

2016 IMPACT REPORT

THE RURAL HEALTH NETWORK OF SOUTH CENTRAL NEW YORK, INC.

2016 was a year of continued growth for Rural Health Network of South Central New York. Our founding goals from 18 years ago are still relevant and we'd like to use some of those goals as an introduction to our 2016 accomplishments.

"To expand opportunities for professional education and training and improved consumer access to information relative to the identified health and human service needs in each community."

Getting There – a Conference on Bridging the Transportation and Healthcare Gap gathered nearly 250 people from across the region to explore issues of access and innovative ways to address the challenges.

Food and Health Network hosted two Growing Health forums in 2016. ***Healthy Food, Healthy Communities*** focused on how we can improve community wellness through purchasing healthy, local food. ***Fruit and Vegetable Prescription Programs*** explored an innovative model for how healthcare, food retailers, and community based organizations can partner to improve health by increasing access to fresh fruits and vegetables. The forum has led to a 2017 Fruit and Vegetable Prescription pilot project in Broome County.

"The original goals of the Rural Health Network established in 1998 remain current today."

JACK SALO,
*Executive Director,
Rural Health Network of
South Central New York*



“To promote universal access to healthcare services and to provide a system through which consumers and providers of health and human services can work together to enhance service planning and assessment, implementation and evaluation.”

Our Rural Broome Counts project published three reports, a *Housing Supplement*, *Rural Household Budgets*, and a *Housing Resource Guide for Rural Municipalities* which looked into the unique barriers and opportunities that surround housing in rural Broome County. The cost of housing is closely linked to poverty, impacting a family’s ability to address other needs, such as medical care, nutritious food, and high-quality child care.

RHNSCNY, as a partner with the HealthlinkNY Community Network, works to implement the New York State Population Health Improvement Program. The team has been taking action to

address health disparities with a focus on stigma, mental health, transportation and poverty. RHNSCNY PHIP Coordinators serve Tioga and Delaware counties.

“To serve as a forum for the identification of needs requiring new services and the development of strategies for ameliorating service gaps.”

Food and Health Network is working towards increased use of nutritious, locally produced food. 2016 saw the expansion of Farm to School activities connecting local food growers and producers with school cafeterias. With support from a NY State Volunteer Generation Fund grant, we are also working to develop a network of volunteers for projects that increase community food security.

“To provide information and advocacy regarding the community specific needs.”

Advocacy was identified as a focus area for our 2015-2018 Strategic Plan. We’ve added an advocacy section to our monthly e-newsletter, *Rural Matters*, to help inform our audiences about issues that are important to rural people and communities in our region.

Mission: Advancing the health and well-being of rural people and communities.

Advocacy

RHNSCTNY, through our work in Community Health, Food Access, Mobility, and now Population Health, has historically been an advocate for the people and the communities in our region. In 2016, we recognized that we have an opportunity to be an even stronger voice, and we developed a formal organizational

advocacy plan focused on education for ourselves, our partners, and our elected officials. Priority areas are: the lack of behavioral health providers and services; the lack of transportation data, funding, and services; and limited access to nutritious foods among rural residents.



The full advocacy plan can be found on RHNSCTNY's website.
www.rhnsctny.org/about/advocacy-plan

PHIP

RHNSCTNY is a subcontracted partner with lead organization Healthlink NY for the implementation of the NYS Department of Health's Population Health Improvement Program (PHIP). The Southern Tier program encompasses Broome, Chenango, Delaware, Tioga and Tompkins Counties, and RHNSCTNY is responsible for implementation in Delaware and Tioga. Population Health Coordinators focus on social determinants of health and how they impact health outcomes and health disparities. Engaged partners from multiple health, human services, business sectors, and the community provide data and anecdotal information to better understand factors impacting health. The PHIP team develops programming to build capacity, filling gaps and improving overall population health.

Primary PHIP activities in 2016 were:

- The development of a pilot project in partnership with primary care practices in each county, collecting data on transportation vulnerability and providing a referral process to Mobility Management SCNY with the intention of reducing no-show and late cancellations for healthcare appointments, and to improve access to primary care.
- A Behavioral Health Employee Wellness Toolkit pilot project designed for businesses to provide supports to employees as a component of overall Workplace Wellness.

Getthere, a Mobility Management Program

Getthere (also known as Mobility Management of South Central NY)



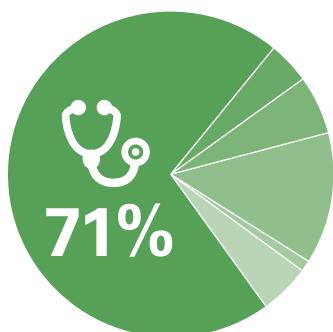
works collaboratively with partners and stakeholders in Broome, Tioga,

Chenango, Delaware, and Otsego counties. Together, we seek to improve transportation access and coordination in South Central New York, with particular regard to the area's rural communities.

MMSCNY was originally established as the Broome-Tioga Mobility Management Project in 2011. Since 2011, MMSCNY has operated the **Getthere Call Center** to provide trip planning and referral services, transportation education, and travel training to individuals in need. From 2013 to the

end of 2016, the Getthere Call Center assisted individuals on over 2,500 cases to help meet their transportation needs.

During the call center's first year of operation, it became evident that existing transportation options were unable to meet the needs of the region's rural communities and their residents. In 2013, MMSCNY created the **Connection To Care** (CTC) program, which helps individuals living in rural communities with an expressed financial need to access healthcare, and health-related services. Since the program began, CTC has helped 549 individuals travel over 100,000 miles, thus enabling people with no other options the ability to access essential medical care.



Reasons for Calling Getthere 2016

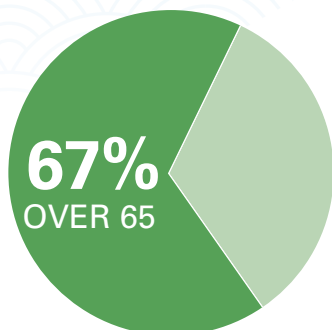
- Medical 71%
- Social 4%
- Work/Volunteer 6%
- Information 13%
- Shopping 1%
- Other 5%

“Transportation has often been one of the first or biggest barriers that an individual and their families struggle with. From health, employment, or simply socialization, mobility is necessary for the well-being of all.”

WILLIAM WAGNER,

Director, Mobility Management of SCNY

Getthere Call Center	Broome	Chenango	Delaware	Otsego	Tioga	Other	Totals
Number of 2016 Cases	324	174	51	51	131	27	758
Percent of Total Cases	42.7%	23.0%	6.7%	6.7%	17.3%	3.6%	100%
% of Callers Seeking Health-Related Services	56.5%	84%	69%	71%	77%		71.5%



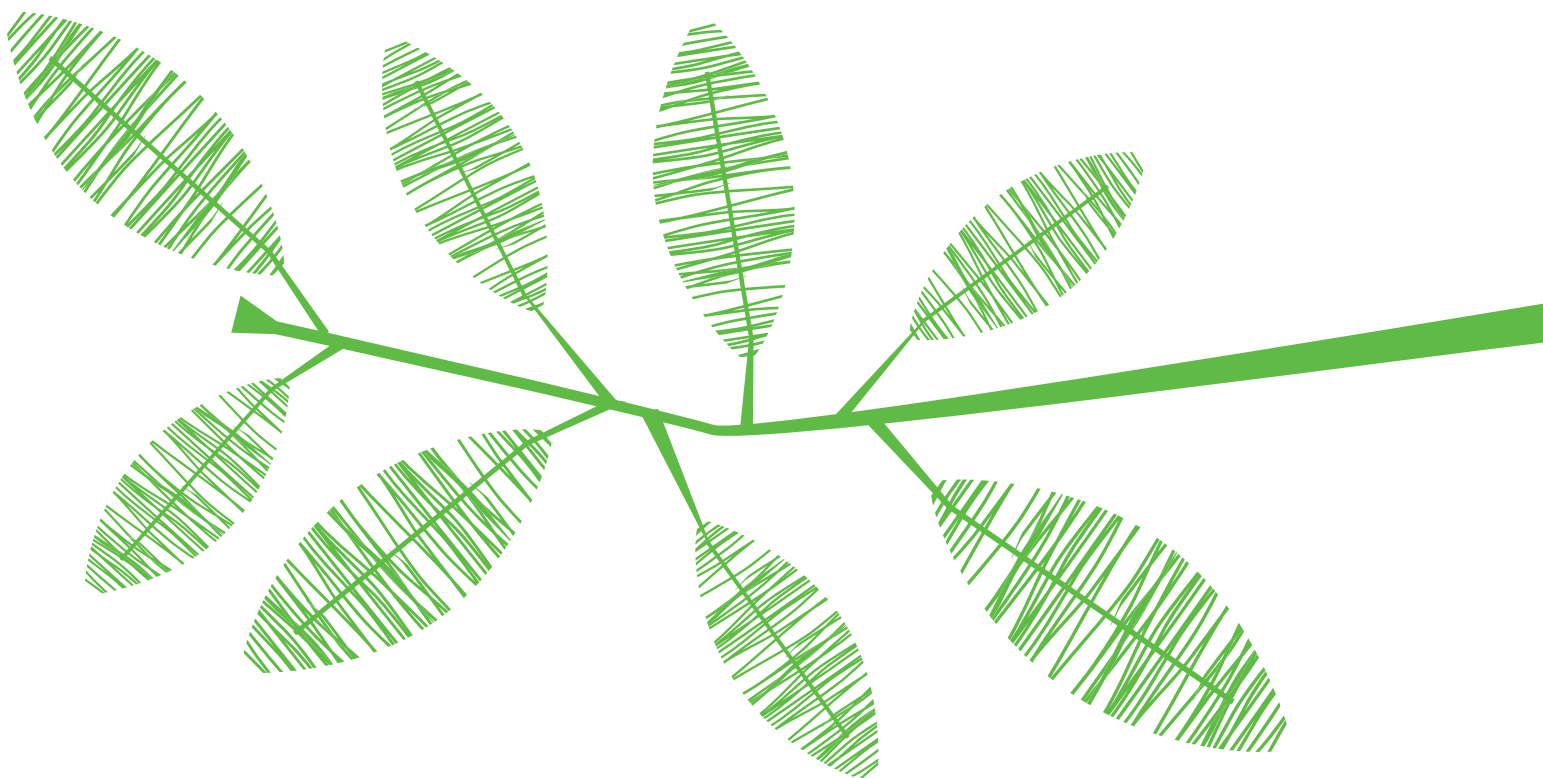
Connection To Care Facts 2013 – 2016

Average Age 67 years
 Most Frequent Age . . . 73 years
 Oldest Client 95 years
 Youngest 18 years
 Over the age of 65. 67%
 Average round trip . . . 60 miles

“I can do a lot on my own, I just can’t drive. But I am not giving up. I wish my transportation needs and options weren’t so complicated. Thank you Connection to Care. Thanks for helping me out!”

A RESIDENT OF CHENANGO COUNTY,
a cancer survivor who faces several health and healthcare related challenges

2016 Connection To Care	Broome	Chenango	Delaware	Otsego	Tioga	Totals
Unique Individuals Served	41	25	92	8	56	222
Miles Traveled	13,742.3	8,677.8	21,198.25	599.3	15,781.32	59,998.97
Total Round Trips	329	99	224	4	366	1,022
Average Cost Per Mile	\$0.30	\$0.60	\$0.72	\$14.75	\$0.44	\$3.36
Amount Allocated	\$5,118.43	\$6,306.00	\$8,376.61	\$195.00	\$7,447.00	\$27,443.04
Amount Contributed by Clients	\$1,684.40	\$2,091.00	\$1,217.09	\$10.11	\$850.00	\$5,852.60



Getting There

Getting There – A Conference on Bridging the Transportation and Healthcare Gap was cohosted by RHNSCNY and the Community Foundation for South Central New York on October 26 at the DoubleTree Hotel in Binghamton, NY.



Workshop presentation materials and other resources distributed at the conference are available on our website.

Getting There Event Sponsors

HealthlinkNY Community Network
Care Compass Network
Community Foundation for South Central New York
Excellus BlueCross BlueShield
Guthrie
Leatherstocking Collaborative Health Partners
Lourdes
United Health Services (UHS)
Southern Tier Care Coordination

*Binghamton University College of Community and Public Affairs
Department of Social Work worked with the conference planning
team to offer continuing education for social workers.*

The conference brought together nearly 250 healthcare practitioners, transportation providers, community organizations, philanthropic organizations, elected officials, governmental service providers, mobility managers, and others interested in the challenges and best practices related to transportation and healthcare access. In the afternoon sessions, participants were grouped by county and engaged in two exercises. The first exercise related to problem solving a transportation to healthcare scenario specific to their county. In the second exercise, participants considered, discussed, and recommended how a transportation tool-kit could be most effective for helping patients, healthcare workers, and other intermediaries in bridging the transportation to healthcare gap.

“I left this conference with information and contact info for transportation services that I did not know were available. This was very educational for myself and program.”

CONFERENCE ATTENDEE



Travel Training



Travel training teaches those who could benefit from public transportation how to use it. Increased use of public transit by seniors and individuals with disabilities can generate cost savings, ensure independence, and expand opportunities.

Mobility and Transportation Advocates provide travel training to groups that work closely with those in need of transportation and mobility services. They also provide travel training for individuals who want to become familiar with public transportation options and routes.

Voucher Program

In October 2016, Care Compass Network (CCN), the organization charged with leading New York State's Medicaid redesign effort in Southern Tier counties, awarded an Innovation Fund grant to RHN's Mobility Management program. The Innovation Fund is a unique way for CCN to help its partners identify innovative ways to support the health of Medicaid members. MMSCNY is using the award to increase Getthere Call Center hours, develop a website with a trip planning feature to assist healthcare providers and consumers with access to transportation services, and develop a voucher program to help improve health access and outcomes for Medicaid enrollees. Vouchers can cover the cost

of transportation to certain treatments, pharmacies for prescription pickup, or grocery stores which are types of trips not covered by Medicaid.

"We recognize that people's health needs go far beyond their medical appointments. We also believe that a lack of transportation and a lack of access, in general, makes it harder for people to live healthy lives. As both a transportation service and a program of the Rural Health Network of South Central New York, it makes sense for us to be the ones to help facilitate this, to help people get to the places and services that are going to make them healthier."

WILLIAM WAGNER,
Director, Mobility Management of SCNY

Community Health Services

RHNSCNY has supported rural people in accessing healthcare since 1998. In 2016 we expanded our Community Health Services portfolio to include or improve health/well-being screenings, chronic disease education and case management. Engagement with rural individuals occurs in our offices, via telephone, during home visits, in chronic disease education classes and at outreach events.

Healthcare Access: Outreach, Intake & Referral

Staff complete Healthcare Access intakes to identify basic needs such as: health insurance, primary care or behavioral health provider, health literacy, prescription assistance, vision/dental services, transportation, healthy food, financial assistance, or housing/utility supports. Referrals are made to appropriate community resources.

Health & Well Being Screenings

Health and well-being indicators are addressed through six evidence based screening tools that measure patient knowledge, skill and confidence in self-management, and health risks for depression, diabetes, substance use disorders, or tobacco product use.

Chronic Disease Education

RHNSCNY maintained its license to deliver Stanford University evidence based intervention, Chronic Disease Self-Management Program (CDSMP). Two staff obtained CDSMP Master Training certification.

Case Management/Health Coaching

Staff work with each consumer to enhance their knowledge and skill in accessing healthcare resources and develop strategies to manage specific health conditions.

DSRIP

New York's *Delivery System Reform Incentive Program (DSRIP)* is a Medicaid Redesign initiative intended to reduce avoidable hospitalizations and emergency room utilizations by 25% by 2020. Care Compass Network and Leatherstocking Collaborative Health Partners are the regional Performing

Provider Systems working with Medicaid providers and community based organizations to lead DSRIP efforts in our region. RHNSCNY staff continue to contribute expertise in planning and implementing activities that impact rural Medicaid members.



"I'm glad to see that Rural Health Network is available as a service to our community, especially for those with mental health issues and needs, and physical requirements both. The resources that they are able to introduce us to help make us stronger people, more capable people and a lot more confident in being able to control our own situations."

RENEW HEALTH PARTICIPANT

Community Health Services – Renew Health and Healthcare Access					
	Broome	Delaware	Tioga	Other	Totals
New Clients in 2016	262	15	45	29	351
% of New Clients per County	75%	4%	13%	8%	100%
# of Interactions with New Clients	492	32	77	68	669
Total Clients (New and Existing)	397	17	72	45	531
% of Total Clients per County	75%	3%	14%	8%	100%
# Interactions with All Clients	1,043	38	214	99	1,394

Approximately 64.5% of new clients served from Broome County live in rural communities

18.6% of all client interactions were with consumers over 65 years old

Through Farm to School activities, 5,093 students in our area received local food during 2016.



Food and Health Network

The Food and Health Network of South Central New York (FaHN) works to create healthy, food secure communities and a thriving regional food system.

Farm to School

The Food and Health Network continued working with BT-BOCES Food Service, area school districts, the Food Bank of the Southern Tier, Broome County Health Department, Cornell Cooperative Extension of Broome County, local producers,



and many other partners to bridge connections between the regional farms and schools. The project builds upon current farm to school success and helps to expand an innovative distribution model to address the challenges of transporting food from local farms to schools. Serving fresh, local food in school cafeterias helps kids stay engaged in the classroom, develop healthy habits, and improve food security. It also supports our local farms, strengthening the New York State farm economy — a win for students, farms, and communities.



Farm to school programs ensure that students get the freshest food available and develop lifelong healthy habits while supporting local farmers, processors and the economy. According to a recent study by Cornell University, purchasing vegetables grown on New York farms to serve on school lunch menus across the state one day a week would equate to an increase of more than \$18 million in expenditures on New York-grown foods.

“Our team of Farm-to-School champions is purchasing more local food and bridging connections between the classroom and cafeteria. We are excited to work with Broome-Tioga BOCES Food Service, local school districts, Cornell Cooperative Extension of Broome County, and local farms to grow the program.”

ERIN SUMMERLEE,
Director, Food and Health Network of SCNY

FaHN SUPPORTING GRANTS 2016

Broome County Health Department – Creating Healthy Schools and Communities Grant
 Broome-Tioga BOCES – NYS Farm to School Grant
 Community Foundation for South Central New York – Dick and Marion Meltzer Fund and Tarren Family Fund
 Conrad and Virginia Klee Foundation
 Roger Kresge Foundation
 NYS Corporation for National and Community Service – Volunteer Generation Fund
 NYS Department of Agriculture & Markets USDA Farm to School Grant

FaHN MEMBERS 2016

Individual Members

Susan Adair	Matthew Griffin
Diane Albrecht	Kathleen Horner
Richard Andrus	Kevin Millar
Donna Bates	Diane O'Hora
Mark Bordeau	Jeffrey Piestrak
Jeanne M. Darling	Tony Preus
Ann Denniston	Amy Shapiro
Ray Denniston	Lauren Tonti
Nancy Eckstrom	Rose Zonetti

Organizational Members

Broome County Council of Churches
 Broome County Health Department
 Broome-Tioga BOCES Food Service
 Cayuga Lake Food Buyers
 Center for Agricultural Development and Entrepreneurship (CADE)
 Chenango County Health Department
 Chenango County United Way, Inc.
 Cornell Cooperative Extension of Tioga County
 Delaware Opportunities, Inc.
 Family Enrichment Network
 Food Bank of the Southern Tier
 Hatherleigh Foundation
 Healthy Lifestyles Coalition, United Way of Broome County
 Seven Valleys Health Coalition
 Tioga County Hunger Coalition
 Tioga Opportunities
 Tompkins County Food Distribution Network
 United Health Services (UHS)
 VINES (Volunteers Improving Neighborhood Environments)

FaHN SPONSORS 2016

Individual Sponsors

Diane & Jerry Albrecht	Johan Jelsma
Greg Albrecht & Victoria Zeppelin	Kate Miller-Corcoran
Connie Barnes	Glenda Neff
Susan Beaudoin	Janice Parker
Mark Bordeau	Jeffrey Piestrak
Elizabeth Bossong	Charles & Mary Place
Christina Boyd	Maggie Reeger
Diane Crews	Jack Salo
Ray & Ann Denniston	Bob & Linda Seeger
Nancy Eckstrom	Doris Summerlee
Matthew Griffin	Lauren Tonti
	Shawn Yetter

Corporate, Farm, and Foundation Sponsors

Blackbird Bakery
 Chobani, LLC
 Closer to the Heart Farms
 Creekside Acres Farm/The Creekside Cook
 Dutch Hill Creamery
 Engelbert Farms, LLC
 Excellus BlueCross BlueShield
 FarmHouse Brewery
 Fidelis Care
 Galaxy Brewing Company
 Larry & Denise Moore
 Lourdes Hospital
 Peaceful by Nature Farm
 Regional Access
 Shared Roots Farm
 Slope Farms
 Stone Horse Farm
 The Kitchen Store
 The Owego Kitchen
 United Health Services (UHS)

Rural Health Service Corps



Rural Health Service Corps (RHSC) is an AmeriCorps National Service Program. RHSC provides meaningful service and learning opportunities for people committed to improving the health of

those living in South Central New York.

RHSC members address the broad

community health needs of South Central New York, with a focus on health access and education, increasing food security, and supporting independent living for the elderly, homebound, and people with disabilities.

"I went into AmeriCorps service asking the same question that many recent graduates ask themselves: 'what should I do with my life?' and left my service with a strong set of skills and experience in a new field. Looking back, I'm glad that I took advantage of opportunities that piqued my interest, even if, at the time, I didn't know where they would take me."

NATALIE HUGHES,

former AmeriCorps member

and former Site Supervisor for VINES

During the 2016-2017 AmeriCorps program year:

45

AmeriCorps and AmeriCorps VISTA members were in service with 19 different host partners*. Members provided 46,416.36 hours of service in 2016.**

3,170

Individuals received information on health insurance, healthcare access, or health benefits programs

2,377

Individuals accessed health insurance, healthcare services, healthcare benefits programs and/or improved health literacy

1,326

Older adults and individuals with disabilities received food, transportation, or other services that allow them to live independently

703

Homebound or adults and individuals with disabilities reported having increased social ties/perceived social support

2,565

Individuals received support, services, education and/or referrals to alleviate long-term hunger

932

Individuals reported increased food security of themselves and their children

Note: An individual may be included in more than one performance measure

**8 additional members enrolled and were unable to complete their term.*

***Service aligns with national performance measures under the Healthy Futures focus area.*

AmeriCorps and VISTA Members Who Completed Service in 2016

Dzifa Alifo
Andrew Becker
Pauline Berkowitz
Eric Bull*
Meggan Bush
Dawn Chenier*
Chelsea Cleary
Brooke Ann Coco
Leslie Cody
Olivia Consol
Katharine Constas
Amanda David*
Kaya Donaj-Keys

Tyler Eaton
Sohaib Fasih-Ahmad
Doris Frasca
Nicole Holmes
Kayla Jack*
Shea Kelly
Jenna Layton*
Ilana Lipowicz
Sofia Mitchell
Daniel Morales
Jesse Morgan
Spencer Musselman
Nerlande Poinvil
Maggie Reeger
Julia Rivera
Kristen Stanton*
Joseph VerValin
Olivia Weng
Rachel Yull*

*Enrolled for a second
term (2016-2017)

AmeriCorps and VISTA Members Currently Enrolled and/or Expected to Complete Service in 2017

Crystal Batista (*through
2018*)
Jacqueline Bogart
Amber Brown
Eric Bull
Ruslyn Case-Compton
Dawn Chenier
Aleta Coggin
Caleb Craig
Amanda David
Marsha Dixon
Christine Ector
Tiana Ellis
Margaret Geertz
Caitlin Goldwater
Kayla Jack
Erika L. Kalgren
Joseph Kaplan
Saima Khan
Amber Kida

Kaley Kuntz
Jenna Layton
Thomas Lewis
Molly McDowell
Amanda Nash-
Steinbacher
Cristina Quinn (*through
2018*)
Anastasia Reznikovskaya
Kyle Romanofski
Caroline Russo
Isaac Smith
Tyler Sherven
Kristen Stanton
Giavanna Townsend
Eric Velzis
Emily Wilson
Rachel Yull



Five of our current staff are
AmeriCorps or AmeriCorps VISTA
alumni and we have been recognized
as a member of the Employers of
National Service Network.

2016 AmeriCorps and VISTA Host Sites

ACHIEVE

Broome County Council of Churches:

CHOW and Faith in Action

Broome County Office for Aging

Broome County Promise Zone

Cornell Cooperative Extension – Chemung County

Cornell Cooperative Extension – Tompkins County

CAPCO – Cortland County Community Action Program

Food Bank of the Southern Tier

Habitat for Humanity, Chemung County

Lourdes Hope Dispensary

Mothers & Babies Perinatal Network

Rural Health Network of South Central New York:

Community Health Services

Food and Health Network of South Central New York

Mobility Management of South Central New York

SUNY Upstate Medical University – Dr. Garabed A. Fattal Community Free Clinic

Tioga County Health Department

United Way of Broome County/Healthy Lifestyles Coalition

VINES (Volunteers Improving Neighborhood Environments)



“very moving and educational”

RURAL POVERTY SIMULATION PARTICIPANT

Rural Broome Counts

Rural Broome Counts released the *Rural Broome Counts Housing Supplement*, which examines the barriers and opportunities that surround rural housing. The report comes as the culmination of the second year of the Rural Broome Counts Project, following the initial needs and assets assessment in 2015. The Rural Broome Counts *Housing Supplement* provides a source of data on the housing needs in rural Broome County. In addition to the Housing Supplement, the team has also prepared a report on Rural Household Budgets, a Housing Resource Guide for Rural Municipalities, and an Executive Summary on Housing.

Whitney Point, NY. The event, which one participant described as “very moving and educational,” packed the school cafeteria, drawing in over 100 people from the surrounding community. Within the simulation, 83 participants assumed the roles of several rural families living on the edge of poverty. Each family profile was based upon real individuals facing poverty.

Described by one participant as “an eye-opening experience,” the simulation was designed to stimulate a deeper understanding and realization of the daily struggles faced by those living in poverty. The experience was successful in encouraging conversation about individual behavior and actions that can be taken to influence change through advocacy, giving, volunteering, and building relationships. By the end of the evening, participants were able to confront their assumptions, re-evaluate their beliefs, and eventually broaden their perspective about poverty in their own community.

“an eye-opening experience”

RURAL POVERTY SIMULATION PARTICIPANT

On April 28, 2016, Rural Broome Counts hosted its first *Rural Poverty Simulation* at the Tioughnioga Riverside Academy in



The Rural Broome Counts resources are available online:
www.rhnsny.org/programs/partnerships/rural-broome-counts

Rural Health Network of South Central New York 2016 Funding Support and Donations

Individual Donors

Diane Albrecht
Dr. Francis & Dr. Helen Battisti
Raymond & Sandra Berchtold
Lenore Boris
Elizabeth Ciaravino
Dr. Daniel Driscoll
Zachary Elkind
David & Mary El Emerson
Andrew Fagan
Kathleen Henehan
Emily Hotchkiss
Amelia LoDolce
Tamie MacDonald
Edward Machak
Cindy Martin
Mary McFadden
Kevin Millar
Janice Parker
Beth Saroney Paro
Judith Quaranta
John & Rita Salo
Sandra Sanzo
Betty Short
Dr. James Skiff
Delana Spaulding
Jack Sperling
Michele Summers
Lynn Verduin

Foundations, Private and Corporate Funding

Care Compass Network
Community Transportation Association of America
Daughters of Charity, Mission to Ministry
Excellus BlueCross BlueShield
Gannett Foundation
George & Margaret Mee Charitable Foundation
HealthLinkNY – NYS State Population Health
Improvement Program
Mildred Faulkner Truman Foundation
R.C. Smith Foundation
United Way of Broome County
United Way of Delaware and Otsego Counties

State and Federal Support

CNCS NY State Office (for AmeriCorps VISTA)
Corporation for National and Community Service
(CNCS)
Federal Transit Administration, Section 5310
Enhanced Mobility of Seniors and Individuals
with Disabilities Program
Federal Transit Administration, Section 5311
Formula Grants for Rural Areas Program via
Tioga County
New York State Department of Transportation
New York State Office of Rural Health
NYS Commission on National and Community
Service (for AmeriCorps State and National)



**Rural Health Network of SCNY Inc's
most recent financial statement is available
for review at www.CharitiesNYS.com**



Board Members

Lenore Boris, PhD, JD, *President 2017, Vice-President 2016*
Judith Quaranta, PhD, RN, CPN, AE-C, *Past President 2017, President 2016*
Tamie MacDonald, MGS, *Vice President 2017*
Sharon Chesna, *Treasurer 2017, Secretary 2016*
Sister Kathleen Natwin, *Treasurer (through 12/16)*
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Maureen Abbott
Lisanne Bobby
Mallory Evans *(through 12/16)*
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Lisa McCafferty, RS
Mary McFadden, BS, CPH
Cynthia Paddick
Johannes Peters
Greg Rittenhouse
Beth Saroney Paro
Delana Spaulding, FNP-BC
Amanda Walsh, MPH

Current Staff

Nick Cecconi, *Assistant Director, Mobility Management of SCNY*
Haley Desilet, *Assistant Director, Rural Health Service Corps*
Christian Dirado-Owens, *Program Coordinator, Food and Health Network of SCNY*
Stephanie Eatton-Johnson, *Mobility Management Transportation Advocate*
Pamela Guth, *Director, Community Health Services*
Josie Maroney, *Administrative Support Assistant*
Cindy Martin, *Director, Resource Development*
Mary Maruscak, *Population Health Coordinator, Tioga County*
Janice Parker, *Technical Advisor*
Julie Pitts, *Director, Rural Health Service Corps*
John C. (Jack) Salo, *Executive Director*
Anne Marie Sanford, *Mobility Management Transportation Advocate*
Elin Summerlee, *Director, Food and Health Network of SCNY*
William Wagner, *Director, Mobility Management of SCNY*
Donna Wickham, *Healthcare Access Facilitator*



of South Central New York, Inc.

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