

2019 IMPACT REPORT

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#NYThursdays

RURAL HEALTH NETWORK PRESIDENT'S MESSAGE Innovation, Dedication and Growth



The Rural Health Network has experienced unprecedented growth for several years. This growth is a result of the organization's ability to capitalize on a number of opportunities to fund existing programs and create innovative, new programs. Two factors contribute to

this growth. The first is an ad-Lenore Boris, herence to the Network mission **BOARD PRESIDENT** to improve the health and

> well-being of rural people and communities. The mission guides us to select new activities and to focus resources for this important work. The second factor is the tremendous dedication, resourcefulness, and flexibility of the staff and, thus, the organization as a whole. Talented staff have modified activities, realigned their skills as needed and refocused in response to client needs, changing resources and, most recently, the COVID-19 pandemic. They have done this while staying true to the mission and responsive to clients' needs.

> To accommodate Rural Health Network's growth in staff and services, the Network began conducting a multiyear Capital Campaign in 2019. This capital campaign will fund the purchase and renovation of 455 Court Street in Binghamton and allow us to create a multi-purpose training/meeting space where we will hold classes, conduct trainings and host community meetings. The building is

the hub from which staff will provide services on-site or via newly developed remote methods. The building will support the growth experienced by Rural Health Network thus far while enabling future growth.

This report outlines some of the important work done by the Network in 2019. We could not do this work without the tremendous support of community members such as yourself. If you are able, consider making a financial contribution to the Capital Campaign. Above all, thank you for your interest in our work and your on-going support to the Rural Health Network of South Central New York.



Jack Salo and Rural Health Network board presidents L to R: Shawn Yetter (2009–2010), Lenore Boris (2017–2020), Jack Salo, Natalie Thompson (2006–2008), Diane Albrecht (2001–2005), and Wayne Mitteer (1999–2001). Not pictured: Judy Quaranta (2014–2016) and Lynn Verduin (2011–2013).

FY 2018-2019 **Revenue and Expense Profile**

The graphs on the right represent Rural Health Network's financial activity for the period of July 1, 2018 through June 30, 2019. During this fiscal year, Rural Health Network continued to develop and secure a diverse array of resources to support our work and meet our mission. There was a significant increase in Fee for Service revenue resulting primarily from our work with Care Compass Network and DSRIP (Medicaid reform). Additionally, there was an increase in net assets of \$134,865 generated during the fiscal year. Expenses are shown by program area to provide a sense of financial activity and scale of different activities. More specific information on the Rural Health Network 2018–2019 Fiscal Year is available on Guidestar www.guidestar.org and the NYS Charities Bureau www.charitiesnys.com/RegistrySearch/search_charities.jsp websites.

About Us

For more than 20 years, Rural Health Network of South Central New York has advanced the health and well-being of rural people and communities.

Community Health Services and Education

Ensuring access to affordable, quality healthcare and support services has always been a priority for Rural Health Network. Community Health Workers support clients with case management and evidence-based tools as they navigate complex health and social service systems. Educational programs include chronic disease management classes and rural cultural competence training.

Food and Health Network

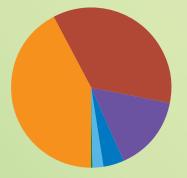
The Food and Health Network works to increase the consumption of healthy, locally grown food throughout our region. Current collaborative programs include Farm to School, the Prescription Fruit & Vegetable Program, and a regional program supporting volunteerism to improve access to healthy, affordable food.

Getthere use public transportation.

management, minor home friendships.

TOTAL REVENUE: \$2,072,392

- Governmental Grants: \$876,547
- Private Funding (Foundations, Donations, etc.): \$744,495
- Fee For Service (Care Compass Network): \$314,004
- Match Contributions to Governmental Grants: \$86,331
- In Kind Service and Space: \$50,365
- Interest and Miscellaneous Income: \$650



Getthere operates a transportation information and assistance call center that works to help those with transportation needs to find workable, affordable solutions. Serving five counties, Getthere provides case management services, financial assistance for eligible individuals who need transportation to healthcare appointments, transportation to employment services, and training on how to

Northern Broome CARES

Northern Broome CARES serves older adults in northern Broome County to support healthy aging through health services, case repairs, transportation, and social activities to grow and maintain

Rural Health Planning & Technical Assistance

Rural Health Network works at the local and regional level to provide assistance with health related needs assessments, planning, and project implementation. In 2019, projects included NYS Department of Health's Population Health Improvement Program (subcontract with Health-eConnections), the Social Determinants of Health Measurement project, the Tioga Tells quality of life assessment, and Poverty Simulations.

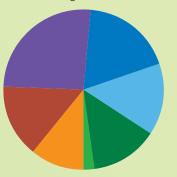
Rural Health Service Corps

Rural Health Network has been a regional provider of national service programming for twelve years. AmeriCorps and AmeriCorps VISTA National Service positions provide individuals with opportunities to serve their community for up to one year. Specific areas of service include improving nutrition and food security, working on community development projects, and addressing the opioid epidemic.

TOTAL EXPENSES: \$1,937,527

Community Health Services: \$211,819 Food and Health Network: \$285,020 Getthere (Transportation and Mobility Management): \$503,335 Planning, Education and Technical Assistance: \$353,877 Rural Health Service Corps (AmeriCorps, VISTA): \$279,813 Management and General: \$261,319

Fundraising: \$42,344



FROM THE EXECUTIVE DIRECTOR

The Power of Measurement



Over the past year, Rural Health Network has made two important investments in measuring the effectiveness of our work: (1) Measuring the impact of our purchasing on the regional economy and (2) Measuring the effectiveness of rural health services, specifically services addressing social determinants of health.*

Jack Salo. EXECUTIVE DIRECTOR

By measuring and having a better understanding of our economic impact, we can deliberately

contribute to the sectors of the local economy that align with our mission. Purchasing from local farms and food vendors supports our agricultural sector, generates a regional economic multiplier effect and provides fresh vegetables and fruit to individuals with chronic health conditions and limited resources. Purchasing services from non-profit and local government partners provides resources to implement important programs and services locally and strengthens the rural safety net and provider community. Being deliberate and thoughtful about purchasing is an important tool in improving rural economies and rural health.

With a generous grant from the New York State Health Foundation and additional support from Care Compass Network, Rural Health Network began a major new initiative in 2019. The Social Determinants of Health (SDOH) Measurement Project was implemented to improve how small and rural organizations collect data and measure the impact of their work, specifically work that could be of interest to, and supported by, healthcare

LOCAL FOOD PURCHASES FOR PRESCRIPTION FRUIT & VEGETABLE PROGRAM:



DURING 2019, RURAL HEALTH NETWORK DIRECT PURCHASING INVESTED

⁵489,383

IN THE LOCAL ECONOMY

PURCHASED TECHNICAL AND PROFESSIONAL SERVICES: **\$245,460**

PURCHASED SERVICES

·\$114,804

FROM NON-PROFIT

PARTNERS

PURCHASED TRANSPORTATION SERVICES

TO HEALTHCARE APPOINTMENTS AND

EMPLOYMENT:

\$88,381

partners and health insurance companies. The SDOH Measurement Project is working to measure impact across the spectrum of services that are foundational to individual and community health, including food and nutrition assistance, transportation, housing and health education. Under the leadership of SDOH Measurement Project Coordinator, Emma Nalin, the project has made great progress in 2019 (more information available on page 5). Work will continue through 2020 and Rural Health Network is committed to supporting a culture of improved measurement by small and rural community organizations beyond the initial project period.

"The **Social Determinants Of Health** are the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities—the unfair and avoidable differences in health status seen within and between countries."



Better Measurement: Leading to Participation in Value-based Payment

ealthcare's traditional payment structures are shifting from fee-for-service models, in which providers are paid for delivering separate episodes of care, to value-based payment (VBP) models, in which providers are incentivized to move the needle on key health outcomes for their patients. With this new expectation comes increased attention to addressing patients' non-medical needs such as food, transportation, financial stability, and housing. These health-related social needs, also referred to as Social Determinants of Health (SDOH), broadly impact the wellbeing of individuals and communities.

In this emerging payment environment, community based organizations (CBOs) addressing social determinants have new opportunities to access healthcare dollars – if they can demonstrate the financial savings and health impacts of their work. It is a new challenge for many small and rural CBOs to communicate their value in these specific terms.

With funding from the NYS Health Foundation and Care Compass Network (CCN), Rural Health Network has completed year one of a two-year initiative to increase high-quality measurement of SDOH work, both within the agency and among partners.

Brian Frey, Brian Frey Productions and Emma Nalin, **Social Determinants of Health Project Coordinator** preparing for video

Impact in 2019

- Eight benchmark return-on-investment calculations for SDOH interventions currently in use by the CCN cohort management program
- Five filmed interviews with CBO leaders completed, with the intent to inform and support other CBO leaders in the transitions to come
- Three SDOH measurement capacity assessments for Rural Health Network, Mothers & Babies Perinatal Network, and Tioga Opportunities, Inc.
- Two Binghamton University internship projects evaluating the Fruit and Vegetable Prescription Program (Bre'zhe Brooks, MPH) and launching the CLEAN Laundry Program (Emma Ospelt, MPH) (more information on page 7)
- In addition to these products, learnings from this project led to the development of an internal agency-wide data management plan for 2020, named the Year of Good Measurement.

Clinical-Community Partnership Flourishes in Primary Care Clinic

n 2019, Rural Health Network began serving clients in a new way through the Care Compass

Nicole Rogers, **Community Health Worker** accepting dental care products donated by Wilson Dental from Karyn Palmer, Wilson Dental **Community & Public Relations** Manager

Network (CCN) cohort management program. This program was designed to give clinical and social care providers experience working together to serve eligible clients with complex health and social needs. Rural Health Network is a community partner in five out of eighteen cohort networks in the CCN service area. The cohort networks, comprised of organizations with different expertise, focus on specific high-need populations and meet regularly to talk about

09

PATIENTS

ENROLLED

SERVICES

PROVIDED

6

TIOGA TELLS

the Table

each case, make referrals within and beyond the network, and ultimately address people's needs in a holistic way.

One cohort, centered on the Lourdes Center for Family Health at 303 Main St. in Binghamton, highlights the strength of clinical-community partnerships in particular through the placement of a Community Health Worker (CHW), Nicole Rogers, in shared office space with an Our Lady of Lourdes nurse navigator, Kelly

Top 5 Issues Addressed

- Wellness and Prevention
- Medication and Prescription Assistance

- Food and Nutrition
- Benefit Support
- Social Support

Quality of Life Assessment

he Tioga Tells quality of life assessment brought together residents, business partners, service providers, and county officials to identify the strengths and challenges impacting quality of life for Tioga County residents. The project was facilitated by AmeriCorps VISTA member Deanna Hutchison-Baker, who worked alongside Tioga Opportunities, Inc. and Tioga County Public Health.

Tioga Tells engaged 500 participants (85% Tioga residents) through a survey, kickoff event, and focus group discussions. Information from these activities was analyzed using the WealthWorks framework,

which sorts a community's strengths and resources into different types of "capital" to evaluate quality of life. In Tioga County, participants identified four key strengths - Nature Appeal, Local Schools, Sense of Community, and Community Organizations - and Inviting Communities to five priority challenges - Disconnect and Division, Traveling out of Tioga County, Lack of Social Support, Nostalgia, and Transportation Barriers. To learn more about the Tioga Tells

> project, visit rhnscny.org/publications/ **#assessments-research**. Tioga Opportunities, Inc. is leading the next phase of the project in 2020, expanding and building on the findings of the original report.



As CHW Nicole Rogers met with cohort members, she learned that many did not have the money or supplies they needed to do laundry. Having clean clothes restores people's sense of dignity, and cleaning linens regularly reduces the risk of bed bugs and other health concerns. To address this need, summer intern Emma Ospelt designed the **Community Laundry Effort** Assisting Neighbors (CLEAN) program, with funding from Care Compass Network. This program operates out of North of Main (NoMa) community center in Binghamton, where cohort members can go to pick up guarters, tokens, and detergent while connecting with other community resources. The program will continue through September 2020.

Murtha. While clients are on site for a medical appointment, they can meet with Nicole for social needs screening and navigation. Nicole and Kelly, with on-site support from a social worker and patient financial assistance counselor, work together to ensure clients' social needs are

met in alignment with their clinical care plan.

Additional cohort network partners include the Healthy Neighborhoods Program at the Broome County Health Department, the American Civic Association, and the YWCA.

Northern Broome CARES–Launching a New Program

year after moving the main office from Whitney Point to Binghamton, some of our staff have returned to Whitney Point to provide specialized services to older adults. The Northern Broome CARES (Care for Aging in Rural Environments program is available to adults 60 years of age and older in the towns of Triangle and Lisle. In 2019, staff visited local community groups, tabled at the Whitney Point Fall Festival, and presented at a public hearing t provide information about the program. Limited servi began via phone calls and home visits prior to the program's official launch in January 2020. The five-ye program is one of only two rural programs of its kind New York State.

Northern Broome CARES is located at 12 Strongs Place in Whitney Point, the home of the Broome County

The clinical-community partnership at 303 Main Street has provided the clinical staff [with] the time to focus on the clinical care of the population they are serving and at the same time have peace of mind that the community health worker will assist with life's necessities such as food, clothing and transportation. We have seen that when this trusting relationship is built with people by truly listening to their needs, their engagement in improving their lives, including their health, increases.

The partnership has also been a great learning experience for the staff at 303 Main Street. There is a heightened awareness of the social determinants of health, the impact they have on a person's health and the interventions that are available in our community to help.

-DEBORAH BLAKENEY, VICE-PRESIDENT CONTINUUM OF CARE, ASCENSION-LOURDES AND RURAL HEALTH NETWORK BOARD MEMBER

Office for Aging Northern Broome Senior Center. The program involves a collaboration of education, healthcare, aging services and community partners.

n 	Partners include:
ts)	Binghamton University Decker School of Nursing
	Binghamton University Department of Social Work
f	Broome County Office for Aging
<u>ey</u>	Broome County Department of Public Transportation
to rice	Lourdes Memorial Hospital
	Whitney Point Central School District
ear	Whitney Point Preschool and Daycare
d in	THIS PROJECT IS SUPPORTED BY FUNDING FROM THE NEW YORK STATE OFFICE FOR THE AGING UNDER THE NATURALLY OCCURRING RETIREMENT COMMUNITIES PROGRAM.

Partnership Helps Residents "Getthere"

n September 2019 Getthere started a partnership with Volunteer Transportation Center (VTC). VTC is a non-profit organization in Watertown, NY that coordinates local volunteers to provide transportation.

SEPTEMBER-DECEMBER 2019

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165 VOLUNTEER TRIPS OVER 5,000 MILES

\$4,235 SAVED

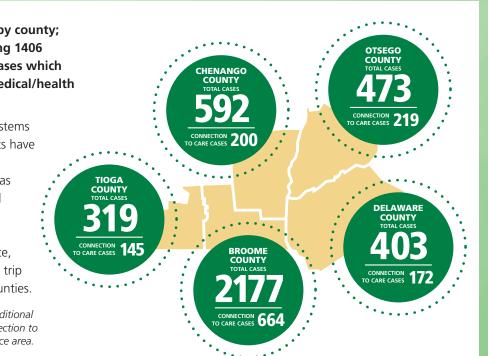
TRAVELED

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In addition to providing a needed service, there is significant cost savings to using volunteer drivers. For example, Getthere worked with a client who needed to get to a medical appointment in Whitney Point, less than a mile away from her home. The cost of a private taxi would have been over \$100 since the closest provider was located twenty miles away, in Binghamton. However, because Getthere was able to find a volunteer driver for this trip, the cost was less than \$20 to reimburse the volunteer. Spending less on each trip leaves more funding available for additional trips and to

serve additional clients. For some volunteers, the work is personal. Martha Nuzzela, volunteer driver, reflects: "I had an elderly father that lived out in the country and my siblings and I would go up and take him to doctor's appointments. I wondered about people that live out in the country that *don't* have family around to drive them, what do they do?" After her father passed away, Martha decided to become a volunteer driver. "It's clearly needed, just from the people that I've picked up and spoken with."

"VTC and Getthere are an effective partnership because the strengths of both organizations are at work," says Bill Wagner, Director of Getthere. "Getthere provides the call center and mobility management expertise, local recruiting knowledge and relationships with these small communities. VTC provides the driver's training, mileage reimbursement, and program expertise." The strong partnership between Getthere and VTC will continue to provide innovative and cost-effective transportation solutions for rural communities.



Population Health Improvement Program—a Retrospective

n 2015, Rural Health Network became a subcontract partner on NY State's Population Health Improveme Program (PHIP) five-year initiative. The Network partnered with organizations in Broome, Chenango, Delaware, Tioga, and Tompkins County to advance the PHIP's primary goal: identifying and improving social conditions that have the greatest impact on health.

In the initial assessment, Population Health Coordinators completed 238 stakeholder interviews and eight community focus groups. Much to our surprise, the priority topics were very similar across the f counties. Steering Committees were developed on ea topic, and regional groups met to determine the mos effective projects.

PROJECTS:

Transportation: Population Health Coordinators collected over 3,600 surveys, identified the need for transportation to primary care, connected patients to mobility management services, and coordinated with local media to share information with the community

Mental Health and Substance Use: Working with mental health and substance use providers, Population Health Coordinators developed a Workplace Wellness

Rural Cultural Competence Training

he Rural Cultural Competence (RCC) training program is a professional development resource for clinical and community service providers working with rural people. Rural Health Network began developing the program in 2015 to address the lack of rural cultural sensitivity education in the health and human services sector. The information is a combination of current research on the characteristics, attitudes, and health management trends among rural populations and anecdotal information from those who live, raise their families, work, and thrive in rural communities.

RCC is designed to:

- Describe characteristics of rural individuals, families, and communities, and discuss the health challenges that rural people face;
- Train participants to communicate with and provide services to rural people more effectively; and
- Provide resources to evaluate and improve rural cultural competence of participants and their organizations.

2019 Getthere cases by county; 4005 in total, including 1406 **Connection to Care cases which** are specifically for medical/health services.*

In rural areas, transit systems are limited and residents have few, if any, options to access necessities such as food, medical care, and employment without a car. Getthere provides transportation assistance, case management, and trip planning across five counties.

*In 2019, there were 41 additional Getthere cases and 6 Connection to Care cases outside the service area.

ted ent ne	Toolkit with best practice activities, policies, and resources for employers. The Southern Tier PHIP also provided community education on substance use, the opioid epidemic, workforce and legal supports for those with addictions, and prevention programs.
	Technical Assistance: Population Health Coordinators worked with county Departments of Public Health, hospital systems and other community groups to com- plete Community Assessments, Improvement Plans, and Service Plans.
ive Ich t	Age-Friendly Communities: Eight workshops intro- duced AARP's Age Friendly Framework as a planning guide for communities.
	Health Equity: Regional health equity events featured speakers on the social determinants of health, adverse childhood experiences, rural cultural competence, and law enforcement.
	Workplace Wellness Summit: This event provided Broome and Tioga County organizations and businesses with information about workplace wellness, creating a wellness committee and connecting to low cost or no

cost resources to promote wellness in the workplace.

In addition to the clinical and community provider audience, the RCC materials have recently been used in other settings. In Spring 2019, our AmeriCorps and VISTA members met with VISTA members from Rochester Youth Year, a Monroe County urban poverty initiative. The RCC materials facilitated discussion about the nuances between rural and urban poverty. In Summer 2019, Mary Maruscak, Director of Community Health Education presented the program at a NY State Office of Mental Health Symposium in Albany to a standing-room-only audience. Mary was then invited and accepted a seat at OMH's Statewide Multicultural Advisory Committee. 2020 will be the first time rural representation has been included on that committee. RCC has been shared with audiences as small as six

people and as large as 86 people. Response, collected in the form of training evaluations and in-person feedback, has been overwhelmingly positive. In response to the 2020 pandemic, RCC has been adapted for virtual delivery over video-conferencing platforms.

National Service Programs **Create New Partnerships**

ural Health Service Corps (RHSC) and the Food and Health Network (FaHN) collaborated on several important initiatives during 2019. The programs launched the region's first Farm to School AmeriCorps Program, hosted two AmeriCorps VISTA members to support FaHN programming, held four poverty simulations at Binghamton University, and helped recruit over 500 volunteers for food insecurity projects throughout the region.

The inaugural Farm to School Corps team included three members who worked in Broome, Cortland, Delaware, and Tioga counties. The members supported schools by providing hands-on learning opportunities, hosting local food taste tests, and creating a schoolwide culture of health. According to Jessica Barbini, the Farm to School Coordinator at FaHN, "The Farm to School program would not have been able to accomplish the work it did in 2019 without the continuous passion and support the members provide."

2019-2020

Theresa Rodabaugh

MacKenna Rvan

Sameerah Shaik*

VISTA Members

Amber Colby*

Emily End

Jamie Henry

Kyra Lowie

Tristan Mace

Michele McAuliffe

Hannah Taggart

Sophia Valente*

Dorothea Primavera*

Jacqueline Bogart +

Deanna Hutchison-Baker*

The Volunteer Generation Fund (VGF), a grant that supports RHSC and FaHN programming, added additional capacity to the Farm to School program by helping with recruitment of volunteers for taste tests and events. VGF also provided assistance for the initial Broome-Tioga School Garden Grants program, which awarded five school districts with funds to purchase garden supplies and promote youth volunteerism in school gardens. RHSC and FaHN exemplify the passion that Rural Health Network programs have for creating innovative collaborative opportunities.

2019 FARM TO SCHOOL CORPS

SUPPORTED 26 **SCHOOLS**



AmeriCorps Members Erika Allen Avsha Bhutta* Mitchell Brooks Kevin Brouillard* Margaret Caroompas* Emily Fusco* Inda Gillett Christopher Guy* Rosalie Hopko* Brianna Johnson* Nicole Kaczmarczyk Tara Kenyon* Phyllis Ling* Shea Magrane* Brandon Ngo* Jabari Randolph

‡ completed 2019 term and re-enrolled * completed term in 2019

Rural Health Service Corps Emily Reed*

2019 and 2020 AmeriCorps and VISTA Host Sites Binghamton University Community Schools Broome County Council of Churches Broome County Office for Aging Cornell Cooperative Extension–Cortland Family Counseling Services Food Bank of the Southern Tier Rural Health Network of South Central New York Community Health Education Community Health Services **Development & Communications** Food and Health Network Lourdes Opioid Use Disorder Partnership Schulyer County Public Health Department Seven Valleys Health Coalition Southern Tier AIDS Program Steuben County Public Defender Tioga Opportunities, Inc. VINES–Volunteers Improving Neighborhood Environments

RHSC ALUMNI PROFILE Susan Beaudoin

What attracted you to an AmeriCorps position with the **Rural Health Service Corps?**

I knew that I wanted to work in the non-profit space and was interested in policy issues. The position was a perfect opportunity to launch my nonprofit career and to do so in a space that matched well my interests and upbringing. Food and cooking have always been an important part of my family.

What did you learn from your placement at Rural Health Network?

The position was a great opportunity to do a bit of everything. I had exposure that allowed me to develop skills like content writing and editing, meeting facilitation, research, grant writing, a bit of website development. As well as how to effectively communicate, collaborate, be flexible, and be willing to jump into any task. Working at FaHN, RHN, and particularly with Jack taught me so many important lessons like the importance of innovation and addressing the many aspects of communities-really looking at and planning for addressing all the needs of the community that contribute to health and food security.

I was able to contribute to the process of rebranding the program as the Food and Health Network and had some amazing mentors in Jack Salo, Phil Metzgar, Diane Albrecht, Matt Griffin and the late Ray Denniston.

> A lot of the work I did was about developing systems- newsletters, website, etc. I hope that



members?



Susan Beaudoin was the first AmeriCorps member with what was then known as the Regional Community Food Project, now known as the Food and Health Network (FaHN). She is the Senior Special Projects & Initiative Associate with the Food Research & Action Center (FRAC) in Washington, DC, which works to eradicate poverty-related hunger and undernutrition in the United States. The special projects and initiatives team works to implement cross-program projects and drive new nutrition and anti-hunger strategic initiatives at FRAC. Susan

is originally from the Apalachin/Owego area and is a graduate of St. Mary's College of Maryland where she majored in Political Science.

Do you have any words of advice for current members and/or prospective AmeriCorps

Always be open to listening and learning. The people around youcolleagues, the community—have so much to teach you. But also trust yourself and ask questions— You bring your own unique set of knowledge, experiences, and skills that are valuable.

In this unprecedented time, we're all learning—both professionally and personally—so make sure you take time to take care of yourself and of others. It's critical now to focus even more on centering compassion: compassion for the community you work with, your colleagues, and for yourself.

What was some of the work you did as an AmeriCorps member that you're most proud of?

those pieces helped lay groundwork for the incredible strides that FaHN has made in the last 10 years. One other piece that comes to mind is providing support for the 2010 Growing Health event, which was a full day conference and evening local food tasting. The event planning skills I learned then have carried through my career into subsequent positions.

You have been a regular supporter of Rural Health Network and our Food and Health Network program. What inspires you to support our work?

I'm so thankful for all I learned at RHN and FaHN, and for the incredible work you're doing in the region. It has been exciting to watch the growth and innovation happening at Rural Health Network. I'm thankful for the experiences I had that launched my career and allowed me to develop skills I continue to use.

STAFF PROFILE Erin Summerlee, Director, Food and Health Network

Tell us about the growth of Food and Health Network (FaHN) from your start as a national service member.

When I started as an AmeriCorps member in late 2012, FaHN was "staffed" by one service member and guided by our Steering Committee. Now in 2019, we have grown to 3 staff, 2 Farm to School AmeriCorps members, and 2 VISTA members. With this significant growth and increased capacity our focus has evolved from primarily

Erin Summerlee

Erin Summerlee grew up in Vestal, NY where she first developed a passion for cooking, growing food, and social justice. After graduating from Loyola University Chicago with a Bachelor's degree in International Studies, Erin worked on an organic vegetable farm in Chelsea, Michigan before returning to NY to start her career in food systems.

Erin serves a variety of roles in the community, including Food Bank of the Southern Tier's Board of Directors and Advocacy Committee Chair; Farm to Institution NYS Leadership Team;

Management Committee of the Northeast Organic Farming Association of New York, Certified Organic LLC; Board of Directors, Center for Agricultural Development & Entrepreneurship (Oneonta, NY), and the NYS Farm to School Coordinating Committee.

Erin resides on the West Side of Binghamton with her partner Chris and beloved dog, Larry. You can usually find them on long walks in the neighborhood, cooking, listening to music, or spending time with friends and family. convening regional stakeholders for networking, events, and conducting assessments; to operating direct programs while also strengthening regional collaborations, providing technical assistance, and supporting policy. FaHN has always had a unique role in identifying gaps, convening partners, securing funding, and supporting initiatives to address those gaps—whether directly or supporting another organization.

How did you become interested in working in this field?

While my love of food and cooking has been lifelong, my interest in regional food systems emerged while studying issues of food access, agriculture, and human rights internationally. While attending college in Chicago, I participated in two alternative spring break trips that played a significant role in shaping my awareness of local and regional food systems and sparked my interest in shifting career paths. During these trips I had the opportunity to learn about urban

Food and Health Network Members and Sponsors

Jerry and Diane Albrecht Susan Beaudoin Beth Bossong Broome County Council of Churches Broome-Tioga BOCES Chenango County Health Department Olivia Consol Tom and Nikki Corgel Diane Crews Ray and Ann Denniston Nancy Eckstrom Food Bank of the Southern Tier

Matt Griffin Alison Handy-Twang Kevin Hodne Jane's Fund Dick and Nancy Kuehnemund Suzanne Lewis Liberty View Farm Kate Miller-Corcoran Larry and Denise Moore Karen Nelson Otsego 2000–Cooperstown Farmers Market Peaceful by Nature Farm Jack Salo Linda and Bob Seeger Seven Valleys Health Coalition Amy Shapiro Stone Horse Farm Doris Summerlee Greg Summerlee Tioga County Hunger Coalition Lauren Tonti Volunteers Improving Neighborhood Environments (VINES) Joseph and Maureen Wilson Rosemarie Zonetti



agriculture and food justice efforts in Detroit, and work on an organic farm in Chelsea, Michigan where I also got my first taste of farm to school. After graduating I decided to move to the farm I had visited in Michigan where I gained first hand experience with the joys and challenges of farming, and witnessed a deep sense of community, connection, and innovation. This led me back to the Binghamton area in an effort to better understand, serve, and invest in my own community through regional food systems work. Seven years later I am just as interested and learning as much as when I arrived.

What one or two things are you most proud of having accomplished in 2019?

Every year since I started with FaHN has brought some form of growth and innovation, and the same holds true for 2019. This year I am particularly proud of launching the first full year of the Farm to School Corps, which has brought together our many years of supporting farm to school programs and Rural Health Network's AmeriCorps and VISTA program. I am also very proud of the Food as Medicine Summit held in November 2019, where over 160 people attended to learn about the intersections of nutrition, food security, healthy food access, and healthcare. I am very excited for regional collaboration and innovation around Food as Medicine initiatives in 2020.

What is your vision for the Food and Health Network over the next 3-5 years?

I would like to deepen the impact, internal strengths, and capacity of our existing programs, including Farm to School, Fruit and Vegetable Prescription Program, and our Community Food Systems program. I would like to pursue new opportunities aligned with our current work, such as Farm to Institution—including hospitals; partnership with healthcare for food access and nutrition initiatives: and rural wealth building through food systems. In addition to programming, I would like to focus on building capacity among partner organizations to advance Food as Medicine programs and policy.

Visit <u>www.foodandhealthnetwork.org</u> to read the Food and Health Network 2019 Year in Review. AmeriCorps members and farm to school partner Cornell Cooperative Extension of Broome County prepare samples for a NY Baked Bean taste test at Johnson City High School.

FVRx 2019 BY THE NUMBERS

\$86,400

In Vouchers Distributed for Local Produce

> BROOME: \$46,800 DELAWARE: \$8,280 TIOGA: \$31,320

31

Locations to Shop with FVRx BROOME: 25 DELAWARE: 3 TIOGA: 3

240

Participating Individuals and Their Families BROOME: 130 DELAWARE: 23 TIOGA: 87

11

Primary Care Clinic Partners BROOME: 6 DELAWARE: 2 TIOGA: 3

Rural Health Network Donors and Funding Support

Individuals

Maureen Abbott Jerry & Diane Albrecht Jessica Barbini Susan Beaudoin Raymond and Sandra Berchtold Danielle Berchtold Deborah Blakeney Lisanne Bobby Rick Boland Edna Boone Lenore Boris Christina Boyd Katherine Buchta Kathleen Bunnell Nancy Cahill in memory of Charles R. Williams Nick Cecconi Sharon Chesna Ray & Ann Denniston Haley Desilet Ronald Dougherty Merrill Douglas Nancy Eckstrom David and Mary El Emerson Andrew Fagan Kara Fisher

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In fall 2019, the former and current Board Presidents of the **Rural Health Network** challenged all former board members to join them in supporting the Capital Campaign. The presidents hosted an October reception, inviting former members to reconnect with each other, tour the agency offices, and enjoy refreshments. To date current and former board members have made gifts or pledges of more than \$23,000 to support the capital campaign goals.

In Memory of **Raymond J. Denniston**

Anonymous Diane Albrecht Debbi Beauvais Carolyn Beveridge Mark Bordeau Jean Booska David & Julie Carter Alfred & Peggy Colosi William DeLorme Sandra & Bruce Denham Dalibor Drummer East Side Wine & Liquors Nancy Eckstrom Gary and Sue Freed Jamison Grailer Renee Hanks Patricia Jimenez Kerrie Liedtke Amelia LoDolce Gretchen Mallory Kathleen McLaughlin William McPeak

Foundation, Private, and Corporate Funding

Apalachin United Methodist Church Apple Travel, Deanne DiRado Care Compass Network Chenango United Way Chianis & Anderson Architects, PLLC Chobani Community Impact Fund of the Community Foundation for South Central New York Community Foundation for South Central New York Coughlin & Gerhart LLP Davidson Fox & Company LLP Dr. G. Clifford and Florence B. Decker Foundation George A. and Margaret Mee Charitable Foundation Kowalik and Associates LLC Leatherstocking Collaborative Health Partners Levene Gouldin & Thompson, LLP New York State Health Foundation Our Green Acres **RC Smith Foundation**



Glenda Neff Julie Raway Susan Roberts Christopher Rosenbaum Sandra & Sam Ruffo Chelsea Scantlan Sherry Singh Vicki Snitzler Susan Sutton

Rural Health Network Staff SEFCU York Tioga State Bank Employees Wilson's BBO

Broome County Health Department: NYS Creating Healthy Schools and **Communities Grant** Broome-Tioga BOCES: NYS Farm to School Grant and Farm to School **Corps Project** Corporation for National and Community Service: VISTA Grant

Raymond J. Denniston lived a life overflowing with compassion and laughter. He was a tireless advocate for child nutrition and fighting poverty. He started summer and weekend meal programs for kids, championed the Farm to School program and was an original founding member of the Food and Health Network. Ray passed away on December 24, 2019.

Jon Tettina Lauren Tonti, Stone Horse Farm Karen Wadsworth Kathy Wiegert on behalf of STVBS Women's Club Ministry Board members Annamary Zappia Rosemarie Zonetti Wal-Mart Foundation

Riger Marketing Communications Roger Follett Foundation

State Employees Federated Appeal The Roger Follett Foundation, Inc. The Women's Fund of the Community Foundation for South Central New

United Way of Broome County, Inc. United Way of Tompkins County

Visions Federal Credit Union

County, State and Federal Funding

Federal Transit Administration, Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilites Program

Federal Transit Administration, Section 5311 Formula Grants for Rural Areas Program via Tioga County

Floyd Hooker Foundation

New York State Commission on National and Community Service-AmeriCorps and Volunteer Generation Fund Grants

New York State Department of Agriculture & Markets: Farm to School Grant

New York State Department of Health–Office of Rural Health

New York State Department of Transportation

New York State Office for the Aging-Naturally Occurring Retirement **Communities Program** New York State Office of Substance

Abuse and Alcohol Services Sidney Central School District: NYS Farm to School Grant



Rural Health Network was founded in 1998, initially serving Broome, Delaware, and Tioga counties. Since then we have demonstrated a strong focus on our mission to advance the health and well-being of rural people and communities, expanding our service area from three to ten counties. Currently one or more services are provided in Broome, Chenango, Chemung, Cortland, Delaware, Otsego, Schuyler, Steuben, Tioga, and Tompkins counties.

 Original service area
Counties added since 1998 in which at least one service is provided.

Board Members

Lenore L. Boris, PhD, JD, President Tamie Reed, MGS, Vice-President Sharon Chesna, Treasurer ‡ Greg Rittenhouse, Treasurer Sandra Sanzo, RN, BSN, Secretary Maureen Abbott ‡ Kelly Ames Josephine Anderson Robles Shelly Bartow, PhD Deborah Blakeney, RN, BSN, MS, CCM Lisanne P. Bobby **Rick Boland** Paula Brown Luann Kida, MA, LMSW Melissa Klinko Amelia LoDolce, MS ‡ Lisa McCafferty, RS ‡ Nicole Rouhana, PhD, CNM, FNP-BC ‡ Beth Saroney Paro James M. Skiff, MD Amanda Walsh, MPH Katherine G. Young, MA, CASAC

‡ term ended 12/31/19

Staff

John (Jack) C. Salo, Executive Director Mindy Alexander, Community Health Worker I Sandra Atwood, Northern Broome CARES Program Coordinator Jessica Barbini, Farm to School Coordinator Katie McDonald Blaine, Transportation to Employment Coordinator Susan Boldman, Community Health Worker I Stephanie Button, Mobility & Transportation Advocate Nick Cecconi, Assistant Director, Getthere Haley Desilet, Assistant Director, Rural Health Service Corps Kara Fisher, Mobility & Transportation Advocate Maggi Frommer, Financial Services Manager Pamela Guth, Director, Community Health Services Thomas Lewis, Community Food Coordinator Justina Lewis, Mobility & Transportation Advocate Cindy Martin, Director, Resource Development Mary Maruscak, Director, Community Health Education Emma Nalin, Social Determinants Project Coordinator Rose Anna Peguero, Community Health Worker I Julie Pitts, Director, Rural Health Service Corps Rachel Priest, Administrative Services Coordinator Nicole Rogers, Community Health Worker I Debora Rogers, Community Health Worker I, Delaware County Erin Summerlee, Director, Food and Health Network Terri Tweedie, Community Health Worker II, Delaware County William Wagner, Director, Getthere Stephanie Wright,* Population Health Coordinator Shelby Zimmer, Administrative Services Assistant

*resigned