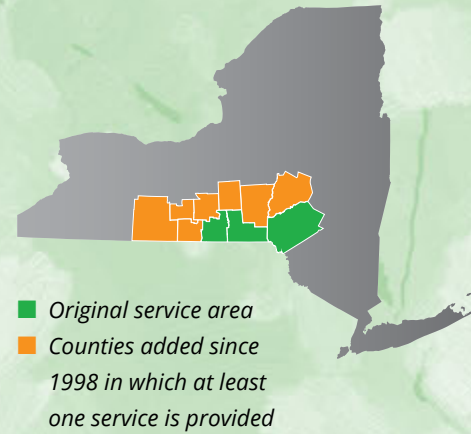


# 2021 Impact Report



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.



## About Us

**For more than 23 years, Rural Health Network of South Central New York has advanced the health and well-being of rural people and communities.**

### Community Health Services

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 as they navigate complex health and social service systems. Northern Broome CARES serves older adults in northern Broome County to support healthy aging through health services, case management, minor home repairs, transportation, and social activities to grow and maintain friendships.

### Community Health Education

Community Health Educators deliver evidence-based workshops and information so community members can better understand, prevent, and manage health conditions. For service providers, the Community Health Education team offers a three-part workforce development training series on Social Determinants of Health, Rural Cultural Competence, and Health Literacy. Rural Health Network also works at the local and regional level to provide assistance with health related needs assessments, planning, and project implementation.

### Food and Health Network

The Food and Health Network works to increase access to and consumption of healthy, locally grown food throughout our region. Current collaborative programs include Farm to School, Food as Medicine—including Produce Rx, a produce prescription program—and a rural food retail initiative to better understand and strengthen rural food access and economic viability.

### Getthere

Getthere connects those in need of transportation to healthcare, food, and employment to workable, sustainable solutions across five counties. Getthere provides transportation case management, education, and support to improve clients' access, independence, and service coordination. Financial assistance and travel training are available for eligible older adults, people with disabilities, lower-income individuals, and others.

### Rural Health Service Corps (RHSC)

Rural Health Network has been a regional provider of national service programming for fourteen 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, education, public health outreach, and addressing the opioid epidemic.

## STEADFAST AND RESILIENT



**Lisanne P. Bobby**  
BOARD PRESIDENT

### Letter from the Board President

I have had the opportunity to be associated with the Rural Health Network for many years. As I conclude my first year as Board President, I want to express my gratitude for the staff and board who serve our communities and for the residents who allow us to serve them.

Many entered 2021 unsure what to expect during the second year of the COVID-19 pandemic. As a nation, descriptions of the year ranged from relentless and disappointing to messy and clarifying; from fragile and unexpected to change and survival. The Rural Health Network of South Central New York's board, staff and those served were not exempt from the impact of the pandemic. It was a year of personal and organizational adaptation and change. We thanked longtime friend and Executive Director Jack Salo, for his nearly 17 years of service at the Network and welcomed a new Executive Director, Mark Bordeau. We bid farewell and welcomed other staff and board members, grateful for their impact.

Throughout the year, Rural Health Network continued to measure the impact of social determinant of health interventions, to innovate, transform, expand, and launch new services, many

of which you will read about in this Impact Report. The Network ended 2021 optimistic and changed, yet steadfast and resilient.

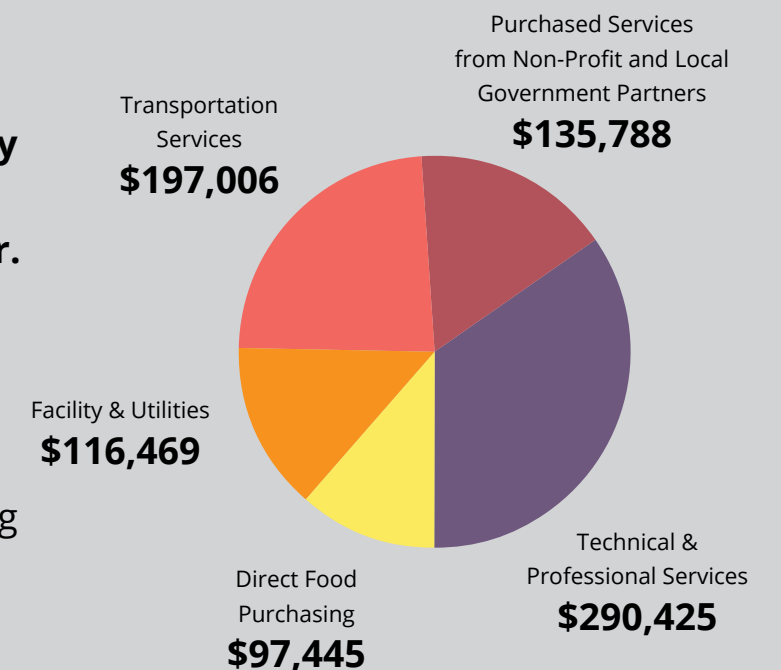
I invite you to reflect with me, "What is the most important lesson that we learned? How will we be different because of what we have seen, heard, and felt?" The pandemic has demonstrated how quickly life can change, at times from circumstances beyond our control. However, there are many things we can control. We set our own priorities and determine how we use our energy, time and means. I was reminded that individuals united with a shared passion and commitment to serve others, when anchored in a solid mission, can implement extraordinary measures to advance the health and well-being of others. I saw this at Rural Health Network and in our collaborative partnerships.

We remain true to our mission to advance the health and well-being of rural people and communities. The organization has a solid foundation. The staff are steadfast and immovable in their resolve to serve. The Rural Health Network will continue to be flexible and resilient in the face of external pressures and changing community need.

Thank you for your support in this important work. It is a privilege and honor to work collectively to advance the health and well-being of rural people and communities.

**During 2021, Rural Health Network invested a total of \$837,133 in the local economy through direct purchasing—a 16% increase from last year.**

By measuring our economic impact, we can deliberately contribute to the sectors of the local economy that align with our mission. Strengthening rural economies improves rural health.





# A YEAR OF CHALLENGES AND CHANGE



**Mark Bordeau**  
EXECUTIVE DIRECTOR

Health Network of South Central New York in July. While we were not immune to all the unique challenges 2021 brought to our world, I was extremely grateful and proud of all that the team at Rural Health Network was still able to accomplish in the face of adversity.

COVID continued to impact how we delivered our services. We also saw a change in our leadership as we said thank you and goodbye to our long-time Executive Director Jack Salo and our Director of Getthere William Wagner. Despite those challenges, our dedicated staff, board of directors, and community partners were more driven than ever to achieve our mission.

As you'll see in the coming pages, we firmly believe that the power of the Rural Health Network of South Central New York

## Letter from the Executive Director

As I look back at 2021, it will be remembered as a year of challenges and change. I was blessed to start my new role as Executive Director of Rural

comes from the passionate people who live and breathe our shared mission and vision every day. Together, we are emerging stronger and making a meaningful difference for the communities we serve.

Everything we did was made possible through the support of the Rural Health Network's funders and donors and strengthened through deep engagement

with our community of stakeholders. The generosity of our funders and donors helped us through a challenging 2021 and has given us a strong foundation to serve our community in the future.

We are so grateful to everyone who supports our work, together we will continue to advance the health and well-being of rural people and communities.

### A FEW HIGHLIGHTS FROM 2021:

**AmeriCorps Members served 21,619 hours of time in the community. Some of their work focused on:**

- Assisting seniors aging in place in the communities where they live
- Helping provide healthy local foods to 26 school districts in the Southern Tier
- Anti-poverty initiatives

**Getthere's Connection to Care, a program assisting people without Medicaid in getting to health related appointments, had its most impactful year on record:**

- Over 160,000 miles traveled
- Serving over 1,000 unique individuals with over 5,000 cases
- 730 of those cases being COVID related

**Food and Health Network's Produce Prescription program assisted 320 individuals with diet sensitive chronic health conditions. This resulted in \$115,000 in produce being purchased from local farmers.**

# Farm to School Updates

In 2021, FaHN helped expand the NY Thursday Farm to School program to 11 additional school districts within Delaware-Chenango-Madison-Otsego (DCMO) BOCES. We're now working to support farm to school programs in a total of 26 school districts across 5 counties.

In October, we hosted a Farmer Meet and Greet with Broome-Tioga BOCES and Cornell Cooperative Extension of Broome County to facilitate conversations between community partners, school food service staff, and farm partners. Over 30 stakeholders attended to help strengthen and grow the program.

Through this collaborative work, \$1,648,609 in sales were made to local farms, food hubs, and processors from

September '20 to December '21 across all 26 school districts. From January '21 to December '21, 227,033 lbs of food were purchased by BT BOCES and DCMO BOCES combined.

Despite the pandemic creating significant barriers, taste tests were able to start up again in July of 2021, the first time since March of 2020. The taste tests were greeted with overwhelming support and enthusiasm from staff and students. The Broome Tioga farm to school team held over 8 taste tests from July to December of 2021, showcasing 6 new farm to school recipes. DCMO BOCES also began piloting NY Thursday once a month across their 11 school districts.



**Farm to School Coordinator Hannah Rion serves NY Thursday Meal**



## PARMESAN ROASTED CAULIFLOWER *Servings: 7 (½ cup)*

### Ingredients

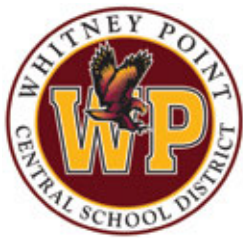
- 1 head of cauliflower
- 2 Tablespoons vegetable oil
- ½ teaspoon garlic powder
- ½ cup grated parmesan cheese

*Food & Health Network  
Rock on Café  
Cornell Cooperative Extension  
Broome County*

### Steps

1. Preheat oven to 375° F.
2. Wash head of cauliflower and cut it into bite-size florets.
3. In a bowl, mix oil and garlic powder. Add mixture to the cauliflower florets and stir until fully coated.
4. Mix in parmesan cheese and stir until fully coated.
5. Spread the cauliflower onto a greased baking sheet.
6. Bake for about 25 minutes or until cauliflower is lightly browned and crisp around the edges. Stir halfway through baking time.

## Second Annual Rural Health Awards Announced



**Rural Health Champion: Whitney Point Central School District.** For their integrated community schools model, emphasis on trauma informed care, and commitment to the entire community, we recognize Whitney Point Central Schools as a Rural Health Champion. Rural Health Network

has long admired Whitney Point Central School District's commitment to meeting the needs of students both in and out of the classroom. They have been a strong partner since the days when Rural Health Network's main office was in Whitney Point. Former Superintendent Pat Follette served on Advisory Boards for our Rural Broome Counts project and Northern Broome CARES program.



**Rural Health Leader: Lenore Boris, PhD, JD, RN** is the immediate past President of the Rural Health Network Board of Directors. She served two terms as President, providing leadership through a time of unprecedented growth for the agency. In September 2021, Dr. Boris was named Dean of St. Joseph's College of Nursing where

she oversees the daily operations of the College, faculty development, curriculum design, research, and clinical services. Dr. Boris began her nursing career in the U.S. Air Force, retiring in 2007 as a colonel after 28 years of service. She spent more than 15 years as an associate dean at the Binghamton Campus of SUNY Upstate Medical University's College of Medicine where, among other duties, she supervised a free primary care clinic for uninsured adults.

**Rural Health Partner: Gerould's Health Care Center.** Rural Health Network's Community Health Workers had the privilege of working with Gerould's Health Care Center on two projects focused on chronic disease management. Pamela Guth, Director of Community Health Services, said that "In my view, one of Gerould's many strengths is their innovative, integrated, and inclusive approach to clinical and community based partnerships designed to provide holistic wrap-around services to their clients in order to improve individual and population health outcomes."



**Rural Health Practitioner: Rachel Mischler, RD, CDN**, is an outpatient dietitian with Lourdes Hospital. Ms. Mischler has been a champion for Rural Health Network's

Produce Prescription Program since it was first piloted in 2017. Ms. Mischler is truly an advocate for addressing the barriers that individuals encounter when trying to meet their nutrition goals, and is always willing to try new approaches in order to support her patients and the community.



Community Health Services Highlights

In 2021, Community Health Workers served 248 individuals through 2,367 phone calls, home visits, office visits, and other encounters across all CHS programs.

In 2021, Rural Health Network’s Community Health Workers supported clients in Delaware County (Terri Tweedie–Delaware Valley Hospital), Binghamton (Nicole Rogers–Lourdes Primary Care Practices), and Northern Broome County (Mindy Alexander–Northern Broome CARES program).

At the end of September 2021, Community Health Workers wrapped up their work in five 18-month cohort management programs under Care Compass Network’s Medicaid Redesign project. These collaborative cohorts involved many different community and clinical partners and were led by the following service providers: Ascension Lourdes (two

cohorts), Gerould’s Healthcare Center, Guthrie, and Springbrook NY. Community Health Workers provided patient outreach and engagement, case management, health coaching and education, produce prescriptions, and connection to primary care. Consistent with our past experience, the greatest social needs of cohort clients were food, transportation, and housing. The team’s high performance earned Rural Health Network unexpected revenue in the form of performance payments and a data sharing incentive. Looking forward, this type of performance-based payment arrangement could become the standard for funding Community Health Workers.

Community Health Workers Help Rural People Access:

- Primary Care
- Prescriptions
- Health Insurance and Member Benefits
- Healthy Foods
- Transportation
- Education and Employment
- Safe, Affordable Housing
- Technology Support
- Health Education
- Financial Assistance Programs

Salute to Jack Salo

John C. (Jack) Salo served as Executive Director of Rural Health Network for nearly 17 years during which time the Network expanded significantly. His leadership style, vision, and commitment to collaboration led to the establishment of Rural Health Service Corps, Food and Health Network, Getthere, and other programs. When Board President Lisanne Bobby announced Jack’s resignation, she said, “He has developed personal relationships and organizational partnerships that facilitate our collective focus on improving health, food security, transportation, and local economies across the Network service area. Jack’s work on behalf of rural populations will continue to be felt at Rural Health Network and within the region and New York State into the future.”

In recognizing the legacy of Jack’s leadership at Rural Health Network, the Board of Directors has dedicated the conference



Jack Salo and Assemblywoman Donna Lupardo

space in the newly renovated office as “The John C. Salo Learning Center.” The Board and staff also held an informal reception in his honor last July.

The New York State Association for Rural Health (NYSARH) also honored Jack as the winner of the 2021 Senator McGee Rural Health Award. The award announcement stated that “Mr. Salo has been recognized with this award for devoting his career to the needs of rural communities and for his vision to recognize and advocate for the multiplicities of rural life situations that impact health. As a pioneer in rural health innovations, Salo has impacted not only the health status of rural communities, but the

economic viability of rural communities.”

Jack Salo continues to consult with Rural Health Network during our process to bring accounting services in-house and prepare the fiscal year 2022–2023 budget.

TRANSPORTATION TO EMPLOYMENT EXPANDS

Getthere’s Transportation to Employment Program (TEP), which helps people maintain a long-term job through transportation assistance, has seen significant growth since it began as a fledgling project in 2018.

TEP addresses a challenge that many unemployed individuals find themselves facing: the excitement of a new job offer met with the reality that they may never get to start that job because they need a regular paycheck to afford the cost of transportation. The program provides a bridge to long-term employment by extending short-term transportation assistance to individuals while they build funds to support their own transportation costs.

The program’s rapid expansion reflects the need for transportation to employment services across South Central New York. Thanks to the support of funders, TEP now offers services in six counties: Broome, Chenango, Cortland, Delaware, Otsego, and Tioga. The Broome County United Way’s Binghamton-Broome Anti-Poverty



Initiative paved the way for TEP to be piloted in the City of Binghamton in 2018 and then serve all Broome County residents in 2019. TEP saw significant growth in 2020, moving into Chenango, Otsego, and Tioga

Counties with the support of Chenango County, Tioga County Rural Ministry, and the Otsego Community Foundation. Funding in 2021 from the Appalachian Regional Commission allowed TEP to work with individuals in Delaware and Cortland Counties in addition to reaching folks that were not served by the program in 2018–2020.

Stan Varghese joined Getthere as a Transportation Employment Associate to support TEP efforts in 2021. Stan interfaces with county social services, workforce development, and human service agencies, as well as other partners that work with our target population. Stan offers case management to all program participants, working to create an individualized short-term transportation plan that supports a long-term transportation strategy.

The expansion has allowed TEP staff to work with employers to help them broaden their labor pool and increase attendance and retention related to transportation. Most recently, TEP worked with Chobani in partnership with ICF, a consultant for the NYS Department of Transportation’s 511NY program, and the Volunteer Transportation Center.

On the Road to Independence

In August 2021, Getthere’s Transportation to Employment Program (TEP) received a referral from the Workforce Innovation and Opportunity Act (WIOA) Employment Educator at Cornell Cooperative Extension of Tioga County (CCE). At the time, the referred client was working per diem 12-hour shifts four to five times every week and needed assistance paying for fuel from Owego to Vestal. Fuel cost had not previously been a problem while the individual was living in temporary housing, but it would not be affordable once they moved to their own apartment.

TEP staff worked closely with the Educator at CCE to understand the individual’s situation; they had overcome barrier after barrier and made enormous strides toward becoming

independent. It was important that the individual remain living in Owego while working in Vestal. Moving closer to the place of employment was not a viable option for the individual’s circumstances. In addition, the Educator did not want the person to experience a lapse in employment after coming so far.

TEP was able to support the individual by providing fuel cards to help them get to their job and then to a new job assignment through Nurse Connections. The individual successfully moved into their very own apartment and reached their 90-day long-term employment milestone as a home health care aide thanks to the collaboration between Getthere TEP and the CCE WIOA Youth Employment Program.

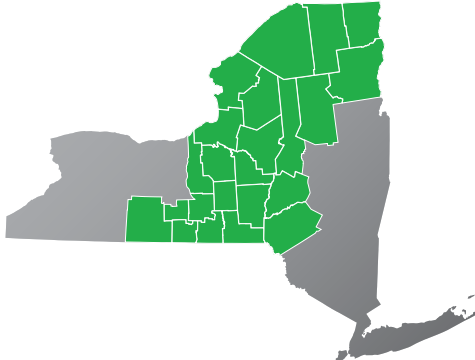


# Getthere Improves Access & Independence

The “How Do I Getthere?” Travel Training Program helps individuals navigate rural and urban transportation resources safely and independently through one-on-one or small group training. The program is specifically designed to meet the unique needs of individuals with intellectual and developmental disabilities (IDD). Getthere is one of very few travel training programs for rural people in the United States.

Getthere’s travel training efforts got a boost in late 2020 from the New York State Office for People With Developmental Disabilities (OPWDD) Planning Council.

Funding covers OPWDD Region 2, which comprises 22 predominantly rural counties that stretch from Steuben County in the west to Clinton County in the northeast. Services, particularly specialized care, employment, and social engagement opportunities, tend to be concentrated



in urban areas, which leaves rural people with prohibitive travel times and distances. “How Do I Getthere?” Travel Training teaches individuals what transportation resources are available and helps them build the confidence needed to be actively engaged members of their community.

Due to the large service area, “How Do I Getthere?” utilizes a train-the-trainer model in which a Getthere Lead Travel Trainer trains representatives from across the region who work with clients in the areas they serve. Kara Fisher, a former Mobility Transportation Advocate, stepped into the role of

Lead Travel Trainer before leaving the Rural Health Network in September 2021.

During her tenure, Kara, with the support of Bill Wagner, Getthere’s former Director, created a train-the-trainer curriculum, the Travel Training Guidebook, and began overseeing work on travel training



**A look at the production of the “How Do I Getthere?” travel training video series.** Special thanks to Brian Frey of Brian Frey Productions for helping create the nine video series and to HTM MedTrans for allowing Getthere to utilize their staff and vehicles for filming.



educational videos. Julie Feheley assumed the role of Lead Travel Trainer in October 2021, picking up where Kara left off. In total, Kara and Julie have trained 17 travel trainers from organizations across eight counties.

The Travel Training Guidebook provides trainers with tools to take clients from the planning stage of their trip to what to do in an emergency situation. Trainers craft a customizable plan to fit the needs of each client and utilize both classroom and field-based instruction to assess skill mastery.

A series of nine travel training videos were created by Brian Frey of Brian Frey Productions to supplement the material in the guidebook, addressing a variety of topics such as using paratransit, flagging a stop, and crossing the street.

The project benefits from the guidance of an 18-member advisory committee made up of direct service providers from across Region 2, national experts from the Community Transportation Association of America and National Center for Mobility Management, Cornell University, parents



of individuals with IDD, and a language specialist.

Innovative new tools are in development to support travel trainers and clients including an online repository where the Travel Training Guidebook, videos, and other material can be found. A smartphone app will allow clients and caregivers to map trips, view past and future trips, view training material, and access emergency contact information. Getthere’s existing web-based trip planner will also be upgraded.

## Staff Profiles: Rural Health Service Corps AmeriCorps Alumni



**MARY MARUSCAK:**

I was a VISTA in Fulton County, NY in 2001–2002. My term was part of the nationwide America’s Promise initiative, coordinating efforts to build youth development programs in underserved, high-risk communities and schools. During that time, I learned the value of collaboration across sectors, which was a major catalyst for my educational and career goals and my professional philosophy. AmeriCorps is a great opportunity for young people to step into professional service at a pace that works for them due to the wide variety of programs, and my experience was no exception. I pursued a Master’s Degree in Public Administration with a Nonprofit concentration, leading to my work at Rural Health Network, where I collaborate to plan and oversee programs designed to give voice and equity to those most in need of support.



**ERIN SUMMERLEE:**

From 2012–2014 I had the opportunity to serve two, full-time AmeriCorps terms with the Food and Health Network (FaHN) program at Rural Health Network of South Central NY. In my role as Education Coordinator I facilitated an eight county, cross-sector network of regional food system stakeholders to build collaboration, foster learning, and advance programs and policies. My AmeriCorps experience provided invaluable opportunities to develop knowledge and firsthand experience related to regional food systems, food access and anti-hunger initiatives, healthcare, sustainable agriculture, policy, program management, nonprofits, and so much more. Equally important is the community of mentors, partners, and friends that I was so fortunate to build. Nine years later, I’m incredibly grateful to continue working with the talented, passionate, and innovative AmeriCorps and VISTA members who serve with FaHN.



**HALEY DESILET:**

I was a VISTA in Wenatchee, Washington in 2012–2013 and an AmeriCorps State and National member with the Rural Health Service Corps in Binghamton in 2013–2014. In my first term, I learned about developing a program at a nonprofit organization; my lessons in grant writing, marketing, organization, and outreach were ones that taught me valuable skills, but also a lot about myself and where I wanted to focus my attention. My second year in AmeriCorps solidified my interest in not-for-profit work, and led me to permanent placement at Rural Health Network, where I’ve remained since. The best part of my work now is seeing that same passion bloom in a person doing AmeriCorps for the first time, and seeing where that passion takes them after they complete their service.

**MELISSA SUMPTER:**

My service as an AmeriCorps member through the Rural Health Service Corps allowed me to gain valuable experience working in a professional office environment. At a time when “life” happened and I was not able to complete my graduate degree, the opportunity to explore the human services sector within healthcare was a welcome blessing. Not only was the experience extremely rewarding, it also led to a job within the same organization I completed my AmeriCorps service with. I was employed there for more than seven years, much of which was spent working to increase access to healthcare by assisting patients in enrolling in the New York State of Health insurance marketplace plans. When I wanted to explore another side of service—helping to manage the day-to-day tasks that enable an organization to successfully provide services to the community, I came back to the Rural Health Network and currently serve as the Administrative Services Coordinator.



Interview with Director Julie Pitts

**Q:** How has Rural Health Service Corps evolved over the last fourteen years?

Rural Health Network received its first AmeriCorps grant in 2008. In 2012 we added the AmeriCorps VISTA grant to our Rural Health Service Corps (RHSC) portfolio. RHSC members have traditionally supported Network programs, as well as health initiatives with partner host site agencies. Two Network programs, Food and Health Network, and Getthere Mobility Management, both evolved out of grassroots efforts supported solely by AmeriCorps members. Due to AmeriCorps service, these essential programs have grown and are now staffed with paid employees. The Food and Health Network program continues to enroll RHSC members to bring its projects to scale.

**Q:** How many AmeriCorps members have completed their terms of service through this program?

368 RHSC members have completed service since the inaugural 2008 class, joining the growing list of over one million AmeriCorps Alumni nationwide.

Since 2008:

**368** Rural Health Service Corps members completed service

Hours of service provided **441,038**

**\$1,047,985** Value of Segal Education Awards earned

**Q:** How are AmeriCorps and AmeriCorps VISTA terms different from each other?

AmeriCorps State and National (SN) and AmeriCorps VISTA are two AmeriCorps programs administered by Rural Health Network with federal AmeriCorps funds that flow through two different grants. Both grants require the support of non-federal matching funds in order to operate. AmeriCorps SN members provide direct services to individuals and communities. RHSC members may provide assistance with health and food access, lead cooking or nutrition classes, help with COVID-19 efforts, or make appropriate referrals to those they serve. These members enroll in either full or part-time terms and serve for one year or less. AmeriCorps VISTA (Volunteers In Service to America) members enroll full-time for an entire year and focus on indirect, anti-poverty capacity building services like grant writing, program tracking systems, or development of train-the-trainer modules. Both types of members can recruit and manage volunteers for their projects. Both receive a living allowance stipend and an end of service Segal Education Award.



**JULIE PITTS** joined Rural Health Network in 2009, supporting the inaugural Rural Health Service Corps

(AmeriCorps) program. She transitioned into the role of Rural Health Service Corps Director in 2014. She holds a Masters Degree in Education from Binghamton University, enjoys team trivia, spreadsheets, soccer, and all things dog.

**Q:** What are you most proud of having accomplished in 2021?

In April 2021, RHSC was one of two NYS AmeriCorps programs selected by the NYS Commission on National and Community Service to pilot the NYS Public Health Corps. RHSC, along with CHCANYS AmeriCorps, used their existing AmeriCorps programs to enroll a sample of members as Public Health Fellows. One year later, we have been awarded \$684,377 in Public Health AmeriCorps funding to bring the project to scale, enrolling 40 Public Health AmeriCorps members this Fall. Haley and I are excited to continue this project and contribute to the expansion of the public health workforce in New York. With our growing program, we may even look to hire additional program staff this summer!

Interested AmeriCorps candidates may get more information and apply online: [ruralhealthservicecorps.org](https://ruralhealthservicecorps.org)

Building Public Health Capacity

In April 2021, Rural Health Network's AmeriCorps program, Rural Health Service Corps (RHSC) was selected to pilot a small group of members for the NYS Public Health Corps. Since its inception, RHSC has placed members in settings related to public health and health education, which—in combination with partnerships already in place—made the program a perfect choice for the pilot. Throughout the year, AmeriCorps members focused on service related to the COVID-19 pandemic, including collecting information about vaccinations and serving as a point of contact for the community during a time filled with misinformation and confusion. RHSC Members and Rural Health Network staff also enrolled in Cornell University's Public Health Essentials certificate program,

which launched in September 2021 and gave participants further information about how to best serve their communities as Public Health professionals. The NYS Public Health Corps is a partnership between the Governor's Office, Northwell Health, NYS Department of Health, and Cornell University. AmeriCorps members thus represent a portion of the larger New York State Public Health Corps, which is designed to "build public health capacity to support COVID-19 vaccination operations and increase preparedness for future public health emergencies." In late 2021, Rural Health Network applied for further Public Health AmeriCorps grant funding, with plans to continue working with the NYS Public Health Corps program.

**"My time as a Public Health AmeriCorps member has been an incredible experience! I have learned so much about rural communities, evidence-based health education, and community resources. My experience at Rural Health Network helped me decide to pursue my MPH to address disparities in healthcare access and continue to have a positive impact on my community."**

**ALEX BUNCY**  
PUBLIC HEALTH AMERICORPS MEMBER

2021 Host Sites

- Binghamton University
- Broome County Council of Churches
- Broome County Health Department
- Cornell Cooperative Extension Cortland
- Cortland Area Communities that Care
- New York State Association of Rural Health
- Rural Health Network of SCNY, Inc.
- Southern Tier AIDS Program
- Seven Valleys Health Coalition
- Steuben County Public Defender's Office
- Tioga Opportunities, Inc.
- Truth Pharm
- VINES



Members who Completed Service in 2021 or are Currently Serving

- |                   |                   |                    |
|-------------------|-------------------|--------------------|
| Jacqueline Allen  | Eddie Ho          | Mary Anna Sedlacek |
| Avery Barber      | Julianna Humphrey | Emma Shen          |
| Chelsie Blasko    | Atiyana Ivy       | Alexandria Steele  |
| Cara Blatt        | Ella James        | Samuel Sylvester   |
| Madeline Block    | Cristina Jimenez  | Allison Underhill  |
| Jackie Bogart     | Molly Kildow      | Christopher Wen    |
| Mitchell Brooks   | Cory Knapp        | Bailey Whiffen     |
| Alex Buncy*       | Courtney Kusher   | Savannah Wilbur    |
| Sarah Calderone   | Joshua Lee        |                    |
| Lily Coots        | Emily Lindsay     |                    |
| Gabrielle Costley | Anna Lynch        |                    |
| Victoria Dean     | Chelsea Macmillan |                    |
| Alejandra Duenas  | Edad Mercier      |                    |
| Peter Farquharson | Charlie Moran     |                    |
| Catherine Faruolo | Valerie Palmeri   |                    |
| Emily Fusco       | Sunny Patel       |                    |
| Grace Gugerty     | Jabari Randolph   |                    |
| Timothy Hafner    | Mackenna Ryan     |                    |

\* completed 2021 term and re-enrolled



# Rural Cultural Competence Training Modules Developed

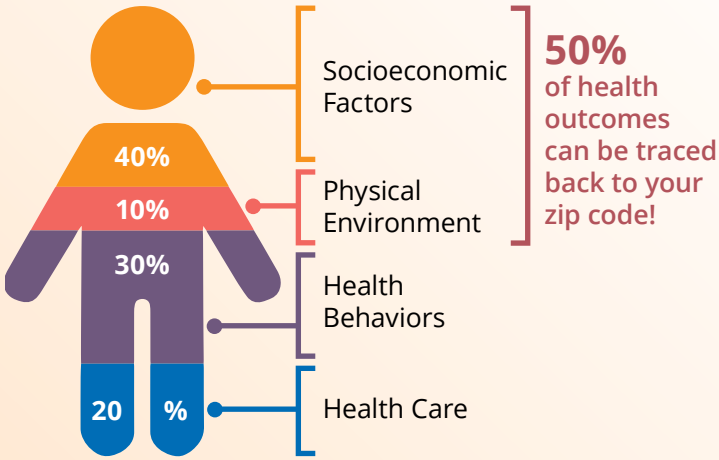
Two years of global pandemic have elevated workforce development to a high priority for many healthcare, social service, and nonprofit organizations. Between staff turnover and a national spotlight on health equity, organizations need workers who are ready to think creatively about providing high-quality services, tailored to the communities in which they work, with a clear vision of improving health and well-being.

To meet this need, Mary Maruscak, Director of Community Health Education, developed and piloted a three-module workforce training series covering three key concepts: Social Determinants of Health, Rural Cultural Competence, and Health Literacy. Training sessions combine information and data sharing about rural health disparities with interactive activities managing

*“I will be working with a diverse population which includes people from rural and urban areas. It’s important to understand the differences in their life experience to best connect with people.”*

—PROGRAM PARTICIPANT

household budgets, roleplaying scenarios, and creating plain-language materials. In 2021, Rural Health Network received an Innovation Fund Grant from Care Compass Network to further develop the Rural Cultural Competence module. The team presented the module to two different audiences and conducted follow-up focus groups, surveys, and feedback sessions to show the program’s effectiveness and update the training for the current workforce environment. While the module does highlight challenges facing rural communities, a large part of the training focuses on understanding characteristics of rural culture such as self-reliance and community connections, then applying that knowledge to participants’ day-to-day work. One participant



Source: Institute for Clinical Systems Improvement, *Going Beyond Clinical Walls: Solving Complex Problems* (October 2014)

**Place Matters. 50% of the factors influencing health outcomes can be traced to the zip codes in which we are born, grow, learn, live and age. Rural Health Network’s workforce training series helps learners understand the unique impacts of place on the health of rural individuals, families and communities, incorporating a common understanding of the Social Determinants of Health, Rural Culture, and Health Literacy.**

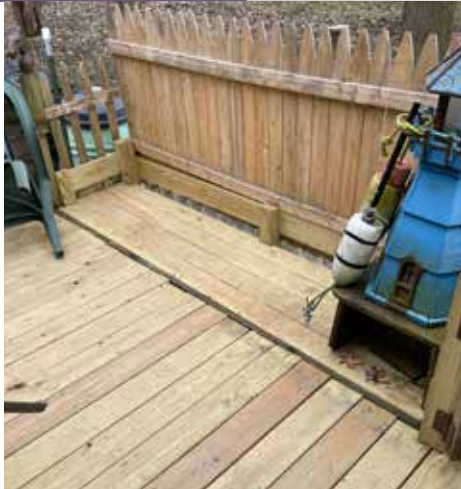
in Rural Cultural Competence remarked: “I honestly had not thought critically about the strengths of rural communities before. This helped me realize I need to tap into the strengths instead of treating individuals from rural communities as if they come from a severe disadvantage in every way.”

The series is now offered to a variety of different audiences including rural clinicians, undergraduate and graduate students, and nonprofit organization staff, with continuing education credits available.

# LIVE WELL, AGE WELL, AT HOME

The Northern Broome CARES (Care for Aging in Rural Environments) program serves individuals ages sixty or older residing in the rural towns of Barker, Lisle, Nanticoke and Triangle, including the Village of Whitney Point. 2021 marked year two of five years funded through the NYS Office for the Aging’s Naturally Occurring Retirement Community (NORC) grant program. Northern Broome CARES staff work closely with community and clinical care partners to promote rural health and well-being, reduce social isolation and empower people to safely age in place with dignity and respect. This year, the team enrolled 66 new individuals in aging-related services and exceeded goals for Community Health Workers providing case management (179% of the annual goal) as well as Lourdes nurses providing healthcare management (102% of the annual goal).

In Summer 2021, Northern Broome CARES deployed a crew of Rural Health Service Corps members under the direction of Community Health Worker Mindy Alexander to assist clients with minor home repairs and property maintenance to promote safety, mobility and independence. Three Whitney Point School District graduating seniors, Julianna Humphrey, Savannah Wilbur, and Alexandria Steele,



The summer crew repairs Vella Melzer’s deck (left) and the finished product (right).

were trained in jobsite and equipment safety, family emergency preparedness, Broome County Office of Aging services, falls risk and prevention strategies, community beautification projects, and home repair budgeting. The crew completed repairs of 16 homes for a total of 900 hours of service from late June through August. Funding for the project was provided by the Roger Kresge Foundation.

One satisfied client, Vella Melzer, reflected on the impact this project had on her: “My biggest concern on my property is falling. When I was presented with the opportunity to have the summer crew fix my deck, I couldn’t believe how blessed I

was. My late husband built that deck for me and I love it, not just because he made it, but because it’s where I sit and enjoy nature. Over the years the wood started to splinter, and when it rained it felt like ice stepping out onto it. I started using it less and less because I can’t afford to fall at my age. The summer crew did an amazing job, and now I’m able to get out and enjoy what I love, and I feel safe again going out there. They sanded and painted my tool sheds, too! I can’t afford to replace many of the things I own, so making sure they stay in good condition is important. I can’t thank everyone enough for what they did!”

## Rural Health Network Alumni: Where are They Now?



**KARA FISHER**

**I am a Development Assistant at the Aquarium of Niagara in Niagara Falls NY.**

Working with a variety of individuals in the Getthere Call Center has helped me to better communicate with everyone from a potential donor to a guest who has a question about

an animal. Being able to respond quickly and creatively to a need was important at Getthere to ensure a client’s needs were met and it has also helped me in my new role. Whether I’m brainstorming new ideas for our animal adoption “Aquaparent” program or troubleshooting an issue that arises at a fundraiser, it’s important that I can work through a solution in a short amount of time.



**THOMAS LEWIS**

**I’m a Policy Principal at Advanced Energy Economy, a national trade association making the energy we use secure, clean, and affordable.**

I help lead congressional and administrative affairs and policy development around in-

creasing the domestic manufacturing of advanced energy technologies. I’m based in Washington, DC. Both my AmeriCorps service and employment at Rural Health Network helped me prepare for my current position by developing my professional communication and coalition building skills. I also had the opportunity to work on policy advocacy and development which provided me with the tools needed to pursue a career in public policy advocacy.



**TERRI TWEEDIE**

**Coordinator of Services for the Aging at Delaware County Office for the Aging**

As a Community Health Worker at Rural Health Network I collaborated with many county agencies to provide thirty day care

transition services for individuals discharged from a small rural critical access hospital. As the Aging Services Coordinator in Delaware County I plan supports for an older target population across the continuum of care from a larger geography. I use project planning and implementation skills I learned while at Rural Health Network at a larger scale now.



**BILL WAGNER**

**Deputy Director of the National Center for Mobility Management (NCMM)**

Through my work at Rural Health Network and Getthere, I had the opportunity to gain the experience and knowledge to take on a larger role in mobility management.

During my tenure, I gained experience and built collaborations that benefited individuals and families throughout Getthere’s five county service region. I am happy to continue my work promoting customer-centered mobility strategies that advance good health, economic vitality, self-sufficiency, and community.



## LOOKING AHEAD

## WITH A STRONG FOUNDATION

In many ways, this year was characterized by building and strengthening new areas of focus that will help Rural Health Network move confidently into the future. Among these strategic initiatives were a foray into grassroots fundraising, monitoring the opportunities presented by telehealth, and active self-reflection on what the agency can do to improve racial equity in our organization and the communities we serve.



Fresh off the success of the Capital Campaign, Rural Health Network's Resource Development team turned their attention to grassroots fundraising, which has historically been a small, though appreciated, part of our revenue. In October 2021, Rural Health Network held a virtual fundraiser called On the Hunt for Good Health. This first-ever Rural Health Network peer-to-peer fundraising event saw participation from staff, board members, corporate sponsors, and community members. Goals included raising awareness of our work in the community, encouraging participants to complete "challenges" such as cooking healthy recipes, and generating unrestricted donations to benefit all agency



programs. As we prepare for the future, we look forward to finding new ways to actively engage our community supporters in ensuring the sustainability of our work.

Constraints of social distancing and overcrowded healthcare facilities brought the value of telehealth into sharp relief during the pandemic. In response, Rural Health Network convened a group of stakeholders from different organizations to keep track of changing policies and emerging opportunities related to telehealth. So far, we have offered virtual workshops through our Community Health Education program and launched a tablet lending program for rural seniors in our Northern Broome CARES program. In 2022, the tablet lending model will be replicated with our other community health workers, who will help clients access online resources, healthcare appointments, and patient

portals. In addition to identifying ways we can directly support clients, the group will continue to advocate for better broadband connectivity in our rural region.

Reflecting on our mission and past work, we acknowledge the need to look within our definition of "rural people and communities" to focus more attention on rural people of color, who face even greater challenges from being racial minorities within a rural minority. In 2021, we began this process by convening a Justice, Equity, Diversity, and Inclusion (JEDI) work group of staff and board members. In its early stages, this group has focused on sharing information about local racial health disparities, historical race relations in the communities we serve, and how organizations like ours are approaching these issues. While we are only just beginning this complex and necessary work, we are committed to long-term goals of advancing the health and well-being of rural people of color while creating a culture of equity within our own organization.

*These types of conversations are taking place across the agency as we work together to identify new opportunities and continuously improve each of our programs and services. With strong foundations built in 2021, we are prepared to make an even greater impact in the years to come.*

## Rural Health Network Funding Support

### County, State and Federal Funding

Appalachian Regional Commission  
Broome County Health Department  
Broome County Office for Aging  
Chenango County Planning Department  
Corporation for National and Community Service: VISTA Grant  
Developmental Disabilities Planning Council  
Federal Transit Administration, Section 5310 Enhanced Mobility of Senior and Individuals with Disabilities Program  
Federal Transit Administration, Section 5311 Formula Grants for Rural Areas Program via Tioga County  
National Rural Transit Assistance Program (RTAP)  
New York State Commission on National and Community Service–AmeriCorps and Volunteer Generation Fund Grants  
New York State Department of Agriculture & Markets  
New York State Department of Health–Office of Rural Health  
New York State Department of Transportation  
New York State Office of Aging–Naturally Occurring Retirement Communities Program  
USDA Farm to School Program

### Foundation, Private, and Corporate Funding

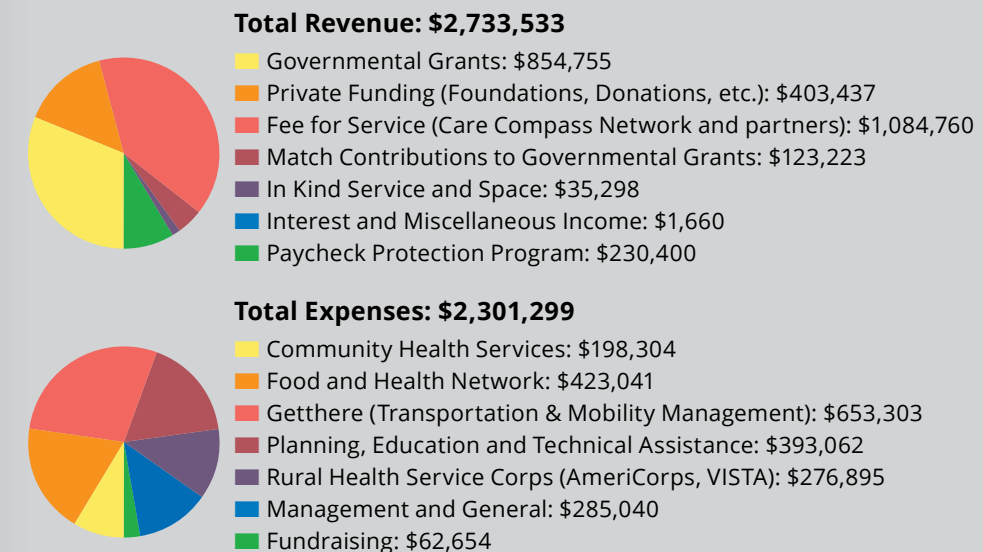
AARP  
Amazon Smile Foundation  
Ascension Health  
Association of State and Territorial Health Officials  
BAE Systems–Community Impact Grant  
Broome-Tioga BOCES  
Care Compass Network  
Chenango United Way  
Chobani Community Impact Fund of the Community Foundation for South Central New York  
Community Foundation for South Central New York–Dick & Marion Metzler Fund  
Conrad and Virginia Klee Foundation  
Cornell University  
Coughlin & Gerhart LLP  
Excellus BlueCross BlueShield  
Express Employment Professionals  
GE Foundation  
James B. Wilma Cancer Center  
Mother Cabrini Health Foundation  
New York State Association for Rural Health  
New York State Health Foundation  
NYCON–New York Council of Nonprofits  
Roger Kresge Foundation  
Seven Valleys Health Coalition

Sidney Central School District  
State Employees Federated Appeal  
St. Paul's Catholic Church of Binghamton  
UHS Delaware Valley Hospital  
UHS Foundation–Sock Out Cancer  
United Way of Broome County  
VINES  
Visions Federal Credit Union, Visions CARES Grant  
Wal-Mart Foundation

### On the Hunt For Good Health–Event Sponsors

Ascension Lourdes Hospital  
Centene Corporation–Fidelis Care  
Chianis & Anderson Architects, PLLC  
Excellus BlueCross BlueShield  
Gerould's Healthcare Center  
iHeart Radio  
Levene Gouldin & Thompson, LLP  
Mirabito  
Molina Healthcare  
Montrose Produce, Inc.–Russell Farms  
NBT Insurance  
United Health Services  
Visions Federal Credit Union

## Revenue and Expense Profile: FY 2020–2021



**Notes:** As a result of the passing of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), the Agency received a Paycheck Protection Program Loan (PPP) (an U.S. Small Business Administration (SBA) secured loan) in the amount of \$230,400 from Tioga State Bank. As a provision of the loan program, up to the full amount of the loan may be forgiven by the SBA. The Agency used the proceeds for purposes consistent with the PPP criteria and the loan was forgiven in December 2020. The loan proceeds were treated as debt forgiveness and reported as a realized gain in the accompanying financial statements as of June 30, 2021.

More specific information on the Rural Health Network 2020–2021 Fiscal Year is available on Guidestar [www.guidestar.org](http://www.guidestar.org) and the NYS Charities Bureau [www.charitiesnys.com/RegistrySearch/search\\_charities.jsp](http://www.charitiesnys.com/RegistrySearch/search_charities.jsp) websites.



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Sandra Sanzo, RN, BSN\*  
Beth Saroney Paro\*  
Christine Shaver  
James M. Skiff, MD  
Megan Staring

\* term ended 12/31/2021

## STAFF\*

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Catrina Baez, *Mobility & Transportation Advocate*  
Katie McDonald Blaine, *Transportation to Employment Coordinator*  
Stephanie Button, *Mobility & Transportation Advocate*  
Alexander Castro, *Community Health Worker*  
Nick Cecconi, *Interim Director, Getthere*  
Roz DeRensis, *Mobility & Transportation Advocate*  
Haley Desilet, *Assistant Director, Rural Health Service Corps*  
Julie Feheley, *Mobility & Transportation Advocate*  
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Jules Lee, *Community Health Educator*  
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Michael Treiman, *Program Coordinator, Northern Broome CARES*  
Stanley Varghese, *Transportation to Employment Associate*  
Erin Wank, *Community Health Worker*

\* as of April 1, 2022

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