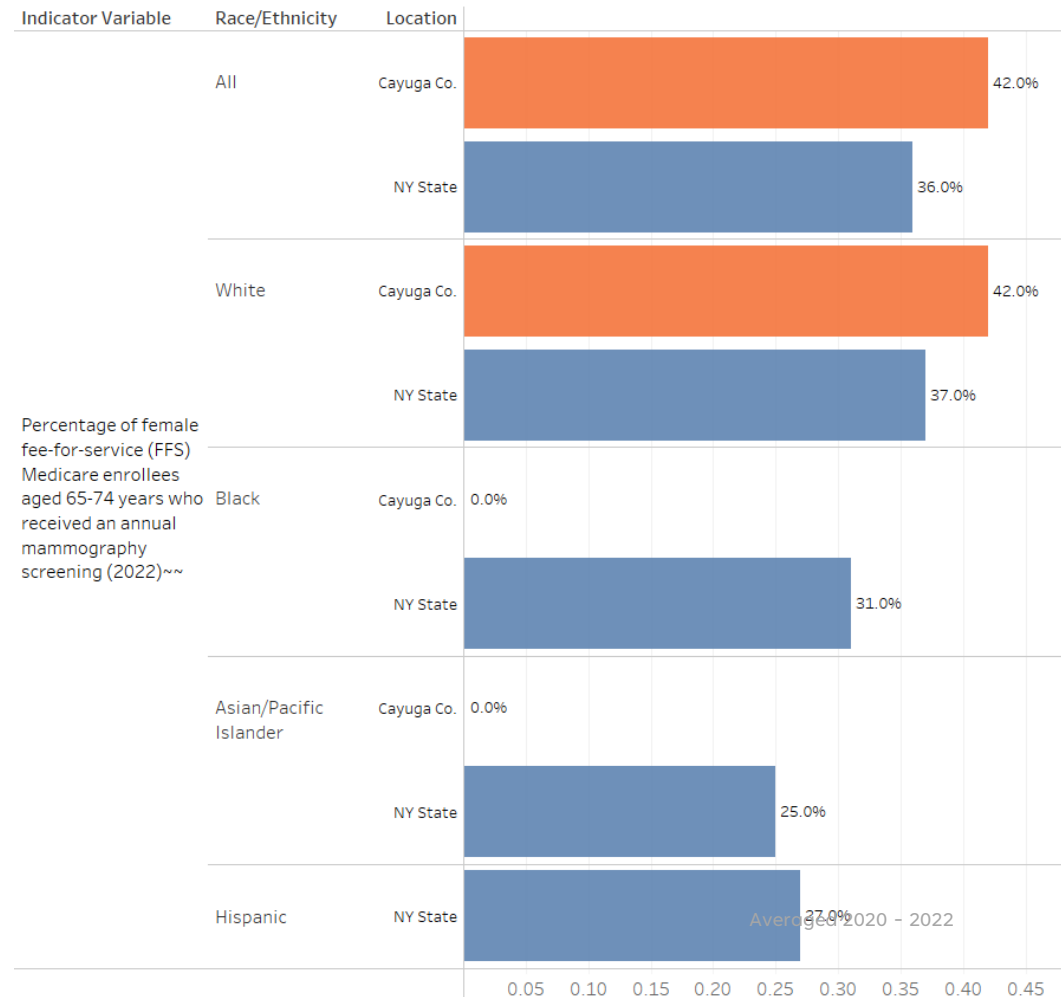
Lead screenings for children in Cayuga County fall 22% below the 2030 objective of 70% at 54.6%.





PREVENTATIVE SERVICES: MAMMOGRAPHY

Screenings



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

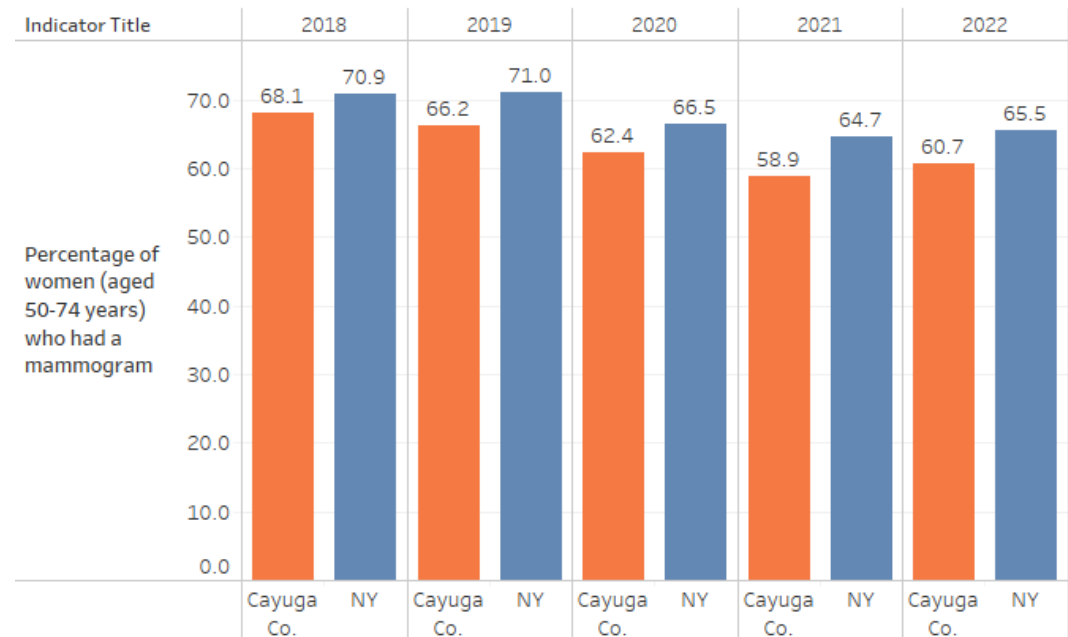
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- The percentage of mammography screenings for older Medicare beneficiaries exceeds the state benchmark, but yearly trend data shows that percentage to be declining since 2018.

Cancer Indicators



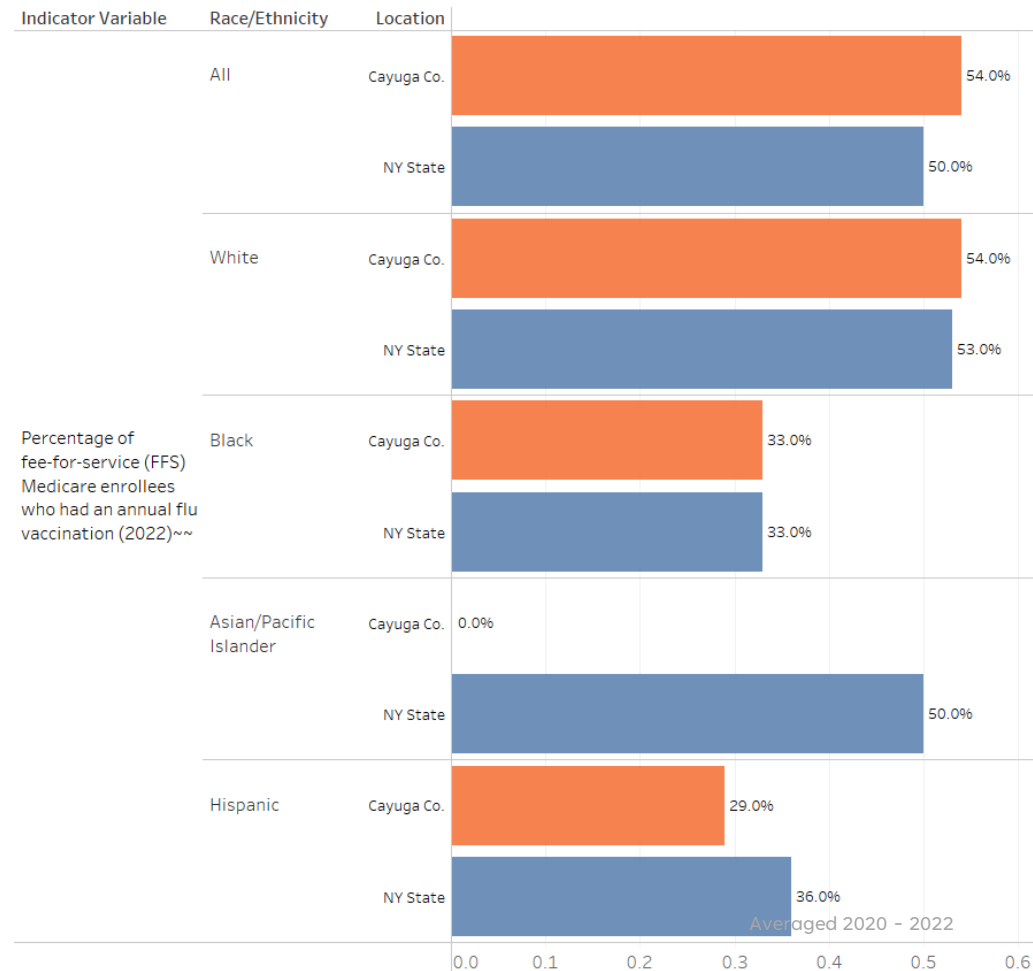
Source: CHIRS Dashboard (ny.gov)





PREVENTATIVE SERVICES: FLU VACCINATIONS

Vaccinations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

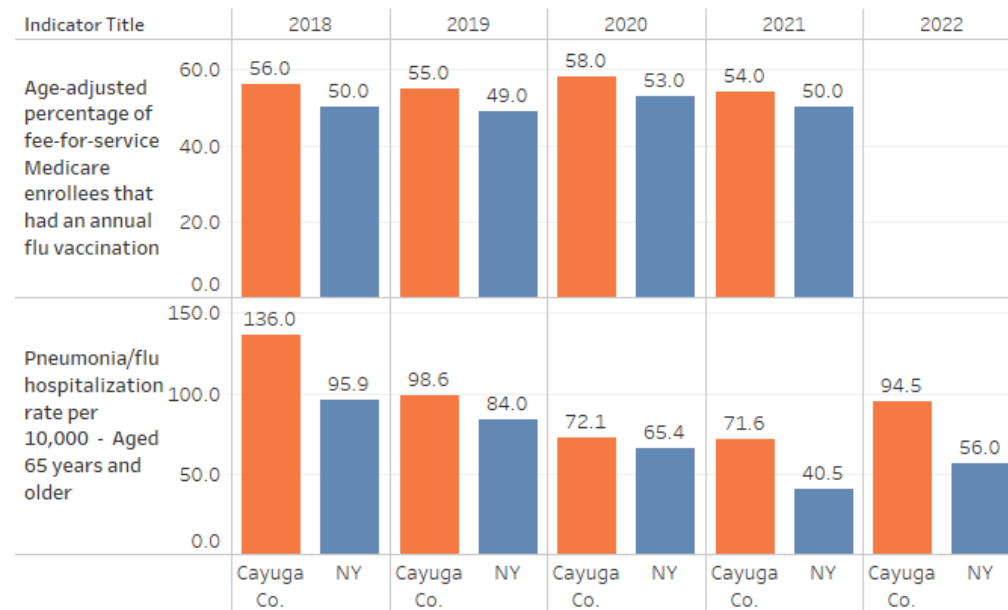
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian/ Pacific Islander (including Hispanic), and Hispanic (of any race).

- Flu vaccination rates for Medicare enrollees in Cayuga County exceed the state benchmark. However, rates for the Hispanic population cohort are 19.4% lower than state averages.

Communicable Disease Indicators



Source: CHIRS Dashboard (ny.gov)





PREVENTATIVE SERVICES FOR CHRONIC DISEASE PREVENTION AND CONTROL

Domain: Health Care Access and Quality
Priority Area: Preventive Services for Chronic Disease Prevention and Control



2025-2030 Prevention Agenda Indicators

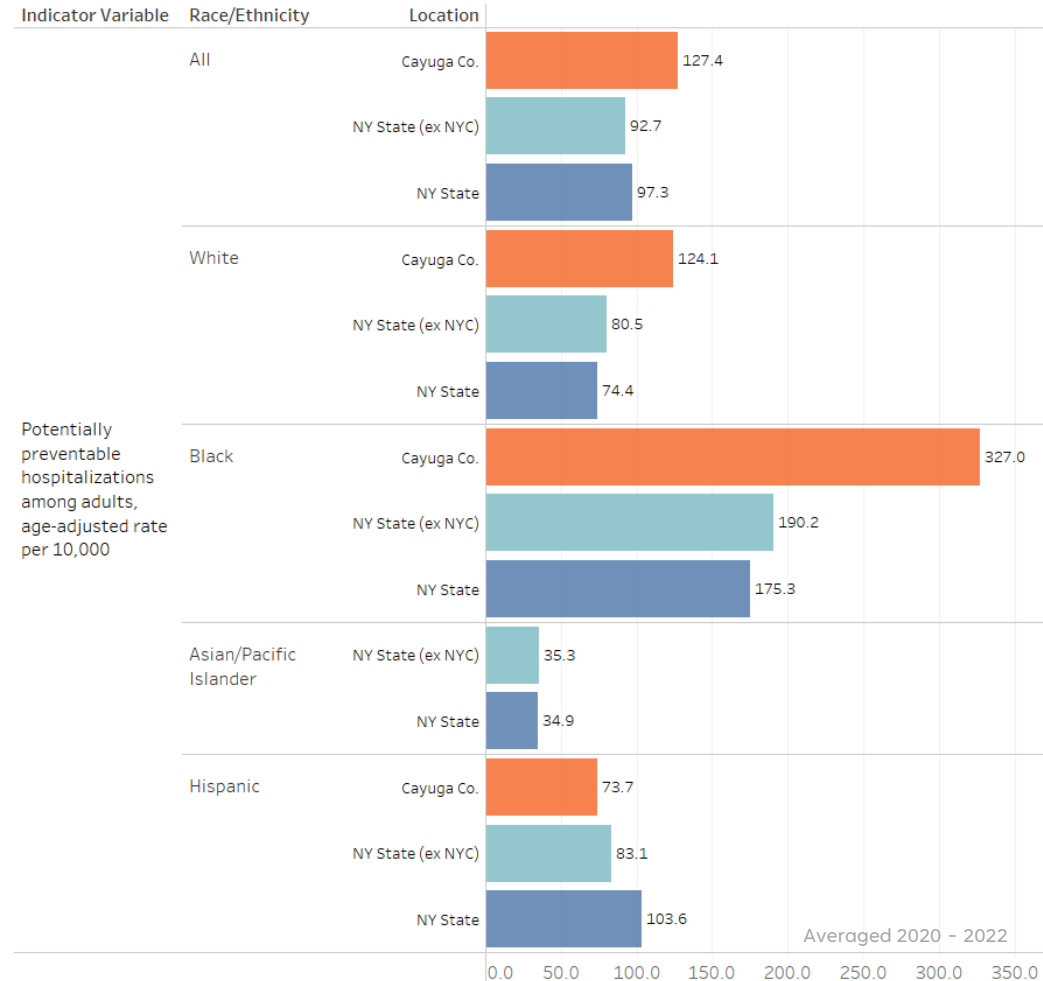
Cayuga County meets 2030 objectives for asthma emergency department visits among residents aged 0-17 and for adult hypertension management.





PREVENTIVE SERVICES FOR CHRONIC DISEASE PREVENTION AND CONTROL: PREVENTABLE HOSPITALIZATIONS

Preventable Hospitalizations



- Preventable hospitalization rates in Cayuga County are higher than state benchmarks, particularly for white and Black cohorts at 54.2% and 71.9% above the state benchmark.
- For the Hispanic population, the rate is lower than the state benchmark.

Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

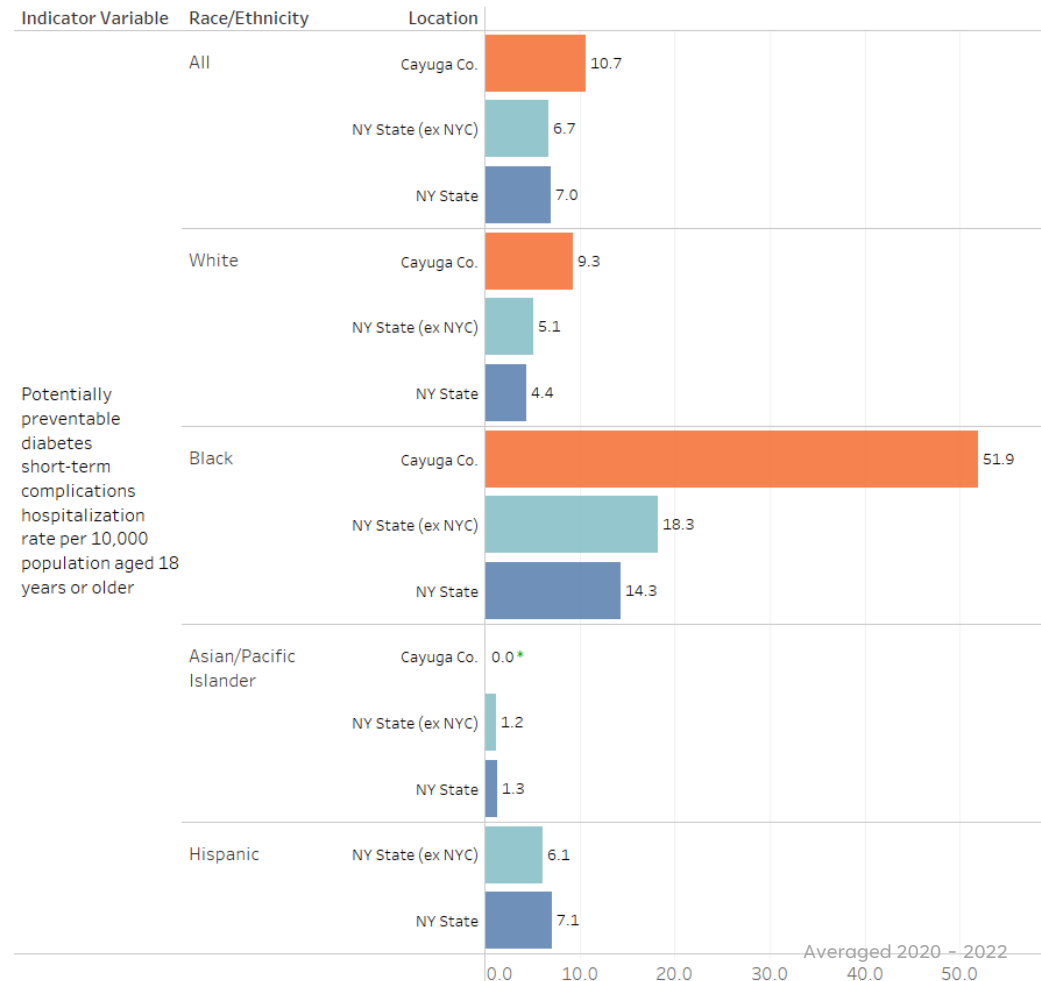
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).





PREVENTIVE SERVICES FOR CHRONIC DISEASE PREVENTION AND CONTROL: PREVENTABLE HOSPITALIZATIONS DIABETES

Preventable Hospitalizations



- Preventable hospitalization rates for short-term diabetes complications among Cayuga County's white population are almost twice the state benchmark.
- Rates for the Black population are almost 3 times higher than the state benchmarks.

Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

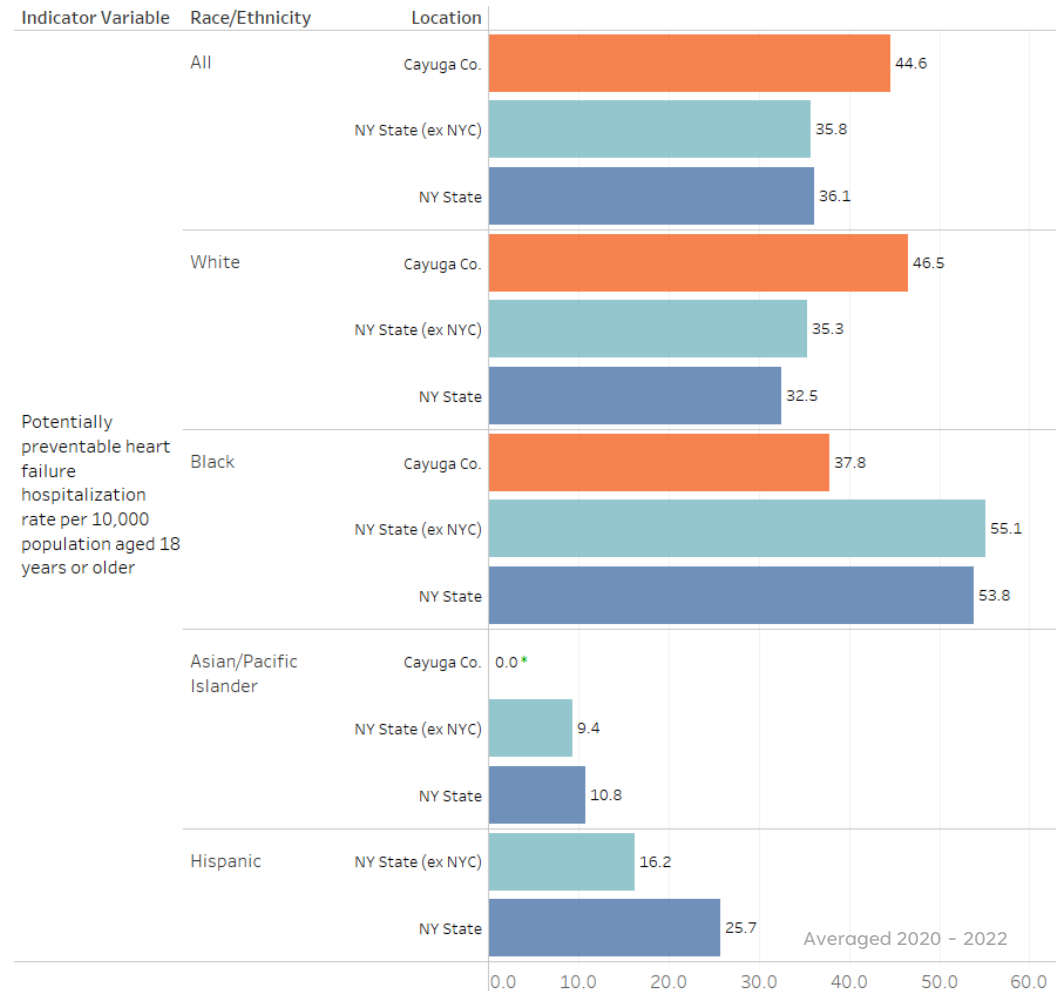
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).





PREVENTIVE SERVICES FOR CHRONIC DISEASE PREVENTION AND CONTROL: PREVENTABLE HEART FAILURE HOSPITALIZATIONS

Preventable Hospitalizations



- The rate of preventable heart failure hospitalizations among the county's White population is much higher than state benchmarks, which drives the overall rate higher.

Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

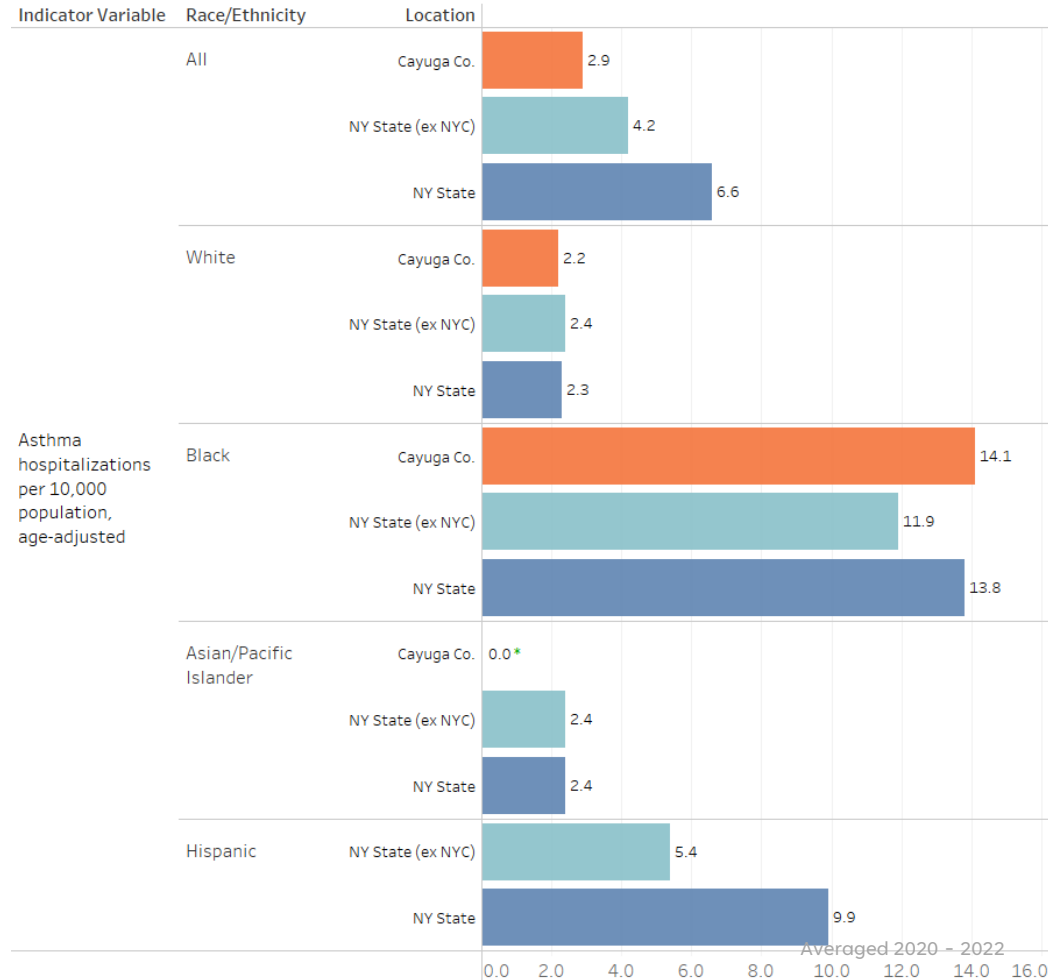
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).





PREVENTIVE SERVICES FOR CHRONIC DISEASE PREVENTION AND CONTROL: ASTHMA HOSPITALIZATION

Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

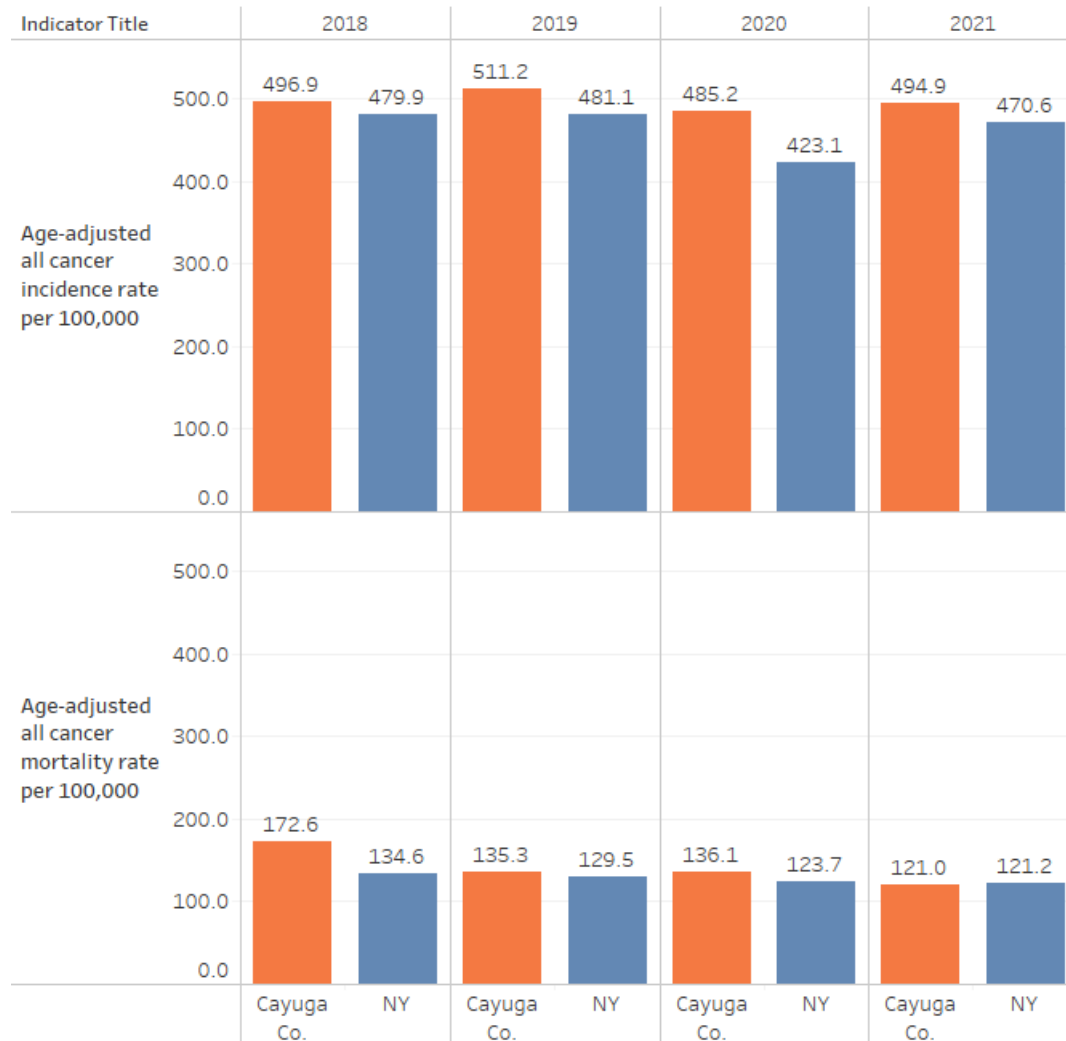
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Overall hospitalization rates for asthma complications in Cayuga County are lower than state benchmarks.
- However, hospitalization rates among Black residents is 18.5% higher than the state.



CANCER INDICATORS

Cancer Indicators



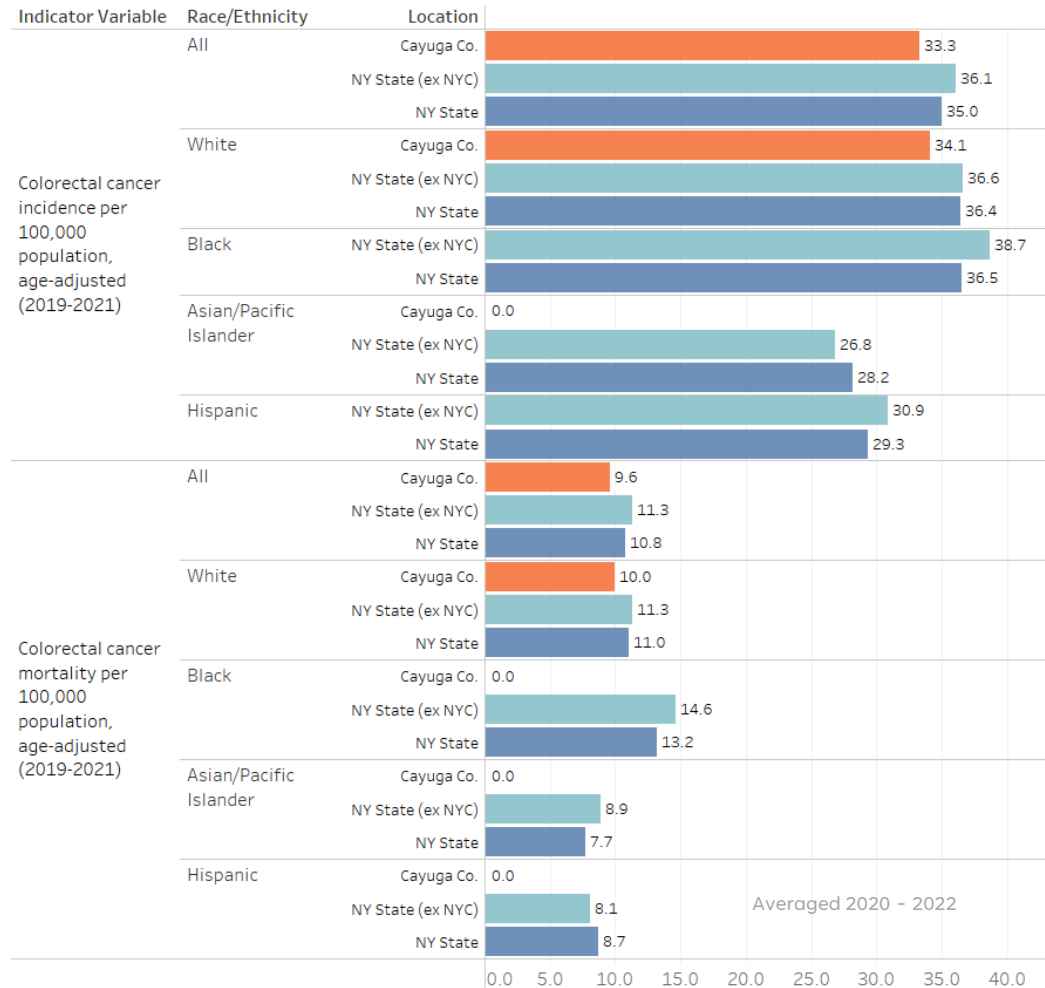
- Cayuga County has a cancer incidence rate (all types) that is 5.2% higher than state benchmarks.
- The all-cancer mortality rate, however, has dropped from 2018 to align with the state rate.





CANCER INDICATORS: COLORECTAL CANCER

Cancer Indicators



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

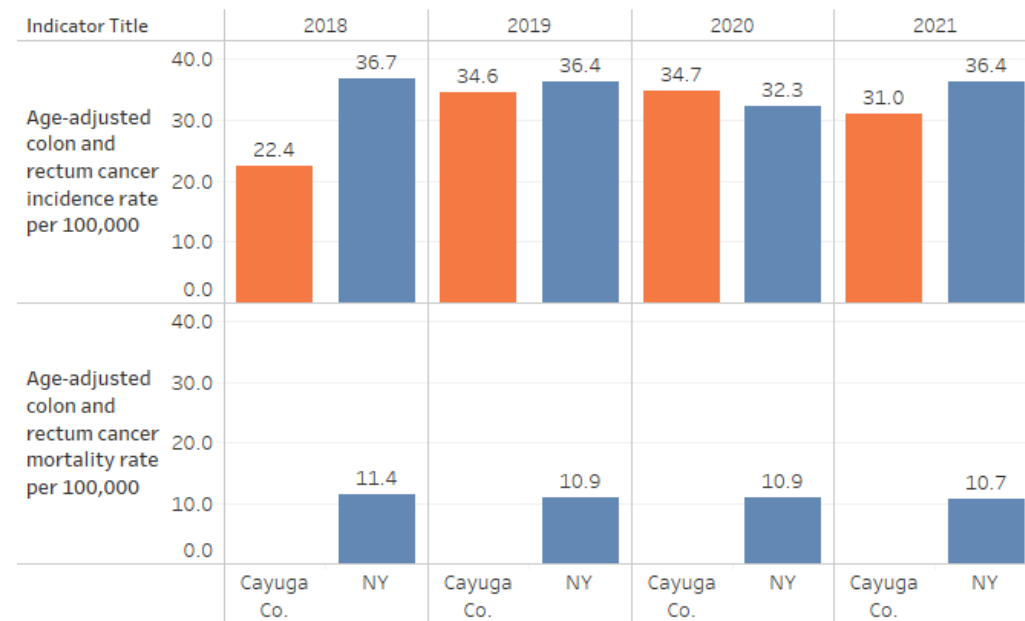
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Cayuga County has a lower incidence rate of colorectal cancer compared to state benchmarks.

Cancer Indicators



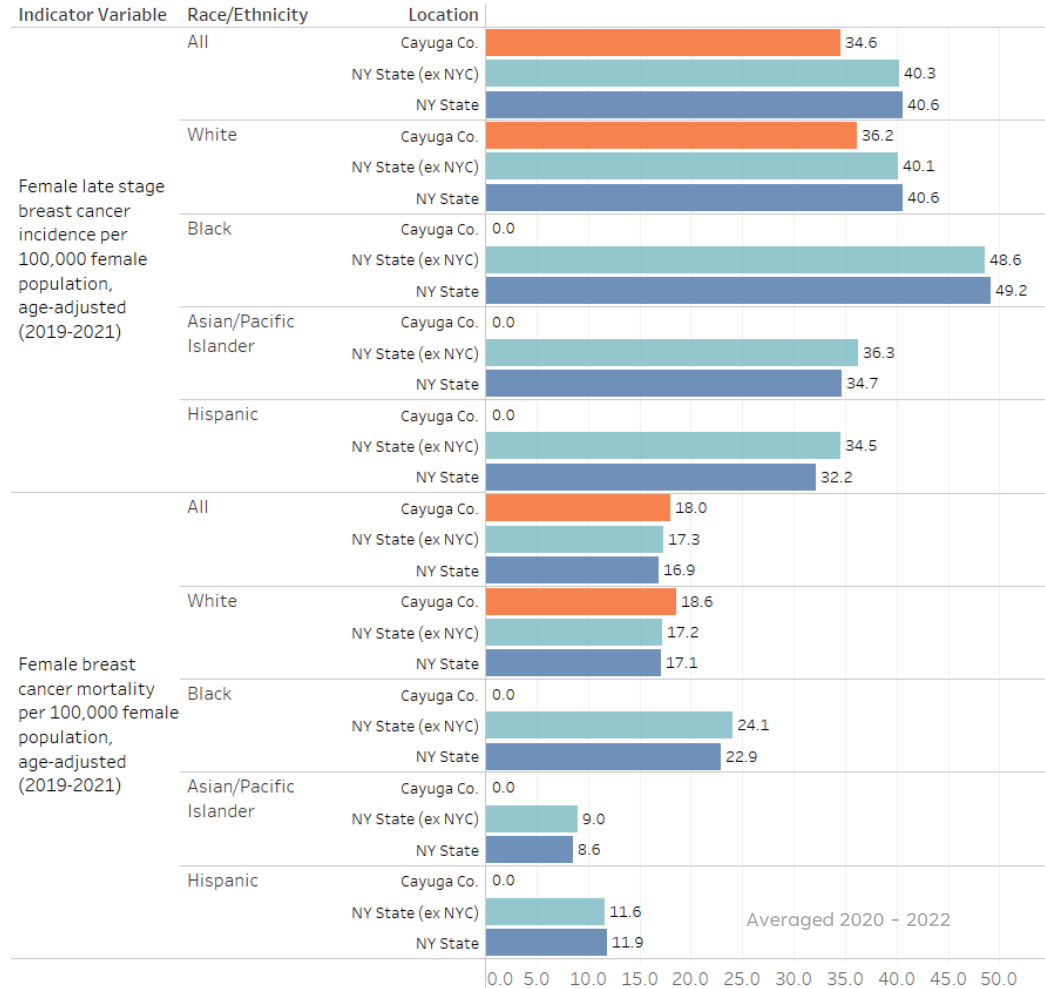
Source: CHIRS Dashboard (ny.gov)





CANCER INDICATORS: BREAST CANCER

Cancer Indicators



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

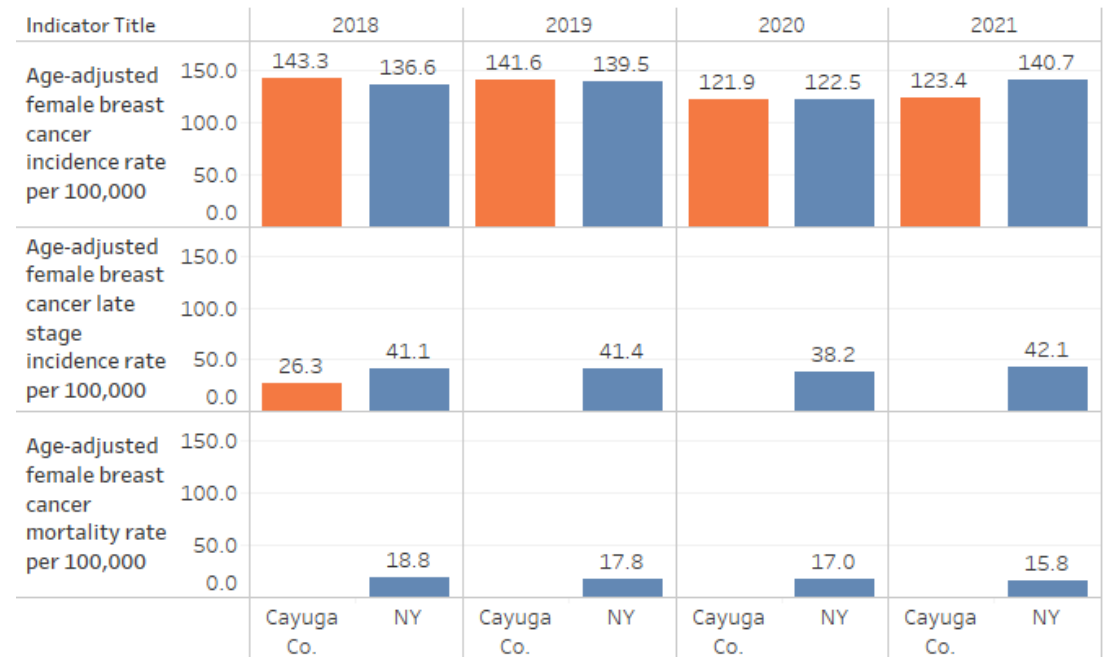
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Cayuga County has a lower incidence rate of female late-stage breast cancer, compared to state benchmarks.

Cancer Indicators



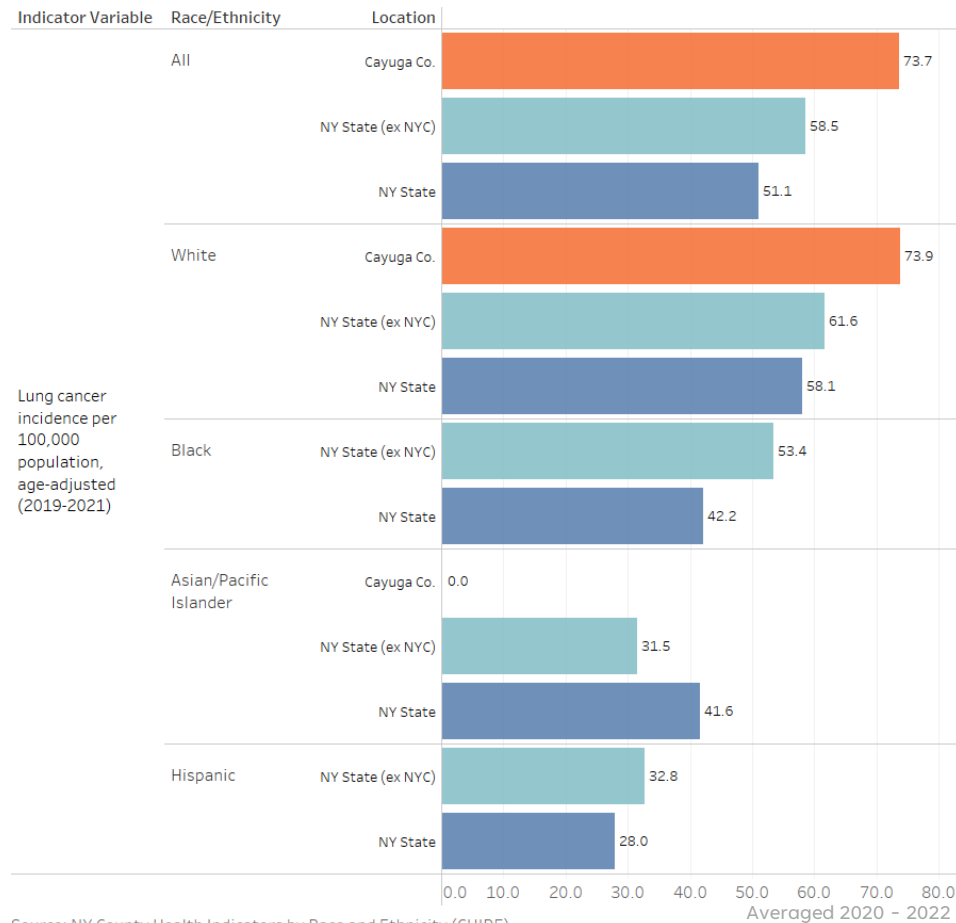
Source: CHIRS Dashboard (ny.gov)





CANCER INDICATORS: LUNG CANCER

Incidence



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

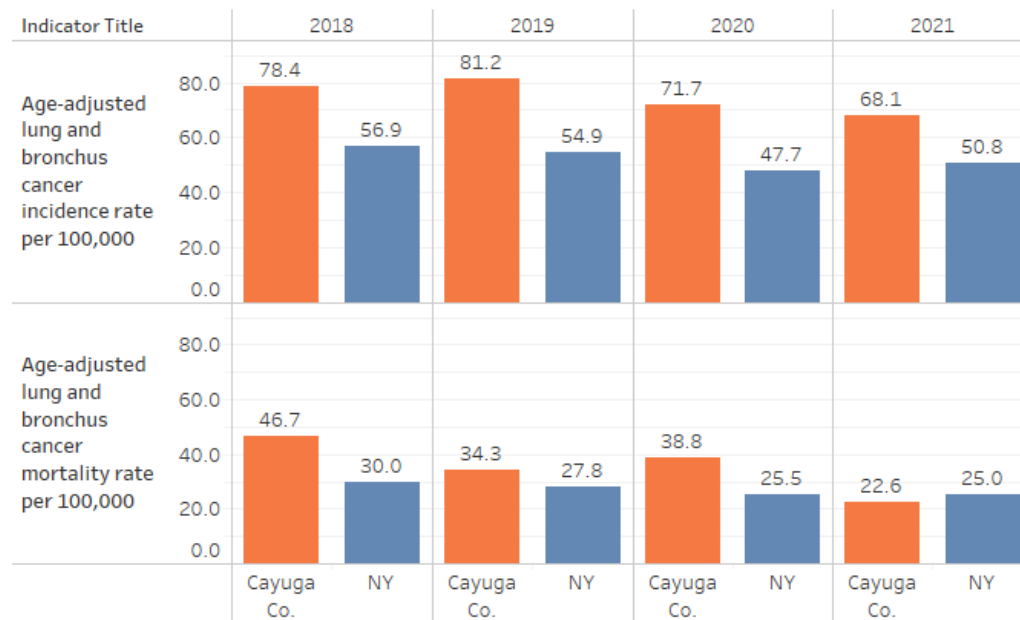
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Lung cancer incidence in Cayuga County is 26% above the state benchmark, and yearly trends have remained steady.
- However, the mortality rate has declined since 2018 to be lower than the state rate.

Cancer Indicators



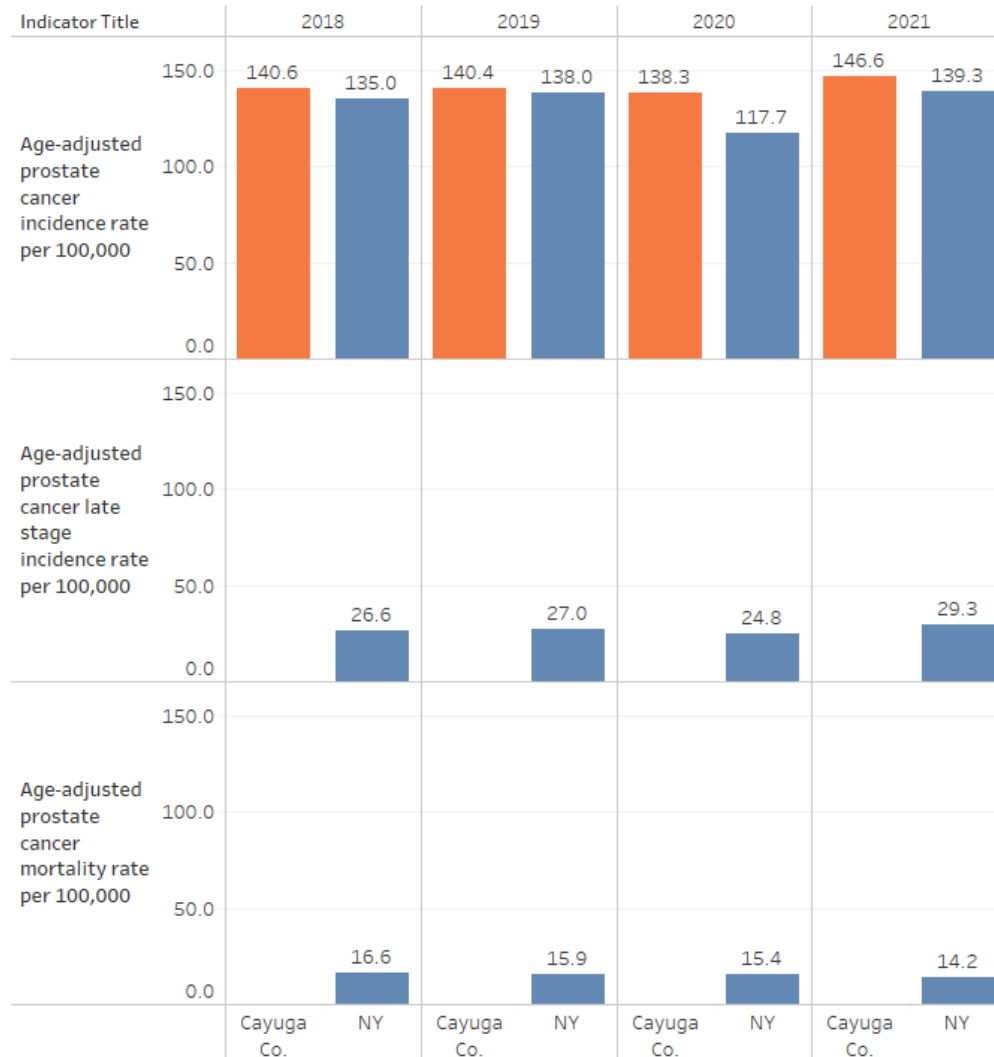
Source: CHIRS Dashboard (ny.gov)





CANCER INDICATORS: PROSTATE CANCER

Cancer Indicators



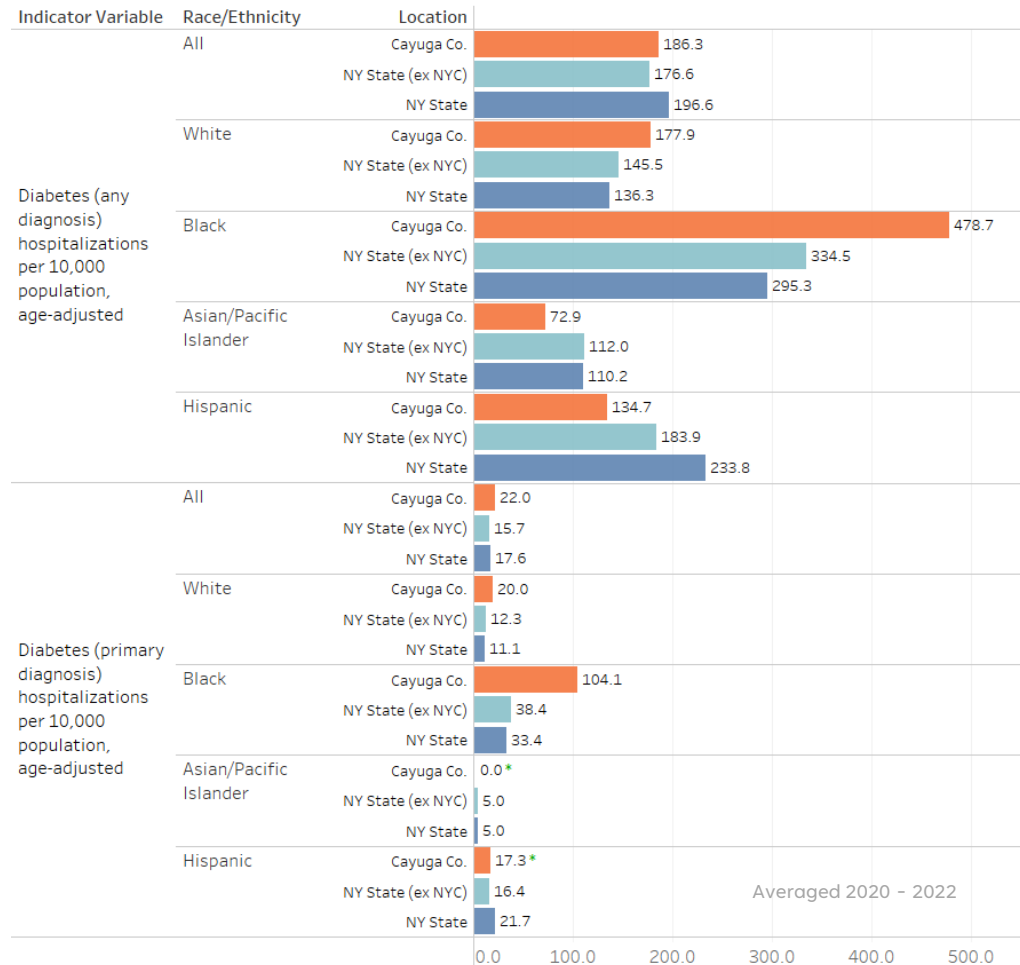
- Prostate cancer rates are slightly higher than the state benchmark, and as of 2021, have reached their highest incidence rate compared to prior years.
- Mortality rates are not available for Cayuga County.





DIABETES INDICATORS: HOSPITALIZATIONS

Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

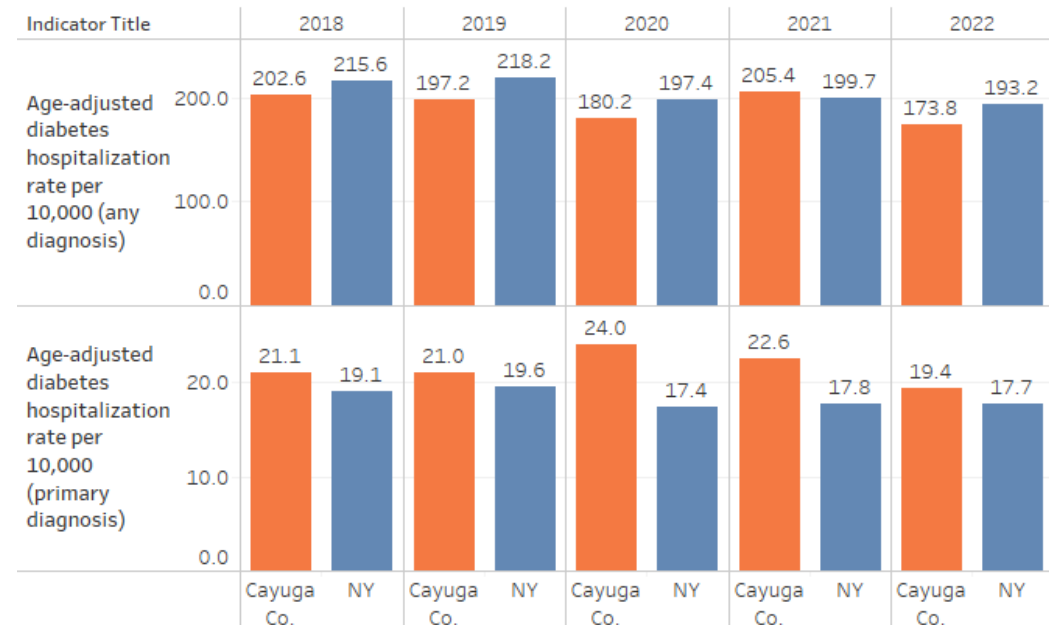
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian/Pacific Islander (including Hispanic), and Hispanic (of any race).

- Diabetes hospitalizations are similar to state rates, except for Black residents of Cayuga County. Diabetes hospitalizations per 10,000 for the black cohort is 43.1% higher than the state average for any diagnosis and 171.1% higher for primary diagnosis.

Cirrhosis, Diabetes, and Kidney Indicators



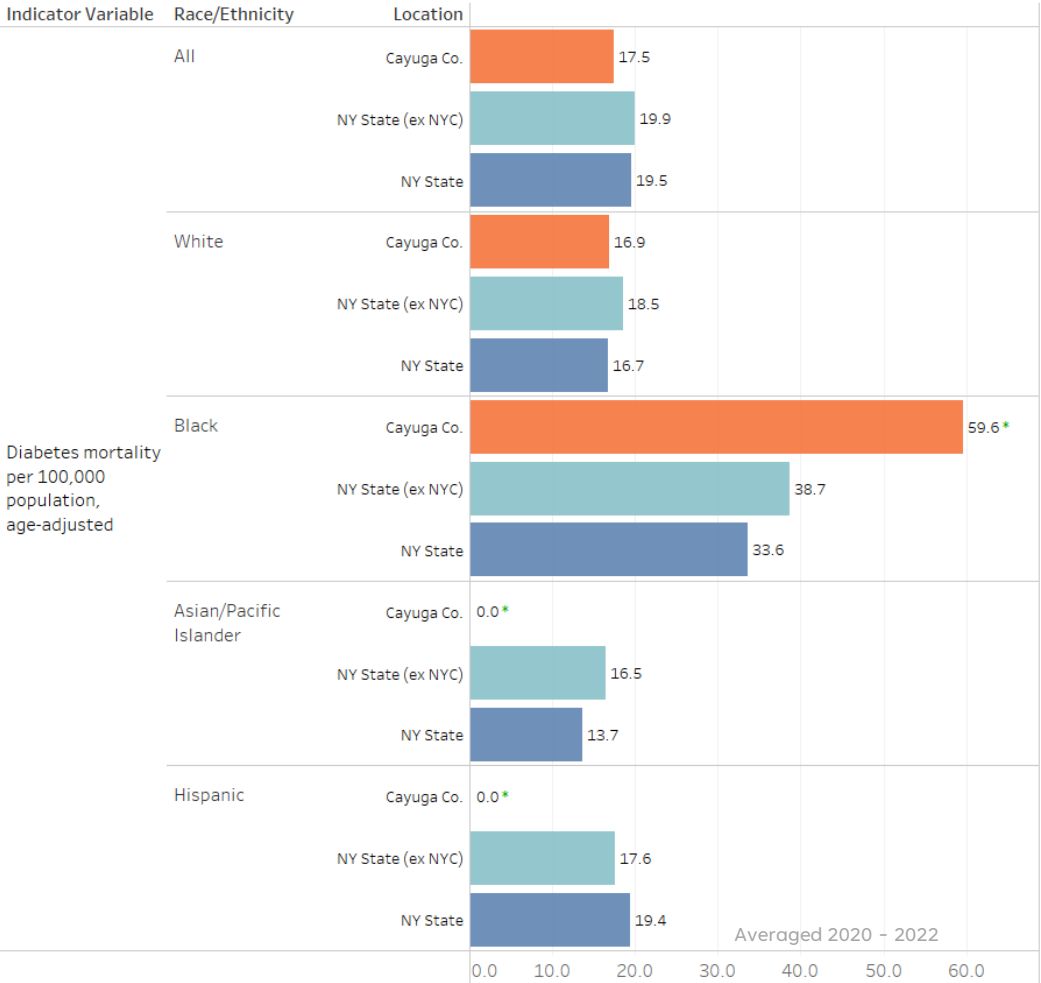
Source: CHIRS Dashboard (ny.gov)





DIABETES INDICATORS: MORTALITY

Mortality



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

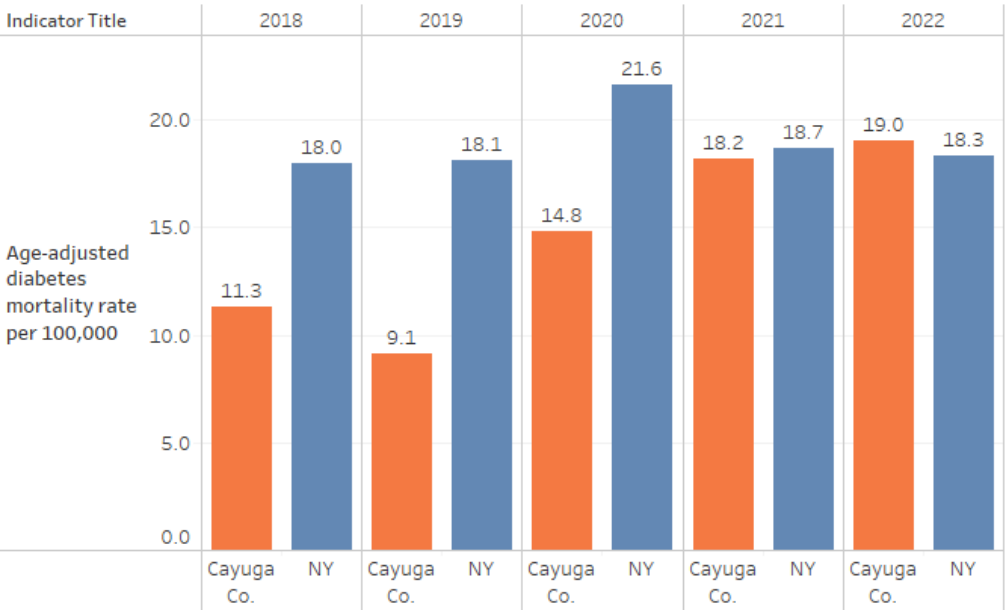
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Diabetes mortality rates in Cayuga County have increased since 2018 to be comparable to state benchmarks. Rates for Black residents are 54% higher than state rates.

Cirrhosis, Diabetes, and Kidney Indicators



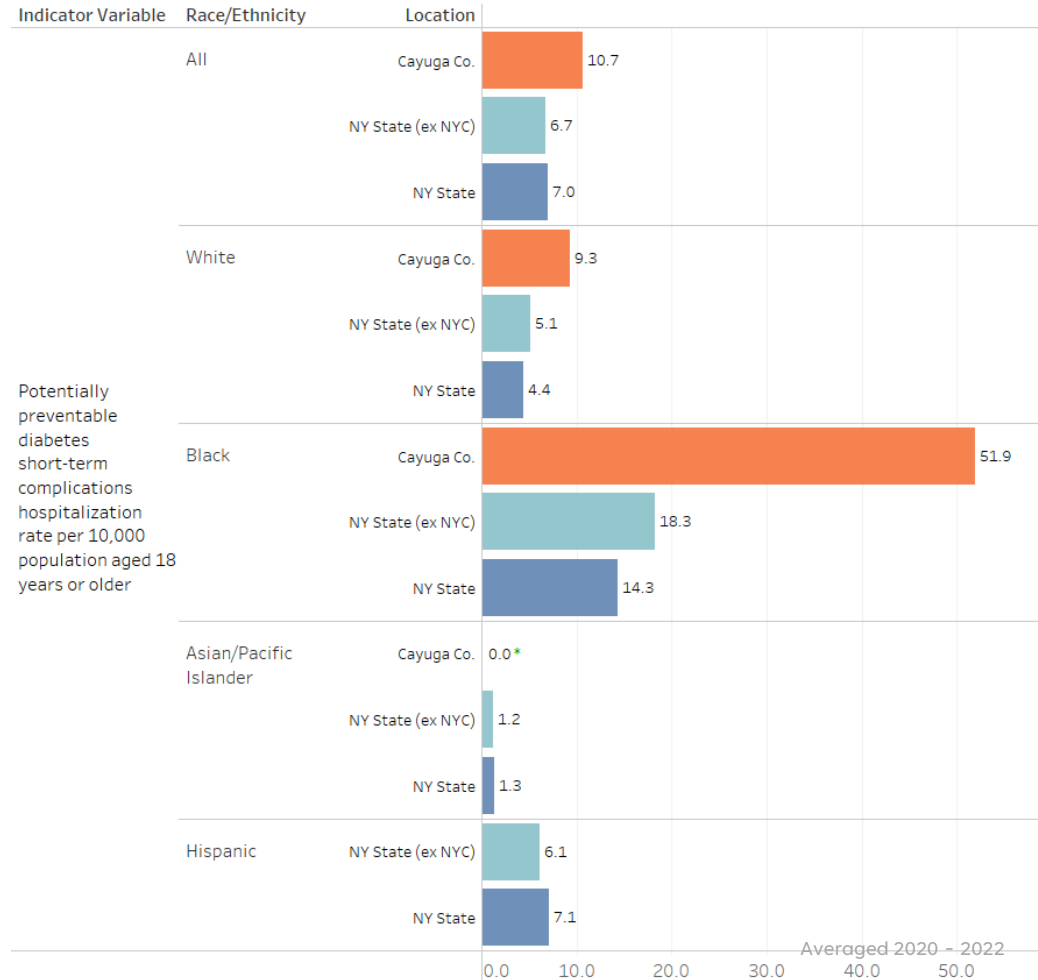
Source: CHIRS Dashboard (ny.gov)





DIABETES INDICATORS: PREVENTABLE HOSPITALIZATIONS

Preventable Hospitalizations



- Hospitalizations for short-term diabetes complications exceeds states benchmarks. Like the other diabetes metrics, the rate for Black Cayuga County residents is markedly higher.

Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

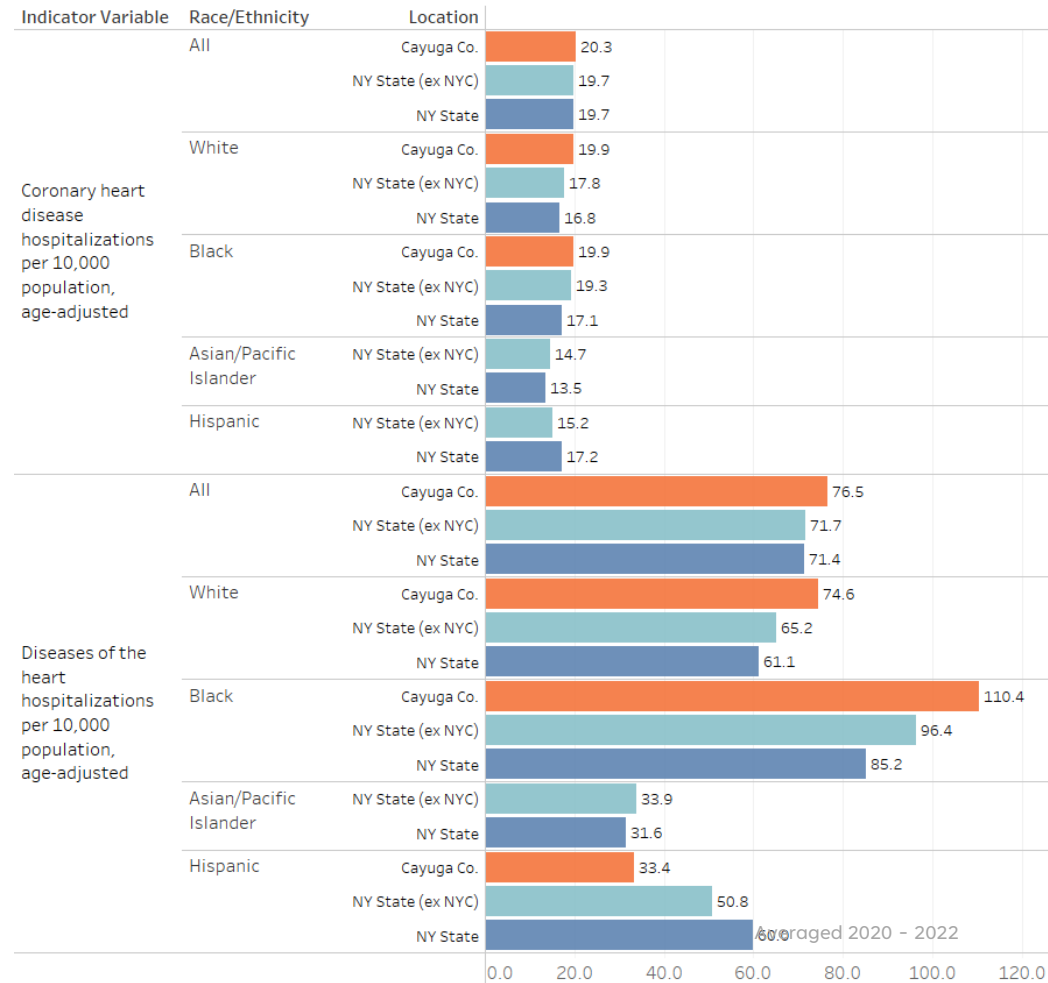
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).





HEART DISEASE AND STROKE INDICATORS: HOSPITALIZATIONS

Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

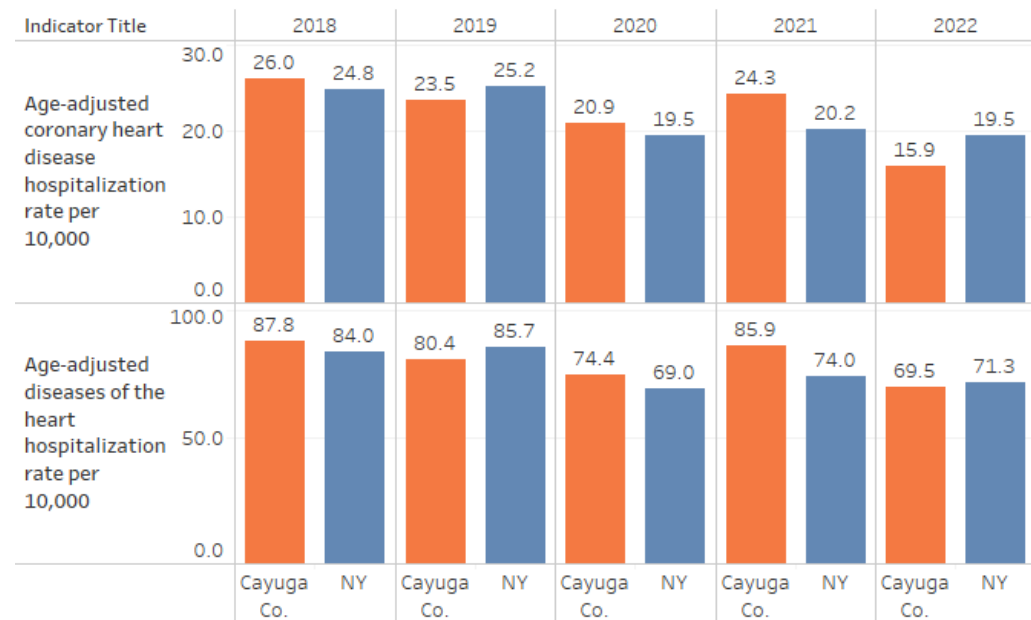
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Hospitalization rates for coronary heart disease in Cayuga County are similar to state benchmarks. Hospitalization rates for heart disease exceed state benchmarks, particularly for the Black population cohort.

Cardiovascular Disease Indicators



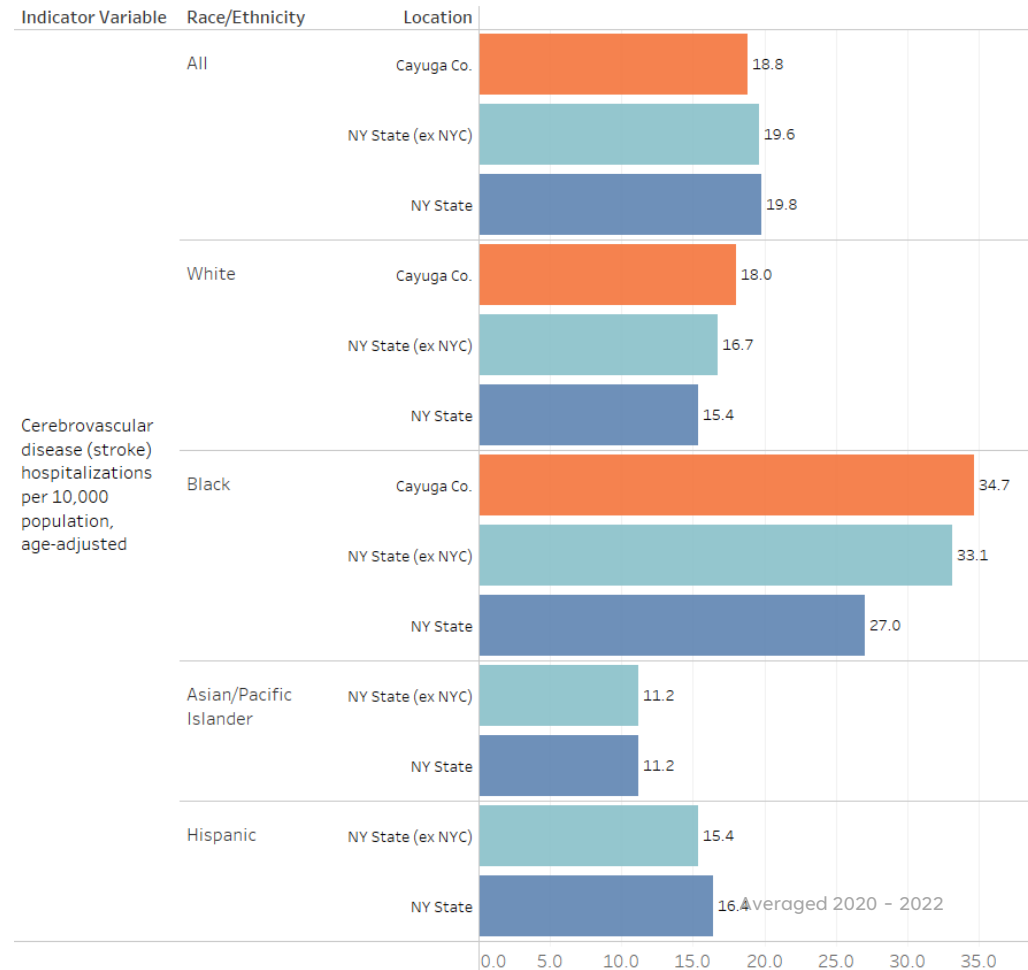
Source: CHIRS Dashboard (ny.gov)





HEART DISEASE AND STROKE INDICATORS: HOSPITALIZATIONS

Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

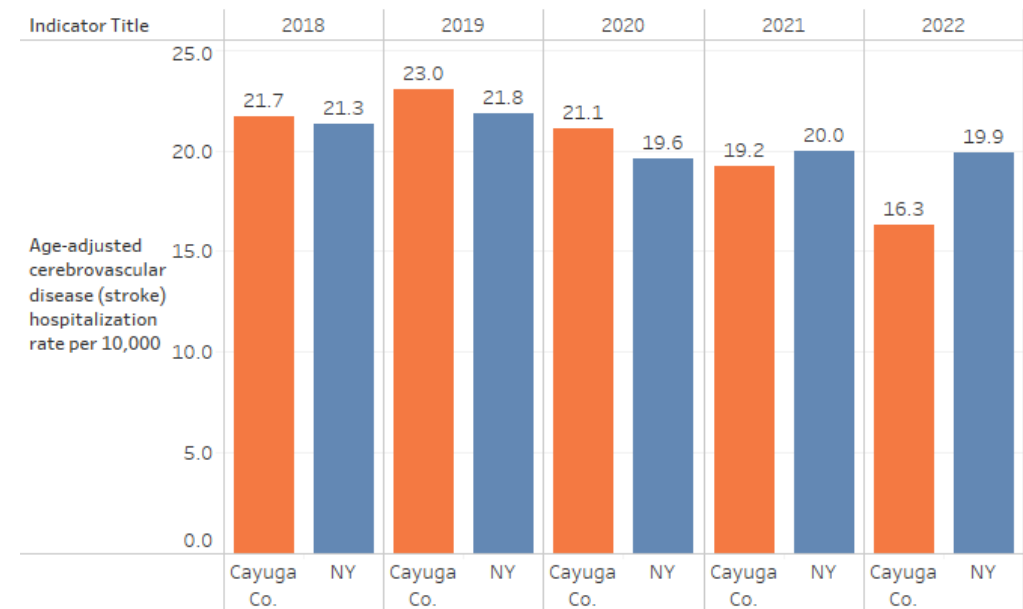
* The rate or percentage is unstable.

~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Stroke hospitalization rates in Cayuga County have declined since 2018. The rate remains slightly above state benchmarks among White and Black population cohorts.

Cardiovascular Disease Indicators



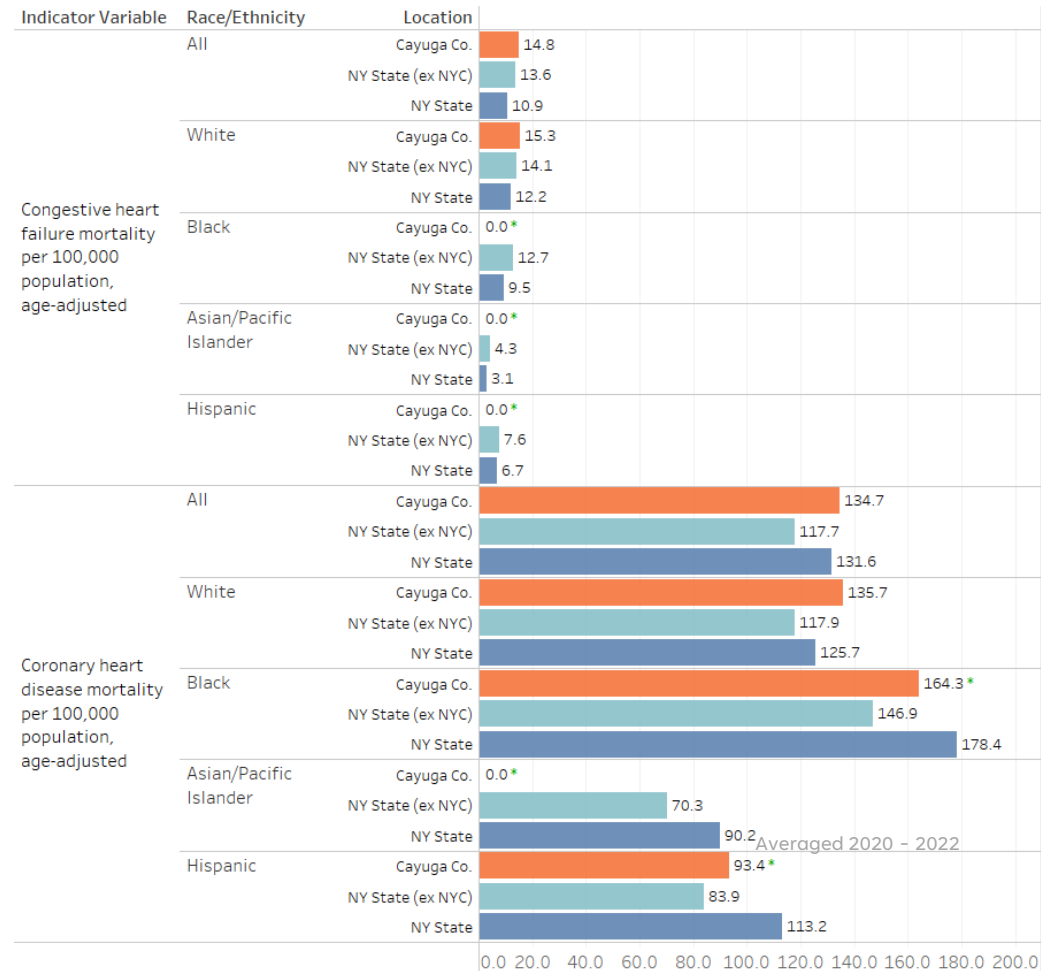
Source: CHIRS Dashboard (ny.gov)





HEART DISEASE AND STROKE INDICATORS: MORTALITY

Mortality



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

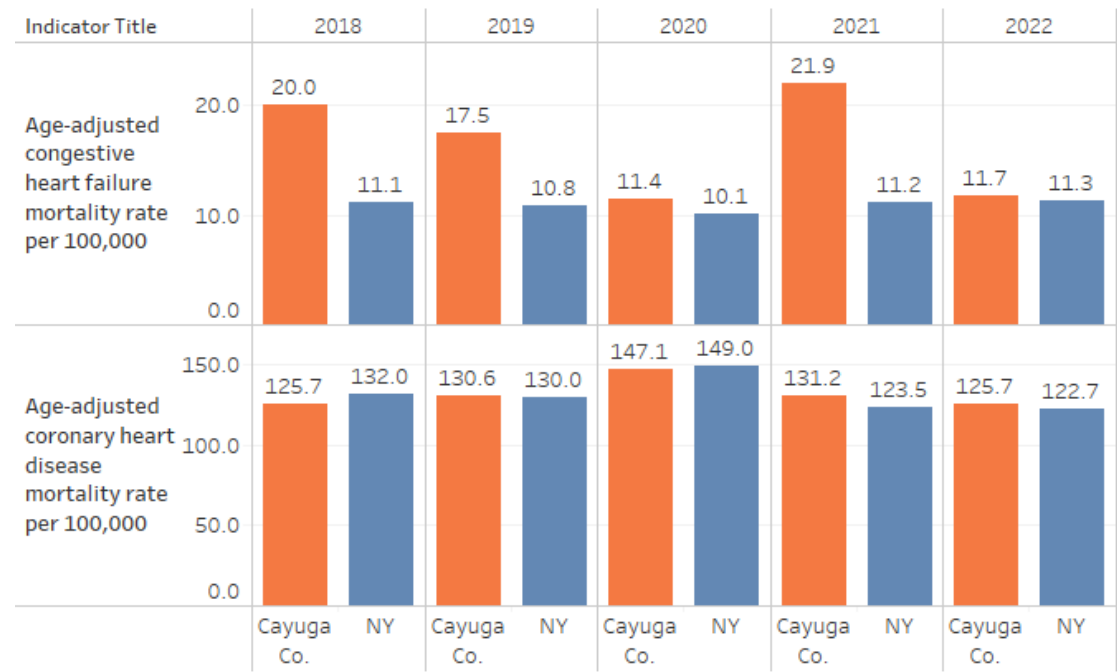
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~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

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- Mortality rates for congestive heart failure and coronary heart disease in Cayuga County are higher than state benchmarks.

Cardiovascular Disease Indicators



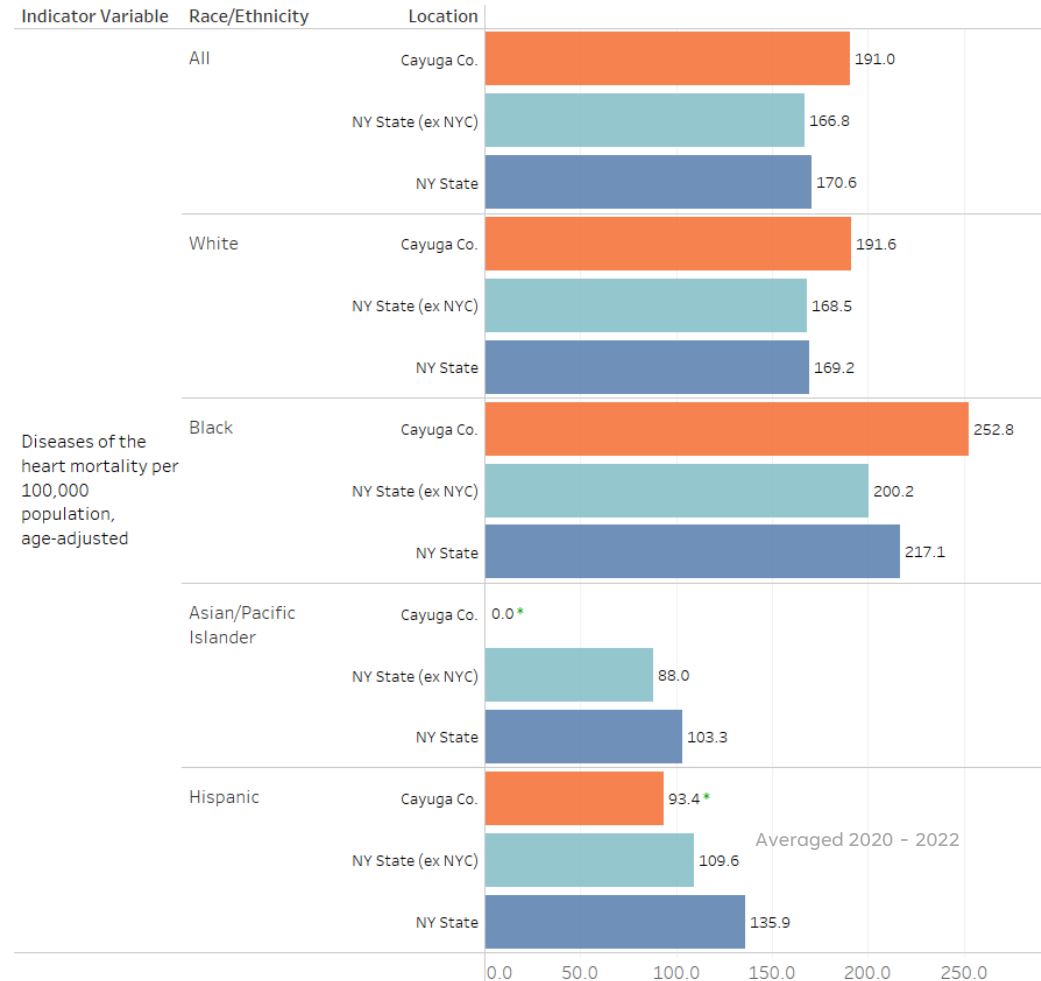
Source: CHIRS Dashboard (ny.gov)





HEART DISEASE AND STROKE INDICATORS: MORTALITY

Mortality



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

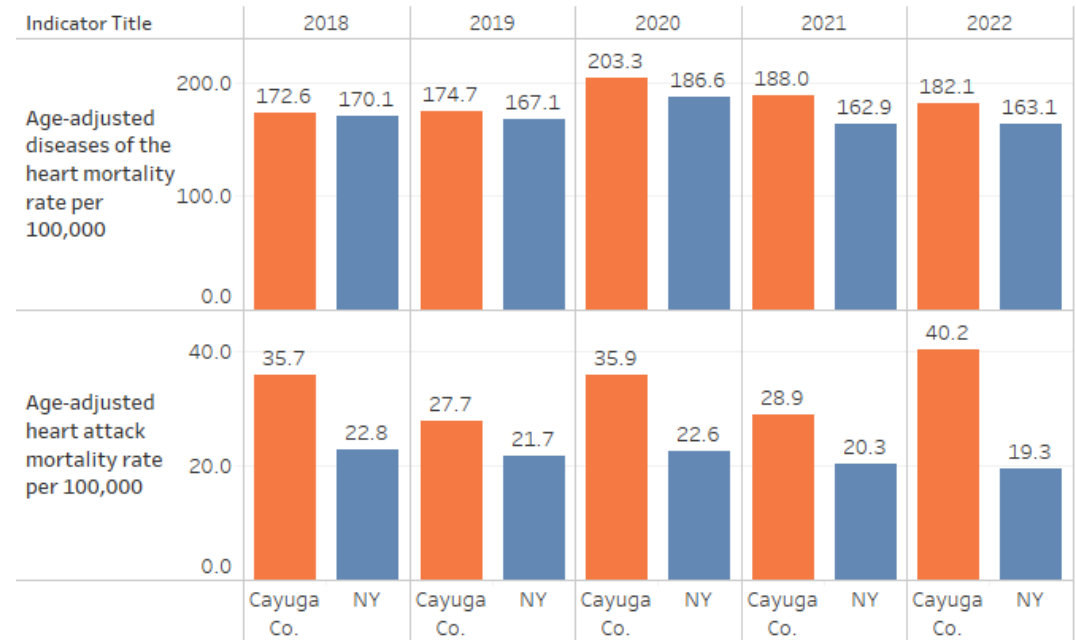
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~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).

- Cayuga County sees higher mortality rates for heart disease compared to state benchmarks. Rates are notably elevated for the Black population cohort.

Cardiovascular Disease Indicators



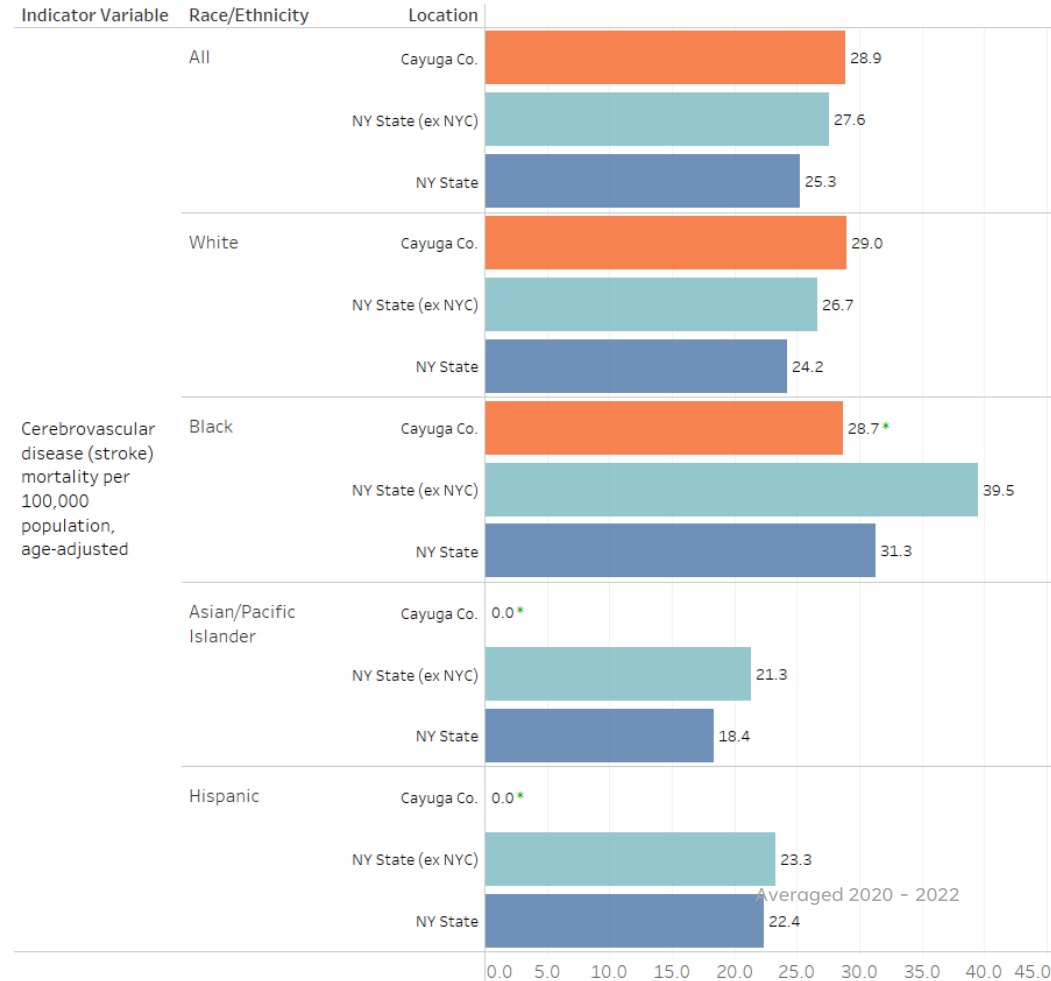
Source: CHIRS Dashboard (ny.gov)





HEART DISEASE AND STROKE INDICATORS: MORTALITY

Heart Disease and Stroke Indicators



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

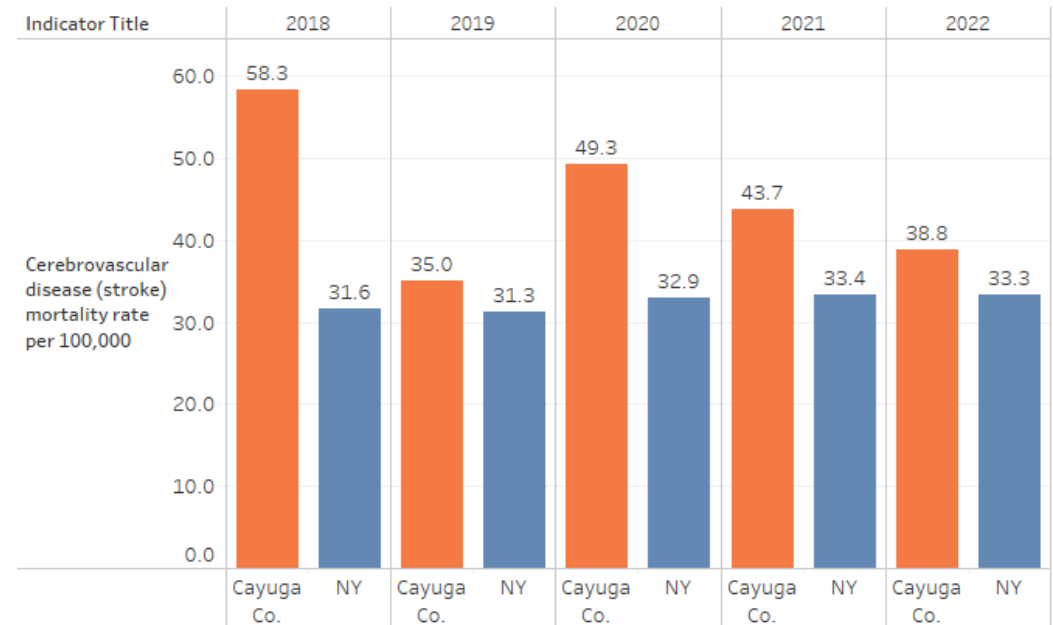
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~ White non-Hispanic, Black (including Hispanic), Asian (including Hispanic, excluding Pacific Islanders), and Hispanic (of any race).

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- Stroke mortality rates in Cayuga County have fallen since 2018 but remain 4.7% higher than state benchmarks. However, stroke mortality rates among the Black population are noticeably lower than the state benchmark.

Cardiovascular Disease Indicators



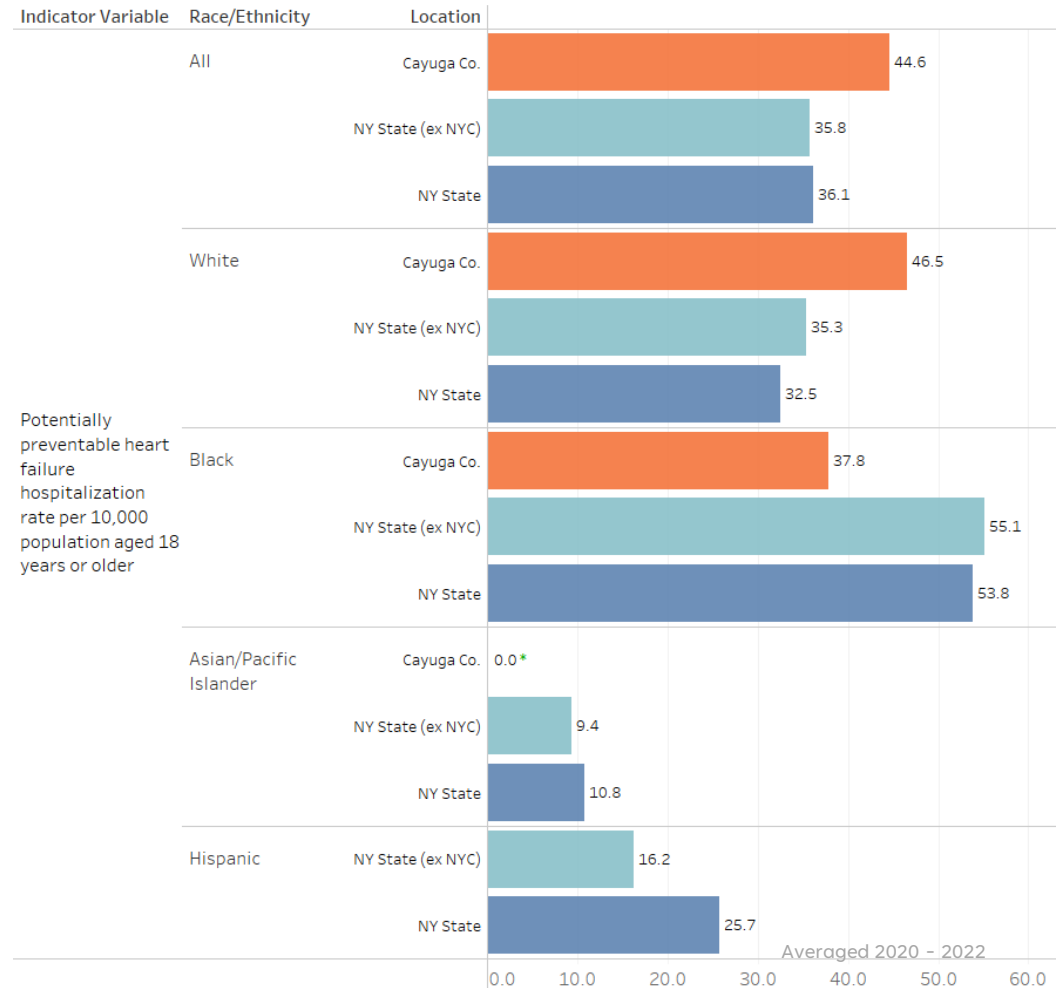
Source: CHIRS Dashboard (ny.gov)





HEART DISEASE AND STROKE INDICATORS: PREVENTABLE HOSPITALIZATIONS

Preventable Hospitalizations



- The rate of potentially preventable hospitalizations due to heart failure in Cayuga County is higher than state benchmarks, overall and for the White population cohort.
- The rate for the Black population cohort is lower than state benchmarks.

Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

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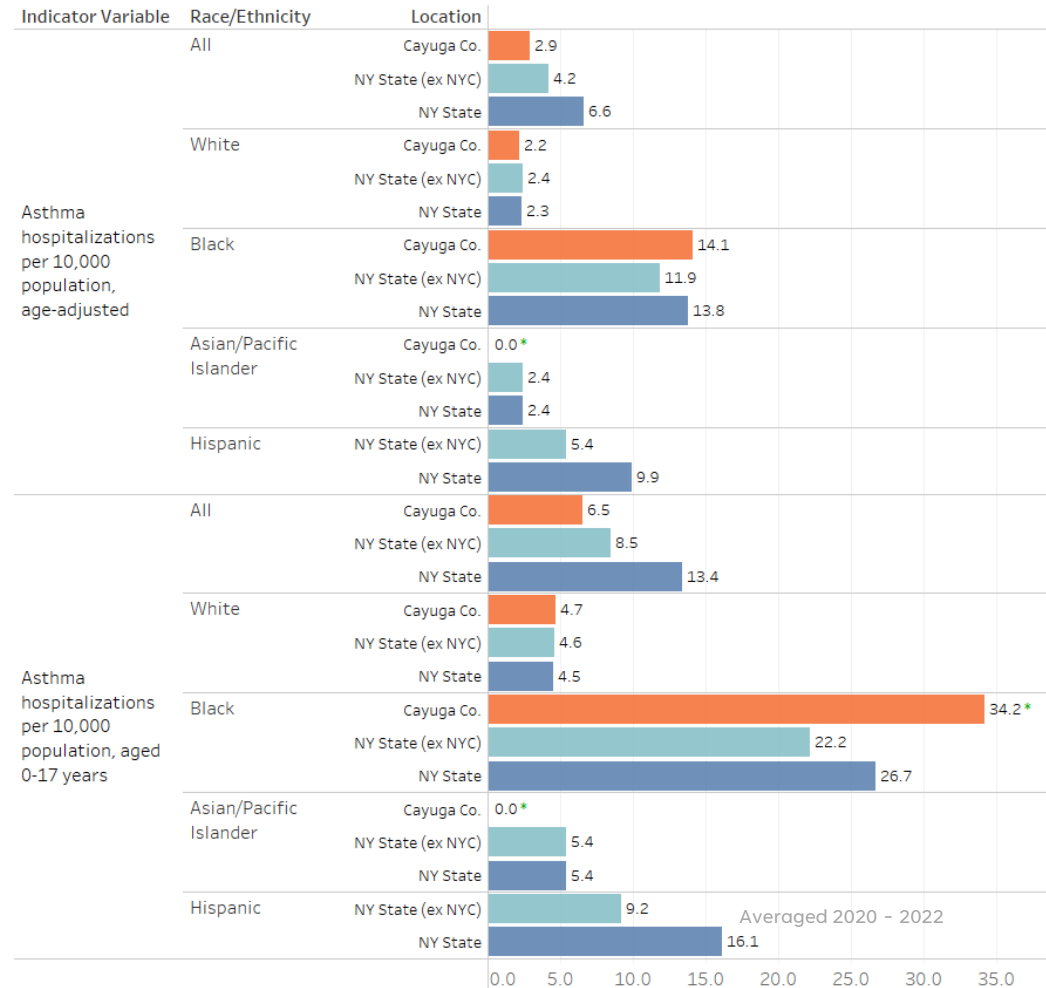
~~ White non-Hispanic, Black (including Hispanic), Asian / Pacific Islander (including Hispanic), and Hispanic (of any race).





RESPIRATORY DISEASE INDICATORS: HOSPITALIZATIONS

Hospitalizations



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

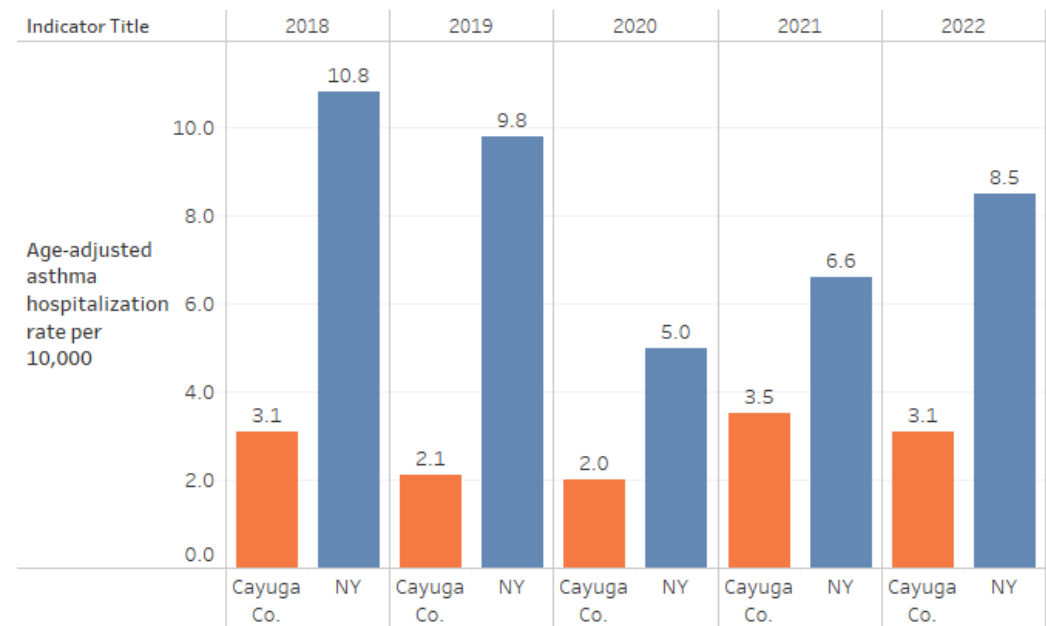
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- Asthma-related hospitalizations for Cayuga County residents are below state benchmarks. However, the rates are elevated for the Black population cohort aged 0-17.

Respiratory Disease Indicators



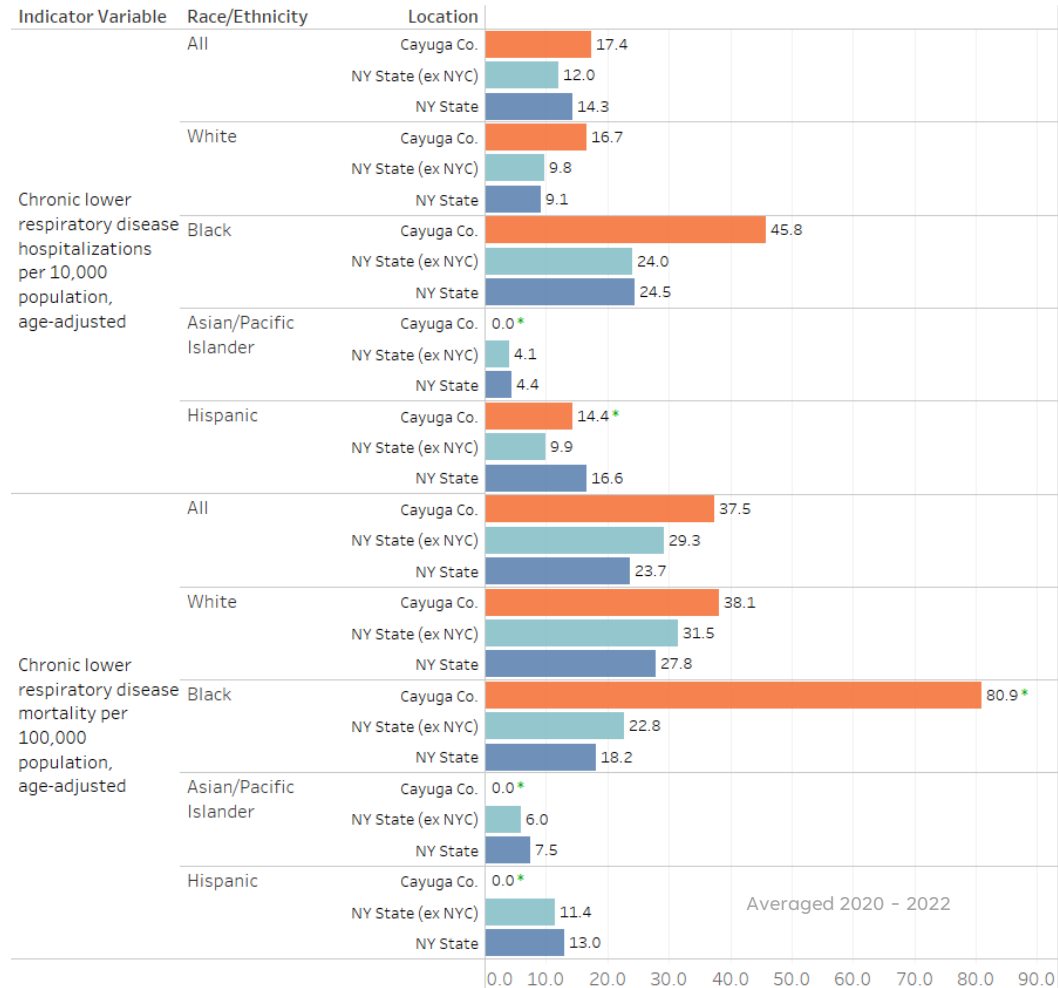
Source: CHIRS Dashboard (ny.gov)





RESPIRATORY DISEASE INDICATORS: CLRD

Respiratory Disease Indicators



Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

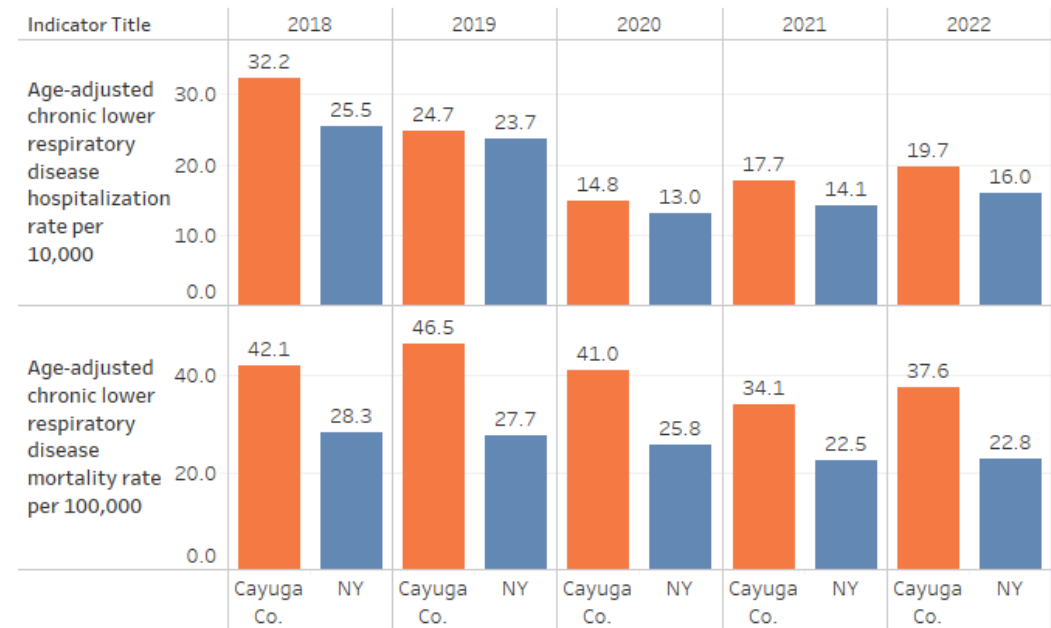
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- The rate of hospitalization among Cayuga County residents for chronic lower respiratory disease (CLRD) is higher than state benchmarks.
- For Black residents, the rate is nearly double the state benchmark.

Respiratory Disease Indicators



Source: CHIRS Dashboard (ny.gov)





EDUCATION ACCESS AND QUALITY

- 2025-2030 Prevention Agenda



EDUCATION ACCESS AND QUALITY



The 2025-2030 Prevention Agenda for New York State identifies Education Access and Quality as a priority domain for addressing resident health. Education is shown to be directly linked to an individual's or a community's health. Higher education correlates with higher income, better education around health behaviors, and greater access to healthcare services. The following statistics related to Prevention Agenda priorities were examined for Cayuga County using data from the 2025-2030 Prevention Agenda dashboard and supplemented by other data sources:

Health and Wellness Promoting Schools

Percentage of economically disadvantaged public-school students in grades K-8 with >10% absenteeism (chronic absenteeism)

Percentage of public-school students in grades K-8 with >10% absenteeism (chronic absenteeism)

Opportunities for Continued Education

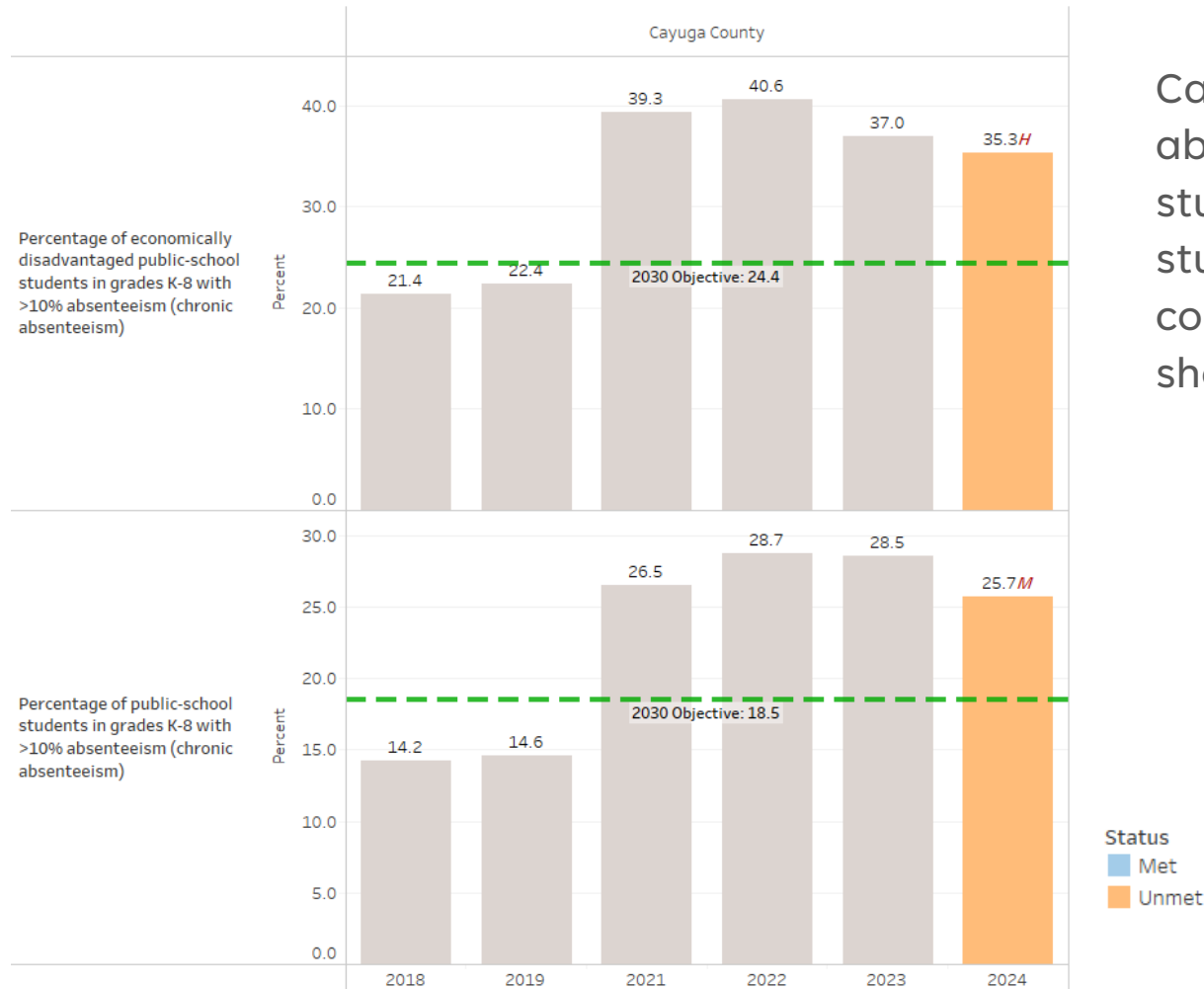
Percentage of economically disadvantaged high school seniors who attend a two or 4-year college within 5 years

Percentage of high school seniors who attend a two or 4-year college within 5 years

HEALTH AND WELLNESS PROMOTING SCHOOLS



Domain: Education Access and Quality
Priority Area: Health and Wellness Promoting Schools



2025-2030 Prevention Agenda Indicators

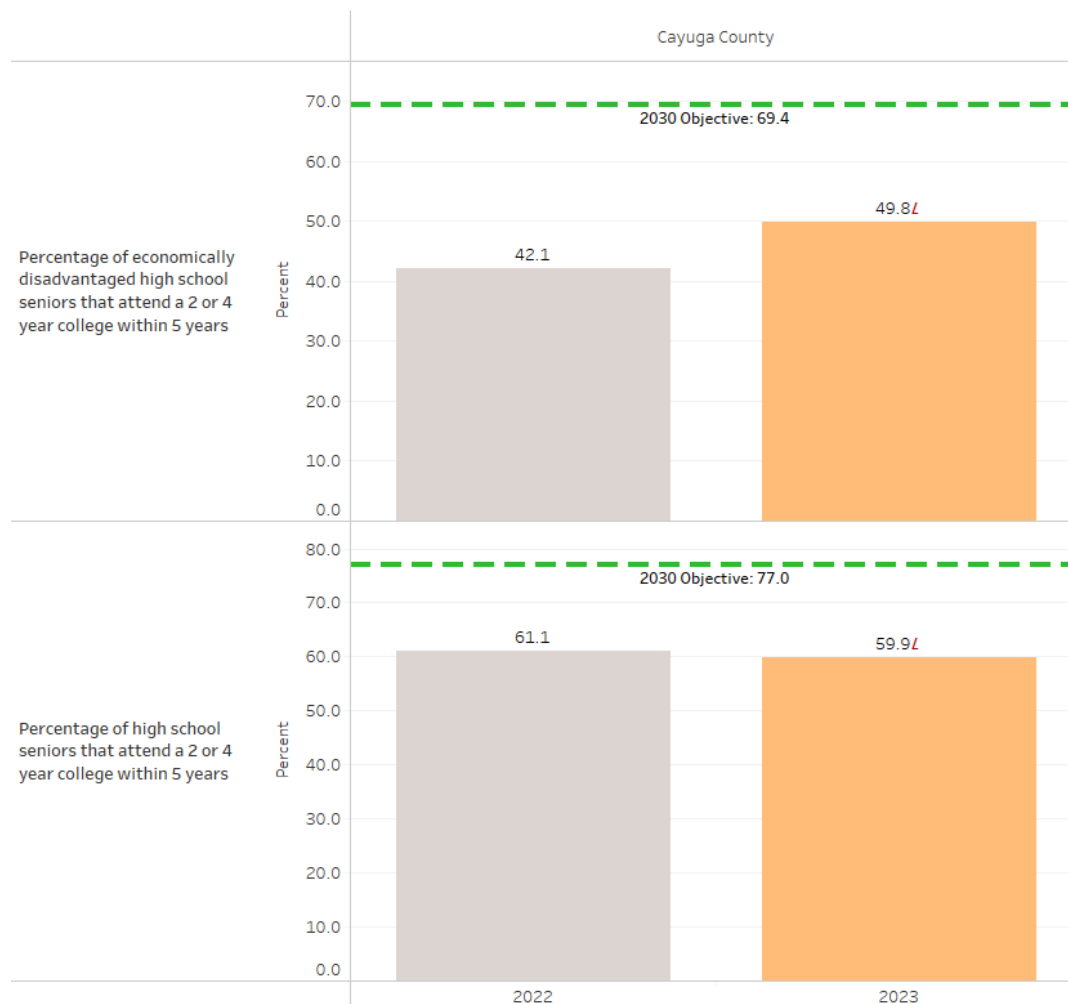
Cayuga County has seen an increase in chronic absenteeism since 2018 among K-8 grade students, including economically disadvantaged students. The COVID-19 pandemic may have contributed to the increase, and more recent data shows a decline in the percentage.



OPPORTUNITIES FOR CONTINUED EDUCATION



Domain: Education Access and Quality
Priority Area: Opportunities for Continued Education



2025-2030 Prevention Agenda Indicators

College attendance among economically disadvantaged high school seniors in Cayuga County falls 28.2% short of the 2030 Objective. Additionally, the percentage of high school seniors who attend a 2 – or 4-year college within 5 years falls 22.2% below the 2020 Objective.

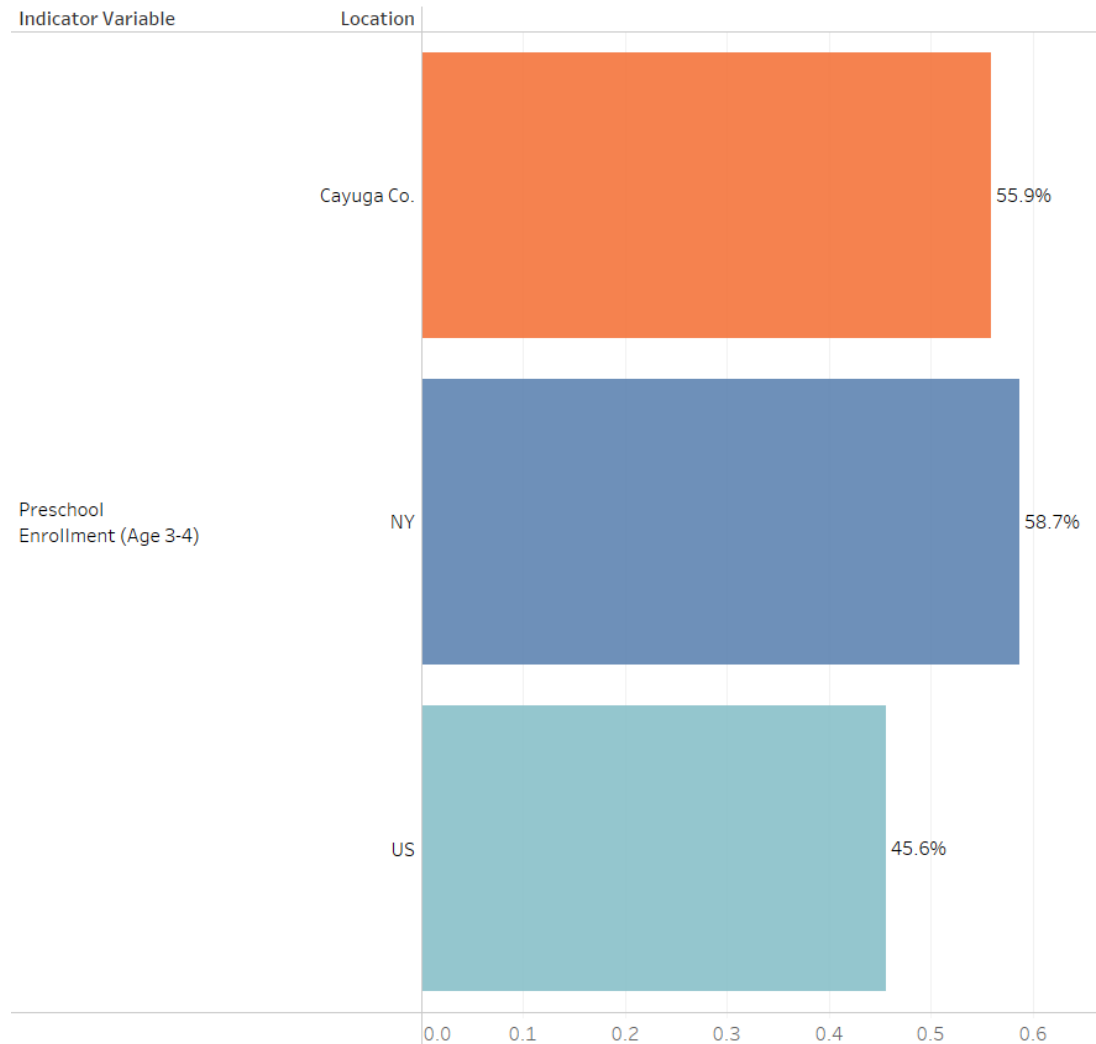
Status
Met
Unmet



PRESCHOOL ENROLLMENT



Education



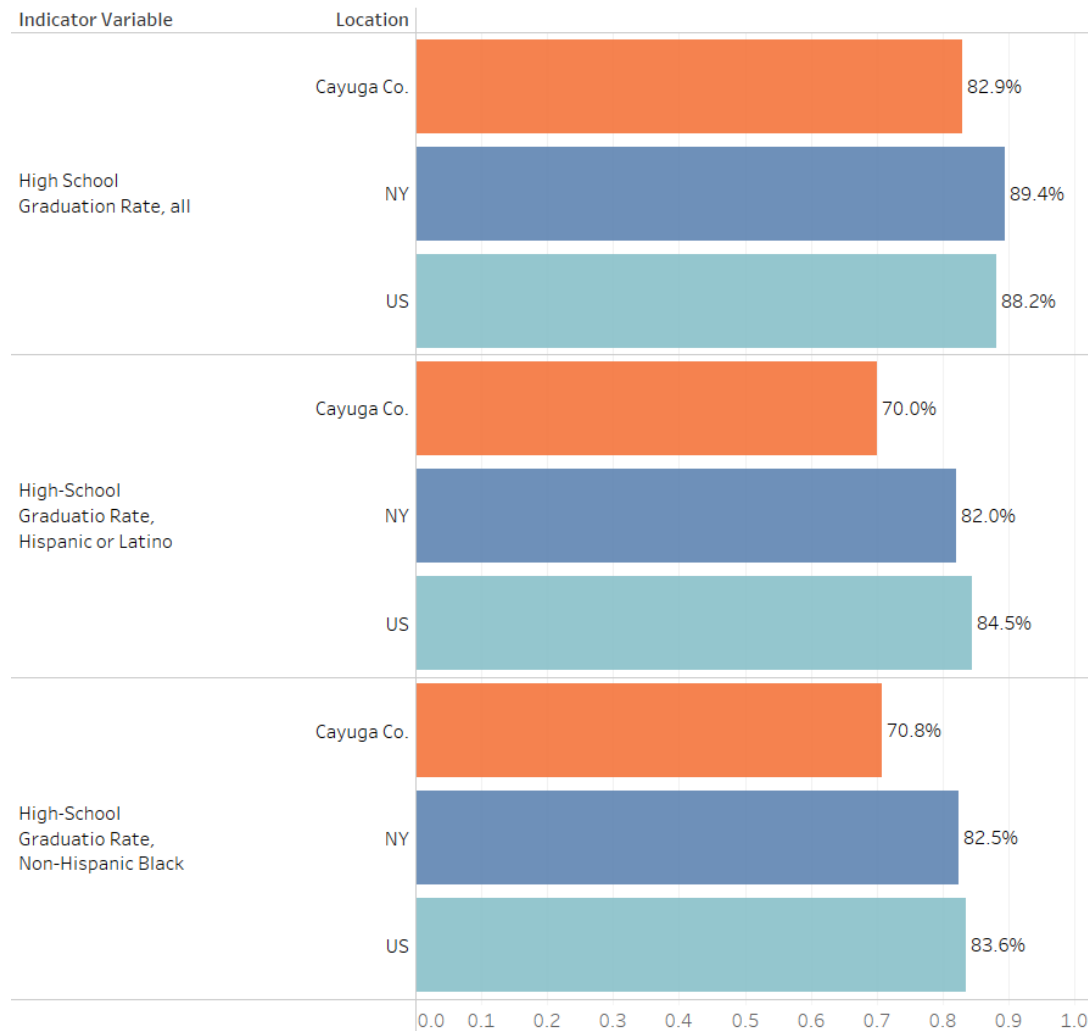
- Preschool enrollment percentages in Cayuga County exceed the national average but fall 4.8% below the state percentage.



GRADUATION RATE



Graduation Rate



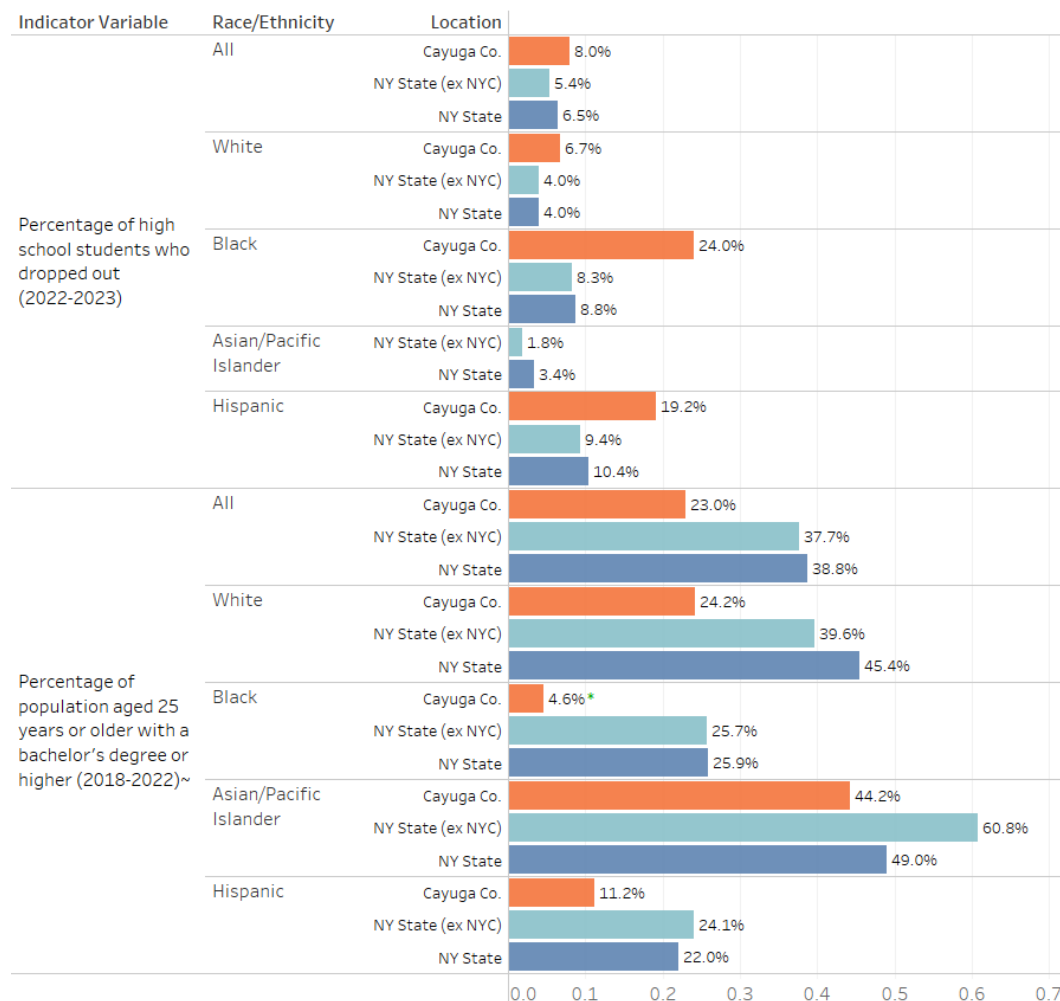
- High school graduation rates among all Cayuga County residents lag behind state and national rates.
- This underperformance is especially noted among Hispanic or Latino and Non-Hispanic Black populations.



EDUCATIONAL ATTAINMENT



Education



- High school dropout rates in Cayuga County are higher than state benchmarks, particularly for Black and Hispanic cohorts.
- The overall percentage of people aged 25 or older with a bachelor's degree or higher is less than half of state benchmarks. Percentages are lower among all racial/ethnic cohorts.

Source: NY County Health Indicators by Race and Ethnicity (CHIRE)

* The rate or percentage is unstable.

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HEALTH CHALLENGES AND ASSOCIATED RISK FACTORS

OVERVIEW OF HEALTH CHALLENGES



Well-being and Mental Health

Preventable Deaths

Chronic Illness Prevention

Healthy Women, Infants and Children



HEALTH CHALLENGES AND ASSOCIATED RISK FACTORS: WELL-BEING AND MENTAL HEALTH



- Cayuga County reports a higher percentage of adults experiencing frequent mental distress during the past month at 15.1% compared to the Prevention Agenda 2030 objective of 12%. Suicide mortality in the county is 74% higher than the state average for all residents and is particularly elevated among the Hispanic population, at 269% above the state average. Cayuga County's age-adjusted suicide mortality rate of 16.9 per 100,000 population is well above the Prevention Agenda 2030 objective of 6.7.
- Several social and economic factors may contribute to these mental health challenges. Cayuga County has a higher proportion of households living in poverty than state and national averages, and a higher percentage of people living in poverty, along with median household incomes that fall below both benchmarks. Cayuga County also has fewer recreation and fitness facilities per 100,000 residents and a lower high school graduation rate compared to state and national levels. Behavioral risk factors may further contribute, including a higher prevalence of binge drinking than the state average. Additionally, higher levels of abuse/maltreatment in children, higher infant mortality rates per 1,000 live births, and a greater proportion of premature deaths relative to state and national averages are associated with poorer mental health outcomes.
- Significant health disparities are evident across racial and ethnic groups. Black residents and individuals identifying as “some other race” experience substantially higher poverty rates in Cayuga County compared to state and national benchmarks. Infant mortality among Black populations in the county is 75% higher than the rate for all ethnic groups, and reports of abuse/maltreatment of Hispanic youth are 28.8, compared to the Prevention Agenda 2030 benchmark of 12.5. Educational disparities are also pronounced, with high school dropout rates higher than the state benchmark for Black students and higher for Hispanic students.

HEALTH CHALLENGES AND ASSOCIATED RISK FACTORS: PREVENTABLE DEATHS



- Cayuga County reports total mortality rates per 100,000 residents that exceed both state and national averages across all races and ethnicities. According to the Prevention Agenda 2025–2030 indicators, the percentage of deaths occurring prematurely (before age 65) in Cayuga County is 22.7%, slightly above the 2030 objective of 22.4%. Infant mortality rates are also notably elevated, at 67% higher than the state average for all races and ethnicities.
 - Multiple factors contribute to these elevated mortality rates. Unhealthy dietary patterns are evident, with a higher percentage of adults in Cayuga County reporting consuming fewer than one fruit and fewer than one vegetable per day, compared to the state average. Poor health behaviors further compound these risks, including adult cigarette smoking rates of 18.7%, which exceed the Prevention Agenda 2030 objective of 7.9%, and binge drinking rates of 16.9%, surpassing the 2030 objective of 14.6%. Violence is another contributing factor, as emergency department visits for assault-related injuries occur at a rate of 43.7 per 10,000 residents, well above the Prevention Agenda benchmark of 30.5. In addition, preventable hospitalization rates, including those related to accidental poisonings, are higher in Cayuga County than state and national averages.
 - Health disparities are evident across these contributing factors. The difference in premature death rates between Hispanic individuals and non-Hispanic White individuals in Cayuga County is 44.6%, far exceeding the Prevention Agenda objective of 17%. Similarly, rates of assault-related emergency department visits among non-Hispanic Black individuals are 6.4, surpassing the Prevention Agenda 2030 benchmark of 4.0.

HEALTH CHALLENGES AND ASSOCIATED RISK FACTORS: CHRONIC ILLNESS PREVENTION



- Cayuga County reports higher age-adjusted all-cancer incidence rates than state benchmarks. Lung cancer incidence is 26% higher per 100,000 population than comparison benchmarks, and prostate cancer incidence remains slightly above the state average. In addition, potentially preventable hospitalizations for short-term diabetes complications are elevated compared to state levels. Hospitalizations related to diseases of the heart are also higher in Cayuga County, as are heart disease mortality rates. Rates of potentially preventable heart failure hospitalizations further exceed state averages, underscoring the burden of chronic disease within the county.
- Several factors likely contribute to the increased prevalence and incidence of chronic illness. Unhealthy dietary behaviors are common, with a higher percentage of adults in Cayuga County reporting consuming fewer than 1 fruit and fewer than 1 vegetable per day, compared to the state average. Poor health behaviors also play a role, as adult cigarette smoking prevalence stands at 18.7%, well above the Prevention Agenda 2030 objective of 7.9%, and binge drinking rates among adults reach 16.9%, exceeding the 2030 objective of 14.6%. Socioeconomic inequality further exacerbates health risks, with a greater proportion of households living in poverty and median household incomes falling below both state and national averages. Environmental factors, including a lower availability of recreation and fitness facilities per 100,000 residents, and a lower number of grocery stores and SNAP-authorized retailers, may also limit opportunities for healthy lifestyles.
- Significant health disparities are evident across these chronic disease outcomes. Black residents in Cayuga County experience higher diabetes related mortality compared to state averages, along with diabetes hospitalization rates that exceed those benchmarks. Most notably, potentially preventable hospitalizations for short-term diabetes complications among Black individuals in Cayuga County are 183% higher than the state average for Black residents.

HEALTH CHALLENGES AND ASSOCIATED RISK FACTORS: HEALTHY WOMEN, INFANTS AND CHILDREN



- Cayuga County's infant mortality rate stands at 5.7 deaths per 1,000 live births, exceeding the Prevention Agenda 2030 target of 3.5. The county also falls short of the benchmark for early prenatal care, with only 73.5% of births receiving care early in pregnancy compared to the 2030 goal of 83%. These indicators point to ongoing challenges in maternal and infant health outcomes within the community.
- Several underlying conditions may affect the health of women and children in Cayuga County. Access to consistent health care remains slightly below the 2030 objective, with 87.2% of adults reporting a regular health care provider compared to the 87.5% goal. Lifestyle and behavioral factors also contribute, including dietary patterns marked by low daily fruit and vegetable consumption, adult smoking rates that substantially exceed Prevention Agenda targets, and binge drinking prevalence above the 2030 objective. Broader social and economic conditions further influence outcomes, as Cayuga County experiences higher poverty rates and lower median household incomes than both state and national averages.
- Notable inequities in women's and children's health outcomes are present across racial and ethnic groups. Black women in Cayuga County experience higher teen pregnancy rates than their counterparts statewide. Infant mortality among Black residents is significantly elevated, at 39% higher than the state benchmark. Although overall rates of low birthweight and preterm births align with state medians for the total population, these outcomes occur at disproportionately higher levels among Black women, underscoring persistent disparities in maternal and infant health.



PRIOR CHNA INITIATIVES AND ACTION ITEMS

IMPACT OF ACTION TAKEN SINCE 2022 IMPLEMENTATION PLAN PRIORITY #1



Priority #1	Objectives	Strategies	Outcomes
Prevent Chronic Diseases	Tobacco Prevention & Cessation; Chronic Disease Preventive Care & Management	Tobacco-Free CNY Coalition partnership (Cayuga, Onondaga, and Oswego Counties)	The Cayuga County Health Department has launched initiatives to raise awareness about the health risks associated with secondhand smoke and to encourage smoke-free housing policies. Residents are encouraged to participate in these efforts to maintain a healthy and smoke-free community.
		Assess and evaluate existing local laws and policies that support and enhance efforts to prevent smoking initiation and promote cessation.	Local laws passed by Cayuga County legislators requiring vendors to have a valid Tobacco Retail License to sell tobacco products. Additionally, the Clean Indoor Air Act program aims to reduce exposure to secondary smoke in public places and workplaces. The Cayuga County Health Department has also launched initiatives to raise awareness about the health risks associated with secondhand smoke and to encourage smoke-free housing policies. Residents are encouraged to participate in these efforts to maintain a healthy and smoke-free community.
		Increase cancer screening rates (specifically colon and breast cancer) by reducing barriers to screening/testing such as lack of health insurance and transportation.	PET scan purchased, placed at the hospital, fully functioning. Allows for patients within the community to have easy access to advanced screening and diagnosis. ACH also initiated and hosted an annual screening day event.



IMPACT OF ACTION TAKEN SINCE 2022 IMPLEMENTATION PLAN PRIORITY #2



Priority #2	Objectives	Strategies	Outcomes
Promote a Healthy and Safe Environment	Injury prevention and reduction of falls amongst vulnerable populations, including adults aged 65 and older, as well as those with Alzheimer's, dementia, and/or disabilities.	Make connections between healthcare providers, including the hospital and programs like the Healthy Neighborhoods Program and programs offered through the Office for the Aging, ARISE and Cayuga County Health Department.	In Spring the CCHD presented to and educated the AMMS managers and ACH social workers on the screening and referral process
		Link individuals to the correct resources that can help make their home environment safer.	Barriers to the referral process were identified and addressed



IMPACT OF ACTION TAKEN SINCE 2022 IMPLEMENTATION PLAN PRIORITY #3



Priority #3	Objectives	Strategies	Outcomes
Promote Well-Being and Prevent Mental and Substance Use Disorders	Prevent opioid and other substance misuse and deaths	Education and outreach to the broader community	Healing Cayuga Project: Healing Cayuga Cayuga County, NY
		Trainings for healthcare professionals and linkages to services and treatment	Train the trainer program rolled out and biohazard needle disposal containers provided at the CCHD. ACH emergency department providing overdose patients and families with Narcan take home kits and education. Referrals made to Nicks Ride, ACH is represented on this community group. Nicks Ride 4 Friends



IMPACT OF ACTION TAKEN SINCE 2022 IMPLEMENTATION PLAN PRIORITY #4



Priority #4	Objectives	Strategies	Outcomes
Promote Healthy Women, Infants, and Children	Decrease the rate of infants born with neonatal abstinence syndrome and/or affected by maternal use of drugs	Cayuga County Prenatal, Maternal, and Child Health Program will work with ACH's obstetrics and gynecology (OB/GYN) practice to obtain referrals for all pregnant women	Referrals made for social care needs such as food and housing. Cayuga County prenatal program
		Services will be tailored to the specific needs of each individual and referrals to other community-based organizations will be made.	Referrals received by the CCHD are reviewed and patients are linked to appropriate services based on need. Examples include: assistance in signing up for WIC, providing items such as a pack and play
		Educational trainings for OB/GYN, pediatric, and family care providers will be offered to focus directly on these issues so that providers are better equipped to assist their patients, address the stigma pregnant women and mothers who are suffering from drug addiction face, and are more knowledgeable of community resources	– Family Practice Rural Residency providers received annual training for pregnant patients and mothers who suffer from addiction



COMMUNITY ASSETS AND RESOURCES



CAYUGA COUNTY COMMUNITY ASSETS AND RESOURCES

Community resources within Cayuga County, including medical, law enforcement, education, government assistance, housing, food, and emergency assistance, are listed below:

Emergency Assistance	Location	Description
Cayuga/Seneca Community Action Agency, Inc. (CAP)	Auburn	Homeless/at-risk – financial assistance, emergency and temporary housing, case management, employment assistance, crisis intervention, food, utility crisis intervention, emergency transportation.
Chapel House Homeless Shelter	Auburn	Safe, temporary housing for men only. 19 bed shelter.
The Salvation Army	Auburn	Food, limited overnight motel accommodations, transportation assistance to shelters in neighboring counties, and limited rental assistance.
Housing Services	Location	Description
Chapel House Homeless Shelter	Auburn	Offers 19 bed shelter provides safe, temporary housing for men, age 18 and over.
Unity House of Cayuga County	Auburn	Provides transitional and permanent housing, respite, rehabilitative and employment services for adults with mental illnesses, developmental disabilities, and/or those in recovery from chemical dependencies.
ARISE	Auburn	HUD Self sufficiency housing program for homeless with disabilities; case management and a housing subsidy for eligible individuals and families.
Auburn Housing Authority	Auburn	Promotes quality, affordable housing, economic opportunity, and a living environment free from discrimination; includes Melone Village, Brogan Manor, Olympia Terrace.
Cayuga County Homesite Development Corporation	Auburn	Section 8 Rental Assistance, security deposit loans, owner/renter counseling to prevent eviction, and SRO for Women.





CAYUGA COUNTY COMMUNITY ASSETS AND RESOURCES

Housing Services (continued)	Location	Description
Cayuga/Seneca Community Action Agency, Inc. (CAP)	Auburn	Emergency and temporary housing. HUD Supportive Housing program with intensive case management services.
Grace House (Substance Use Disorders)	Auburn	An alcohol/drug free residence for men and women as they work on an individualized recovery plan.
Cayuga County Department of Social Services	Auburn	If you are homeless and do not have friends and/or family to stay with or are facing eviction the Cayuga county Department of Social Services is the first place you should go for assistance.
Clothing Services	Location	Description
Chapel House Homeless Shelter	Auburn	Free clothing
Second Baptist Clothes Closet	Auburn	Free clothing
SS. Peter and John Episcopal Church	Auburn	Free clothing
Heating Assistance	Location	Description
Catholic Charities of the Finger Lakes	Auburn	Home Energy Assistance Program (HEAP) applications for regular and emergency benefits.
Government Services	Location	Description
Cayuga County Social Services	Auburn	Financial assistance for shelter, fuel, and utilities. Temporary and Disability Assistance, Medical Assistance/Food Stamps, Adult Services, Child Protective, Family Preventative, and Child Foster Care.
Cayuga County Health Services	Auburn	Clinics for immunization, lead screening, sexually transmitted disease and HIV testing.





CAYUGA COUNTY COMMUNITY ASSETS AND RESOURCES

Government Services (continued)	Location	Description
Cayuga County Office for the Aging	Auburn	Provides Elder In-Home Service, caregiver support, Alzheimer's information, health information, counseling, Senior Nutrition Program, senior transportation referral.
Cayuga County W.I.C. Program	Auburn	Women, Infants and Children Supplemental Food Program for pregnant, lactating, and post-partum women.
Law Enforcement	Location	Description
Auburn Police Department	Auburn	Local police
Cayuga County Sheriff's Office	Sennett	County sheriff
NYS Police – Auburn Station	Aurelius	State police
Adult Education/Career Services	Location	Description
Cayuga-Onondaga BOCES Center for Learning	Auburn	Adults can get the education and skills they need to be productive workers, family members, and citizens while in the Career & Technical Education programs.
Cayuga Works Career Center	Auburn	Appointments with a Cayuga Works career specialists help guide job seekers navigate searches and fulfill career goals.
Health Services – Medical	Location	Description
Auburn Community Hospital (ACH)	Auburn	Emergency Room (ER), outpatient and inpatient care
WellNow	Auburn	Urgent care





CAYUGA COUNTY COMMUNITY ASSETS AND RESOURCES

Health Services – Medical (continued)	Location	Description
Aurora Medical	Aurora	Community health center
Moravia Health Center	Moravia	Community health center
Port Byron Community Health Center	Port Byron	Community health center
Urgent Care of Auburn	Auburn	Urgent Care
Health Services – Primary Care Doctors	Location	Description
Auburn Internal Medicine	Auburn	Dr. Graney, Dr. McSwain, Dr. Langley
Auburn Family Care	Auburn	Dr. Levy, Dr. Keenen
Auburn Primary Care	Auburn	Dr. Christensen, Dr. Ripon, Dr. Zafar
Trinity Family Medicine	Auburn	Dr. Boyle
Health Services – Mental Health	Location	Description
Auburn Community Hospital (ACH)	Auburn	Mental health evaluations at ER for hospitalization in Behavioral Unit or other psychiatric intervention.
Cayuga Counseling Services	Auburn	Provides a variety of mental health services from prevention and education to individual, group, couples and family therapies, treatment, and crisis intervention.
Cayuga County Community Mental Health Center	Auburn	Offers mental health treatment for Cayuga County residents through outpatient clinic, 24/7 crisis hotline, care management and coordinated services for families with youth who have significant behavioral health needs.
Anxiety, Depression, and Panic Attack (ADPA) Support Group at Auburn Community Hospital	Auburn	Meetings take place from 7pm 8:30pm the 2nd and 4th Tuesday of every month.





CAYUGA COUNTY COMMUNITY ASSETS AND RESOURCES

Health Services – Mental Health (continued)	Location	Description
East Hill Medical Center	Auburn	Provides counseling and behavioral health assistance.
National Alliance on Mental Illness (NAMI) of Cayuga County	Auburn	Provides a family support group at Auburn Community Hospital.
Health Services – Substance Use	Location	Description
Confidential Help for Alcohol and Drugs, Inc. (C.H.A.D.)	Auburn	Supports physical, mental, and spiritual rehabilitation chemical dependency programs through substance use disorder treatment and prevention services.
Syracuse Recovery Services (SRS)	Auburn	Provides personalized treatment for substance use disorders, including individual and group counseling.
Nick's Ride 4 Friends	Auburn	Provides programs that meet the needs of those struggling with addiction, including peer support.
Veteran Services	Location	Description
Cayuga County Veteran's Service Agency	Auburn	Handles veteran claims for education, hospitalization, medical, housing, compensation, pension, death benefits, re-employment, insurance and legal.
Auburn VA Clinic	Auburn	Veterans Administration clinic
Food Pantries and Emergency Food Providers	Location	Description
Calvary Food Pantry CNY Inc.	Auburn	Food pantry
Cayuga/Seneca Community Action Agency, Inc. (CAP)	Auburn	Food pantry





CAYUGA COUNTY COMMUNITY ASSETS AND RESOURCES

Food Pantries and Emergency Food Providers (cont.)	Location	Description
Community Caring Program	Auburn	Food pantry
First Love Ministries Food Pantry	Auburn	Food pantry
Holy Family Catholic Church Lunches with Love	Auburn	Food pantry
St. Alphonsus Food Pantry	Auburn	Food pantry
Salvation Army Food Pantry	Auburn	Food pantry
First Love Fellowship	Auburn	Food pantry
SS. Peter and John	Auburn	Food pantry
The Salvation Army	Auburn	Food pantry
Brutus–Sennett Food Pantry First Baptist Church	Weedsport	Food pantry
Cato Christian Food Pantry	Cato	Food pantry
Community Food Pantry Loc-Mor Thrift Store	Moravia	Food pantry
Fair Haven Community Church Food Cupboard	Fair Haven	Food pantry
Genoa Food Pantry United Church of Genoa	Genoa	Food pantry





CAYUGA COUNTY COMMUNITY ASSETS AND RESOURCES

Food Pantries and Emergency Food Providers (cont.)	Location	Description
Jordan–Elbridge Food Pantry	Jordan	Food pantry
Migrant Farm Worker Outreach Good Shepherd Catholic Community	Southern Cayuga Co.	Delivery to migrant/immigrant farm workers.
Port Byron Community Food Pantry/First United Methodist Church	Port Byron	Food pantry
Throopsville Community Church	Throopsville	Western Cayuga County emergency food pantry.
Trinity United Church of Christ	Union Springs	Food pantry
Other Healthcare Facilities	Location	Description
University Dialysis at Auburn	Auburn	End-stage renal disease facility
Hillside Finger Lakes Campus	Auburn	Psychiatric residential treatment facility
Finger Lakes Center for Living	Auburn	Skilled nursing facility
The Commons on St. Anthony	Auburn	Skilled nursing facility
Auburn Rehabilitation and Nursing Center	Auburn	Skilled nursing facility
Northwoods Rehab and Nursing Center at Moravia	Moravia	Skilled nursing facility
Source: Cayuga County Sheriff Help Now Map 2024 and HRSA.gov		





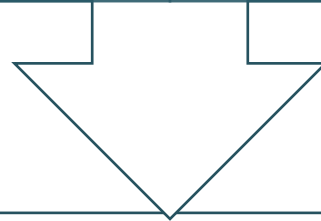
COMMUNITY SERVICE PLAN

MAJOR COMMUNITY HEALTH NEEDS



The findings of the CHNA indicate four major community health needs:

Promote Well-Being and Increase Access to Mental Health	Promote Healthy Women, Infants, and Children	Prevent Chronic Diseases	Preventable Deaths
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Of the four major community health needs identified Auburn Community Hospital prioritized the following:

Promote Well-Being and Increase Access to Mental Health	Promote Healthy Women, Infants, and Children
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PRIORITIZATION METHODS



- **Prioritization Methods:**

- *a. Description of Prioritization Process:*

- The Auburn Community Hospital (ACH) Community Health Needs Assessment Team met with ACH key stakeholders to engage in discussion and identify the top health needs from the primary data collected through on-line survey and key community stakeholder in-depth interviews. This information was the foundation for the development of the 2026-2029 Community Health Needs Assessment (CHNA) and associated Community Services Plan (CSP). The team engaged in a targeted ranking exercise to rank and prioritize the most important and impactful need themes. Once priority areas were chosen, additional targeted data were acquired and objectives, identified disparities, and interventions were created. During ACH meetings, partners were asked to identify interventions already in place as well as those that would be feasible to initiate, sustain, and measure. Input was compiled and summarized and a list of interventions, was created.

- *b. Community Engagement:*

- Community stakeholder interviews and online surveys conducted with the CHNA were imperative to prioritizing the major community health needs. The comments from the online survey and community stakeholder interviews directly influenced the ranking of the major community health needs.

- *c. Justification for Unaddressed Health Needs:*

- The identified community health needs represent broad priority areas that encompass multiple related health issues, not all of which can be addressed directly through hospital-led strategies. The selected priorities align with the New York State Prevention Agenda and reflect areas where Auburn Community Hospital, in collaboration with community partners, is well positioned to implement evidence-based interventions and contribute to measurable improvements in population health and the reduction of health disparities.



PROMOTE WELL-BEING AND INCREASE ACCESS TO MENTAL HEALTH



Actions and Impact

- In aiming to Promote Well-Being and Increase Access to Mental Health, Auburn Community Hospital will address three priorities on the 2025 – 2030 Prevention Agenda: Poverty, Suicide and Primary Prevention, Substance Misuse, and Overdose Prevention.
 - **Priority Poverty:**
 - Objective: 1.0 Reduce the percentage of people living in poverty from 13.6% to 12.5%
 - Intervention: Conduct regular screening of patients at the hospital for SDOH factors like income and unemployment.
 - **Priority Suicide:**
 - Objective: 6.2 Reduce adolescent suicide attempts from 9.4% to 8.5% (New York State outside New York City).
 - Intervention: Promote calling or texting 988 through social media, digital marketing campaigns, and other utilized marketing strategies.
 - Intervention: Promote and conduct comprehensive suicide prevention training for staff.
 - **Priority Primary Prevention, Substance Misuse and Overdose Prevention:**
 - Objective: 13.0 Increase the number of naloxone kits distributed from 397,620 to 596,430.
 - Intervention: Provide or expand access to naloxone to reduce overdose fatalities



PROMOTE WELL-BEING AND INCREASE ACCESS TO MENTAL HEALTH: PRIORITY POVERTY



Priority Poverty:

- **Objective:**
 - 1.0 Reduce the percentage of people living in poverty from 13.6% to 12.5%
- **Intervention:**
 - Conduct regular screening of patients at the hospital for SDOH factors like income and unemployment.
- **Geographic Focus:**
 - Intervention will be conducted at the hospital with patients of Auburn Community Hospital
- **Resource Commitment:**
 - Hospital leaders, social workers, nurses and other staff will integrate the objective and intervention with their current job responsibilities as all of ACH is committed to reducing the amount of individuals living in poverty in Cayuga County. Additionally, each intervention will have an individual who is responsible for charting progress.
- **Participant Roles:**
 - Social workers and nursing staff.
 - Nursing staff: Screen for SDOH and refer patients that screen positive to social work.
 - Social workers: Provide referred patients with resources and guidance with identified need.
- **Health Equity:**
 - ACH's mission as a not for profit hospital is to provide care to all individuals, regardless of socioeconomic status, race or ethnicity, religion or age. This specific objective and intervention aims to address socioeconomic disparities in the community.



PROMOTE WELL-BEING AND INCREASE ACCESS TO MENTAL HEALTH: PRIORITY SUICIDE



Priority Suicide:

- **Objective:**
 - 6.2 Reduce adolescent suicide attempts from 9.4% to 8.5% (New York State outside New York City).
- **Intervention:**
 - Promote calling or texting 988 through social media, digital marketing campaigns, and other utilized marketing strategies.
 - Promote and conduct comprehensive suicide prevention training for staff.
- **Geographic Focus:**
 - Intervention will be conducted at the hospital.
- **Resource Commitment:**
 - Hospital leaders, and social workers will integrate the objective and intervention with their current job responsibilities as all of ACH is committed to reducing the amount of adolescent suicide attempts in Cayuga County. Additionally, each intervention will have an individual who is responsible for charting progress. Community partners and individuals in public relations will also devote time to this objective and intervention.
- **Participant Roles:**
 - Hospital leaders, public relations, social workers, and community partners.
 - Team will create and campaign information on 988 throughout the hospital and community.
 - Hospital and mental health experts will create an evidence based suicide educational training for staff that will be hardwired into the new staff orientation.
- **Health Equity:**
 - ACH's mission as a not for profit hospital is to provide care to all individuals, regardless of socioeconomic status, race or ethnicity, religion or age. This specific objective and intervention aims to help youths in rural Cayuga County. Racial and ethnic disparities, stigma related disparities, and geographic disparities are all issues that can be addressed through comprehensive suicide prevention training.



PROMOTE WELL-BEING AND INCREASE ACCESS TO MENTAL HEALTH: PRIORITY PRIMARY PREVENTION, SUBSTANCE MISUSE, AND OVERDOSE PREVENTION



Priority Primary Prevention, Substance Misuse, and Overdose Prevention:

- **Objective:**

- 13.0 Increase the number of naloxone kits distributed from 397,620 to 596,430.

- **Intervention:**

- Provide or expand access to naloxone to reduce overdose fatalities.

- **Geographic Focus:**

- Intervention will be conducted at the hospital.

- **Resource Commitment:**

- Hospital leaders, physicians and nursing staff will integrate the objective and intervention with their current job responsibilities as all of ACH is committed to reducing the amount overdose fatalities in Cayuga County. Additionally, each intervention will have an individual who is responsible for charting progress. Community leaders will also devote time to this objective and intervention.

- **Participant Roles:**

- Physicians, nursing staff, and community leaders.
 - Physicians and nurses will expand access to reduce overdose fatality among the emergency department, inpatient, and physician practices community. Community leaders will work with hospital and vendors to provide Narcan access points within the community as well as drug overdose education.

- **Health Equity:**

- ACH's mission as a not for profit hospital is to provide care to all individuals, regardless of socioeconomic status, race or ethnicity, religion or age. This specific objective and intervention aims to help individuals struggling with substance misuse in rural Cayuga County. This intervention will help individuals regardless of racial and ethnic disparities, stigma related disparities, and geographic disparities.



PROMOTE HEALTHY WOMEN, INFANTS, AND CHILDREN



Actions and Impact

- In aiming to Promote Healthy Women, Infants and Children, Auburn Community Hospital will address two priorities on the 2025 – 2030 Prevention Agenda: Nutrition Security and Prevention of Infant and Maternal Mortality.
 - **Priority Nutrition Security**
 - Objective: 3.0 Increase consistent household food security from 71.1% to 75.9%.
 - Intervention: Expand or create access points to get affordable, high quality, nutritious food. Examples include:
 - Emergency food programs/food pantries
 - Farmers' markets
 - Colleges/schools
 - Community-based organizations
 - Mobile fruit and vegetable markets
 - Online grocery purchasing pilots/programs for SNAP and WIC
 - Community gardens
 - Food hubs
 - Community supported agriculture
 - Hospitals
 - Healthy corner/convenience stores



PROMOTE HEALTHY WOMEN, INFANTS, AND CHILDREN CONT.



Actions and Impact

- In aiming to Prevent Chronic Diseases, Auburn Community Hospital will address two priorities on the 2025 – 2030 Prevention Agenda: Nutrition Security and Prevention of Infant and Maternal Mortality.
 - **Priority Prevention of Infant and Maternal Mortality Use:**
 - Objective: 27.1 Decrease the rate of maternal mortality per 100,000 live births among Black, non-Hispanic birthing persons from 65.2 to 55.0.
 - Intervention: Integrate hospital-based midwifery model of care that supports:
 - The employment of midwives in leadership roles
 - The institution of formal policies and practices supportive of midwives as independent clinical professionals
 - The emphasis on the value and benefit of such programs
 - Intervention: Implement ZERO TO THREE's Healthy Steps Program in pediatric primary care offices.



PROMOTE HEALTHY WOMEN, INFANTS AND CHILDREN: PRIORITY NUTRITION SECURITY



Priority Nutrition Security

- **Objective:**
 - 3.0 Increase consistent household food security from 71.1% to 75.9%.
- **Intervention:**
 - Expand or create access points to get affordable, high quality, nutritious food. Examples include:
 - Emergency food programs/food pantries, farmers' markets, colleges/schools, community-based organizations, mobile fruit and vegetable markets, online grocery purchasing pilots/programs for SNAP and WIC, community gardens, food hubs, community supported agriculture, hospitals, healthy corner/convenience stores
- **Geographic Focus:**
 - The Intervention will be conducted through the hospital including at the nursing home where a farmers market is hosted. Additional locations will be with community groups to help feed homeless individuals in Cayuga County.
- **Resource Commitment:**
 - Hospital leaders, and staff volunteers will integrate the objective and intervention with their current job responsibilities as all of ACH is committed to improving food security in Cayuga County. Additionally, each intervention will have an individual who is responsible for charting progress. Community leaders and individuals in public relations will also devote time to this objective and intervention.
- **Participant Roles:**
 - Hospital leaders, public relations, community leaders, and staff volunteers
 - Public relations will work with leaders to set up food access points. Support will come from the others listed to ensure there is a continuity of the program.
- **Health Equity:**
 - ACH's mission as a not for profit hospital is to provide care to all individuals, regardless of socioeconomic status, race or ethnicity, religion or age. This specific objective and intervention aims to help individuals struggling with food security in rural Cayuga County. This intervention will help individuals regardless of racial and ethnic disparities, stigma related disparities, and geographic disparities.



PROMOTE HEALTHY WOMEN, INFANTS AND CHILDREN: PRIORITY PREVENTION OF INFANT AND MATERNAL MORTALITY



Priority Prevention of Infant and Maternal Mortality Use:

- **Objective:**
 - 27.1 Decrease the rate of maternal mortality per 100,000 live births among Black, non-Hispanic birthing persons from 65.2 to 55.0.
- **Intervention:**
 - Integrate hospital-based midwifery model of care that supports:
 - The employment of midwives in leadership roles
 - The institution of formal policies and practices supportive of midwives
 - The emphasis on the value and benefit of such programs
 - Implement ZERO TO THREE's Healthy Steps Program in pediatric primary care offices.
- **Geographic Focus:**
 - Intervention will be conducted at the hospital
- **Resource Commitment:**
 - Hospital leaders, physicians and staff will integrate the objective and intervention with their current job responsibilities as all of ACH is committed to reducing maternal mortality amount black and non-Hispanic persons in Cayuga County. Additionally, each intervention will have an individual who is responsible for charting progress.
- **Participant Roles:**
 - OBGYN physicians and CNMs who work in the hospital as well as the clinic.
 - OBGYN leaders will work with CNMs to define and advance the role of the CNM as it relates to the value and benefit to patient care, quality, and access.
 - Clinic providers, community leaders, and staff.
 - Provide information, awareness of the program, and assistance to enroll women, children and families into the program.
- **Health Equity:**
 - ACH's mission as a not for profit hospital is to provide care to all individuals, regardless of socioeconomic status, race or ethnicity, religion or age. This specific objective and intervention aims to help racial and ethnic disparities among black and non-Hispanic birthing persons in rural Cayuga County.



PARTNER ENGAGEMENT



Partner engagement will expand in January 2026, at which time the ACH CHNA Committee will expand to incorporate additional key stakeholders from ACH, AMMS, and various community partners. In January, detailed plans will be reviewed by the larger group and adjusted as needed. Each deliverable will have a responsible party assigned to it. In quarter 1 of 2026, the team will meet monthly to assess the plan, report off on their progress, and adjust course as needed. After quarter one, the meetings will transition to be quarterly with the same agenda of reviewing the plan, reporting out, and making any necessary adjustments.





SHARING FINDINGS WITH COMMUNITY

Auburn Community Hospital will share the Community Health Assessment via the following channels:

- Website: <https://www.auburnhospital.org/>
- Press Release: also featured on 'News' section of website
- Social media platforms: <https://www.facebook.com/auburncommunityhospital/>
- Board of Directors: email link to document
- Healthcare Stakeholders: this document is continually shared by email link and hardcopy printout with various stakeholders during meetings, roundtables, etc.





APPENDIX

IRS REQUIREMENTS FOR CHNA

- The Internal Revenue Service requires hospitals to conduct a CHNA every three years. Below are the IRS requirements from Schedule H Form 990, Part V, Section B, with the corresponding section from this report:

Item	Description	Slides
3a	A definition of the community served by the hospital facility	Slide 8
3b	Demographics of the community	Slides 7 - 25
3c	Existing healthcare facilities and resources within the community that are available to respond to the health needs of the community	Slides 162 - 169
3d	How data was obtained	Slides 27 - 28
3e	The significant health needs of the community	Slides 49 - 150
3f	Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups	Slides 105 - 143
3g	The process for identifying and prioritizing community health needs and services to meet the community health needs	Slide 172
3h	The process for consulting with persons representing the community's interests	Slide 29
3i	The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)	Slides 157 - 161