

innovation
CELEBRATING INNOVATION AND SUCCESS
success





of South Central New York, Inc.

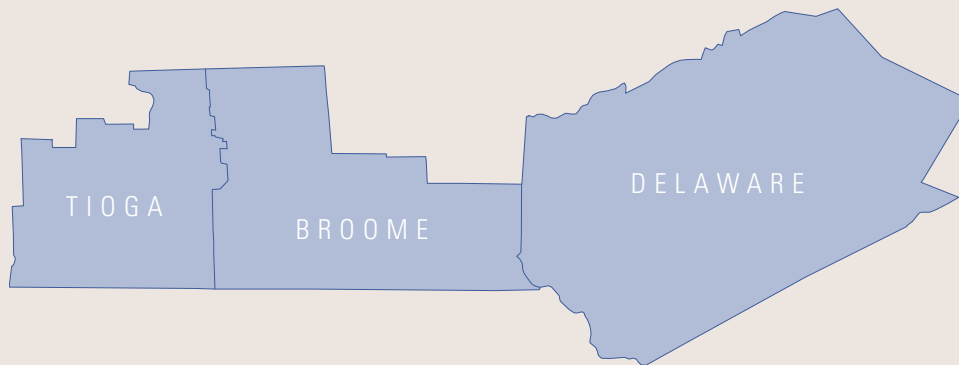
P.O. Box 416

Whitney Point, NY 13862

Phone: (607) 692-7669

Toll free: (888) 603-5973

www.RuralHealthNetwork.org



Mission Statement

The mission of the Rural Health Network of South Central New York, Inc. is to promote and improve the health of rural communities and strengthen each community's capacity to respond to health needs by reducing barriers and improving access and use of health and human services through advocacy, communication and partnerships.

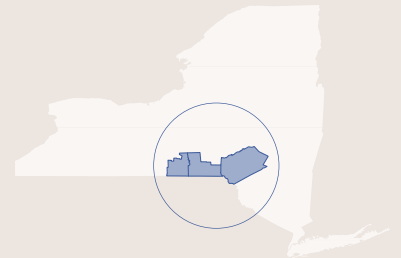
Our Vision of Success

The Rural Health Network of South Central New York works toward optimal individual and community health and wellness, which are supported by:

- Individuals and families with adequate and affordable health insurance;
- Accessible, efficient and collaborative health and human service delivery systems driven by best practice models;
- Reduction in health disparities for the most vulnerable populations;
- Strong community norms for healthy lifestyle choices and optimal physical and mental health.

Our vision of success is predicated on the strength of the Rural Health Network of South Central New York, its commitment and participation of our stakeholders (Board, staff and community partners working together), and the availability of resources required to achieve desired results.

Serving Rural
Broome, Tioga and
Delaware Counties



"The revival of community would have to be a revival accomplished mainly by the community itself. It would have to be done from the inside by the ancient rule of neighborliness, by the love of precious things, and by the wish to be at home."

– Wendell Berry

President's Perspective



This year, the Rural Health Network celebrates seven years of service. The Network was created in 1998 with the ambitious purpose of improving the health of residents, increasing access to needed services and strengthening the way health and human services are delivered.

The challenges are enormous in America's health care environment. In the Network's vision for the future, all individuals and families have adequate and affordable health insurance, and healthy lifestyles. At the local level, we are making progress towards our vision, in focused and meaningful ways.

We celebrate innovation and success in improving access to care for the increasing number of working families who cannot afford health insurance. Based on state and national data, over 1 in 3 residents ages 19 to 64 are either uninsured or underinsured. Those who lack health insurance are at greater risk of poor health and when they become sick, they frequently face financial stress. The Network's Pharmacy Assistance program assists hundreds of individuals in getting low cost and affordable prescription medications. The results are better management of problems such as diabetes, asthma, high blood pressure, and heart conditions.

We celebrate innovation and success in creating healthier communities. The Network helps residents of all ages build and maintain healthy lifestyles and address root causes of chronic disease, such as poor nutrition and lack of exercise. Our wellness programs build on local community assets and promote self-directed choice and active participation for sustainable success.

We celebrate innovation and success in creating partnerships for improved services. As one of the founding members, I remember starting the organization with groups of residents working side by side with leaders from health and human services. From the beginning, we *jointly* developed the best ways to meet rural needs. Our role as a convener continues. This year, the Network strengthened relationships with many stakeholders. As a catalyst for positive change, the Network values collaborative efforts with partners from public health and social service agencies, physicians practicing in rural areas, voluntary health associations, regional health systems, schools, small businesses, cooperative extensions, and universities.

In celebrating the Network's contributions, I am grateful for the vision, commitment, wisdom, and energy of individuals who make a difference. My colleagues on the Board are respected and knowledgeable community leaders, we have an excellent staff, and our valued partners share our passion for honoring each rural community's unique strengths, as we work together for the common good.

My term as President ends this year. In my leadership role, I have tried to bring out the best in others through facilitation, promoting inclusive and democratic participation, creating win-win opportunities, providing stability during transitions, and applying my experience in population-based health and human services planning. I am grateful to serve an organization so aligned with my values. **Thank you!**

Sincerely,

Diane C. Albrecht
President, Board of Directors

Executive Director's Report:

I am thankful for the many Board members, staff members and community partners who welcomed me and supported my efforts during my first year as Executive Director. With their help and guidance, I have a deeper understanding of the Rural Health Network's mission and impact. Through attending collaborative project and program meetings, I have come to appreciate our role as an important part of a larger effort to meet the health needs of our rural communities. Thank you to all who have generously shared your experience, wisdom and time this past year.



As federal funding for the Family Health Link project ends, we celebrate the contributions of all who have participated in this initiative to help meet the needs of the uninsured and underinsured. The Family Health Link project created a system of care that includes pharmaceutical assistance, vision services, and referral services to publicly funded health care. Rural residents throughout Tioga, Delaware and Broome Counties now receive direct assistance and information that helps them access the health services they need. Two major health care systems and a private provider now share patient health information through PHIN, the Patient Health Information Network, resulting in improved patient care and efficiency. Relationships have been forged with rural primary care sites resulting in services ranging from wellness classes for patients to provision of computer based patient health information. Family Health Link provided a forum, advocacy and in some cases funding for development of critical dental services in rural communities. We celebrate all of these accomplishments that are having such a positive impact on so many lives!

Through Family Health Link, the Rural Health Network, and the larger network of health and human service providers, we have strengthened the safety net and filled important gaps in services for those without health insurance. We will continue working diligently to secure the resources necessary for the Network to sustain and expand our response to meet these critical needs.

As we consider what comes next, I believe it is important to investigate and engage a broader range of assets to support our work. Rural communities are rich in resources, history and strong community values. While we face real economic challenges, it is also true that there is vast human and economic potential that can be realized by working together. As a Rural Health Network, we need to continue addressing critical health needs and of equal importance, provide the education necessary to realize positive behavioral changes essential to sustaining health and well-being. We also need to consider the broader context of rural health and how community, economic and traditional rural activities factor into our mission and efforts.

Coming off this first year of service to the Rural Health Network, I am excited about the future of rural communities and our opportunities to help improve the quality of rural life.

Sincerely,

John (Jack) C. Salo
Executive Director

I. Getting Well

Creating long term results... During the eight-week Mission Meltaway program, Network staff and guest instructors encourage participants to provide support for each other as they learn about nutrition, the health benefits of an active lifestyle and ways to manage stress. To maintain healthy behaviors after graduation, participants continue meeting as a class or in smaller, informal groups. Something as simple as having a friend to continue walking with can make all the difference in providing the support, consistency, and motivation to stay active.

"The nutritional knowledge has been wonderful – I had always heard of issues of fat, carbohydrates, etc., but never understood what I should and should not eat. I never understood that I could walk and consider that exercise."

– Pam B.
Participant in
the Rural Health
Network's Mission
Meltaway Wellness
Class in Union
Center

With four programs held this year, thirty-nine of the forty-five participants who graduated (87%) improved in one (or more) health indicator measurement such as weight, Body Mass Index, blood pressure and waist - hip ratio.

Connecting exercise and health in Tioga... At one time hiking and biking maps simply located trails on the map. Working in partnership with the Tioga County Active Living Partnership, the Rural Health Network and State Office of Rural Health provided funding for *Trails of Tioga – Destination: Health*, a map of a "different color". In addition to great trail locations and descriptions, the map is full of information on health, physical activity, and local sources of exercise programs, hiking and cycling clubs. The *Trails of Tioga* map makes exciting new connections between local trails and health and wellness. To provide added incentive, the Tioga County Active Living Partnership established prizes for visiting multiple trails, which can be accessed through the Rural Health Network's web site through November 1, 2005.



Healthier children through learning that's fun...

The Rural Health Network brought the nationally acclaimed "Food Play" nutrition education performance to Harpursville and Deposit School Districts. Important health education partnerships continued with the Steps to a Healthier New York "Give Me Five" campaign, the Walton School District Health and Wellness Committee and others.

Sharing solid information... Krames on Demand™ software was provided at eight sites throughout our three county region. This easy to understand and proven effective patient education software provides information on over 1800 health education subjects. Printed as needed by health, school and human service providers, the Krames on Demand™ information makes important health related information available to those who need it.

Major improvements in the Network's web site include new health information links and a bulletin board which enables Wellness Class participants to correspond with Network staff and each other. We are also adding helpful health information and making sure that news entries are current and interesting. Donor and volunteer information pages are being developed. Check out our web site at www.ruralhealthnetwork.org to see how the Network can benefit you or your organization in our quest for building healthy lifestyles.

healthy
lifestyle

II. The Rural Health Network Role in the Safety Net...

Celebrating Innovation...

While the Rural Health Network, health care providers and human service organizations work diligently to provide health care and coverage for increasing numbers of uninsured and underinsured, there remains a need for innovation and policy change at the national level that will ensure quality, affordable health care for all Americans.

The Family Health Link Project has been an important step in demonstrating an innovative and effective local response to meeting critical health needs for the uninsured. As the federal funding for this important project ends, we celebrate the commitment of Our Lady of Lourdes Hospital and the many other organizations and individuals that have made the successes of the project possible.

Building on the investment of the Family Health Link Project, The Rural Health Network will continue to assist those in need with accessing prescription medication, vision services and health insurance programs. We will also continue participating in community projects, like Cover the Uninsured Week, and supporting the development of much needed dental services in rural communities.

“With the loss of health insurance, and the need to obtain very expensive, and very necessary medications for a daily regimen, I was very upset and stressed during the month of June 2005, until I worked with Ms. Beverly McLain at Rural Health Network, whose kindness, compassion, and overall superb assistance in helping, assuaged a traumatic month of worry and anxiety. I found that working with Ms. McLain over the course of a few weeks with numerous phone calls to her, was a rare pleasure, and, believe me, Ms. McLain has great understanding and ability in her job in customer service.”

– J.B., July 2005.

And Success...

As shared by J.B. in the quote above, success is measured by much more than the number of people served. We can't easily measure the sense of relief and hope that results from help provided by the Rural Health Network. Our staff understands that *listening* to a person who cannot afford prescription medication, or a parent who cannot afford an eye exam and glasses for their child, is the first step in providing help. How someone is helped is as important as the help provided. The pressures on those without health insurance, or with insufficient health insurance, are real and frightening. The Rural Health Network's staff is known for both the skill and compassion it brings to this important work.

Through the Family Health Link Project, funded by the federal Healthy Communities Access Program and under contract with Our Lady of Lourdes Hospital with additional funding by Ascension Health, the Rural Health Network has provided the following services to the uninsured and underinsured residents of our service area during 2004:

- 696 individuals screened for health insurance program enrollment
- 633 individuals received pharmaceutical assistance
- 1,658 scripts filled for people receiving pharmaceutical assistance, with a wholesale value of \$384,905.
- 101 children and adults assisted with vision examination and eyeglass assistance
- 300 RHN "Options for Vision Services in the Southern Tier" Resource guides distributed to health and human service providers
- \$80,000 of Healthy Communities Access Program funding was provided to the O'Connor Hospital – Bassett Healthcare Dental Clinic Project in Delhi, N.Y. The Dental Clinic opened in August 2005 and accepts Medicaid patients.



**Family Health Link
Accomplishments:**

1. Pharmaceutical Assistance services provided directly through the Rural Health Network and through fourteen rural primary care sites.
2. Vision (eye exams and glasses) services
3. Health insurance referral services
4. Creation of the Patient Health Information Network, a shared patient information system between two regional health systems and one private provider. 50 primary care sites are participating, from Candor in Tioga County to Deposit in Delaware County.

*skill and
compassion*

III. Community Initiatives

“Please accept my sincere thanks for the pedometers. My after school students are having such a good time with them that I have to limit my participants to avoid being overrun. Now the students want to use study hall time to walk and I am working on a curriculum to accompany the pedometers to try to improve the possible benefits...”

– Elaine D. Anderson
Sidney Central School District

Celebrating Innovation...

From the beginning, the Rural Health Network has listened to those serving rural residents and worked with them to secure the resources needed to meet local needs. Through the careful application of financial, technical and human resources, the Rural Health Network has helped small communities and local organizations better serve their residents.

While difficult to quantify and measure, the investment made in community initiatives often yields a wide range of unexpected and positive results. New relationships are formed, often between organizations that would not normally interact. The blending of different sectors can result in creative and new approaches to health services, health and wellness education and other actions resulting in improved health and health care in rural communities. Perhaps most exciting are the efforts of some communities to bring their local school, community organizations, and businesses together in a common effort to improve the health and well being of their residents. Targeted community initiatives can be the catalyst for a broader, community-based effort to improve health.

And Success...

2004 was a busy year for community initiatives. The Rural Health Network provided program and project support to eight school districts, the Food Bank of the Southern Tier, Broome County Cooperative Extension, the American Cancer Society and O’Connor Hospital. Over \$136,000 in Federal and New York State funding was directed towards community initiatives over the past year, including provision of \$80,000 to O’Connor Hospital – Bassett Healthcare, in Delhi, Delaware County, to help with the costs of opening a dental clinic. The dental clinic will accept Medicaid and Child Health Plus participants and help to meet a critical need for dental care in Delaware County.

With funding provided by Health Research, Inc., the Rural Health Network purchased a defibrillator for use by the Village of Owego Police Department. The unit is available for emergency responses by officers on patrol.

When it was reported by the Broome County Sheriff’s Department that they had defibrillators in their patrol cars, but the defibrillator batteries needed replacement, Network staff secured permission to use the funding for this purpose. Nine defibrillator batteries were purchased for the Broome County Sheriff’s Department, the only reported use of the funding for this purpose in New York State.



Based on recommendations from over 50 stakeholders participating in 6 focus groups held throughout the region last year, the Rural Health Network directed significant resources to help meet the health needs of children and youth this year.

Rural Health Network Community Initiatives begun in 2004 and 2005 include:

- **Sidney Central School** trained all Kindergarten through Grade Five teachers in the *Growing Healthy Curriculum* for use with their classes.
- **Harpursville Central School** purchased exercise equipment for use by students and faculty and initiated a personalized student fitness CD program.
- **Bassett Healthcare School Nutrition and Food Service Assessment Project** evaluated nutrition and food service programs at Delhi Central School and South Kortright Central School, and recommended ways for the school districts to strengthen programs.
- **Active for Life Program:** This ten week program was offered by the American Cancer Society to residents of Whitney Point with support from the Rural Health Network.
- **Kids Up Front Cooking Classes:** Anthony Garzo, Chef at the Oaks Inn, Endicott, teamed up with staff from Broome County Cooperative Extension, the Food Bank of the Southern Tier and the Rural Health Network to provide a comprehensive cooking and nutrition education program for teens in the Harpursville Advantage After School Program.
- **Walton Central School District** purchased fitness equipment for students, faculty and the community at large, instituted a nutrition program, and activated a school health and wellness committee.

- **Downsville Central School** implemented the *It Does a Body Good* project, a nutrition and fitness initiative, serving both students and faculty.
- **Newark Valley Schools** assessed, revised and integrated physical education and nutrition K-12 curriculum. Project components included a curriculum gap analysis, curriculum alignment, and development of instructional components to support an active, healthy lifestyle.
- **Tioga County Active Living Partnership** published and distributed the *Trails of Tioga – Destination: Health* map.
- **Living Well with Diabetes** education program was provided for patients of Candor Family Care, United Health Services. The Food Bank of the Southern Tier, the Tioga County Cornell Cooperative Extension and the Tioga County Health Department provided instructors for the program. Owego Treadway Inn Chef, Jeannie Middendorf, prepared healthy meals for the class each week.

community
effort

IV. Working Together...

"I am writing to offer my gratitude and appreciation to the Rural Health Network of SCNY for their exemplary partnership with the Broome County Steps to a Healthier New York Program.

Your employees, Joy Olson and Lorelle Vanno, have each done an outstanding job partnering with us to fight the disease burdens of diabetes, obesity and asthma in our community through offering many opportunities to reach those underserved and at risk for developing chronic diseases."

Mary McFadden, Director, Broome County Steps to a Healthier New York Program.



One example of how *working together* resulted in the continuation of a critical service involves the Sight for Students program. This program, which provides eye exams and eye glasses for school aged children referred by local schools, has been administered locally by the Rural Health Network for the past several years. In late 2004, the Network was contacted by the program's parent organization, Vision Service Plan, and informed that the Rural Health Network could no longer administer the program. Only a select group of providers, including members of the National Association of Community Health Centers would be permitted to participate in the program. Fortunately, Head Start programs were also listed as eligible Sight for Students providers. After several unsuccessful appeals to Vision Service Plan to reconsider their decision, we began discussing the possibility of a Sight for Students partnership with the Opportunities for Broome, Broome County Head Start program. By *working together*, the Rural Health Network and the Broome County Head Start program have been able to continue the Sight for Students program. This critical service has provided eye exams and glasses for 26 children and teens during the first eight months of 2005. Without this partnership, the Sight for Students program would have been discontinued and these children would not have been served.

The Rural Health Network has both initiated and participated in a rich mix of collaborative projects over the past year. Only by working together is it possible to respond to the health needs of our community in a way that is coherent, sustainable and effective. We offer heartfelt thanks to scores of partners throughout the region for the opportunity to jointly and creatively address these needs.

Celebrating Innovation and Success...

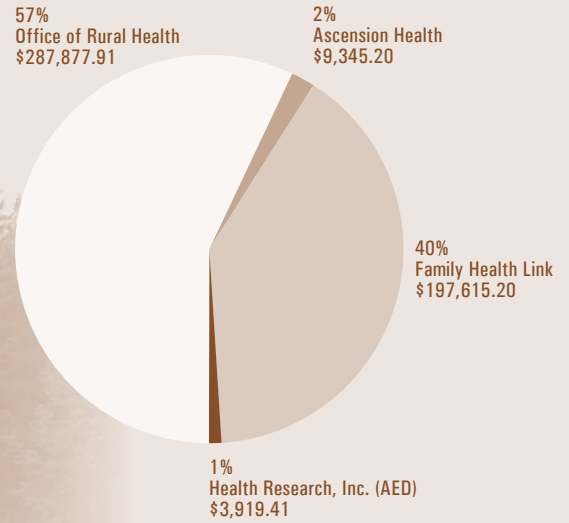
Collaboration is one of several guiding principles identified in the Rural Health Network strategic plan. We collaborate with other organizations to increase services, avoid duplication, and integrate services. Equally important are the lasting relationships and friendships that often develop, the energy generated when like minded individuals and organizations work toward a common goal, and the creativity that results when different ideas and perspectives are considered in a partnership project.

Rural Health Network staff and board members currently participate in over thirty different partnership forums. This participation includes formal representation as committee and board members for partner organizations, and participation with less formal initiatives that address local needs through grassroots community action. Partnerships also include several committees and networks, with representation from multiple organizations, established to address specific health issues and needs.

collaboration

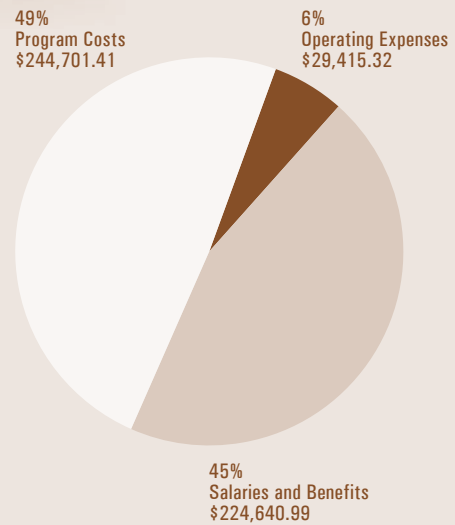
2004 – 2005 Revenue

Total: \$498,757.72



2004 – 2005 Expenses

Total: \$498,757.72





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Check out our web site at www.ruralhealthnetwork.org to see how the Network can benefit you or your organization in our quest for building healthy lifestyles.

Board Members July 1, 2004 – June 30, 2005:

Diane Albrecht - *President*
Natalie Thompson - *Vice President*
James Skiff, MD - *Secretary*
Shawn Yetter - *Treasurer*
Larisa Gryczko Avellaneda
Lucy Bianco
Edna Boone
Thomas Briggs
Michael Curti
Pamela Stewart Fahs, DSN
Heidi Kolwalchyk
Nancy McGraw
Hans Peeters
James Savage
Ruth Shenk
George Spencer
Anne Wolanski
E. Kay Boland - *Term ended Dec. 04*
Sharon Chesna - *Term ended Dec. 04*
Sandra McCoy Cleveland - *Resigned Feb. 05*
Wayne Mitteer - *Term ended Dec. 04*
Gail Rhodes - *Term ended Dec 04*
Sandi Sanzo - *Term ended Dec 04*

Staff:

Jack Salo, *Executive Director*
Penny DelFavero, *Office Manager*
Joanne Murray, *Administrative Assistant*
Beverly McLain, *Customer Service Representative*
Joy Olson, *Outreach Coordinator*
Christine Berwald, *Outreach Coordinator*
Lorelle Vanno, *Outreach Coordinator (Resigned June 2005)*

Photography Credit:

Cover photograph of a Tioga County barn and inside
back cover photograph of a Broome County road
by Joy Olson, Outreach Coordinator