



AGENDA FOR PROMOTING HEALTHY COMMUNITIES

ADVANCING THE STATE PUBLIC HEALTH
PRIORITIES: YEAR 1



Hospital for Special Surgery’s (HSS) One-Year Community Service Plan (CSP) update describes the Hospital’s progress in executing its 2009 Comprehensive Three-Year CSP, which is focused on supporting the implementation of New York State Department of Health’s (DOH’s) *Prevention Agenda Toward the Healthiest State* initiative. The Hospital’s contributions are to the Priority Areas of: **Physical Activity and Nutrition**, and **Chronic Disease**, where HSS concentrates on musculoskeletal and rheumatic conditions, its areas of expertise. By initiating and strengthening key partnerships, developing and refining strategies, and conducting and evaluating programs, HSS met, and in some cases exceeded, its first year CSP goals.

1. MISSION STATEMENT

Hospital for Special Surgery’s commitment to providing the highest quality of care to its patients and improving the communities it serves is articulated in its *Mission, Vision, and Values* statement—which is reviewed annually by the Hospital’s Board of Trustees. This statement remained unchanged from the previous year.

Key principles include:

- Providing the highest quality patient care, improving mobility, and enhancing the quality of life for all and advancing the science of orthopedic surgery, rheumatology, and their related disciplines through research and education—regardless of race, color, creed, sexual orientation, or ethnic origin.
- Leading the world as the most innovative source of medical care, a premier research institution, and the most trusted educator in the fields of orthopedics, rheumatology, and their related disciplines.

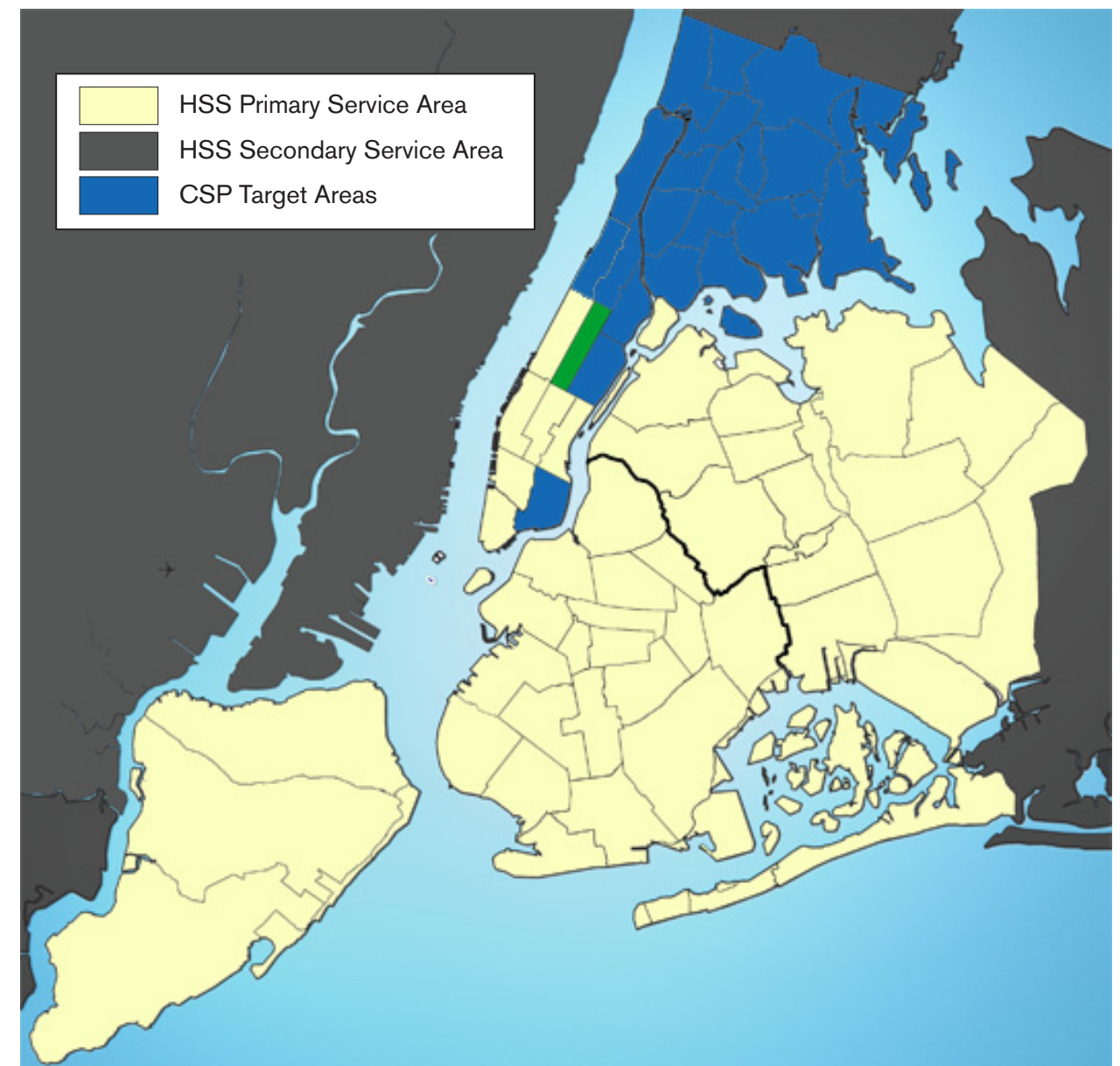
- Setting and adhering to the highest possible standards based on Excellence, Integrity, Compassion, Respect, Teamwork, Quality, Safety, Innovation, Education, and Efficiency.

The Hospital’s *Mission, Vision, and Values* propel HSS’ efforts to provide the highest quality patient care—inclusively, with cultural sensitivity and without discrimination. Hospital for Special Surgery extends this commitment outward—improving public health, empowering communities through information and services to act in their own interests, leveraging resources through effective partnerships, and strategically linking to other health care providers and government agencies.

2. HOSPITAL SERVICE AREA

Hospital for Special Surgery’s immediate community lies within the boundaries of New York City’s Community Board #8, which extends north from 59th Street to 96th Street and east from Fifth Avenue to the East River. More generally, HSS’ primary service area consists of the five boroughs of New York City. The suburban counties surrounding New York City, including those in New Jersey and Connecticut comprise its secondary service area. However, the institution assists its many communities, whether in New York City neighborhoods, in the tri-state area, or around the world. For CSP planning and implementation purposes, there is an identified focus based on issues related to health disparities in the following communities: the Lower East Side (encompassing Chinatown), the Hospital’s immediate and adjacent areas of the Upper East Side and East Harlem, Inwood/Washington Heights, and the Bronx. The HSS service area remains unchanged from the previous year.

HSS Service areas



3. PARTICIPANTS AND HOSPITAL ROLE

Input from a broad variety of sources, including community organizations, public schools, city and state agencies, universities, colleges and the private sector, informs the direction and content of HSS’ public health education and social work programs. The ongoing exchange of information with these

partners is critical to enabling HSS to develop, modify, and expand initiatives to meet the constantly changing healthcare needs of our diverse community.

On the following page is a list of the Hospital’s partners involved in assessing the community health needs related to the five programs being implemented under HSS’ prevention agenda priority areas.

Clinical/Academic Partners

Charles B. Wang Community Health Center	Clinical Translational Science Center, Community Engagement Core, Weill Cornell Medical College <ul style="list-style-type: none"> • Hospital for Special Surgery • New York Presbyterian Hospital • Memorial Sloan-Kettering Cancer Center • Hunter College School of Nursing • Cornell University Cooperative Extension- New York City
Translational Research Institute for Pain in Later Life (TRIPLL)	
Greater New York Hospital Association	
New York-Presbyterian Morgan Stanley Children’s Hospital, Pediatric Rheumatology Service	
Chinese Community Partnership for Health, New York Downtown Hospital	Center for the Study of Asian American Health, New York University
Gouverneur Healthcare Services, New York City Health and Hospitals Corporation	Asian American/Asian Research Institute, City University of New York
Weill Cornell Medical College, Department of Psychiatry	Audubon Family Planning Center, NewYork-Presbyterian Hospital Ambulatory Care Network Columbia University Medical Center

Community-Based Organization Partners

Arthritis Foundation- NY Chapter	Senior Health Partners
New York Foundation for Senior Citizens	East Side Council on the Aging (ESCOTA)
New York Road Runners Club (NYRR)	East Harlem InterAgency Council on Aging
Senior Companions at Henry Street Settlement	Spanish Speaking Elderly Council-RAICES
New York Chinese American Association, Inc	Chinese American Planning Council
Asian Health & Social Service Council	Asian American Federation of New York

Government/Public Partners

New York City’s Public Schools	New York City Department of Health and Mental Hygiene
New York Public Libraries	Office of Women’s Health, Department of Health and Human Services

See Appendix 1 for additional information on each of our partners.

4. IDENTIFICATION OF PUBLIC HEALTH PRIORITIES

HSS is in regular contact with its partners, including face-to-face meetings and communication via telephone and e-mail, to assess the musculoskeletal and rheumatic health needs of the communities it serves. A variety of methodologies are used in obtaining information for this assessment, including:

- Focus groups with constituent populations
- Program evaluation feedback
- Stakeholder interviews
- Written, telephone and online surveys
- State, local and Hospital-specific data analysis

Assessment results serve as the basis for developing new, modified or expanded programs to address the diverse needs of the community, including those that correspond to the DOH’s *Prevention Agenda*. From September 2009 to present, HSS completed a systematic assessment of health disparities within the Hospital’s primary CSP service area to determine those aspects of health that might be addressed and impacted through public health education and social work programs.

In February 2009, Special Surgery’s Public and Patient Education Advisory Committee, which is comprised of representatives from across the Hospital’s departments, formed a special Community Service Plan Task Force to: methodically review the DOH Prevention Agenda for the Healthiest State materials, analyze current initiatives and partnerships in light of data and statistics describing community needs and health care disparities, and respond to the public health challenge presented by DOH and its new Comprehensive Three-Year Format planning document. The assessment process, which included consultations with partners as well as with the highest levels of HSS management,

ensured Hospital-wide ownership of the two HSS CSP Task Force-identified priorities— **Physical Activity and Nutrition** and **Chronic Disease**—and designed the blueprint for reaching our common goals. Appendix 2 includes a comprehensive list of HSS faculty and staff involved in the strategic direction and advancement of CSP initiatives.

5. UPDATES TO ACTION PLAN

HSS PREVENTION AGENDA PRIORITY ONE: NUTRITION AND PHYSICAL ACTIVITY

Findings from the New York City Department of Health and Mental Hygiene suggest that one in five public school children (kindergarten through eighth grade) are obese, and a similar number of students are overweight. Compared to children nationwide, New York City (NYC) children are more likely to be obese (21 percent vs. 17 percent) and overweight (18 percent vs. 14 percent).¹ Overweight and obese children report higher rates of musculoskeletal problems in their lower extremities and more lower back pain than children of normal weight.² These statistics clearly demonstrate the need for nutrition and physical activity education that reaches young children, their parents and caregivers.

HSS aligns with the DOH’s 2013 prevention agenda objective to reduce the percentage of children ages 6-11 years who are obese to 5 percent or less.

1 New York City Department of Health and Mental Hygiene (2008). Childhood Obesity is a Serious Concern in New York City: Higher Levels of Fitness Associated with Better Academic Performance. *NYC Vital Signs*, 8, 1. Available: <http://www.nyc.gov/html/doh/downloads/pdf/survey/survey-2009fitnessgram.pdf>

2 de Sá Pinto, A. L., de Barros Holanda, P. M., Radu, A. S., Villares, S. M. F., Lima, F. R. (2006). Musculoskeletal findings in obese children. *Journal of Pediatrics and Child Health* (42)6, 341

HSS – SNEAKER®: Super Nutrition Education for All Kids to Eat Right Project

To help promote healthier foods in elementary schools, SNEAKER® (Super Nutrition Education for All Kids to Eat Right Project), which was developed by the HSS Education Division, provides culturally-sensitive nutrition education information for NYC’s English, Spanish and Chinese-speaking children and their families. The program targets the city’s most medically underserved communities, including East Harlem, Harlem, the Lower East Side, Manhattan’s Chinatown, and sections of the Bronx. Residents in these areas are predominantly Latino, Asian and African-American.

To impact the public health priority area, through the SNEAKER® Project, HSS is committed to empowering children and adults to adopt proper nutrition habits by:

Goal 1: Increasing awareness in children and adults that obesity is a key health concern,

Goal 2: Helping children and adults adopt healthier nutrition patterns in any setting, and

Goal 3: Training teachers, health care workers, caregivers and parents in the SNEAKER® program model.

Using evidence-based public health, including a systematic review of our service area, community health needs assessments and focus groups, the SNEAKER® program model continues to modify and expand interventions to reach targeted communities. SNEAKER® activities over the past year included: implementing and evaluating workshops administered by HSS Health Educators, disseminating nutrition and exercise information via print and through the HSS website, and exploring the coordination of a training initiative for community health workers.

The following are a list of partners for year one initiatives:

- Charles B. Wang Community Health Center
- New York City Public Schools
- Weill Cornell Medical College Clinical Translational Science Multi Institutional Consortium Community Engagement Core (CERO)

UPDATES ON ACTION PLAN

SNEAKER® Project at P.S. 140

In the first and second quarters of 2010, HSS partnered with P.S. 140 on the Lower East Side to provide a five-part (1-hour long) interactive workshop educating 33 fourth graders on the importance of nutrition and physical activity. To determine feasibility and to better understand student needs, key informant interviews were held by HSS Education Division staff. As a result, slight modifications were made to the SNEAKER® program to meet the needs of the predominantly Latino group of children. Baseline data was collected and educational gaps were identified including the need for education on refined vs. natural sugars and the consequences of excess sugar consumption, portion control and physical activity. Currently SNEAKER® does not have a physical activity component as part of the curriculum; however, the possibility of incorporating a physical activity component will be explored in Year 2. At the conclusion of the program, post assessments were administered to assess change in knowledge. Three-month follow up questionnaires were also given to assess behavior change. The data from the PS 140 assessments indicate that HSS improved the students’ physical activity and calcium consumption. On the pre-workshop assessment, none of students indicated that they had engaged in vigorous activity (played sports, danced or played games for at least thirty minutes) six out of the last seven days, while 25 percent indicated that they had done so at the post-workshop assessment, and 33

percent indicated that they had done so in the 3-month post-workshop assessment. Similarly, on the pre-workshop assessment 81.5 percent indicated that they drank calcium-fortified juices “Sometimes or Often,” while 92.9 percent indicated that they had done so in the post-workshop assessment and 100 percent indicated that they had done so in the 3-month post-workshop assessment.

Despite these results, it is evident that gaps still exist in the students’ knowledge about proper nutrition, particularly about calcium-and vitamin D rich foods and sugary beverages. Findings from this pilot project will be used to modify the workshop to better suit the education needs of future participants and help us spread proper nutrition knowledge, in turn impacting obesity rates in New York City children and their parents.

HSS Pediatric Ambulatory Care: Healthy Families Workshop

Recognizing that overweight or obese children are at higher risk for musculoskeletal problems in their lower extremities and back that can cause pain and difficulty walking, a coordinated HSS team, including a nutritionist, social worker and public health specialist, assessed the interest of the parents of HSS pediatric patients in attending a family nutrition education workshop. To date, forty surveys have been collected, 92 percent of which indicate an interest in attending. The team is reviewing the feedback from the surveys to determine the educational design and content of the workshop. This workshop is scheduled for fall 2010.

HSS SNEAKER® Website

Recognizing that adolescents age 3-17 are increasingly turning to the Internet for information and currently account for 60 percent of Internet users, a coordinated effort to improve the HSS – SNEAKER® nutrition website began in the last quarter of 2009.

The SNEAKER® website launched in March 2003 to engage children and their caregivers in activities that emphasize the importance of nutrition and physical activity and to reach the much wider audience that is unable to benefit from the in-person SNEAKER® workshops. Included on the interactive website is a recipe submission form through which visitors to the website can submit a healthy recipe based on the goals of the SNEAKER® curriculum. Once submitted, a recipe is evaluated using Nutritionist Pro, a nutrition software program that analyzes and summarizes the nutritional value of the recipe and generates a detailed food label. Based on the analysis, those who submit recipes are given feedback on their recipe and options for how to make it healthier. Recipes are then posted on the website so they can be used by the general public. Over the past year, the design and content of the website have been modified to make it more interactive with the goal of engaging more children and their families, particularly those who live outside the geographic area where the in-person SNEAKER® program is offered. The original site included general information about the SNEAKER® program while the new site includes health information for parents, caregivers, teachers and healthcare providers. Also new to the site are age appropriate cartoons and interactive games. PDF versions of our new publications, the SNEAKER® Activity Book and the second version of the SNEAKER® Cookbook are posted as well. The SNEAKER® website has been viewed 2,254 times since the beginning of 2009; 393 of those views occurred in the first three months of 2010.

SNEAKER® Health Fairs

To reach children and families at the grassroots level, HSS Health Educators participated in three community health fairs. In addition to offering SNEAKER® hands-on activities and health promotion resources, information was

also made available about additional health education programs offered by the Hospital. Other participants in the health fairs included the Vanderbilt YMCA, the Charles B Wang Community Health Center and the Yorkville Public Library. Over 1000 children and families visited the HSS booth and participated in SNEAKER® activities. HSS will continue this health promotion effort in 2011.

NEW PROGRAM ADDITION TO THE CSP

New York State Osteoporosis Prevention and Education Program (NYSOPEP)

In January 2010, HSS was again funded by the New York State Department of Health as the regional resource center for the greater metropolitan area for NYSOPEP with the objective to develop, implement and evaluate innovative osteoporosis education and research initiatives. In this leadership role, HSS will continue to focus on building community collaborations to reach a broader base for public health education initiatives aimed at women, children and older adults. HSS includes NYSOPEP as an addition to the Community Service Plan. In addition to the above mentioned SNEAKER© project (part of NYSOPEP), in year 2 HSS will work on initiatives that will reduce the public impact of osteoporosis and related fractures.

SNEAKER® Training

As outlined in the original community service plan timeline, goal 3, training teachers, health care workers, caregivers and parents in the SNEAKER® program model has been targeted for years 2 and 3.

HSS PREVENTION AGENDA PRIORITY TWO: CHRONIC DISEASE

The DOH Prevention Agenda initiative presents HSS with an opportunity to strengthen public and community efforts to prevent and manage chronic musculoskeletal diseases that align with this specialty Hospital's medical expertise. Under this DOH-identified priority, HSS is focusing on improving the health of

and reducing healthcare disparities among populations affected by arthritis and lupus. The four programmatic interventions are distinctly designed for the Latino, African-American and Asian communities, including those who are age 60 and older. Together, these four programs address the inter-linkages of promoting good health through education, self-management, support and access to care. Each is central to HSS' mission and commitment to improving community health. They are: (1) *Osteoarthritis Awareness and Prevention*, (2) *VOICES 60+ Senior Advocacy Program*, (3) *Charla de Lupus/Lupus Chat*®, and (4) *LANtern*® (*Lupus Asian Network*). Following is a brief description of how the Hospital is addressing each priority. The four programs will be separately described.

Osteoarthritis Awareness and Intervention in Action: Enhancing Mobility, Primary and Secondary Prevention

As the population ages, the impact of musculoskeletal disease will increase dramatically, as will the need for new approaches to prevention and management. Osteoarthritis is the leading cause of disability in the United States. In fact, it is estimated that the disease affects roughly 27 million Americans.³ In New York state, 4 million adults live with doctor-diagnosed arthritis at an estimated cost of \$5.7 billion annually. It is particularly prevalent in older adults, affecting 1.4 million people age 65 and older. With the aging of the baby boomer generation, the incidence of arthritis is expected to increase dramatically.

³ Helmick CG, Felson DT, Lawrence RC, Gabriel C, Hirsch R, Kwoh CK, et al, for the National Arthritis Data Workgroup (2008). Estimates of the prevalence of arthritis and other rheumatic conditions in the United States: part I. *Arthritis and Rheumatism* 5, 15–25.

By 2025, it is estimated that older adults with doctor-diagnosed osteoarthritis will approach 4.1 million.⁴

The data concerning osteoarthritis (OA) and its prevalence, along with information gained from community needs assessments, partners and health agencies, motivated HSS to *design a new program specifically focused on osteoarthritis*. The objective of the program is to address modifiable risk factors by raising awareness of OA and providing OA patients with life style management strategies. The initiative benefits from existing partnerships with:

- Chinese America Planning Council
- New York Chapter Arthritis Foundation
- New York City Department of Health and Mental Hygiene
- New York City Department of Aging
- New York Road Runners Club
- The Translational Research Institute for Pain in Later Life (TRIPLL)
- Weill Cornell Medical College Clinical Translational Science Multi Institutional Consortium Community Engagement Research Core (CERO)
 - Hospital for Special Surgery
 - New York-Presbyterian Hospital
 - Memorial Sloan-Kettering Cancer Center
 - Hunter College School of Nursing,
 - Cornell University Cooperative Extension-New York City

Progress on OA Awareness and Intervention in Action Plan

HSS is pleased to report on this new public awareness and public health intervention program, which is making a significant

⁴ New York Department of Health (2010). *Arthritis in New York State*. Retrieved April 20, 2010 from <http://www.nyhealth.gov/diseases/conditions/arthritis/arthritis.htm>

contribution to the Prevention Agenda by focusing on this emerging and under-resourced area. Each specific project goal is presented followed by targeted accomplishments.

Goal 1: Increase public awareness of OA as a priority public health concern.

Assessing Community Knowledge and Beliefs: Public Response to Survey

HSS seized the opportunity to assess OA knowledge gaps among residents in its service area before the launch of the Arthritis Foundation, Ad Council, and American Council of Rheumatology sponsored public service campaign focused on preventing and slowing the progression of OA, which is described below. Using its Public and Patient Education database of community contacts, HSS sent 12,000 residents a one-page (front and back) questionnaire to assess knowledge of OA risk factors, symptoms, self-management and treatments. The questionnaire also inquired as to their interest in learning more about additional topics and attending specific health and wellness programs. Two hundred-sixty three (263) people responded to the community needs assessment (75 percent female, 12 percent male and 12 percent who did not indicate a gender.). Of these, 157 respondents were from New York City (10 from the Bronx, 23 from Brooklyn, 97 from Manhattan, 26 from Queens and one from Staten Island.) The majority of respondents (39 percent) were age 75 and over. Sixty-three percent of the respondents had been told by a health provider (doctor, nurse, etc.) that they have OA. Half of the respondents indicated that they are interested in learning more about OA. Preliminary analysis of the data suggests that there is a gap in basic OA knowledge, including recognition of risk factors, symptoms and common joints affected by the disease.

Recreational Athletes Response to Survey

Given the strong relationship between sports

related injuries and subsequent OA, HSS surveyed 248 runners about their knowledge of risks factors associated with an increased likelihood of developing osteoarthritis (OA). Of those, 90 percent were members of a running club and fifty percent had previously participated in marathons. A number of participants had a moderate risk of developing osteoarthritis because either they had injured either knee badly enough to have trouble walking for at least two days (39.1 percent) or had knee swelling that lasted more than one day in the past year (17.7 percent). However, sixty-eight percent of participants showed high awareness that knee injuries can increase the risk of developing osteoarthritis, especially when these injuries are ignored and left untreated (71.4 percent). HSS in partnership with New York Road Runners Club is currently in the program development phase incorporating data from this assessment.

Improving Access through Community Linkages

HSS has leveraged existing partnerships with the Weill Cornell Medical College's Translational Science Institute for Pain Later in Life (TRIPLL), Bronx Health Link, and local community groups to disseminate OA educational resources and the validated osteoarthritis risk assessment tool to over 1000 community members. Preliminary discussions with the Community Engagement Core (CERO) at Weill Cornell Translational Science Center have taken place in Year 1. In Year 2 a strategy will be developed using CERO networks with the primary focus given to reach medically underserved communities in NYC.

Goal 2: Educate the public about the spectrum of treatment options for OA from non-surgical to surgical management strategies and

Goal 4: Offering people with OA techniques to better manage the impact of the disease.

Hospital-based Osteoarthritis and Movement Programs

Integral to our mission, HSS education initiatives help improve the health, mobility, and quality of life for the communities it serves. Since the third quarter of 2009, HSS has offered 68 community education programs ranging from balance classes to lectures on managing OA reaching 1100 people focused on reducing symptoms and the progression of OA. Participant feedback is evaluated after each program and integrated in the development of future initiatives. A list of programs and workshops are found in Appendix 3.

Speakers Bureau

HSS' Speakers Bureau acts as a vital resource to New York's local non-profits and government agencies, providing expert speakers upon request to educate community members and health workers on a variety of topics related to the Hospital's expertise in maintaining mobility and improving quality of life. The Bureau provided a physical therapist and health educator to the New York City Department for the Aging to participate in their Save A Life Campaign seminars for health promotion, where over 100 seniors were educated on the benefits of exercise on bone health. In addition, Prime Care Home Health Agency, an organization that trains home attendants and aides to care for homebound elderly, engaged HSS physical therapists and a nutritionist through the Speakers Bureau to provide biweekly training sessions for their aides on topics including falls prevention and healthy eating. An average of 15 participants attended each training session. Participants were asked to fill out evaluations to gauge the learning experience. 100 percent rated the program as excellent and when asked to share something new about the subject matter they learned, participants reported learning about health and aging and expressed a strong interest in additional programming on arthritis. In addition, the HSS Speakers Bureau provided

a nutritionist to the Jewish Association for Services for the Aged (JASA), a senior center located on the Upper West Side, to speak to 50 older adults in their lunch program about how to buy and/or prepare nutritious meals on a limited income.

Goal 3: Help people with OA increase their knowledge of the disease.

Fight Arthritis Pain Campaign

Although OA can affect activities of daily living (from holding a job to holding a toothbrush) the condition is met with complacency and the misconception that aches and pains are an inevitable part of aging still remains. To increase awareness of the prevalence of OA, in February 2010, HSS endorsed the multimedia (television, radio, and print) public service campaign launched by the Arthritis Foundation, the Ad Council and the American College of Rheumatology. The purpose of the campaign is to empower people at risk or with OA to take simple steps to reduce pain, increase mobility and prevent disability caused by this disease. As a key stakeholder, HSS continues to promote the public health message that stresses the importance physical activity and weight reduction play in preventing and managing the pain associated with OA to New York City residents via health fairs and print media.

Goal 5: Implement OA life style and behavior management programs.

Self-Management Education: Arthritis Foundation Exercise Program

To educate residents of New York City's Chinatown community, HSS administered the Arthritis Foundation's Exercise Program, which is proven as an effective intervention strategy to decrease pain, improve function and reduce disability associated with OA, at the Chinatown Senior Center. The eight-week program was conducted once per week

in two-hour sessions and was led by an HSS Bilingual (Chinese speaking) Health Education Coordinator who was trained and certified by the Arthritis Foundation. Twenty Chinese-speaking seniors enrolled in this program designed to use gentle activities to increase joint flexibility and range of motion. Pre- and post-assessments were conducted; however, low literacy and linguistic differences (Chinese languages spoken other than Cantonese and Mandarin) presented challenges despite the on-site bilingual coordinator's assistance. Fourteen seniors completed the OA exercise program (93 percent female, 7 percent male). Eighty-six percent of the participants had been told by a health professional that they have some form of arthritis. Of these, 43 percent reported that they have OA, 29 percent reported having rheumatoid arthritis (RA), 7.1 percent reported having both OA and RA and another 7 percent reported having gout. Preliminary analysis suggests that the exercise program was effective at reducing pain and stiffness.

VOICES 60+ Senior Advocacy Program: Reducing Falls and Enhancing Doctor-Patient Communication

HSS's immediate service area – the Upper East Side and the Harlem area – are among the NYC areas where older adults are in great need of assistance. In fact, this area has the third highest rate of hospitalizations from falls (1,626/100,000), which is more than 40 percent higher than the city's overall rate (1,148/100,000). Similarly, the neighborhood has fall-related hip fracture hospitalization rates 20 percent higher than the rest of the City (560/100,000 vs. 454/100,000).⁵ Furthermore, the National Osteoporosis Foundation notes that hip fractures are on the rise among

⁵ New York City Department of Health and Mental Hygiene (2006). Community Health Profile, Second Edition: The Upper East Side. Retrieved July 31, 2010 from <http://www.nyc.gov/html/doh/downloads/pdf/data/2006chp-305.pdf>

Hispanics, with half of all Latinas older than 50 having low bone mass, a risk factor for falls. The average direct cost per fall is nearly \$9,400 nationally (National Osteoporosis Foundation).

The goal of VOICES 60+ is to enhance the medical care experience of low income, ethnically diverse (primarily Hispanic and African American) HSS patients 60 and older, by helping them to navigate and access the support, education, and community resources they need to manage their rheumatologic or musculoskeletal disorders to improve their quality of life.

The growing number of Americans age 55 and older presents an extraordinary opportunity to apply the Prevention Agenda and improve health. HSS proposes to meet the Prevention Agenda's challenge to reduce health care disparities through a targeted program that enhances the medical care experience of low income, ethnically diverse patients in its Ambulatory Care Center clinics and in the Upper East Side and East Harlem communities. Research affirms that these groups have experienced significant health disparities in terms of access to care, doctor-patient communication, and treatment adherence.

To advance the Prevention Agenda, HSS has expanded initiatives through its existing VOICES 60+ program priorities to:

Goal 1: Educate and raise awareness of ethnically diverse older adults on issues related to communication with their health care providers about arthritis and related needs with a specific focus on falls prevention.

Goal 2: Increase patient safety and support at home and in the social environment by linking older adults with community partners that provide language and culturally appropriate services.

VOICES 60+ continues to assess and implement initiatives to raise awareness of the needs of ethnically diverse older adults within the HSS patient population and community with a focus on the East Side of Manhattan. To meet the above stated goals, the VOICES 60+ team has met with key stakeholders at community based organizations, identified common goals, planned, coordinated and executed community workshops, and collaborated to develop culturally relevant homecare plans. We have accomplished this while gaining further knowledge of the needs of this population using a comprehensive patient satisfaction survey completed in May 2010. Through these initiatives, we have developed curricula for our presentations and created evaluation tools to assess satisfaction, increase knowledge and intended behavioral change as a result of these presentations.

Integral to the success of this initiative, VOICES 60+ has cultivated relationships centered on mutual goals with the following comprehensive community-based senior service programs, senior centers, home care agencies and senior residences:

- New York Foundation for Senior Citizens
- Senior Companions at Henry Street Settlement
- Greenberg Academy for Successful Aging
- Spanish Speaking Elderly Council – RAICES

UPDATES ON ACTION PLAN

VOICES 60+ identified two key challenges to accomplish our goals: 1) engaging isolated and underserved Spanish speaking residents and 2) developing outcome measures that were appropriate for low health literacy participants. The VOICES 60+ team overcame these challenges and developed a customized outreach plan to reach Spanish speakers, as well as created and pilot-tested evaluation tools designed for individuals with low literacy. The

following section highlights accomplishments towards each CSP goal:

Goal 1: Educating and raising awareness of ethnically diverse older adults on issues related to communication with their health care providers about arthritis and their related needs, including a focus on falls prevention, by collaborating with community service providers.

Falls Prevention and Improving Patient-Doctor Communication Workshops

From the fall of 2009 to the spring of 2010, VOICES 60+ conducted eight interactive workshops (five in English, three in Spanish) on falls prevention and ways to improve patient-doctor communication. The workshops were well attended, reaching 116 senior citizens. Our strategic outreach plan to contact 25 Spanish-speaking residents of New York Foundation for Senior Citizens Enriched Housing Program residence by phone in their preferred language yielded the best attendance by Spanish speakers (18) of programmatic activities in the building's history. We also learned that optimal scheduling of workshops needs to take into account senior center activities and should occur before mealtime in order to capture a larger audience.

A five-item assessment was administered after each workshop to measure knowledge, intended behavioral change and satisfaction with the workshop. Ninety-nine percent of Spanish-speaking and 83 percent of English-speaking seniors were "very much" satisfied with the falls prevention workshop. Similarly, 84 percent of Spanish-speaking participants indicated that they knew "very much" more about ways to improve communication with their doctors after the workshop, while 64 percent of English-speaking participants indicated that they knew "very much" more about ways to improve communication with their doctors after the workshop. Spanish-speakers also scored higher in behavior change

strategies to reduce falls, including "Put[ting] nightlights in bathroom and hallways (80 percent Spanish-speaking vs. 47 percent for English-speaking), and "Clear[ing] clutter from floors (80 percent Spanish-speaking vs. 47 percent for English-speaking). In piloting the assessment, VOICES 60+ staff began to read the assessment aloud to aid low vision participants.

Goal 2: Increasing patient safety and support at home and in their social environment, by linking older adults with community partners that will provide language and culturally appropriate services.

Home Care Referral Pilot

To pilot homecare referrals to a specific community partner, VOICES 60+ collaborated with Senior Health Partners (SHP), a non-profit organization sponsored by The Jewish Home and Hospital, Metropolitan Council on Jewish Poverty, and Mount Sinai Hospital, which helps older adults receiving Medicaid and who are eligible for home care to remain in the community by coordinating their medical services. The pilot helped identify communication strategies to be developed between HSS and SHP to track status and disposition of referrals. At the time this collaboration was launched, HSS's Department of Rehabilitation was not in network with SHP, which impacted continuity of care for these patients. The pilot results led to a communication strategy that ensures that once an intake nurse has made a visit to a referred patient, HSS receives notification of referral disposition. Additionally, HSS's Department of Rehabilitation became part of SHP's network, ensuring that there would be no coverage gap for patients referred from HSS. Subsequently, VOICES 60+ assessed patients HSS referred to SHP for their perceived feelings of safety. Patients reported that prior to the SHP referral, 71 percent felt "Somewhat" to "Not at All" safe," while 100 percent felt "Very" to

“Extremely” safe after the referral.

Professional Education

Evidence-based literature confirms the existence of disparities in healthcare provider communication with older adults. Further, a key theme that emerged from our in-depth qualitative needs assessment survey of 20 older adult patients, demonstrated that they had concerns about falls. They did not, however, communicate these concerns to their doctors. In light of this, VOICES 60+ decided to enhance its own clinical staff’s ability to screen and intervene in this area, and now our expertise is called upon to present models for other professional groups. To this end, we expanded our CSP goal to include staff development and professional education. VOICES 60+ partnered with Nimali Jayasinghe, PhD, Assistant Professor of Psychology in the Psychiatry Department at Weill Cornell Medical College. Dr. Jayasinghe is an expert in trauma and falls prevention. We utilized her expertise to train HSS staff on falls prevention strategies, review community presentations and collaborate on grant proposals.

For additional VOICES 60+ activities please see Appendix 4.

Charla de Lupus/Lupus Chat®

Lupus (systemic lupus erthematosus-SLE) is a chronic and potentially life-threatening autoimmune disease that can cause profound fatigue, joint pain, and organ failure that disproportionately impacts women of color. In fact, women of color are two to four times more likely to develop lupus than white women. Studies have shown that minority women experience more severe manifestations of lupus than do white women, such as renal involvement and higher mortality rates. Since 1994, The LUMINA (*Lupus in Minorities: Nature vs. Nurture*) research team studying a multi-ethnic U.S. cohort of African Americans,

Latinas, and White women has reported similar findings.

Seventy one percent of residents in Inwood and Washington Heights, the community targeted for this initiative, are Latino, as compared to 27 percent for New York City as a whole. In addition, teen pregnancy rates for African American and Latina teens are significantly higher than for white teens (149.3/1,000 African Americans and 130.6/1000 for Latinas vs. 29/1,000⁶). The birth rate of teenage mothers is higher than in the rest of the city. One in five residents in these communities are obese.⁷ These health disparities, therefore, led us to focus our initiatives on nutritional and reproductive health education for Latino adolescents diagnosed with lupus.

Charla de Lupus/Lupus Chat® (Charla) is the only national program offering people with lupus and their families peer health support and education in both English and Spanish. The program consists of Charla Line, which offers one-to-one support and education to adults, teens, and children living with lupus through its toll-free number, on-site outreach in community clinics; Charla Teen and Parent Lupus Chat Group; and multi-lingual publications.

Given these demonstrated public health community needs, the Charla program, already serving this population in Washington Heights, was in a unique position to further assess these specific issues in order to design effective intervention strategies. Our targeted goals are:

6 New York City Department of Health and Mental Hygiene (2002). Who is at risk? Teen Pregnancy in New York City. Retrieved July 31, 2010 from <http://www.nyc.gov/html/doh/downloads/pdf/fhs/treport.pdf>

7 New York City Department of Health and Mental Hygiene (2006). Community Health Profile, Second Edition: Inwood and Washington Heights. Retrieved July 31, 2010 from <http://www.nyc.gov/html/doh/downloads/pdf/data/2006chp-301.pdf>

Goal 1: Increasing routine health care, including gynecological visits, among Latina teenage women with lupus

Goal 2: Promoting awareness of improved nutrition through culturally relevant educational interventions

To accomplish these goals, the program team has engaged in ongoing discussions with their primary community partner, the Morgan Stanley Children’s Hospital of New York-Presbyterian, Pediatric Rheumatology Service. The pediatric rheumatology service has appointed a fellow to be the “point person” for this initiative, and we use monthly on-site meetings to update each other on progress. Their pediatric lupus clinic sees a large number of culturally diverse adolescents, many of whom are residents of the Washington Heights and Inwood areas, which have a largely Dominican population.

UPDATE ON ACTION PLAN

Goal 1: Increasing routine health care, including gynecological/reproductive health care visits, among predominately Latina teenage women with lupus

In meeting with the pediatric rheumatology team to define common goals and roles as well as our collaboration framework, the team identified several gaps that were important to address before moving ahead more specifically regarding reproductive health goals. There was a need to first address issues around a basic understanding of lupus, treatment and medication adherence, compliance with rheumatology appointments, and doctor-patient communication. In response, Charla shifted the scope of this goal to prioritize these expressed concerns.

Consequently, in the fall of 2009, the Lupus Chat Program in collaboration with Morgan Stanley’s team implemented a three-part (two-hour long) workshop series as a part

of our monthly Lupus Chat Teen and Parent Group meeting. Titled, *Gambling with Lupus*, the workshop series covered basic lupus knowledge, lupus and medications, and doctor – patient communication. Pre- and post-evaluations were administered which helped inform the content and direction of future sessions, and provided important assessment of outcomes. Morgan Stanley Children’s Hospital pediatric rheumatology staff played a major role in planning and implementation. There were two separate 40-minute break out sessions, one for teens and one for parents, that were co-facilitated by the Charla Program Associate and rheumatology fellow or attending physician.

Themes from the three programs (attended by 45, 50, and 39 program participants, respectively) included: the need for better understanding of medications, struggles with unpredictability of lupus, managing school and life and being sick, and issues surrounding medication side effects. Teens also expressed issues around communicating with their doctor and conveyed a sense of wanting to do the right thing, but also wanting to “be normal” and not have to think about being ill. Parents were mostly concerned about their children’s future regarding school and work, as well as managing challenges faced by their children in adhering to complex medication regimens.

These programs with Charla community participants further underscored and validated the concerns voiced by the pediatric rheumatology team at Morgan Stanley Children’s Hospital. In turn, Charla provided important feedback to the rheumatology team regarding these issues. Given this priority, in year 2 the Charla team plans to focus with its partners on the most effective strategies to more specifically address adolescent reproductive health concerns, together with the Audubon Family Planning Center and related community resources.

Goal 2: Promoting awareness of improved nutrition, through culturally relevant educational interventions.

To better understand issues related to Latina teens and nutrition, Charla conducted an in-depth literature review, and key informant interviews with Charla peer associates and staff related to our specific population of teens with lupus and their families. This framework helped to inform the design of a bilingual (Spanish) needs assessment tool, utilizing culturally appropriate language. The instrument also incorporated elements of nutritional assessment surveys developed by the U.S. Department of Agriculture. The purpose of the assessment was to enhance the understanding of the nutritional knowledge, practices, and preferences of our Charla teens and their parents. Charla also sought to assess their understanding of the impact of nutrition on various health conditions, and interest in a nutritional educational intervention. We incorporated valuable feedback from HSS' Education Division's Public and Patient Education Department, who developed the SNEAKER® program. Charla also presented the survey to its pediatric rheumatology team at Morgan Stanley for input before it was finalized. As an internal hospital partner, The SNEAKER® project team (see HSS Prevention Agenda Priority #1 for SNEAKER® program description) plays an integral role in the planning and implementation of this goal.

The survey was administered by phone in two versions: one for teens and one for parents. Over 90 teens and parents were contacted and 35 (11 parents and 24 teens) completed the survey. Significant themes emerged which will help to guide the nutritional education intervention planned for year 2. For example, there were many variances in presented opinions vs. actual practice, i.e. 88 percent of teens and 100 percent of parents expressed that eating healthy foods is important, and

91 percent of parents and 67 percent of teens expressed that nutritional value is a strong determinant in the food they buy, but when we look at the types of food they reported eating, it lead us to believe otherwise. For example, 63 percent of parents and 42 percent of teens say “the things I eat and drink now are healthy so there is no reason for me to make changes” yet 82 percent of parents and 33 percent of teens eat at fast food places one to three times/week, and 64 percent of parents and 50 percent of teens report ordering “take out” one to three times/week. Understanding of the influence of nutrition on lupus and various co-morbidities was variable.

In order to flesh out survey responses in greater depth, we subsequently held three small group discussions, two for Charla teens, and one for parents, which provided a depth of qualitative information. From both the survey and small group discussion, an interest was expressed in a nutritional educational intervention for four to six sessions. The Charla team will continue to meet with HSS' Public and Patient Education Department, which developed the SNEAKER® intervention, to adapt the program to the age range of the Charla group and to integrate knowledge of nutritional needs as they specifically relate to lupus risk issues. In addition, the group will work together on strategies to effectively provide the SNEAKER® intervention with both parents and teens while addressing differential language and developmental needs. The Morgan Stanley Pediatric Rheumatology team at NewYork-Presbyterian Hospital will play a key role in directing lupus-specific nutritional content in the curriculum in Year 2.

Additional Charla activities are outlined in Appendix 5.

LANtern® (Lupus Asian Network)

Lupus continues to be under recognized in the Asian American community, denying women at risk early diagnosis and appropriate treatment. While there are fewer studies involving Asian Americans with lupus than of other ethnic groups, national organizations specializing in rheumatic diseases consistently indicate that Asian Americans develop lupus at a rate two-to-three times higher than whites. Several peer-reviewed studies have reported an earlier onset of the disease, greater renal damage, and increased mortality.

According to the 2007 Census Bureau's American Community Survey data, over 12 percent of all New York City residents are Asian, roughly 1,046,082. According to NYC's Community Health Profiles, the Lower East Side, including Chinatown and the East Village, has the highest proportion of Asian residents (27 percent) of any neighborhood in Manhattan or in the five boroughs. The largest Asian group in New York City is Chinese (45 percent of all Asians), with 39 percent residing in Queens, 34 percent in Brooklyn, and 22 percent in Manhattan. Chinese New Yorkers face numerous barriers and health disparities, including poverty (19.6 percent live below the poverty line), limited English proficiency, and less formal education (33 percent of Chinese adults are without a high school diploma vs. 21 percent of overall city residents). When compared with the other 41 New York City Department of Health and Mental Hygiene's neighborhood community health profiles, the Lower East Side ranks below average on half the health indicators tracked.

LANtern® is the only national peer support and education program designed specifically for Asian Americans with lupus, reaching out to the Chinese community, the largest ethnic sub-group in New York City. Through its telephone Support Line, community education and outreach, and bilingual publications, the

program seeks to create and expand networks of hope and understanding concerning this complex illness, which is not well known and often misunderstood.

LANtern's public health initiative, therefore, is primarily focused on reaching the Chinese-American community through capacity building with key community stakeholders. Leveraging existing resources within its Community Advisory Board, the program solicits feedback and guidance from its board members toward meeting the goals of our CSP initiative. The multi-stakeholder board includes: the Charles B. Wang Community Health Center's Women's Health Department, NYU Langone Medical Center's Center for the Study of Asian American Health, The SLE Lupus Foundation, New York Downtown Hospital's Chinese Community Partnership for Health, and NYU Hospital for Joint Diseases, as well as consumer representatives.

UPDATE ON ACTION PLAN

Goal 1: Increase awareness of lupus as an important Asian American health concern through capacity building with targeted health care organizations, multi-service agencies, and professional and advocacy groups at the local, regional and national levels.

As outlined in our original community service plan timeline, LANtern's goal for the first year was to develop and formulate five to seven partnerships, and together define specific areas of potential collaboration for each partnership. LANtern has exceeded these original expectations in identifying the following 10 organizations - strategically selected in the areas of health care, social service, academic, professional membership, and government agencies.

The LANtern team developed a CSP overview resource tool that utilizes a flow chart diagram to visualize the plan, which was incorporated as part of the initial partnership meetings.

A tracking tool was also developed to assist in describing the alignment of preliminary objectives and the progress of action plans. Partnerships are in various stages of planning, coordination and implementation. Activities which have already taken place as a result of these partnerships are described in Appendix 6. The following is a list of LANtern partnerships and the specific areas of collaboration that have been defined for each partnership.

- **Chinese Community Partnership for Health, New York Downtown Hospital**
Enhance public awareness via community outreach and multiple media outlets, including radio, health fairs, onsite LANtern publications at NYDH, collaboration with their Health Hotline, and possible educational initiatives with HMO client populations.
- **Charles B. Wang Community Health Center's Women's Health Department**
As a member of CBWCHC's Women's Health Advisory Committee, LANtern's manager will have the opportunity to share specific collaborations, to expand knowledge of lupus among community service providers.
- **Center for the Study of Asian American Health, NYU Langone Medical Center**
Partnership discussion has focused on increasing lupus awareness for both health and social service providers, as well as a potential "Asian Lupus Wellness Day" for consumers.
- **Gouverneur Healthcare Services, New York Health and Hospitals Corporation**
Medical education/grand rounds for general internal medicine, women's health, pediatrics, and psychiatry.
- **U.S. Department of Health & Human Services' Office of Women's Health (OWH)**
OWH launched a highly successful National Lupus Awareness Campaign in March

2009, www.couldihavelupus.gov, to enhance early diagnosis and treatment of lupus among minority women. Hospital for Special Surgery is a community partner. LANtern has reached out to the OWH and with its permission, is working collaboratively with the Ad Council to develop their print ad campaign materials in Chinese, for utilization at various community outreach venues.

- **New York Chinese American Association, Inc.**
Annual public education forums to be held in Flushing, Queens, outreaching the Mandarin speaking community.
- **Chinese-American Planning Council (Manhattan and Brooklyn Branch)**
Staff in-service education to enhance provider awareness of lupus and public education for their targeted constituencies.
- **Asian Health & Social Service Council**
Lupus awareness programs for membership organizations and collaboration opportunity with fellow members. LANtern's manager has recently accepted an invitation to become a member of the organization's Executive Board.
- **Asian American Federation of New York**
Educational forum to enhance member organizations' awareness of lupus.
- **Asian American / Asian Research Institute, City University of New York**
Educational lectures and workshops for English speaking Asian-American public.

Goal 2: Develop and implement an informational strategy so that there is an ongoing communication vehicle to promote and sustain this awareness, in order to enhance opportunities to promote the need for early identification, diagnosis and treatment of this illness among Asian Americans. As stated in our original Community Service Plan, Goal 2 has been targeted for Year 2.

Additional LANtern activities are outlined in Appendix 6.

Hospital for Special Surgery's Non-Community Service Plan Activities

As a recognized leader in musculoskeletal medicine for more than a century, HSS has established an ongoing commitment to keeping our community healthy and well and providing patients with the highest standard of healthcare. Designed with the goal of increasing awareness, sharing knowledge, providing support and promoting healthier lifestyles for people within our community, **Annex A** includes a comprehensive list of HSS' Non-Community Service Plan Activities.

6. DISSEMINATION OF THE REPORT TO THE PUBLIC

To increase knowledge and promote healthier lifestyles, HSS is dedicated to designing, implementing, and evaluating state-of-the-art programs and community services, and to communicating these programs to diverse audiences as widely as possible. To that end, HSS produced a concise, easy-to-read overview of its comprehensive Three-Year Community Service Plan, which is available on the Hospital's website at <http://www.hss.edu/files/community-service-plan-2010.pdf>. HSS will produce a similar summary of its One-Year Update submission that will also be posted on the Hospital's website, which averages 270,000 unique visitors monthly. In addition, key CSP messages are promoted using a variety of mechanisms. Information

on community programs and services are disseminated at community health fairs and circulated to approximately 15,000 bi-annually in the Hospital's From Education to Empowerment brochure and annually in the HealthConnections newsletter.

7. CHANGES (ACTUAL OR POTENTIAL) IMPACTING COMMUNITY HEALTH, PROVISION OF CHARITY CARE, AND ACCESS TO SERVICES

Given the current economic situation, during the fall of 2008, HSS expanded its Financial Assistance program from at or below 400 percent of the federal poverty level to patients whose income is at or below 500 percent the federal poverty level. This is important due to the rising uninsured population; current statistics indicate that one out of three New Yorkers under the age of 65 are uninsured. In addition, the expansion of the Hospital's financial assistance program is potentially beneficial to the insured population due to the rising out-of-pocket costs for medical services, including deductibles and other forms of cost sharing such as co-payments and co-insurance. This remains unchanged from the previous year.

8. FINANCIAL AID PROGRAM

HSS is very proud of its commitment to provide financial assistance to qualifying patients and to ensure that the program is well-known to patients and communicated in the preferred languages of our patients.

One of the major successes of the HSS Financial Aid program is its visibility to patients. This is accomplished through extensive Hospital-wide signage posted in two languages in more than 50 locations throughout the facility. All patient bills—initial through final external collection

notices—contain a notice alerting patients to the existence of the program. This prominent visibility informs patients and their families of the program’s availability at any point—prior to treatment, during treatment, or post treatment. Keenly aware of patient cultural diversity, HSS has produced a financial aid summary in six languages for dissemination at all patient registration areas. Information about the program is also featured on the Hospital’s website at www.hss.edu

The creation of a dedicated team to work exclusively with patients has been a key to the program’s effectiveness. The three-person team is comprised of a manager and two associates, qualified to understand the complexities and options for each situation. This allows for a quick turnaround when making determinations regarding a patient’s eligibility for Financial Assistance. Equally important, the team has created and operationalized a unique database application that enables HSS to track and assess the Hospital’s compliance with its Financial Aid Program.

HSS extended its program beyond the state mandated levels of 300 percent of the federal poverty level to patients whose income is at or below 500 percent of the federal poverty level. Hospital policy is to also consider a patient’s insurance co-pay, deductible, and co-insurance potentially eligible for discount.

A major challenge faced is that despite the visibility of the program, many patients are reluctant to apply. As noted above, HSS continues to make clear the availability of the program and encourages clinical staff to refer patients who might be eligible to apply. A related program, VOICES Medicaid Managed Care Education, assists patients in navigating the complexities of public insurance programs. The education and advocacy provided through this program allow patients to obtain and maintain access to our specialty care. In addition, the program provides information, referral and advocacy regarding other options for the patients’ broader healthcare needs. The Financial Aid Program remains unchanged from the previous year.

ANNEX A NEW YORK STATE DEPARTMENT OF HEALTH COMMUNITY SERVICE PLAN

Advancing the Prevention Agenda: Hospital for Special Surgery Public and Patient Programs Reference Guide

Hospital for Special Surgery (HSS) offers a wide range of public and patient education, support groups and service programs. Annex A, which complements the HSS 2010 Community Service Plan DOH Report, presents a reference guide to non prevention agenda initiatives designed to assist patients and the community.

EDUCATING TO IMPROVE PATIENT AND PUBLIC HEALTH

Hospital for Special Surgery’s Public and Patient Education Department is a resource for educating and empowering patients, families and the public through enhancing awareness, promoting prevention and facilitating the early diagnosis and management of musculoskeletal conditions with the goal of enhancing quality of life. To accomplish this vision, the Department offers a variety of program topics and learning formats from osteoarthritis and sports injury prevention seminars, to posture workshops and yoga wellness classes. Programs are promoted in the semi-annual **From Education to Empowerment: Your Guide to Total Health and Wellness** program calendar of events.

In addition, *HealthConnection: Hospital for Special Surgery’s Good Health Newsletter* offers consumer health information, serving to inform the community on the latest

research in musculoskeletal health. Both print publications have a distribution of over 15,000 and are accessible via the Internet. Please go to www.hss.edu to get to the HSS Homepage, and then click on For Patients >> Classes and Programs. To be added to our mailing list to receive future publications, please call the Education Division at 212.606.1057 or email pped@hss.edu.

The HSS website also contains current health information on osteoarthritis, osteoporosis, sports injury prevention, rheumatoid arthritis, lupus and other musculoskeletal conditions.

HSS offers a schedule of public education programs, private classes, and alternative care services under the supervision of HSS physicians, physical therapists, and complementary care providers through the **Integrative Care Center (ICC)**. An HSS affiliate, the ICC combines conventional medicine and therapeutic approaches with complementary and alternative techniques such as acupuncture, Pilates, and massage therapy. The ICC is located at 635 Madison Avenue, between 59th and 60th Street in Manhattan. Information about events and classes is available at www.hss.edu/integrative-care.asp, or by calling 212.224.7900.

ENCOURAGING SAFE EXERCISE
HSS presents a variety of specialized offerings for all ages to encourage safe physical exercise and help people benefit from participation in sports. Pre-seasonal training programs are offered to the public through the HSS Rehabilitation Department’s **Sports Rehabilitation and Performance Center**. Players, coaches, and trainers of all levels learn how to optimize performance and prevent injury under the guidance of expert HSS therapists and certified strength and conditioning specialists. The hands-on workshops are held in the Sports Rehabilitation and Performance Center, located in the Hospital’s Belaire Building on the ground floor level. To learn more call 212.606.1005, or go to www.hss.edu/performance-center.asp.

The HSS Sports Rehabilitation and Performance Center has teamed up with the Police Athletic League to offer public high school students a **Pre-Season Football Medical Screening Combine**, performed by a staff of primary care physicians, orthopedic surgeons, pediatricians, certified athletic trainers, physical therapists, exercise physiologists, and registered nurses. Player evaluation and screening includes, but is not limited to, orthopedic screening, flexibility testing, and body fat % measurement, all offered at no cost. For more information, call 212.606.1005.

The need to bring the message of good nutrition and regular exercise to disadvantaged youth and their parents motivated the HSS **Women's Sports Medicine Center** to partner with the Wendy Hilliard Foundation in Harlem to design several events to promote the health and fitness of young girls from 5 to 16 years of age. For more information on the Women's Sports Medicine Center activities, call 212.606.1345 or go to www.hss.edu/womens-sports.asp.

To help people maintain the progress achieved in physical therapy, the HSS Rehabilitation Department's **Joint Mobility Center (JMC)** offers an Exercise Wellness Program for people who have completed their formal physical therapy and choose to continue under the guidance of JMC therapists. Call the Joint Mobility Center at 212.606.1213.

ASSISTING WITH ACCESS TO HEALTHCARE

Special Surgery's **VOICES Medicaid Managed Care Education Program**, offered by the Department of Social Work Programs, provides bilingual (English/Spanish) education, as well as support and advocacy, to assist patients in understanding and navigating their options under Medicaid managed care and empower them to maintain continued access to specialized healthcare for their arthritis and musculoskeletal conditions. Call 212.774.2011 or go to www.hss.edu/voices-managed-care for information.

HELPING PEOPLE WITH LUPUS Special Surgery's Rheumatology Division, through its **Mary Kirkland Center for Lupus Care** and its pioneering clinical and research initiatives, provides outstanding resources for people with systemic lupus erythematosus, a complex, chronic and life-threatening autoimmune disease that can affect multiple body

organs. Nine times out of ten lupus strikes women, who usually develop the disease between the ages of 15 and 45—Asians, African Americans, and Latina women are two-to-four times more likely to have lupus than Caucasian women.

As part of an integrative model of care, the Department of Social Work Programs offers the following support and education services.

LupusLine®, begun in 1988, is the only national telephone peer support program offering one-to-one emotional support and information to people with lupus across the country and internationally; the program links people who need the service with trained volunteers who have lupus or are a family member of someone with lupus. To access this HSS telephone peer counseling support and education program, call 866.375.1427 toll free, or log on to www.hss.edu/LupusLine for additional information.

The **SLE Workshop**, one of the country's oldest support and education groups for people with lupus, ongoing since 1985, offers free monthly meetings at HSS for individuals with lupus, their families and friends. Experts drawn largely from HSS faculty present on a variety of lupus related topics, followed by informal group discussion. More than 30 summaries of selected meetings are available by visiting www.hss.SLEWorkshop.

SUPPORT FOR SPANISH SPEAKERS

Charla de Lupus/Lupus Chat® is the only national program offering people with lupus and their families peer health education and support in both English and Spanish, bringing services to the historically underserved Latino and African-American communities. This multi-faceted program carries out its mission

through telephone peer support, outreach to community clinics, community-based support groups, professional and community lectures and presentations, and bilingual resources, including an award-winning teen booklet, available at www.hss.edu/charladelupus. For more information, call 212.606.1958 or 866.812.4494 toll free.

REACHING THE ASIAN-AMERICAN COMMUNITY

LANtern® (Lupus Asian Network) is the only national support and education program for Asian Americans with lupus. Lupus is a complex illness that affects Asian-Americans two-to-three times as often as Caucasians. Its SupportLine, a bilingual (Chinese-English) peer health education intervention, is complemented by its community collaborations. Educational publications, available in both English and Chinese, have been specifically developed by the program and are available in print or at www.hss.edu/lantern. For more information about LANtern®, call 212.774.2508 or 866.505.2253 toll free, or go to www.hss.edu/lantern.

Pediatric Orthopedic Clinic at Charles B Wang Community Health Center was established in 2004 to provide the growing number of Asian-American children living in Chinatown with access to orthopaedic care in a bilingual, bicultural setting within their community. An HSS bilingual (Chinese-English) medical translator and health educator provides support for the family at appointments and serves as the liaison for follow-up care. To date, over 500 children have received free orthopedic care through this program. For more information call 212.606.1057, or email pped@hss.edu or visit www.hss.edu/pediatric-outreach-program

CARING FOR CHILDREN AND FAMILIES

HSS treats many chronically ill children through its Department of Pediatrics and clinics in Pediatric Lupus, Pediatric Orthopedics, and Juvenile Rheumatoid Arthritis. The Hospital is an established leader in the treatment of cerebral palsy, osteogenesis imperfecta (brittle bone disease), familial dysautonomia (a rare genetic disease that results in serious bone and growth problems), spina bifida, congenital dislocation of the hip, club foot, scoliosis, and acute fractures. HSS's **Pediatric Social Work/Case Management Services** brings the services of a pediatric social worker to assist children and families to coordinate patient care, providing families with help and information.

Through the **Child Life Program**, the Hospital eases children's fears and creates a family-friendly supportive setting through recreational activities for young patients, siblings and family members. To help give young patients and their families a way to express their experiences, HSS publishes **SPECIAL KIDS**, a newsletter comprised solely of articles, drawings, and poems by pediatric patients who receive treatment at HSS. Contact the coordinator at montuoril@hss.edu, or call 212.606.1031.

HSS SCREENING PROGRAM PROVIDES NYC CHILDREN ACCESS TO FREE MUSCULOSKELETAL CARE

Since its inception over 23 years ago, Hospital for Special Surgery's **Leon Root, MD Pediatric Outreach Program (POP)** provide access to free health screenings for children between 3-12 years of age. The free program, the first of its kind, sends highly trained orthopedic teams from HSS into public schools and day care centers in Harlem, the Bronx, the Lower East

Side, Chinatown and Queens, to screen children for primary health and musculoskeletal problems such as scoliosis, leg length discrepancies and juvenile rheumatoid arthritis. To date over 24,000 children have been screened and over 3,500 children have received free orthopedic care. For more information about POP, contact the Education Division at 212.606.1057, or visit www.hss.edu/pediatric-outreach-program

Recognizing that obesity is an epidemic in New York City, POP, in collaboration with Special Surgery's Department of Public and Patient Education, provides bilingual nutrition education to those schools that have children identified as high-risk for obesity, to POP-participating schools, and throughout HSS pediatric departments. For more information about POP, contact the Education Division at 212.606.1057, or go to www.hss.edu

PEDIATRIC HEALTH CARE COALITION RESOURCE MANUAL

Concern for the city's children involves the Hospital in the **Pediatric Health Care Coalition**, a consortium of health care and service professionals from a wide variety of institutions that serve New York City's children and adolescents comprised of membership representing 28 organizations. In 2008, the organization published the 14th edition of the *Pediatric Health Care Coalition Manual*, a resource guide that includes information on New York City hospitals, insurance programs, foundations, and programs that provide free- and low-cost health care for children. The information is available at www.hss.edu

IMPROVING HEALTH AMONG OLDER ADULTS

VOICES 60+ SENIOR ADVOCACY PROGRAM
VOICES 60+ Senior Advocacy

Program, offered by the Department of Social Work Programs, is especially designed to assist ethnically diverse HSS patients, 60 and older, with arthritis and related orthopedic conditions. The program's goal is to enhance the medical care experience and improve quality of life by helping patients to navigate and access the care, community resources and education they need.

Contact VOICES 60+ by calling 212.774.7072. Program information is available at www.hss.edu/voices60

GREENBERG ACADEMY FOR SUCCESSFUL AGING

The **Greenberg Academy for Successful Aging** offers health education programs designed for adults age 65+ in the community. Offerings include free health care lectures such as "Hearing and Balance," workshops on "Healing through Art" and "Health Information on the Web" in addition to wellness classes on "Stretch Yoga for Older Adults."

Our **Speaker's Bureau** matches professionals to locations around New York City to present educational programs on pain management, diet and exercise, osteoporosis and arthritis. For further information click on www.hss.edu/greenberg, or call the Education Division at 212.606.1057.

REACHING PEOPLE WITH CHRONIC MUSCULOSKELETAL CONDITIONS

SUPPORT FOR PEOPLE WITH RHEUMATOID ARTHRITIS

To help patients with chronic illness and their families, the Hospital presents lectures and courses with the Arthritis Foundation-New York Chapter. The Department of Social Work Programs, in collaboration with the Division of Rheumatology

and Nursing, presents a free monthly education and support program for HSS patients with severe Rheumatoid Arthritis (RA) called *Living with RA*, now in its eleventh year, and unique in the New York metropolitan area. The group features RA-related lectures and is followed by a support group facilitated by a licensed social worker and nurse manager in rheumatology. Summaries of selected lectures are posted on www.hss.edu/rheumatology-arthritis-programs. For additional information about the program, visit www.hss.edu/RAGroup or call 212.774.2539.

INNOVATIVE PROGRAM FOCUSES ON EARLY INTERVENTIONS FOR RHEUMATOID ARTHRITIS

A more recent initiative launched in 2007, the “Early RA Workshop” is a program offered through the **Early Arthritis Initiative of the Gosden Robinson Inflammatory Arthritis Center (GRIAC)**, in collaboration with the Department of Social Work Programs and the Division of Nursing. This free workshop series focuses on early intervention for people with newly diagnosed RA by providing essential RA-related education and peer support. Selected lecture summaries are posted on www.hss.edu/rheumatoid-arthritis-programs, and written materials are available upon request. Information about these programs is also available on the GRIAC website, stoparthritis.hss.edu. For more information, visit www.hss.edu/EarlyRA or call 212.774.7378.

ASSISTANCE FOR PEOPLE WITH SCLERODERMA

Scleroderma is a chronic autoimmune disease of the connective tissue generally classified as one of the rheumatic diseases affecting an estimated 300,000 persons in the U.S. Approximately four times more women than men develop the disease. A joint effort between HSS

and the Scleroderma Foundation/Tri-State Chapter offers a monthly **New York City Scleroderma Support Group** for people coping with this long-term painful condition. To learn more, access www.hss.edu or, call the Education Division at 212.606.1057.

MYOSITIS SUPPORT GROUP

The Hospital’s Department of Social Work Programs offers the only support and education group in New York City for people with myositis, a rare chronic disease causing profound muscle weakness. The **Myositis Support and Education Group** helps patients cope with the disease, reduces isolation, and increases understanding of the inflammatory myopathies (polymyositis, dermatomyositis, and inclusion body myositis). The group meets monthly and is free. A special monthly newsletter is sent to all group members, and selected meeting summaries are posted on www.hss.edu/myositisgroup. For further information, call 212.774.7623.

HOLISTIC APPROACH TO TREATING SKELETAL DYSPLASIAS

The Kathryn O. & Alan C. Greenberg Center for Skeletal Dysplasias (“The Greenberg Center”), the first of its kind in New York City, brings together an interdisciplinary team committed to improving the quality of life for people with skeletal dysplasias through clinical care, research, education and patient advocacy. Skeletal dysplasias, a group of more than 300 genetic disorders, are characterized by differences in size and shape of the limbs, trunk, and/or skull that often affect stature. A unique staff-developed Mentoring Program for teenagers prepares high-school aged youth for independent adulthood, and assists young people through the college application process. To

contact the Greenberg Center, call 212.774.7332.

PREVENTING AND REDUCING OSTEOPOROSIS

LEADING THE WAY IN OSTEOPOROSIS PREVENTION AND TREATMENT

In New York State alone, at least 3 million people aged 50 and older either have osteoporosis or are at significant risk of developing osteoporosis, with women disproportionately affected. HSS serves as the **New York State Osteoporosis Prevention and Education Program (NYSOPEP) regional resource center** for the greater metropolitan area to raise awareness and develop and implement community based osteoporosis educational and research initiatives.

Recognizing that education is key to helping New Yorkers make choices necessary to achieve healthy bones and wellness for a lifetime, the **HSS Annual Bone Health Seminar** brings together clinical experts to discuss osteoporosis prevention and management.

A valuable **HSS-NYSOPEP Osteoporosis Support and Education Group** meets monthly at the Hospital, enabling the public to learn from HSS healthcare professionals about nutrition, prevention, drugs, treatment options, exercise and psychosocial support. Information about osteoporosis programs as well as health information in English, Spanish, and Chinese are available on www.hss.edu/nysopep.asp or by calling the Education Division at 212.606.1057.

The Osteoporosis Prevention Center (OPC), the first of its kind in the nation, brings together HSS expertise on three fronts: research, treatment and prevention. Located within

the **HSS Integrative Care Center** on 635 Madison Avenue, between 59th and 60th Street in Manhattan, the OPC takes a multidisciplinary approach to treatment and prevention. The OPC has received facility accreditation for bone densitometry from the International Society for Bone Densitometry (ISCD) for excellence in the provision of skeletal assessment services. For more information, call 212-224-7935, or visit www.hss.edu.

HEALTHY HABITS FOR YOUNG PEOPLE

HSS, in concert with its partners and New York State, originated a number of initiatives to combat obesity aimed at different age

Further information about the HSS programs and services described can be obtained by contacting **Deborah M. Sale**, Executive Vice President, External Affairs, Hospital for Special Surgery, 535 East 70th Street, New York, NY 10021, 212-606-1321.

groups, particularly children and adolescents through New York City public schools, community centers, and with the Girl Scout Council of Greater New York. One of these, **Super Nutrition Education for All Kids to Eat Right**—abbreviated **SNEAKER**®—aims to prevent obesity and encourage good health by

improving calcium and Vitamin D consumption and exercise habits in grade school children. The program has reached over 6,500 children to date.

The SNEAKER® Project website includes print materials for teachers, students and caregivers. In addition, through the website the public can submit their own healthy recipes to be considered for inclusion in upcoming SNEAKER® activity books and cookbook web-editions, which are published in English and Spanish. Information is available at www.hss.edu/SNEAKER or by calling the Education Division at 212-606-1057.

APPENDIX 1

Hospital for Special Surgery's Community Partners

CLINICAL/ACADEMIC PARTNERS

AUDUBON FAMILY PLANNING CENTER, NEWYORK-PRESBYTERIAN HOSPITAL AMBULATORY CARE NETWORK COLUMBIA UNIVERSITY MEDICAL CENTER

The NYPH Family Planning Center provides comprehensive women's and young men's health care services including primary health care and confidential reproductive health care for adolescents through the Young Adult Clinic and Young Men's Clinic.

ASIAN AMERICAN/ASIAN RESEARCH INSTITUTE, CITY UNIVERSITY OF NEW YORK

The Asian America/Asian Research Institute is a university-wide scholarly research and resource center that focuses on policies and issues that affect Asian and Asian Americans.

CENTER FOR THE STUDY OF ASIAN AMERICAN HEALTH, NYU LANGONE MEDICAL CENTER

The Center conducts research, training and leverages community partnerships to identify and help reduce Asian American health disparities. The Center organizes national conferences addressing Asian American health and health disparities, and builds capacity through partnerships to promote community wellness

CHARLES B. WANG COMMUNITY HEALTH CENTER

CBWCHC is a NYC community-based health care center nationally known for its culturally relevant,

affordable health care and education for Asian immigrants. The CBWCHC's Women's Health Department provides a wide array of primary and specialty services at their clinics in Manhattan's Chinatown and their site in Flushing, Queens, to immigrant women with limited resources. The Department also sponsors many outreach and health education programs to promote and increase the Asian community's awareness of women's health issues.

CHINESE COMMUNITY PARTNERSHIP FOR HEALTH, NEW YORK DOWNTOWN HOSPITAL

CCPH was formed through a collaboration of New York Downtown Hospital with 32 leading Chinese business, civic and family associations. It is a community-based initiative to enhance the delivery of health care to New York's Chinese community. Many of the people CCPH has served are new to this country, with limited English ability and financial resources. Among its many activities, CCPH partners with organizations to conduct educational programs, and maintains a Chinese language health hotline.

CLINICAL TRANSLATIONAL SCIENCE CENTER, COMMUNITY ENGAGEMENT CORE, WEILL CORNELL MEDICAL COLLEGE

- Hospital for Special Surgery
- New York-Presbyterian Hospital
- Memorial Sloan-Kettering Cancer Center
- Hunter College School of Nursing

- Cornell University Cooperative Extension- New York City

The Clinical and Translational Science Center (CTSC) is a multi-institutional consortium with a mission to provide an environment that allows optimal use of our considerable multi-institutional assets and the diversity of its patient population to move translational research seamlessly from bench to bedside and to the community. The CTSC acts as a conduit through which essential resources, technological tools and education programs for all partners can be efficiently shared and managed.

GOUVERNEUR HEALTHCARE SERVICES, NEW YORK CITY HEALTH AND HOSPITALS CORPORATION

Gouverneur Health Services is the largest freestanding ambulatory care clinic in NYC's HHC system, serving about 50,000 patients each year, who are primarily Chinese and Hispanic immigrants, adults and pediatrics.

GREATER NEW YORK HOSPITAL ASSOCIATION

Greater New York Hospital Association (GNYHA) is a one-of-a-kind trade association comprising nearly 300 hospitals and continuing care facilities, both voluntary and public, in the metropolitan New York area and throughout the State, as well as New Jersey, Connecticut, and Rhode Island.

NEW YORK-PRESBYTERIAN MORGAN STANLEY CHILDREN'S HOSPITAL, PEDIATRIC RHEUMATOLOGY SERVICE

The Division of Pediatric Rheumatology, internationally renowned, has a large clinical service, an active research program, and a Pediatric Rheumatology Fellowship program. Their Lupus Clinic serves culturally diverse children and adolescents, many of whom are Latino (Dominican) and live in the Washington Heights and Inwood areas of Manhattan.

TRANSLATIONAL RESEARCH INSTITUTE ON PAIN IN LATER LIFE

The Translational Institute on Pain in Later Life (TRIPLL) is one of 12 Edward R. Roybal Centers for Translational Research on Aging funded nationwide. The purpose of the Centers is to support research activities that lead to programs, policies or practices focused on improving the health and wellbeing of older Americans. TRIPLL builds on the work of the Cornell Institute for Translational Research on Aging (CITRA, www.citra.org), a Cornell Roybal Center, founded in 1993.

COMMUNITY-BASED PARTNERS

ARTHRITIS FOUNDATION- NEW YORK CHAPTER

The Arthritis Foundation is the only national not-for-profit organization that supports the more than 100 types of arthritis and related conditions. It is also the largest private, not-for-profit contributor to arthritis research in the world, funding more than \$380 million in research grants since its founding in 1948. The foundation helps people take control of arthritis by providing public health education; pursuing public policy and legislation and conducting evidence-based programs to improve the quality

of life for those living with arthritis.

ASIAN AMERICAN FEDERATION OF NEW YORK

Asian American Federation of New York is an umbrella advocacy and philanthropy organization that advances the civic voice and well-being of all Asian Americans in New York. It undertakes research to inform policies, and augments the ability of its member agencies to address community needs and concerns. The Federation's Census Information Center (CIC) is the only federally-designated Asian American focused center of its kind in the Northeast that offers a searchable online databank, publishing population profiles, issuing briefs, and responding to inquiries.

ASIAN HEALTH & SOCIAL SERVICE COUNCIL, INC.

The Asian Health & Social Service Council is a professional membership organization with the goals to address current social and health service issues affecting the Asian community, and to improve the quality of services available through education, advocacy, service coordination and interagency collaboration in Greater New York.

CHINESE AMERICAN PLANNING COUNCIL

The Chinese-American Planning Council (CPC) was founded in 1965 as a grassroots community-based organization in response to the tremendous influx of Chinese immigrants after the change in immigration laws. CPC is now a large multi-social service organization, which serves the Chinese community through their offices in Manhattan's Lower East Side, Brooklyn and Queens.

EAST HARLEM INTERAGENCY COUNCIL ON AGING

The East Harlem InterAgency Council on Aging (HICA) is

one of eight interagency councils in the Borough of Manhattan. It is an independent, not-for-profit organization that represents a diverse coalition of consumers, providers and advocates that deliver and oversee services to elderly New Yorkers in their communities.

EAST SIDE COUNCIL ON THE AGING

The East Side Council on the Aging (ESCOTA) is one of eight interagency councils in the Borough of Manhattan. It is a voluntary non-profit organization made up of representatives from community, health, religious, private, civic and social service organizations that work with older adults and their families on the Upper East Side of Manhattan and beyond. The purpose of ESCOTA is to encourage the coordination and expansion of health, legal and other life enhancing services to older adults in order to improve their lives through educating service providers to current problems and their solutions.

NEW YORK CHINESE AMERICAN ASSOCIATION, INC.

The New York Chinese American Association (NYCAA) is a not-for-profit grassroots organization staffed by volunteers who are Chinese/ Taiwanese American professionals. NYCAA's mission is to address social and health disparities through community education and advocacy work for Chinese immigrants.

NEW YORK FOUNDATION FOR SENIOR CITIZENS

The New York Foundation for Senior Citizens is a non-profit, non-sectarian organization that provides enriched and independent living residences for low-income ethnically diverse older adults throughout New York City's five boroughs.

NEW YORK ROAD RUNNERS CLUB

The New York Road Runners Club (NYRR) is one of the world's premier running organizations, with more than 45,000 members, a year-round calendar of races including the famed ING New York City Marathon, fitness offerings for all members of the community, and a running program serving 30,000 children in New York City and around the world

SENIOR COMPANIONS AT HENRY STREET SETTLEMENT

Senior Companions at Henry Street Settlement is a federally funded program that offers free companion services provided by older adult volunteers who help homebound, elderly individuals live independently. Services include friendly visiting, shopping assistance, and escort to doctor appointments or other community activities. Sponsored by Henry Street Settlement and funded through the Corporation for National and Community Service, the Senior Companion Program is available in all of New York City's five boroughs.

SENIOR HEALTH PARTNERS

Located in East Harlem, Seniors Health Partner is a not-for-profit organization sponsored by The Jewish Home and Hospital, Metropolitan Council on Jewish

Poverty and The Mount Sinai Hospital that is designed to allow Medicaid recipients eligible for nursing home care to remain in the community.

SPANISH SPEAKING ELDERLY COUNCIL- RAICES

The Spanish Speaking Elderly Council-RAICES ("RAICES"), is a not-for-profit organization incorporated in New York State, and was first developed as a volunteer advocacy senior citizen council in 1978 by retired Hispanic senior citizens who saw the need for an organization that would provide services, educate and organize the Latino, minority and low income aged.

GOVERNMENT/PUBLIC PARTNERS

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

The New York City Department of Health is one of the country's oldest public health agencies and has over 200 years of leadership in the field serving 8 million New Yorkers from diverse ethnic and cultural backgrounds.

NEW YORK CITY PUBLIC SCHOOLS

The New York City Department of Education is the largest system of public schools in the United

States and serves one of the most diverse groups of students totaling 1.1 million in over 1,600 schools. HSS partners at the local level with public schools in the Manhattan and the Bronx.

NEW YORK PUBLIC LIBRARY

The New York Public Library has 89 locations including four research centers – focusing on the humanities and social sciences; the performing arts; black history and culture; and business and industry – and a network of neighborhood libraries throughout the Bronx, Manhattan, and Staten Island. HSS partners with regional branches on health awareness campaigns.

OFFICE ON WOMEN'S HEALTH (OWH), U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

Established in 1991, the mission of the OWH is to "provide leadership to promote health equity for women and girls through sex/gender specific approaches." The strategy OWH uses to achieve its mission and vision is through the development of innovative programs, by educating health professionals, and motivating behavior change in consumers through dissemination of health information.

APPENDIX 2

Hospital for Special Surgery's Community Service Plan Team

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APPENDIX 3

Osteoarthritis Awareness and Intervention in Action Programs Fall 2009-Spring 2010

Hospital for Special Surgery Education Division's Public and Patient Education Department offers a wide variety of free or low-cost wellness programs to the community focusing on movement and osteoarthritis. Educational formats include workshops, lectures and exercise wellness classes.

Workshops are designed to offer an opportunity for participants to learn in small groups led by health professionals teaching useful tools for preventing and managing health issues ranging from falls prevention and nutrition to osteoarthritis prevention and treatment. **Lectures** are designed to offer programs on more general topics in a larger group setting, averaging 50-75 participants. Many of these programs are facilitated either as a collaborative effort with internal departments or

outside community agencies such as the Arthritis Foundation's New York Chapter. **Wellness classes** are intimate movement classes, offered 1x per week (maximum 15 participants). Each program is evaluated by participants for content, knowledge and some programs (when applicable) for the likelihood to make behavior changes.

Geriatric Training for Orthopedic Residents

This program began as a two year pilot project addressing sensitization of third-year orthopedic residents to the needs of the geriatric patient. The Greenberg Academy partnered with the HSS Academic Training Department to develop the training curriculum. As part of the training program residents were required to present lectures and workshops to

Greenberg Academy participants (65 and older) and hone their skills in connecting to, understanding and being empathic to the older adult. The residents were evaluated after every presentation by participants and the Greenberg Academy program coordinator. From Sept 09 to June 10, eight third-year orthopedic surgery residents presented four talks to 170 older adults. The following is a brief summary of the results.

Surgical and Non-surgical Options for Osteoarthritis had 37 people registered for this program. Of those that provided feedback, 100% felt that the overall program was "excellent" or "good" and that the speakers were knowledgeable on the topic. 93% felt that the presenters were easy to understand and that the audience questions were answered

to their satisfaction.

Staying Injury Free as an Older Adult had 69 people registered. Of those that provided feedback, 100% felt that the speakers and overall program were "excellent" or good," knowledgeable on the topic, easy to understand and that the program was "just right." Eighty-six percent felt they learned something new including "the benefit of exercise".

Exercises for Older Adults with Osteoarthritis was limited to 30 participants in order to accommodate and give full attention to each participant. Two residents gave a 30-minute overview of osteoarthritis followed by an hour-long hands-on demonstration of exercises and movements to aid with the prevention and pain of osteoarthritis. Prior to the workshop, the residents consulted with an HSS physical therapist to ensure that the exercises were appropriate for participants and in conjunction with Physical Therapy Department recommendations. Of those that provided feedback, 100% felt that the program was "excellent" or "good", that the audience questions were answered to their satisfaction, the speakers were easy to understand, that they demonstrated the exercises well and assisted participants if they needed help. 91% felt they learned something new. One participant commented, "I came last year. I've been doing these exercises [and learned] how much stronger I am!"

Exercises for Older Adults with Osteoporosis was also open to 30 participants and followed the same format as the "Exercises for Older Adults with Osteoarthritis," including consultation with an HSS physical therapist. 100% of respondents felt that the lecture was "excellent" or "good" and that the speaker was easy to understand. 82% said that they would recommend this program to a friend.

Living with Osteoarthritis October 6, 2009

Led by a team of HSS rehab specialists and a nutritionist, 53 participants attended this lecture, which was designed to teach participants OA management strategies including weight management and physical activity. Based on the post-program evaluation, pain management of osteoarthritis is a primary topic of interest, which will be incorporated into future programming.

Hip Pain: What are the Causes? April 8, 2010

To reduce the proportion of adults who have difficulty in performing activities of daily living, HSS presented a lecture to 63 community members on common causes of hip pain, pain management strategies and treatment options for hip pain.

17th Annual National Senior Health & Fitness Day May 26, 2010

HSS was once again chosen to be a NYC site to host this event. This half-day program offered lectures and wellness classes to 50 older adults. Lectures included, "Overview Of Osteoarthritis and its Management" and "Healthy Eating for Healthy Aging". Two wellness classes were offered, including "Dance for Fitness and Fun" led by our Dance Instructor/Therapist and "Chair and Low Impact Exercises" taught by HSS physical therapists. A healthy breakfast and snacks were provided along with health literature. Of the participants that filled out feedback forms, 100% felt that the overall program was "excellent" or "good" and that the presenters were knowledgeable and easy to understand.

Health Information on the Web Fall 2009-Spring 2010

Three workshops entitled "Health Information on the Web" were offered during this time period

with a total of 21 registrants. Using the Weill Medical Center's computer room, the HSS librarian taught participants, most of whom do not own a computer, how to access credible health information including diseases, treatments, medications, best prices for medications at local pharmacies and how to look up their doctors profiles. Many registrants repeat this course and are encouraged to further hone their new skills by going to local libraries or senior centers to practice. The goal is to have this older population become active partners in their care who possess up-to-date medical information and come to their appointments armed with questions to ask their physicians. We will continue to offer this course and increase it to 2 hours (from 1.5 hours) to further allow more practice and learning.

Dance for Fitness & Fun Fall 09 – Spring 2010

Studies have shown that dance maintains cardiovascular fitness, enhances emotional well-being, strengthens weight-bearing bones and slows loss of bone mass. Eleven "Dance for Fitness & Fun" classes were offered from Sept 09-June 10 with a total of 32 registrants. These gentle dance classes, specifically designed for adults age 65 and older, begin with a fun warm-up session followed by instruction on different types of dances, including the Tango, Merengue, Rumba and Waltz. These classes teach ballroom dancing while improving balance.

Spring 2010 Workshop Series: Sit and Get Fit: Chair Tai Chi, Chair Yoga and Chair Pilates

Taught by certified instructors, this series was designed for people who could not or did not feel comfortable getting down on the floor for exercise. Chair Yoga introduced gentle yoga postures that stretch and strengthen muscles. Chair T'ai Chi Chih® included

simple, rhythmic movements associated with improved balance, strength, flexibility and maintenance of bone mass. Chair Pilates focused on strengthening the core, making movements more fluid and balancing the body, all coupled with focused breathing patterns. This workshop series went beyond typical exercises in that it encourages quiet reflection, proper breathing and better posture in the comfort and safety of a chair, an alternative way for people with physical limitations to experience the benefits of these exercises. In total 32 community members participated in the workshops. Post program data was compiled and majority of participants are looking for programming designed specifically for arthritis more than other chronic conditions.

Wellness Classes: Fall 2009-Spring 2010

Recognizing that movement plays an important role in maintaining musculoskeletal health and mobility—especially for those with chronic illness and for older adults, the Education Division offered the following exercise and movement classes.

Beginner and Advanced Pilates
Pilates is a series of specific movements designed to strengthen the powerhouse: muscles of the abdomen, back and waist (torso). Beginner Pilates focuses on strengthening the core, making movements more fluid and balancing the body, all coupled with focused breathing patterns. Advanced Pilates is recommended for the beginning Pilates mat student who has a clear understanding of the basic fundamentals and exercises,

but needs to work on improving strength and flexibility. A total for 103 people participated in these sessions.

Gentle Yoga to Ease Arthritis

The slow, controlled, physical movement of yoga can provide pain relief, relax stiff muscles, ease sore joints and help build strength. The movements, poses, stretches and deep breathing relaxation techniques can also provide needed range-of-motion exercise and improve blood circulation. This class is designed to ease participants into gentle stretches from lying, sitting and standing positions. Hands-on correction from the instructor is provided when needed. Movements are modified to meet specific needs. A total for 51 registrants participated in these sessions.

Tai Chi Chih Level 1, 2 and 3

These simple, rhythmic movements provide benefits including improved balance, strength, flexibility and maintenance of bone mass. The Level I class is designed for participants new to T'ai Chi Chih. Level II is planned for participants that have an understanding and comfort with the basic movements, and Level III will begin to incorporate more advanced styles of T'ai Chi and is specifically designed for those who have completely mastered the previous levels. A total of 155 seniors participated in the program.

Beginner and Advanced Yogalates

Yogalates is a popular form of exercise that blends the best of yoga and Pilates. Both techniques combine to help improve stamina and posture while developing a general sense of well-being. In the beginner level class, participants

focus on integrating breathing with movements and basic stretching, and learn the importance of core muscle strength for better posture. In the intermediate level class, the focus is on elements learned in the beginner level class, along with more advanced movement sequences to improve strength and flexibility. A total of 99 participants benefited from this program.

Stretch Yoga for Older Adults

This class offers stretching and toning with simple, gentle body movements that combine sitting, standing and lying down positions (if able) to help participants feel active, energized and relaxed. Twenty-four classes were offered from Sept 09 through June 10 with a total of 38 people registered. Of those that provided feedback, 100% rated the program as “excellent” or “very good.” In fact, the class was so successful that participants requested a summer session, which will be offered for the first time in Greenberg Academy history! The classes will again be offered next year with fewer gaps between series.

Better Balance for Older Adults

This class consists of unique exercises selected for individuals who would like to increase their balance control, and decrease the risk of falls. The program incorporates a set of slow, simple movements adapted from a variety of Eastern modalities including: Yoga, T'ai Chi Chih and Chi Gung. Chairs are provided to hold for balance, if necessary. Eight classes took place from Sept 09 to through June 10 and 28 people registered. Of those that provided feedback, 100% felt that the program was “excellent” or “very good”.

APPENDIX 4 VOICES 60+ Senior Advocacy Program Fall 2009-Spring 2010 Initiatives

Greenberg Academy for Successful Aging Collaboration

Senior Health Fairs: Fall 2009

Approximately 700 ethnically diverse older adults were presented health information on HSS community programs and referral resources.

Senator Liz Krueger— Senator Liz Krueger invited HSS and the Greenberg Academy to participate in a Resource Fair for Seniors & Caregivers held in Temple Emmanuel on the Upper East Side. Designed for older adults, this fair represented NYC services for seniors and hospitals, including New York Presbyterian Weill Cornell Medical Center, Lenox Hill and Mount Sinai.

Assemblyman Jonathan Bing— Assemblyman Jonathan Bing sponsored a Senior Health Fair for his constituents on the Upper East Side of Manhattan. Consumers received free health screenings for Osteoporosis, Blood pressure, cholesterol and glucose.

Hospital Based Falls Prevention Program: Fall 2009/Spring 2010

Offered through the Greenberg Academy for Successful Aging, Juliette Kleinman, LCSW facilitated 2 Falls Prevention Strategies workshops that reached 25 participants. The Fall 2009 program was provided to members of Greenberg Academy and was a workshop in a series of 5 sessions focused on various modalities to address falls prevention. An additional presentation was provided by Juliette Kleinman, LCSW “Falling: From Fear to Confidence.”

Comprehensive Bilingual Telephone Satisfaction Survey May 2010

A comprehensive bilingual (English Spanish) patient satisfaction survey completed to measure patient satisfaction and impact of VOICES 60+, user demographics, perceived safety at home before and after community referral, and satisfaction with community resources.

Spanish Speaking Elderly Council - RAICES

Linkage agreement has been signed and appropriate patients have been referred to this mental health agency providing services to Spanish speaking older adults.

Activities for Professionals

The following activities reflect our expanded scope to educate and influence professional practice through training:

October 1, 2009: Fall Prevention Strategies” facilitated by Nimali Jayasinghe, PhD, Weill Cornell Department of Psychiatry to HSS Interdisciplinary team: Social Work, Nursing, Program Associates, and HSS Volunteers. This was staff development training.

October 27, 2009: “Utilizing Culturally Sensitive Best Practices When Working with Ethnically Diverse Caregivers and Family” panel presentation by Juliette Kleinman, LCSW, ACSW to the New York Metropolitan Chapter of the Society of Social Work Leadership in Healthcare, Fall Educational Conference. Also posted on HSS website and May 2010 HSS Newsletter.

February 2, 2010: Bouncing Back”: A Brief Personalized Approach

to Helping Older People After a Fall” Nimali Jayasinghe, PhD and Juliette Kleinman, LCSW, ACSW co-investigators for a grant proposal for CTSC- Clinical & Translational Science Center, a multi-institutional Consortium at Weill Cornell Medical College. Grant submitted 2/5/10. Although funding was not received, we benefited from the opportunity to conceptualize strategies for intervention that could be tested, in collaboration with our partner Nimali Jayasinghe, PhD and will seek to keep abreast of further research opportunities.

March 17, 2010 “A Hospital-Based Program to Address Health Disparities among Culturally Diverse Older Adults” a poster presentation by Juliette Kleinman, LCSW, ACSW for Aging in America National Conference, National Council on Aging and American Society on Aging National Conference on Aging, Chicago, IL.

April 22, 2010 “Assessing Falls Risk and Intervention Techniques” facilitated by Nimali Jayasinghe, PhD to HSS Interdisciplinary team: Social Work, Nursing, Program Associates, Volunteers HSS for a staff development training.

Education for Patients with Chronic Illness

March 10, 2009: Myositis Support Group. Myositis involves the inflammation of muscles. Affecting mainly the voluntary muscles (muscles that innervate the arms and legs), patient with this condition are at greater risk for falling. Juliette Kleinman, LCSW, ACSW presented “From Fear of Falling to Confidence to members of the HSS Myositis Support Group.

APPENDIX 5

Charla de Lupus/Lupus Chat® Programs Fall 2009-Spring 2010 Initiatives

Since 2002, the Charla program offered monthly community support and education group programs for adolescents with lupus and their family members at the Morgan Stanley Children's Hospital of New York Presbyterian, located in the Washington Heights section of Manhattan.

Lupus Chat Groups for Teens and Parents **"Gambling with Lupus": A three-part series**

The three-part "Gambling with Lupus" series was developed in close collaboration with their pediatric rheumatology team, who played a key role in the development of curricula, program implementation, and outcome measures. The focus was to assess and enhance illness knowledge, and engagement/adherence to often complex treatment regimens. Bilingual (Spanish) interpretation is made available.

Part 1: Let's Talk About Lupus October 15, 2009

This session included three pediatric rheumatologists presenting an overview of lupus, with Q & A. Forty five attendees participated in this program (23 teens, 7 parents, 15 visitors including medical staff).

Part 2: Medications November 19, 2009

Pediatric rheumatologists presented an overview of medicines used to treat lupus, and their side-effects. Three break-out groups facilitated by Charla staff and attended by physicians also provided an informal opportunity for sharing questions. Fifty participants attended this

program (25 teens, 18 parents, visitors incl. medical staff).

Part 3: Wrap Up January 21, 2010

Based on responses to pre and post knowledge evaluations, content was developed for this session to follow-up on gaps in knowledge, assessment of barriers to optimal health care, and skill building activities to address related concerns, with pediatric rheumatologists leading the session. This included scripting and role-playing strategies. Thirty-nine attendees participated (14 teens, 7 parents, 18 visitors including medical staff).

Additional programs related to Charla Community Service Plan goals

Talking with Your Doctor: February 18, 2010

Parents and teens comprised separate groups to each share ways to maximize time with their doctor, and address any challenges in communication. Issues related to adherence to appointments, communication skills, self-advocacy, and ways to best obtain and understand information were reviewed. The program was attended by 34 participants (18 teens, 8 parents, and 8 visitors and medical staff).

Project Sunshine, founded in 1998 in New York City, empowers a dedicated corps of over 10,000 volunteers to bring programming – recreational (arts), educational (tutoring and mentoring) and social service (HIV and nutritional counseling) – to over 60,000 children facing medical challenges

and their families in 100 major cities across the United States, and in five international satellite sites: Canada, China, Israel, Kenya and Puerto Rico. Project Sunshine maintains partnerships with 175 hospitals and medical facilities. The Charla program has engaged Project Sunshine in many diverse programming initiatives, such as the following, enriching the lives of our teens and their families.

Parent "Self-Care" Spa Day: April 8, 2010

Caring for a child/adolescent with a serious chronic illness like lupus can be very challenging. Attended by 15 parents, this program, offered in collaboration with Project Sunshine offered nutritional snacks, instruction in relaxation techniques, and massage. In addition, at this session, there were small discussion groups with parents related to fleshing out key questions from our nutritional needs assessment survey. **Sunshine Chefs: May 20, 2010** Also sponsored by Project Sunshine in which "Sunshine Chefs" joined the group to discuss the culture of healthy cooking, in the context of cultural preferences. The Sunshine Chefs program is designed to promote improved eating habits in children and families, with an opportunity for participants to create various dishes related to the theme. Thirty seven participants attended (21 teens, 11 parents, 5 Sunshine Chef/volunteers)

Healthy Eating/Exercise Discussion: April 15, 2010

At this program, two small group sessions with teens were held as a follow-up to our needs assessment survey regarding nutrition. A separate parent support group was held. Thirty participants attended

(18 teens, 12 parents). Barriers to healthy eating and exercise were identified and discussed, as well as strategies to overcome these.

Lupus and the Sun: June 24, 2010 Presentation by Morgan Stanley Children's Hospital Pediatric

Rheumatology medical staff on risk factors related to lupus and the sun, and the need for adherence to sun protection. Attended by 25 participants (17 teens and 8 parents).

APPENDIX 6

Hospital for Special Surgery LANtern® (Lupus Asian Network) Fall 2009- Spring 2010 Initiatives

The preventive health agenda in LANtern®'s (Lupus Asian Network) Community Service Plan for Year 1 has convened a strong network of diverse community-based health and human services organizations within New York City serving Chinese Americans and other Asian ethnic groups. LANtern has also partnered with U.S. Department of Health and Human Services' Office on Women's Health and Advertising Council, Inc. in its national lupus campaign effort, "Could I Have Lupus?" Our collaborative activities to date emerging from these partnerships are included below. Whenever feasible, LANtern incorporated program evaluations to learn about the impact of our programs in increasing knowledge and intended behavioral change.

Public Education in Mandarin Series #1: Workshop on What Do We Know About Lupus? Partner: New York Chinese American Association December 12, 2009

LANtern conducted its first public community presentation in Flushing,

Queens on lupus. The presentation PowerPoint was in both English and Chinese, but verbally presented in Mandarin on lupus basics by a HSS Rheumatology Fellow, a lupus story by a LANtern Advisory Board member through a simultaneous interpretation provided by our CSP partner, followed by lupus impact by LANtern Manager in this two-hour workshop. There were approximately 45 attendees.

Public Education in Cantonese Series #1: Radio presentation on The ABCs of Lupus Partner: Chinese Community Partnership for Health @ New York Downtown Hospital May 19, 2010

LANtern was a guest speaker on the lupus basics for Cantonese speaking Chinese immigrants via our partner's monthly health talk program at a widely reached ethnic radio station, Chung Wah Broadcasting Company, in the honor of May Lupus Awareness Month. This is LANtern's first radio presentation opportunity outreaching locally and in the tri-state region about what lupus is.

This is the first of three educational radio presentations for each May of our CSP, in honor of Lupus Awareness Month.

Series #2: Lecture on What Is Lupus? Partner: Asian Health and Social Services Council (AHSSC) June 17, 2010

LANtern participated in the Confucius Mannings Pharmacy's Community Education Series, invited by fellow AHSSC members, Visiting Nurse Service of New York and University Settlement, who were collaborators for this Series. The one-hour lecture took place in Manhattan's Chinatown, attended by approximately 110 participants, mostly Cantonese speaking, from the greater metropolitan area. The presentation was preceded by a press conference and advertisements throughout its ethnic media reach for LANtern's lupus presentation by organizers.

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Community Outreach Activities for Chinese-Americans in Cantonese and Mandarin

Series #1: Radio interview: LANtern's SupportLine service and why lupus a health concern for Chinese community?

Partner: Asian Health and Social Services Council (AHSSC)
May 17, 2010

LANtern's had first ethnic radio interview about the program, its SupportLine and why lupus is a health issue for Chinese/Asian-Americans through an invite by a fellow AHSSC member, Visiting Nurse Service of New York (VNS). VNS conducts a 25-minute Health Talks program at Chun Wah Radio Broadcasting Company for Chinese speaking community. The purpose for this outreach effort was to acquaint the Chinese community about LANtern and its outreach effort. The recorded interview went on air on May 26, 2010, reaching tri-state Chinese audience.

Series #2: Health fair activity at partner's Downtown Wellness Day in Manhattan's Chinatown

Partner: Chinese Community Partnership for Health @ New York Downtown Hospital
June 1, 2010

LANtern participated and co-sponsored our partner's successful

Downtown Wellness Day that attracted more than 300 attendees from the Chinese community. LANtern provided a brief presentation to attendees concerning lupus, in addition to staffing an educational table.

Professional Education for Service Providers and Asian-American Public

Series #1: Asian American Women's Health Symposium

Partners: Charles B. Wang Community Health Center's Women's Health Department, Center for the Study of Asian American Health @ NYU Langone Medical Center, and Asian American / Asian Research Institute @ CUNY
June 17, 2010

A LANtern Advisory Board member was invited to do a lupus presentation as part of "A Woman's Health Across a Lifespan" panel moderated by LANtern Manager at the Annual Asian Women's Health Symposium. The audience reach included over 120 service providers and general public. Although most in the audience had heard of lupus, much fewer knew of LANtern; this was an important opportunity to raise awareness of available resources. The segment had been video taped for wider audience reach through an online link at

Asian American / Asian Research Institute @ CUNY.

Resource Development

Series #1: Bilingual Chinese PSA development to raise lupus awareness

Partner: U.S. Department of Health & Human Services' Office on Women's Health (OWH) and Ad Council, Inc.
June 2010

LANtern has secured commitment in a partnership to jointly develop a bilingual Chinese PSA adapting the national lupus campaign's printed PSA materials. The usage will underscore a local outreach effort that could potentially become national through different venues. To our knowledge, this is the first PSA related initiative in the U.S. in any Asian language to enhance lupus awareness. The current language access in OWH/Ad Council's national campaign is available in English and Spanish.