

Clinton County Community Health Improvement Plan

2016 CHIP Progress Update & 2017 CHIP



A collection of interventions and activities representing the local, systematic effort to reach shared community health goals.



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2016/ 2017 Executive Summary

This past year was the third and final year for our current Community Health Improvement Plan. The CHIP Progress Update provides details on the activities completed by a wide range of partners in 2016 and related to the county's two selected NYS Department of Health Prevention Agenda Priority Areas: *Promote Mental Health and Prevent Substance Abuse* and *Promote a Health and Safe Environment*. Over the past three years significant progress has been made in increasing the capacity of our community to support and treat mental, emotional and behavioral health. In addition, there is increased partnership and commitment to maximizing the health potential of the local built environment. Our community has a lot to be proud of.

Throughout 2016, partners were also asked to come back to the table to reassess local health patterns, concerns and the identified priority areas. The result? Priorities have shifted... slightly. The 2017 Community Health Improvement Plan will focus on these two Prevention Agenda Priority Areas: *Promote Mental Health and Prevent Substance Abuse* and *Prevent Chronic Disease*. This small adjustment allows work to strike a strategic balance between increasing access to services and supporting healthy behaviors. The 2017 work plans, detailed in this document, display some of the strategies that will be used over the next few years to influence health outcomes related to these two areas.

It is evident that Clinton County has become more organized and disciplined in implementing its health improvement plan. Existing partners are comfortable with their roles and new partners are stepping up to contribute. Nearly 50% of attendees in the *Health Priority Setting Session* held in June had never participated before. Residents also welcomed a place in the process with 1,000 of them offering their insight through a community survey. The planned activities in the 2017 CHIP show health improvement efforts are no longer happening in isolation. With the past three years serving as a solid foundation, Clinton County partners are poised to demonstrate unprecedented cooperation for community health improvement in the years ahead.

Want to more about how Clinton County assesses health data, identifies its priority areas and engages partners and community members in the process?

Visit clintonhealth.org and check out the **Clinton County Community Health Assessment**.

Community Engagement

Each year, the CHIP is shared widely within the community. In 2016, it was posted conspicuously on clintonhealth.org and updated mid-year to capture progress to date.

Action for Health Consortium (AFH) meetings are organized utilizing the NYSDOH Prevention Agenda. Members are asked annually how they use and share the CHIP. In 2016, 17 organizations completed a CHIP distribution form, providing insight into how they utilize the shared document. Results include:

- 47% of reporting partners use the CHIP for internal Strategic Planning
- 59% of reporting partners use the CHIP for staff education and development
- 71% of reporting partners use the CHIP as a resource for data for grant proposals

In addition, AFH partners and their organizations share the CHIP. 47% of reporting partners share the CHIP with the organization's/ agency's oversight board. A number of partners also reported linking to the document on their respective websites and keeping the document in convenient places for staff and consumer reference and viewing.








This past year, community partners and residents were also engaged in the community health assessment process. Community stakeholders representing health care, social services, education and governmental sectors across the region were solicited by AHI to complete an online survey. Over sixty partners also participated in the half day Health Priority Setting session where they provided insight into current and potential activities related to the identified priority areas. CCHD also surveyed county residents to inform the community health assessment process and to learn more about what they identify as health concerns for themselves, their families and their community.

Results are detailed in the community health assessment (clintonhealth.org).

Health Impact Pyramid

The Health Impact Pyramid is a framework for public health action developed by the Centers for Disease Control and Prevention. Introduced in 2010, the pyramid classifies community level work into 5 tiers to describe the impact of different types of public health interventions. Moving down through the levels, interventions increase in effectiveness and require less individual effort. The accomplishments and proposed work featured in the CHIP represents only a fraction of the good work that is happening locally which many partners are tackling with the goal of improving health for all residents. CCHD utilizes the Health Impact Pyramid to call attention to activities beyond the CHIP and to demonstrate how local work is hitting all five tiers to achieve sustained local benefit.

Clinton County 2016: Health Impact Across the Pyramid

 Increasing effectiveness from reaching broader segments of the population and requiring less individual effort. 	Tier	Activity	Lead Entity
	Counseling & Education 	<p>Farmers Market Promotional Program engaged 24 adults and 20 youth in cooking classes offered throughout the year.</p> <p>11 Fitness programs offered, with 35 participants and an additional 65 participants receiving individual support. Senior Fitness for Life class maintains 25 members.</p> <p>6 educational sessions offered at BHSN covering a range of health topics, including 47 total participants for the year.</p> <p>4th Annual Longest Day of Play celebrated on June 24th, 2016. (#participants or events)</p> <p>Clinton County holds a Breastfeeding Block Party and CVPH hosts Clinton County's only official <i>Big Latch On</i> location during World Breastfeeding Week, August 2016.</p> <p>Clinton County released the first Clinton County Trails Map.</p> <p>Senior Citizens Council of Clinton County offers two sessions of the National Council on Aging's <i>Aging Mastery Program</i>.</p> <p>17 local children participate in <i>Hearty Kids</i>.</p>	<p>Cornell Cooperative Extension</p> <p>CCE, EAHCN, Adirondack Medical Home, TOP CCHD, BHSN</p> <p>CCHD</p> <p>Partners of the CC BF Coalition</p> <p>CCHD</p> <p>OFA, SCCCC</p> <p>TOP & CC Youth Bureau</p>
	Clinical Interventions 	<p>Mental health and substance use disorder treatment is integrated into six primary care practices.</p> <p>CCHD provides approximately 400 flu Vaccinations to high risk residents in the Fall 2016 season.</p> <p>CVPH received funding from NYSDOH to support peer education aimed at increasing referrals to breast and prostate cancer screenings.</p>	<p>CCMH&AS</p> <p>CCHD</p> <p>CVPH</p>
	Long- Lasting Protective Intervention 	<p>All three local pediatric practices trained & participating in the NYSDOH's Pediatric Fluoride Varnish Initiative.</p> <p>13 permanent, outdoor pickleball courts in established in 2016.</p> <p>Village of Rouses Point Connector Trail proposed, planned and COMPLETED!</p> <p>Establishment of a bioswale and bioretention basin at the U.S. Oval to prevent localized flooding adjacent to a city walking trail.</p> <p>Town of Clinton passes a Complete Streets Resolution 6/13/16.</p>	<p>CCHD</p> <p>Foundation of CVPH</p> <p>CCHD, Village of RP</p> <p>LC/LG Regional Planning Board</p> <p>Town of Clinton, CCHD</p>
	Changing the Context 	<p>The Better Choice Retailer Program launches and enrolls 18 participating stores in its first year.</p> <p>Healthy Plates rebranded as Better Choice Eatery. 25 local eateries invited to participate.</p> <p>All three local pediatric practices receive Breastfeeding Friendly designation from NYSDOH.</p> <p>Fitness in the Parks 2016 offers activities in 5 different townships.</p> <p>Health Impact Assessment like project completed for the Cadyville waterfront area.</p>	<p>CCHD</p> <p>CCHD</p> <p>CCHD</p> <p>Foundation of CVPH</p> <p>TOP Planning, CCHD</p>
Socio-economic Factors 	<p>Two additional local schools begin offering universal free breakfast and lunch programs in the 2015-2016 school year.</p> <p>Farm Fresh Cash, a local nutrition incentive program, is distributed to 700+ residents in its first year.</p> <p>Over a dozen community entities come together to form SPARCC- Substance Abuse Prevention and Recovery of Clinton County.</p> <p>1000+ residents surveyed to better understand personal and community health issues.</p> <p>Farmers' Market established at Lakeview Towers, increasing resident access to fresh fruit and vegetables.</p> <p>Town of Peru hosts an "Accessible Trail Event" with 40 people in attendance.</p>	<p>PCSD, BCSD</p> <p>CCHD</p> <p>SPARCC Steering Committee</p> <p>CCHD</p> <p>PHA</p> <p>Town of Peru</p>	

2016 CHIP Progress Update

NYS Department of Health Prevention Agenda Priority Area Promote Mental Health and Prevent Substance Abuse

Focus Area: Strengthen Infrastructure Across Systems
Goal: Support collaboration among leaders, professionals and community members working in MEB health promotion, substance abuse and other MEB disorders and chronic disease prevention, treatment and recovery.
Objective: By December 2016, collaborate with the chronic disease community to take advantage of opportunities to implement MEB health promotion and MEB disorder prevention and implement evidence- based interventions.

Interventions/Activities	Process Measures	Lead Agency	Progress Notes
Continue to strengthen collaboration, communication, understanding of local services and gaps through maintenance of MEB subcommittee, data sharing.	Subcommittee to meet at least 6 times/year; meeting dates, minutes	CCMH&AS	2016 Meeting dates– 1/19, 3/15, 5/17, 11/9
Attend 100% of health fairs/ community events CVFC is invited to promote the Talk2Prevent platform from the NYSDOH.	# of events attended # of participants in each event, total #communities reached	CVFC	1/14/16- Kiwanis Luncheon, Plattsburgh, 30 attendees 3/14/16- NENY Prevention Cooperative, S Springs, 19 attendees 9/15/16- Northern Adirondack Central School Fall Festival, 200 attendees, 50 Talk2 Prevent info 9/20/16 SPARCC at Strand, 500 attendees, 150 Talk2Prevent info. 10/6/16, SUNY Health Fair, 30
Offer a series of educational events focusing on primary and secondary chronic disease prevention for the MEB community.	Provide 6 educational opportunities Event dates, attendance, program evaluation feedback summary	CCHD CCMH &AS	Programs offered at the Center for Wellbeing 2/3/16– 15 (Personal EP) 4/4/16– 8 (DM) 5/16/16-10 (DM, part 2) 8/10/16- 4 (Living Smoke Free) 10/3/16- 10 (Sleep)
Coordinate two vaccination/ education events at the Alliance for Positive Health.	Spring date Fall date # vaccines provided # participants	AFPH CCHD	Vaccination events: 11/16, 11/18, 11/20/2015 Vaccination Education event with AFPH staff 7/21/16.
Initiate a Hep C screening program for clients of the Alliance for Positive Health	Program approval received Program launch date # clients screened	AFPH	Official program launched April 2016. 8 people screened in 2016.

Focus Area: Strengthen Infrastructure Across Systems
Goal: Strengthen infrastructure for MEB health promotion and MEB disorder prevention by 2017.
Objective: By December 2016, enhance the local system to gather and share indicator data required to plan and monitor county level strength based efforts that promote MEB health and prevent substance abuse and other MEB disorders.

Interventions/Activities	Process Measures	Lead Agency	Progress Notes
Incorporate Mobile Integration Unit to facilitate data sharing	Attendance/participation in MEB Sub-Committee by MIU; MIU data-sharing via SharePoint	CCMH, All MEB Partners	Invitation extended to MIT to attend subcommittee. Attended 1/19/16. Partner added to group list serve.
Determine additional local data points new partners can contribute; incorporate into existing database to facilitate access by all partners	Incorporation of additional reports/ data points into SharePoint space	CCMH, All MEB Partners	Improving processes to submit and retrieve data; no new measures added to system in 2016.
Maintain/ advance MEB SharePoint	SharePoint reports/ data, MEB subcommittee meeting dates/ minutes	CCMH	Maintained.
Determine additional reports to be added to MEB SharePoint to expand access to local data	Listing of reports available to partners	All MEB Partners	Improving processes to submit and retrieve data; no new reports added in 2016.
Form a Heroin and Opiate Task Force for Clinton County	Meeting Dates/Agendas Partner list	CCMH&AS BHSN DSS CCHD United Way	Substance Abuse Prevention & Recovery of Clinton County formed. 2016 Meeting Dates: 1/20; 3/9; 4/20; 5/25; 6/29;8/31;10/31;12/14 Steering Committee meets monthly.
Invite NY/NJ HIDTA Drug Intelligence Officer to present baseline data relating to local trends in addiction.	Event date Attendance list	CCMH&AS CCHD	HIDTA representative integrated as data subcommittee member; Local data presented @ Community Forum: Understanding Heroin and Prescription Opioid Abuse, 9/20/16 500 attendees

Focus Area: Strengthen Infrastructure Across Systems
Goal: Strengthen infrastructure for MEB health promotion and MEB disorder prevention by 2017.
Objective: By December 2016, strengthen training and technical assistance provided to primary care physicians, MEB health workforce and community leaders in evidence based approaches to MEB disorder prevention and mental health promotion.

Interventions/Activities	Process Measures	Lead Agency	Progress Notes
Maintain system of ongoing MEB training/education opportunities & MEB Awareness	Dates of training events Training topics Attendance #s	UVHN-CVPH, EXPLORE Steering Committee, CCMH	Understanding Heroin and Prescription Opioid Abuse- Community Partner Forum 9/21/16 (approximately 50 in attendance)
Provide trainings on the use SBIRT tool to staff at local primary care practices and community behavioral health specialists	Provide at least two SBIRT trainings in 2016. Dates of trainings, attendance list.	CVFC	2016 SBIRT Trainings 12 hr training 2/25-2/26 (19@ CVPH) 4 hr training 3/31 (15@ CVPH) 4 hr training 5/20 (20 @ SUNY) 12 hr training (anticipated quarter 4 2016)
Advance usage of SBIRT tool into local primary care	Integration into all 6 adult primary care sites.	CCHM&AS	Screenings implemented on adult mental health unit- CVPH, January 2016. Integration to be continued in 2017.
Assist and support development of behavioral health curriculum for medical residency program at UVHN-CVPH	Inclusion of behavioral health into program curriculum	CCMH&AS	Residency program launched in July 2017. Residents included in SBIRT trainings. Mental health overview included in curriculum and completed by CCMH&AS.

2016 CHIP Progress Update

NYS Department of Health Prevention Agenda Priority Area Promote a Healthy and Safe Environment

Focus Area: Built Environment
Goal: Improve design and maintenance of the Build Environment to promote healthy lifestyles, sustainability and adaptations to climate change by 2017.
Objective: Improve access to affordable fruits and vegetables among low income residents by increasing opportunities to purchase locally sourced and/or fresh fruits and vegetables.

Interventions/Activities	Process Measures	Lead Agency	Progress Notes
Expand the Better Choice Retailer program to independent grocers throughout Clinton County.	Enrollment of 4 new retailers, at least 2 located outside the Town of Plattsburgh	CCHD	13 new participating retailers, 6 certified. 9 locations outside the Town of Plattsburgh Visit: http://www.clintonhealth.org/bc for a full listing of participating retailers.
Increase the number of local farmers' markets/ farm stands accepting SNAP/WIC vouchers through education and support activities	Baseline determined, 25% increase in # of vendors accepting SNAP/WIC/ FMNP vouchers	CCHD	Applications to accept: FMNP- 36% increase in number of farmers accepting (4) SNAP- 14% increase (1) WIC F/V- 10% increase (1)
Develop a coordinated promotion campaign to increase participation new summer meal program sites and free breakfast/lunch programs established in 2015.	Determine baseline participation 25% increase participation	CCHD TOP Recreation	Info flyer created for PCSD (used in monthly newsletter). Baseline participation to be determined from state resources.
Strengthen collaboration on food access issues by addressing food environment related projects and progress at least quarterly at AFH or Food Environment subcommittee meetings	Meeting dates, agenda, minutes	CCHD	AFH Meeting Dates: 1/13/16, 3/9/16, 5/11/16, 7/13/16, 9/14/16, 11/9/16
Develop and pilot a locally adapted Farmers' Market incentive program.	Incentive program action plan # of participants Dollar amount of incentives distributed	CCHD	Farm Fresh Cash (FFC) launched Summer 2016. 17 farmers recruited to accept benefit. 766 FFC vouchers distributed, totaling \$7,660.

Focus Area: Built Environment
Goal: Improve design and maintenance of the Build Environment to promote healthy lifestyles, sustainability and adaptations to climate change by 2017.
Objective: Promote integration and use of built environment strategies that support healthy, active living by 10 community partners including worksites, schools, towns and municipalities.

Interventions/Activities	Process Measures	Lead Agency	Progress Notes
Revise and implement changes to reporting processes for capturing community health related policy and BE work through the Action for Health Consortium	Review of new processes; AFH agendas, meeting minutes	CCHD	Process drafted, reviewed Jan 2016, Tried 3/9/16 # submissions up 3 fold from March to May 2016 Primary Presenters up 2 fold from 2015-2016 for both March and May meetings Process maintained.
Complete a modified HIA of the proposed TOP Cadyville waterfront development plan	HIA community engagement event dates, materials Community survey tool results report Completed HIA and final recommendations	TOP Recreation TOP Planning	4/21/16 stakeholder meeting (15 attendees) Outcome report completed. Final report submitted to NACCHO June 15 th , 2016
Expand support, guidance, and resources to at least 2 school districts serving Clinton County residents to assist in the development of complete streets and BE efforts in community design and mater plan documents	Two identified school districts/ communities Meeting dates Identified CS/ BE efforts	CCHD	NAC– Village of Lyon Mountain traffic assessment 3/9 Town of Belmont– CS info presented to town board 3/21 by Town Supervisor, working towards policy development Inclusion of Rouses Point Elementary (NCCS) in trail extension, Rouses Point Rec Park
Pilot basic community based participatory research concepts to engage residents by collecting input regarding built environment changes they would most like to see in their neighborhoods	Attend a minimum of 4 community events with the purpose of collecting resident input Date of events, # of residents engaged, collection tools, summary of findings	CCHD	Farm to Table Event 3/5/16 (36 formal responses) Community Health Assessment Survey (1,000+ responses!) Senior Health & Fitness Day 5/25/16 (40 attendees) NAC Fall Festival 9/15/16 (71 staff, parents, students participants)

Focus Area: Built Environment
Goal: Improve design and maintenance of the Build Environment to promote healthy lifestyles, sustainability and adaptations to climate change by 2017.
Objective: Increase by 10% the percentage of residents utilizing current available physical activity opportunities. (Baseline unknown).

Interventions/Activities	Process Measures	Lead Agency	Progress Notes
Complete baseline and follow up activities, including process and outcome evaluation, relating to adaptation of SOPARC activity observation tool to local park	Summary report Date shared with community partner(s)	CCHD	Adapted SOPARC method and created simplified form for local observation. Piloted in Heyworth Mason Park, assisted by trained volunteer effort. Outcome report shared with Town of Peru Nov. 2015.
Collect, analyze Year 2 data for trail usage (SRT, Cadyville, Terry Gordon)	End of Year Summary Report	CCHD	End of year data download completed November 2016. Analysis in progress; anticipated completion December 2016.
Support the installation, data collection and analysis of additional infrared trail counters on at least one additional trail outside the City of Plattsburgh	Trail identified Counter purchased Counter installed	CCHD	Trail counters placed at Little Ausable River Trail (quarter 1 2016) and new trail connector in Rouses Point (quarter 3 2016)
Complete enhancements to at least 5 spaces that support cross and multigenerational physical activity (may include pickle ball courts, soccer golf, trail improvements, or other projects)	Identified spaces/ enhancements Completion dates Promotion	CCHD Foundation of CVPH	-13 Pickleball established in 2016 (Cliff Haven, Treadwell Mills South Acres, Beekman St., Town of Saranac Park) - Rouses Point Rec Park trail extension completed, kickoff event 10/15/16
Maintain public awareness campaign promoting regular physical activity and use of local resources	Video series Dissemination Plan # of social media cross posts between partners	CCHD	Video series complete Fall 2016. Topics: Children’s physical activity, Adult physical activity, food access, trails Media/ Promotion: AFH- 9/14/16 AFH insert- Nov. 2016 Posted to CCHD YouTube Channel- 9/22/16 FB series- 11/10, 11/23, 11/24, 11/26, 11/27

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2017

Clinton County Community Health Improvement Plan: Coordinated Activities for Community Health Improvement



NYS Department of Health Prevention Agenda Priority Area: Prevent Chronic Disease

Focus Area: Reduce Obesity in Children and Adults

Goal: Create community environments that promote and support healthy food and beverage choices and physical activity.

Long Term Objective: By 12/31/18, decrease the percentage of Clinton County adults who report participating in no leisure time physical activity by 5% from 25.2% to 21.1% (CDC, 2012).

Long Term Objective: By 12/31/18, increase the percentage of Clinton County adults reporting adequate daily fruit and vegetable consumption by 5% from 24.7% to 29.7% (BRFSS, 2005-2009).

Strategy/ Source	Interventions/Activities (to be completed by 12/31/2017)	Process Measures	Partners (Role)	Partner Resources	Disparate Population Addressed
<p>Offer individually adapted health behavior change programs</p> <p>Source: CDC, Strategies to Prevent Obesity and Other Chronic Diseases (http://www.cdc.gov/obesity/downloads/pa_2011_web.pdf)</p>	-Design a program targeting nurses in conjunction with the Magnet process focusing on diet, exercise, stress, coping, obesity, and disabilities (self-care)	-Program sign in sheet and agenda -Completion of one program per year for the duration of this CHA (Baseline N/A)	-CVPH (Lead)	-Staff, time, funding, space	-General population
	-Continuation/expansion of CVPH's Diabetes Prevention Program	-Patient "graduation" records, #graduates (Baseline =12 in 2016)	-CVPH (Lead)	-Staff, space, funding	-General population
	-Maintain enrollment in fitness programs tailored for residents 55 years and over.	-Participant enrollment/ attendance records (Baseline= 35 in 2016)	-CCE (Coordinator) -EAHCN, TOP (Support) -AFH Partners/Others (Support)	-Staff time -Funding -Cross promotion, space, equipment	-Seniors/ Aging
	-Implement Sun Protection Project targeting those utilizing local spaces for activity. -Develop local work plan for implementation & promotion -Secure funding for materials/ equipment	-Finalized work plan, application submission dates	-CCHD (Lead) -AFH partners (Support)	-Staff, time, supplies -Sponsor, cross promotion	-Low income
	-Coordinate & conduct a Chronic Disease Self-Management Program in Clinton County	-Dates of workshops, # participants (Goal= 1 program)	-EAHCN (Lead) -AFH Partners/ Others (Support)	-Training, funding -Cross promotion, space	-Aging

Strategy/ Source	Interventions/Activities (to be completed by 12/31/2017)	Process Measures	Partners (Role)	Partner Resources	Disparate Population Addressed
<p>Creation of/or enhanced access to places for physical activity combined with informational outreach activities.</p> <p>Source: CDC, Strategies to Prevent Obesity and Other Chronic Diseases http://www.cdc.gov/obesity/downloads/pa_2011_web.pdf)</p>	<p>-Continuation of Year 2 of Fitness in the Parks</p> <p>-Offer local trail map within the CVPH Occupational Health Department</p> <p>-Finalize enhancement to one additional recreational space to support activity across the lifespan</p> <p>-Facilitate community entities to submit projects to NYSHF/ioby's spring <i>Healthy Neighborhoods Challenge</i> for match funding</p> <p>-Creation of a multi-use, accessible recreation trail in Morrisonville (identify and apply for resources</p>	<p>-Grant documents</p> <p>-Completion of year 2 activities:</p> <ul style="list-style-type: none"> -Creation of a foot golf course in Cadyville, open free to youth up to age 18 (Baseline=0) -Increase permanent indoor pickleball courts by 3 (baseline=6, goal=9) -Expand Fitness in the Park to 5 additional townships (baseline =5, goal= 10) <p>-Number of places map is available outside CCHD</p> <p>-Identification of location within CVPH (Baseline =0, Goal= 1 spot in 2017, additional spot subsequent years)</p> <p>-Completion of work at one additional site, kickoff event date (Baseline=5 spaces, Goal=6 spaces)</p> <p>-Formal agreements in place, usage/observation data, dates of promotion activities</p> <p>-Submitted applications (Baseline= 3 applications submitted in 2016, Goal=2 applications submitted in 2017)</p> <p>-Application completed, submission date</p>	<p>-Foundation of CVPH (Lead)</p> <p>-AFH Partners (Support)</p> <p>-CVPH (lead)</p> <p>-CCHD (Assist)</p> <p>-CCHD (Lead)</p> <p>-AFH partners (Support)</p> <p>-CCHD (Lead)</p> <p>-AFH (Supprt)</p> <p>-Town of Plattsburgh, Planning Dept (Lead)</p> <p>-Foundation of CVPH (Partner)</p> <p>-AFH (Support)</p>	<p>-Staff, time, funding</p> <p>-Cross Promotion</p> <p>-Staff, time, coordination</p> <p>Map</p> <p>-Staff, time, grant funding, partner coordination</p> <p>-Cross promotion</p> <p>-Staff time, facilitation</p> <p>-Connection to community entities</p> <p>-Staff, recommendations, coordination</p> <p>-Staff time, application completion</p> <p>-Promotion, assist</p>	<p>-Low-income</p> <p>-Senior/ Aging</p> <p>General population</p> <p>-Senior/Aging</p> <p>-Disabilities</p> <p>-Low income, disabilities</p> <p>-Low income</p> <p>-Seniors</p> <p>-General population</p>

Strategy/ Source	Interventions/Activities (to be completed by 12/31/2017)	Process Measures	Partners (Role)	Partner Resources	Disparate Population Addressed
<p>Ensure access to fruits and vegetables in workplace cafeterias and other food service venues.</p> <p>Source: CDC, Strategies to Prevent Obesity and Other Chronic Diseases (http://www.cdc.gov/obesity/downloads/fandv_2011_web_tag508.pdf)</p>	<ul style="list-style-type: none"> -Continued usage of healthy meal and beverage standards for meals sold and served in the hospital with a focus on using healthy, locally grown foods in cafeteria and patient meals -Review of menus for dietary content -No sugar added options -Inclusion of nutritionals on entrees and specials 	<ul style="list-style-type: none"> -Compliance with selected indicators per policy (Baseline= 25% local Goal: sustain 25% local) 	<ul style="list-style-type: none"> -CVPH (lead) 	<ul style="list-style-type: none"> -Staff time, financing 	<ul style="list-style-type: none"> -General population
<p>Improve access to or availability of high quality fruits & vegetables throughout the community.</p> <p>Source: CDC, Strategies to Prevent Obesity and Other Chronic Diseases (http://www.cdc.gov/obesity/downloads/fandv_2011_web_tag508.pdf)</p>	<ul style="list-style-type: none"> -Expand participation in local <i>Better Choice</i> certification programs -Recruit & promote locally owned restaurants to participate in <i>Better Choice Eatery</i> program -Recruit & promote locally owned retailers to participate in <i>Better Choice Retailer</i> program -Work with local farmers to increase the number of farmers markets/ stands accepting local, state and national nutrition incentive program benefit -Increase use of locally sourced ingredients in <i>Cooking with Kids</i> class -Continue CVPH malnutrition program -Coordinate CVPH malnutrition and CCHD Farm Fresh Cash Programs 	<ul style="list-style-type: none"> - Applications, enrollment dates (Baseline = 5, Goal= Increase participation by 100%) -Applications, enrollment dates (Baseline= 6 , Goal= Increase participation by 100%) -Application submission dates, authorization dates (baseline, goal) FMNP- 11 sites, 15 sites WIC- 10 sites, 14 sites SNAP- 7 sites, 9 sites FFC- 10 sites, 15 sites -# classes utilizing locally sourced fruits and vegetables (Baseline pending, goal- increase by 25%) -Length of stay (Baseline=2.5d, Goal= 2.2d) Readmission rates (Baseline=18.7%, Goal= 16.5%) -#patients referred, #program patients receiving vouchers (Baseline= N/A, Goal= 10 patients) 	<ul style="list-style-type: none"> -CCHD (Lead) -AFH partners (support) -CCHD (Lead) CCHD (Lead) -AFH partners (support) -TOP- Recreation (lead) -AFH partners- cross promotion -CVPH (Lead) -CCHD (Co-lead) -CVPH (Co-lead) 	<ul style="list-style-type: none"> -Staff, time, partner coordination -Cross promotion -Staff, time, funding, partner coordination -Promotion, connection to community groups and resources -Staff, time -Cross promotion -Staff, time, health informatics -Staff, funding, training -Staff, patient access 	<ul style="list-style-type: none"> -Food insecure (for all activities) -General population
<p>Include fruits and vegetables in emergency food programs.</p> <p>Source: CDC, Strategies to Prevent Obesity and Other Chronic Diseases (http://www.cdc.gov/obesity/downloads/fandv_2011_web_tag508.pdf)</p>	<ul style="list-style-type: none"> -Institute environmental changes at local food pantries that increase the site's capacity to accept and distribute fresh produce -Design and launch a community media campaign aimed at increasing donation of fresh produce and other nutritionally sound items to local food pantries. 	<ul style="list-style-type: none"> -# of pantries participating, project completion dates (Baseline= 0, Goal= 3 sites) -Dates of media promotions, # channels utilized 	<ul style="list-style-type: none"> -CCHD (Lead) -JCEO, PIFS -AFH partners 	<ul style="list-style-type: none"> -Staff, time, funding -Access to target spaces, clients -Connection to local organizations, cross promotion 	<ul style="list-style-type: none"> -Food insecure, low income (for all activities) -General population

NYS Department of Health Prevention Agenda Priority Area: Prevent Chronic Disease

Focus Area: Increase Access to High Quality Chronic Disease Preventative Care and Management in Clinical and Community Settings

Goal: Increase screening rates for colorectal cancer, especially among disparate population.

Long Term Objective: Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines (ages 50-75) from 75.8 to 80. (Data Source: NYS BRFS)

Long Term Objective: By December 31, 2018, achieve the healthy people target for age adjusted death rate due to colorectal cancer from 16.7% to 14.5 deaths/100,000 population (HealthyAdk.org)

Strategy/ Source	Interventions/Activities (to be completed by 12/31/2017)	Process Measures	Partners/ Role	Partner Resources	Disparity addressed
<p>Implement evidence- based activities that increase public awareness about cancer screening.</p> <p>Source: National Colorectal Cancer Roundtable, <i>80% by 2018 Guidebook</i> (http://nccrt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/)</p>	<p>-Implement peer education grant to refer patients for screening in mammography and men referred to primary care for discussion on prostate screening – extrapolate lessons learned on mammography and prostate to colon</p> <p>-Host a <i>Men's Night Out</i> to provide information on colon and prostate cancer screening</p> <p>-Maintain Navigator Program to connect patients to screening services</p> <p>-Conduct media outreach related to clinical preventive services for colorectal screening</p>	<p>-Grant documents & reports (Baseline= N/A, Goal- referral of 100 patients to primary care)</p> <p>-Number of uninsured/ underinsured taking advantage of Clinton County Cancer Services Program (Baseline= 85% participants below 250% FPL; Goal- maintain 85%)</p> <p>-Attendance numbers (goal- 40 men Baseline- N/A)</p> <p>-Number of patients utilizing the navigator program to connect to screening services (Goal- 5% increase)</p> <p># of messages (Goal=8)</p>	<p>-CVPH (Lead) -AFH Partners (Support)</p> <p>-CVPH Foundation (lead) -AFH Partners/ Others (Support)</p> <p>-CVPH (Lead) –Fitzpatrick Cancer Center</p> <p>-EAHCN (Lead) -AFH Partners (Support)</p>	<p>-Staff, time, grant funding, -Cross promotion, connection to disparate populations</p> <p>-Staff, time -Cross promotion, space, incentives</p> <p>-Staff, time, program coordination</p> <p>-Staff, coordination, funding -Cross promotion</p>	<p>-Low income, under-insured</p>
<p>Promote provider practice implementation of evidence based interventions & guidelines.</p> <p>Source: CDC, <i>The Guide to Community Preventive Services</i> (https://www.thecommunityguide.org)</p>	<p>-Integrate cancer screening messaging and recommendations into Partner Nurse detailing packets</p> <p>-Provide local perspective/ data update on screening practices/ behaviors at annual provider event</p>	<p>-# packets distributed, # providers reached Goal- At least 2 editions contain screening recommendations and related info.</p> <p>-Event data, # of providers reached</p>	<p>-CCHD (Lead)</p> <p>-CCHD (Lead)</p>	<p>-Staff, time, materials, funding</p> <p>-Staff, time, coordination, space, funding</p>	<p>-General population approach for all activities</p>

NYS Department of Health Prevention Agenda Priority Area: Promote Mental Health and Prevent Substance Abuse

Focus Area: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders

Goal: Prevent and reduce the occurrence of mental, emotional and behavioral disorders among youth and adults

Long Term Objective: By 12/31/2018, Reduce the percentage of adult Clinton County residents reporting 14 days with poor mental health in month by 3% from 11.1% to 8.1% (BRFSS September 2014 data)

Strategy/ Source	Interventions/Activities (to be completed by 12/31/2017)	Process Measures	Partners/ Role	Partner Resources	Disparity addressed
<p>Identify, engage and clarify roles of partners across sectors.</p> <p>Source: NYSDOH, <i>Prevention Agenda: Evidence Based Programs, Policies and Practices</i> https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/mhsa/ebi/index.htm</p>	<ul style="list-style-type: none"> -Expansion of SPARCC activities to include quarterly meetings, work plan -Maintenance of MEB Subcommittee of AFH -Coordinate screening of "Chasing the Dragon" (FBI, DEA) for the public -CVPH ED to start program to dispense Narcan in the ED (2 year program) (grant from Alliance for Positive Health) for opioid overdose patients 	<ul style="list-style-type: none"> -Meeting dates, shared work plan -Meeting dates, agendas, attendance records -SPARCC meeting minutes, event date, attendance data (# in attendance, school districts represented) -In 2017, implement program 	<ul style="list-style-type: none"> -SPARCC partners -CCMH&AS (lead) -CVPH, BHSN, CCHD, CVFC, others (partner) -SPARCC partners -CVPH (lead) -Alliance for Positive Health (partner) 	<ul style="list-style-type: none"> -Variable -Staff, time for coordination/ facilitation, space -Variable (staff, time, space) -Staff, time, training, cost of drugs 	<p>General population approach</p>
<p>Promote coordination of mental health practitioners with other care providers</p> <p>Source: NYSDOH, <i>Prevention Agenda: Evidence Based Programs, Policies and Practices</i> https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/mhsa/ebi/index.htm</p>	<ul style="list-style-type: none"> -Renovations to CVPH Behavioral Health Unit & embedding of outpatient services (Medical Village) -Establish local withdrawal and stabilization services -Embedding of primary care @ Center for Wellbeing -Planning/ preparation for HHHN to open FQHC with embedded behavioral health services -Continued integration of mental health and substance use disorder treatment into 8 primary care practices Integrate trained Recovery Coaches into local service agencies 	<ul style="list-style-type: none"> -Hospital approval received -Certificate of Need (CON) submitted -CON approval received -Progress reports, opening date -Identified primary care provider -Established service -CON submission date -Date construction begins -Opening date (anticipated 2018) -Practices identified, date of integration -# agencies interested, #coaches integrated 	<ul style="list-style-type: none"> -CVPH (lead) -BHSN (partners) -CVFC (lead) -AFH partners (support) -BHSN -CVPH (lead) -HHHN (partner) -CCMH&AS (lead) -EAHCN (support) -CVFC (Lead) 	<ul style="list-style-type: none"> -Financing, coordination -Coordination, staff, time, funding -Space, coordination -Financing, project coordination -Staff, training, expertise - supplies & equipment to enhance portability -Trained coaches, coordination 	<p>-MEB population</p>

Strategy/ Source	Interventions/Activities (to be completed by 12/31/2017)	Process Measures	Partners/ Role	Partner Resources	Disparity addressed
<p>Support mental wellbeing by creating supportive environments.</p> <p>Source: WHO, <i>Promoting Mental Health: Concepts, Emerging Evidence, Practice</i> (http://www.who.int/mental_health/evidence/en/promoting_mhh.pdf)</p>	<ul style="list-style-type: none"> -Offer a series of educational events focusing on primary and secondary disease prevention for the MEB community and other vulnerable populations -Explore guidance and feasibility of a local law enforcement diversion program -Promote Talk2Prevent platform at local community events -Integrate Youth Mental First Aid into local school districts -Offer Family Yoga sessions -Expand the Senior-to-Senior program -CVPH Child and Adolescent Mental Health Unit Social Worker to launch support group for families of patients who have been in the mental health system -Coordinate marketing strategies to reduce stigma/ misperceptions related to seniors utilizing behavioral health services 	<ul style="list-style-type: none"> -Dates of events, attendance #'s/ records, program evaluation feedback -Meeting dates, agenda, recommendations -# events, event reach -Identified school districts -Dates of trainings -# educators trained -Dates of programs -# participants -Facility identified -Program initiation date -Number of visits made -Launch of group -message dates, format, distribution channels 	<ul style="list-style-type: none"> -CCHD (lead) -BHSN (partner) -SPARCC partners -Champlain Valley Family Center (CVFC) -CVFC (lead) -School districts -CVFC (lead) -CCHD & AFH partners (support) -SUNY Plattsburgh Nursing Program -CVPH (Lead) -EAHCN (lead) 	<ul style="list-style-type: none"> -Staff, time, incentives -Space, coordination of high risk groups -Staff, time, variable -Staff, time -Staff, time, training materials -Space, educators, time -Staff, time, space, trained instructor -Cross promotion -Staff, coordination of nursing students -Staff, time, space -staff, time, funding 	<ul style="list-style-type: none"> -MEB population -At risk youth -Seniors/Aging -At risk youth & families Seniors/ Aging

2017 Community Health Improvement Plan Distribution Effort

CCHD will actively disseminate the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) to the public with the assistance of UVHN- CVPH. The plan will reside conspicuously in PDF format in the *Statistical Data and Annual Reports* section of its webpage found at www.clintonhealth.org. UVHN-CVPH will follow these same guidelines, posting the CHA and related documents in the “About” section of www.cvph.org. Links to all documents and updates, when available, will be shared via social media and other media channels. Marketing efforts will then drive the community to these locations to view and download the assessment and related plans. Marketing efforts will include a press release sent to all local media outlining the plan; interviews with the media (as appropriate); regular posts on social media sites such as Facebook and Twitter; and mentions in a variety of print and online communications produced by and CCHD and CVPH.

CCHD will also be dedicating an edition of its *Public Health Profiles* to the new CHA/CHIP. The short overview document will highlight priority areas, planned work, and partners. It will also provide specific calls to action for residents, health professionals, and community leaders. This document will be posted on CCHD’s website and promoted through the standard mechanisms referenced above. Other communication efforts and channels will be considered throughout the year to help increase awareness of shared, community level health improvement plans among partners and residents alike.

Notification will be sent to key stakeholders with a cover letter identifying where community members can access community health assessment related documents. In addition, community presentations will include:

- AFH members to their Directors or oversight Boards;
- Targeted local elected officials;
- Clinton County Board of Health;
- Foundation of CVPH;
- And all other appropriate and identified community stakeholders.

Active distribution throughout the community will assure continued community engagement in this important strategic planning tool to improve health. Community presentations will focus on how residents can contribute to planned efforts. All dissemination activities will help build the grassroots need to address health improvement efforts across the county by engaging both traditional and nontraditional partners in sustainable and permanent community-based interventions.

Community Asset and Resource Evaluation

(Undertaken as part of the CHA process in 2016)

The following represents a collection, but not a complete listing, of community assets identified through key informant dialogues, review of local coalitions/ partnership members and key word internet searches completed in September 2016 and organized by common categories used for asset mapping. All assets listed are potential resources for the implementation of Clinton County's 2017 Community Health Improvement Plan.

Clinton County Community Assets	
Access to Health Services	
University of Vermont Health Network, CVPH	Adirondack Medical Home Initiative/CVHN
Health Care of Rochester (HCR)	Plattsburgh VA Clinic
Private Primary Care Providers	
Mental Health, Addiction, Substance Abuse	
Alliance for Positive Health	Behavioral Health Services North, Inc.
Champlain Valley Family Center	Clinton County Mental Health and Addiction Svcs.
Exercise, Nutrition & Weight	
CVPH Parc	City of Plattsburgh Recreation Department
Clinton County Youth Bureau	Cornell Cooperative Extension
Town of Plattsburgh Recreation Department	YMCA
Family Planning & Services	
CCHD Improved Pregnancy Outcome Program	CCHD WIC Program
Child Care Coordinating Council of the North Country, Inc.	Healthy Families of the North Country
Planned Parenthood	
Food Relief Services	
JCEO Food Shelf	Plattsburgh Interfaith Food Shelf
St. Alexander's/St. Joseph's Soup Kitchen	St. Augustine's Soup Kitchen
St. Peters Church	The Salvation Army Community and Worship Ctr.
Trinity Episcopal Church	United Methodist Church Food Shelf
USDA Summer Feeding Sites	
Built Environment/ Environment	
State Parks:	
Cumberland Bay State Park	Point Au Roche State Park
Macomb Park	
Recreation Parks & Trails:	
<i>Town of Plattsburgh:</i>	
Cadyville Recreation Park	Cadyville Riverfront Park
Cliff Haven Park	Cumberland Head Park
East Morrisonville Park	Guy Cedar Park
May Currier Park	South Plattsburgh Park
Treadwells Mills Park	Wallace Hill Park
West Plattsburgh Park	
<i>City of Plattsburgh:</i>	
Belmont Park	Broadway Park
Centennial Park	Champlain Park
Fort Brown Park	Hamilton Park
Jay Park and Terry Gordon Bike Path	Lakeview Park and Soldier Point

MacDonough Park	Melissa Penfield Park
Peter Blumette Park	Plattsburgh City Recreation Center
Riverview Park	South Acres Park
South Platt St. Park	Tremblay Park
Trinity Park	U.S. Oval
Wilcox Dock and Healthy Lung Trail	
<i>Other Parks/Trails:</i>	
Beekmantown Town Park and Pavillion	Feinberg Park, Altona
Gazebo Park, Peru	Heritage Trail, Plattsburgh
Heyworth/Mason Park, Peru	Lafountain Park, Dannemora
Little Ausable River Trail, Peru	Lyon Mountain Firetower Trail
Mooers Rec Park	Picketts Corners Park, Saranac
Rouses Point Civic Center	
Older Adults & Aging	
Clinton County Office for the Aging	Eastern Adirondack Health Care Network
Nutrition Program for the Elderly	Senior Citizens Council of Clinton County
Housing	
Champlain Valley Habitat for humanity, Inc.	Clinton County Department of Social Services
ETC Housing Corp.	HAPEC – Clinton County Office
Plattsburgh Housing Authority	Victory Place
Education	
Clinton County School Districts:	
AuSable Valley School District	Beekmantown School District
Chazy School District	Northeastern Clinton School District
Northern Adirondack School District	Peru School District
Plattsburgh City School District	Saranac School District
Vocational School:	
Champlain Valley Educational Services (CV-TEC)	
Higher Education:	
Clinton Community College	SUNY Plattsburgh
Early Education:	
North Country Kids, Inc.	JCEO Head Start
YMCA – Y Wee Care Program	
Libraries	
Clinton Essex Franklin Library System	
Clinton County libraries:	
Altona Reading Center	Champlain Memorial Library
Chazy Public Library	Dannemora Free Library
Dodge Library	Ellenburg Center Reading Center
Ellenburg Sara A. Munsil Free Library	Mooers Free Library
Peru Free Library	Plattsburgh Public Library

2016 Action for Health Consortium Member List

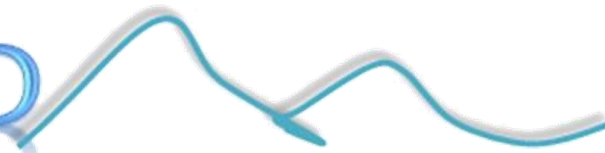
Diana Aguglia	Alliance For Positive Health
Maria Alexander	Senior Citizens Council
Sara Allen	Clinton County Health Department, Contractor
Joy Arana	Citizen, Licensed Social Worker
Maryann Barto	Clinton County Health Department, Environmental Health Division
Laurie Booth-Trudo	Child Care Coordinating Council of the North Country
James Bosley	Clinton County Planning/Clinton County Public Transit
Mary Breyette	Cornell Cooperative Extension
Crystal Carter	Clinton County Office for the Aging
Dot Crawford	Interfaith Food Shelf
Kim Crockett	Clinton County Youth Bureau
Melanie Defayette	Town of Plattsburgh Recreation Department
Karen Derusha	Clinton County Health Department, Health Planning and Promotion Division
Bob Dickie	University of Vermont Health Network-Champlain Valley Physicians Hospital
Adele Douglas	Town of Peru Community Development Coordinator
Shannon Drowne	Kinetic Running
Victoria Duley	The Development Corp.
Darwyna Facticeau	Clinton County Health Department, Health Care Services Division
Sally Garvey	Office for the Aging, Clinton County
Sandra Geddes	Community Development, City of Plattsburgh
Kerry Haley	The Foundation of CVPH
Mark Hamilton	City of Plattsburgh Housing Authority
Kati Jock	University of Vermont Health Network - Champlain Valley Physicians Hospital
Karen Kalman	University of Vermont Health Network-Champlain Valley Physicians Hospital
John Kanoza	Clinton County Health Department, Environmental Health Division
Dorothy Latta	Plattsburgh Interfaith Food Council
Jody Leavens	Fidelis Care

Charles McCoy	Citizen
Gizelle Menard	University of Vermont Health Network-Champlain Valley Physicians Hospital
Erin Pangborn	Town of Plattsburgh Recreation Department
Steve Peters	City of Plattsburgh Recreation Department
Amy Putnam	Fidelis Care
Jerie Reid	Clinton County Health Department, Administration
Sara Rowden	Citizen
Shawn Sabella	Behavioral Health Services North
Shey Schnell	University of Vermont Health Network-Champlain Valley Physicians Hospital
Margaret Searing	Clinton County Health Department, Administration
Courtney Smith	Adirondack Health Institute
Mandy Snay	Clinton County Health Department, Health Planning and Promotion
Kathy Snow	United Way of the Adirondack Region
Sally Soucia	Joint Council For Economic Opportunity
Julie Stalker	Joint Council For Economic Opportunity
Trevor Cole	Town of Plattsburgh Planning Department
Peter Trout	Behavioral Health Services North
Brittany Trybendis	State University of New York at Plattsburgh
Lee Vera	Eastern Adirondack Health Care Network
Laurie Williams	The Foundation of CVPH, Contractor
Steve Williams	Hannaford Supermarket

Acronym List

AFH	Action for Health	HIA	Health Impact Assessment
AFPH	Alliance for Positive Health	HIDTA	High Intensity Drug Trafficking Areas
AHI	Adirondack Health Institute	JCEO	Joint Council for Economic Opportunity
BCSD	Beekmantown Central School District	MEB	Mental, Emotional, Behavioral
BE	Built Environment	MIT	Mobile Integration Team
BHSN	Behavioral Health Services North	MIU	Mobile Integration Unit
CCBF	Clinton County Breastfeeding	NAC	Northern Adirondack Central
CCE	Cornell Cooperative Extension	NACCHO	National Association of City and County Health Officials
CCHD	Clinton County Health Department	NCCS	Northeastern Clinton Central School
CCMA&AS	Clinton County Mental Health and Addiction Services	NY/NJ	New York/New Jersey
CDC	Centers for Disease Control	NYSDOH	New York State Department of Health
CHA	Community Health Assessment	NYSHF	New York State Health Foundation
CHIP	Community Health Improvement Plan	OFA	Office for the Aging
CON	Certificate of Need	PHA	Plattsburgh Housing Authority
CS	Complete Streets	RP	Rouses Point
CVFS	Champlain Valley Family Center	SBIRT	Screening, Brief Intervention, and Referral to Treatment
CVPH	University of Vermont Health Network -Champlain Valley Physicians Hospital	SCCCC	Senior Citizens Council of Clinton County
DEA	Drug Enforcement Agency	SNAP	Supplemental Nutrition Assistance Program
DSS	Department of Social Services	SOPARC	System for Observing Play and Recreation in Communities
EAHCN	Eastern Adirondack Health Care Network	SPARCC	Substance Abuse Prevention and Recovery of Clinton County
ETC	Evergreen Townhouse Community	SRT	Saranac River Trail
EXPLORE	Experience and Professional Leadership Opportunities Result in Excellence	SUNY	State University of Vermont
FB	Facebook	USDA	United States Department of Agriculture
FBI	Federal Bureau of Investigation	TOP	Town of Plattsburgh
FFC	Farm Fresh Cash	WHO	World Health Organization
FMNP	Farmers Market Nutrition Program	WIC	Special Supplemental Nutrition Program for Women, Infants, Children
FQHC	Federally Qualified Health Center	YMCA	Young Men's Christian Association
HAPEC	Housing Assistance Program for Clinton County		
HHHN	Hudson Headwaters Health Network		

CCHD



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