

PATH Minutes
February 10, 2015, 11:30 noon – 2:00 pm
Birth Center Classroom
LewisGale Hospital Montgomery

Present:

Gayatri Ankem, CHC NRV
Harvey Barker, Cooper House
Katherine Bebko, CHC NRV
Michelle Brauns, CHC NRV
Kevin Bryd, NRV PDC
Cathy Callahan, CHC NRV/VCOM
Vicky Collins, Radford City DSS
Susan Dalrymple, PC United Way
Beth Deskins, RU
Deena Flinchum, RSVP/NRV Agency on Aging
Aaron Harris-Boush, Carilion Clinic
Tina King, NRV Agency on Aging
Holly Lesko, VT IPG
Suzanne Lo, VT IPG
Maureen McGonagle, NR Health District
Marya McPherson, MHANRV
Beth O'Connor, VRHA
Molly O'Dell, NR Health District
Linda Pearce, NRV Interfaith Health and Wellness Network
Trina Porterfield, NRCA Head Start
Pam Ray, VT/NRHD
Rhonda Seltz, RU
Rosemary Sullivan, NRVCS
Andrea Troia, Carilion Clinic Intern
Bev Walters, NRV CARES
Wanda Wylam, NR Health District

WELCOME AND INTRODUCTIONS:

Vicky welcomed the group and facilitated introductions of the PATH members. She announced that Michelle Brauns has joined the PATH Steering Committee and that the co-convenor position is still available. Thanks were extended to LewisGale Hospital Montgomery for hosting the meeting and providing lunch.

GILES COMMUNITY HEALTH NEEDS ASSESSMENT

Molly reported that a Community Health Needs Assessment (CHNA) will be completed in Giles County in 2015. She met with Carilion Clinic leadership about combining efforts in a more effective manner and building on what the Livability Initiative has done. She introduced Aaron Harris-Boush with Carilion Clinic Community Outreach to talk about the CHNA.

Aaron reported the last Giles County CHNA was done in 2012. Carilion Medical Center in Roanoke and Carilion Stonewall Jackson Hospital in Rockbridge County will also conduct CHNAs in 2015. Andrea Troia, Carilion Clinic Intern, and Shenika Dillard, Carilion Community Health Educator, are helping Aaron with the Giles CHNA. Aaron explained that tax-exempt facilities must conduct a CHNA every three years, adopt an implementation strategy to meet community health needs identified through the assessment and report how it is addressing the identified needs and describe needs that are not being addressed and why. The target population is low-income, uninsured, underinsured, minority groups and those suffering from chronic disease. The project service area includes Giles County, VA and Monroe, WV. The CHNA includes target population focus groups, stakeholder survey, community health surveys (online, phone and print), secondary data collection, strategic planning and hospital board implementation strategy. This is a community project that is community led. CHNA teams are made up of the Management Team (internal) and the Community Health Assessment Team (CHAT) CHAT oversees the CHNA, participates in the Strategic Planning process and offers guidance to the Management Team. Carilion Clinic would like the PATH Steering Committee to serve on CHAT. He noted that communities and community health

improvement efforts vary but there is one constant: people working together. Carilion Clinic uses CHNA data in various ways: strategic development/planning activities, community health education programs, population health management, community development and foundation grant giving. CHNAs are an asset to the health and human services agencies in the community. Survey distribution and focus groups as well as stakeholder survey distribution are being conducted through April 30. Primary data presentation and community health issue prioritization will take place in the spring. Strategic planning will be done in June. A community forum will be held and the final CHNA report will be completed in August. Aaron would like to distribute stakeholder surveys to PATH members at the April meeting in Giles. Carilion CHNA reports can be accessed at: <https://www.carilionclinic.org/about/chna>.

EVIDENCE OF EFFECTIVENESS OF LIVABILITY PROCESS UPDATE

Kevin Byrd reminded PATH members that the Livability Initiative, completed in February 2014, was a three-year regional planning process which provided an opportunity for NRV residents to develop a vision for the future and develop strategies that businesses, community organizations, local governments and individuals can use to make this future vision a reality. The final report is broken down into four sections—one is Healthy Communities. Innovative community engagement and collaboration were hallmarks of the NRV Livability Initiative. The project was selected for two national innovation awards and the Virginia Association of Planning District Commission's best practices award.

The Livability Leadership Team is hosting a Regional Convening on Thursday (Feb 12) 3-5:30 pm at the Event Center in Christiansburg to provide an update on the progress of the partnerships, projects and initiatives formed across the region as a result of the Livability Initiative. Kevin shared the January 2015 *Livability In Action In The New River Valley* which highlighted some of the successes.

- The NRV Aging in Place Leadership Team hosted its second workshop in October to explore the financial, policy, and decision-making obstacles that traditionally get in the way of making our homes and communities truly lifespan friendly. The workshop helped to increase participants' knowledge of aging in place issues in the NRV, identify respective challenges for caregivers, local governments and developers and share best practices for supporting aging in place.
- Solarize Blacksburg was a local initiative to bring solar to the Town of Blacksburg through the power of bulk purchasing. This model has been replicated across the state to 16 municipalities.
- The New River Health District (NRHD) with support from the NRVPDC, VT's Center for PH Practice & Research, the Town of Christiansburg and PATH secured a CDC public health prevention grant to expand biking and walking infrastructure in the Town of Christiansburg.

Also, the PDC recently established a partnership with NRHD to utilize GIS to geocode data and make it accessible through online applications and hard copy maps.

CAPE 2

Suzanne Lo reminded PATH members that Virginia Tech Institute for Policy and Governance was one of ten groups nationwide awarded a grant by the DHHS Substance Abuse and Mental Health Services Administration as part of a national project to provide behavioral health resources for local decision makers—Community Assessment and Education to Promote Behavioral Health Planning and Education (CAPE). CAPE 2 expands on CAPE and will run through January 2016. A new working group will be created to come up with ideas and strategies. Suzanne sent around a sign-up sheet for the CAPE 2 working group.

WORK GROUP REPORTS:

Advocacy: Rhonda announced that Tiffany Goins will serve as PATH's intern. She will work on the website and welcome packet. Rhonda asked PATH members to let her know if there are any issues on which they would like Advocacy to concentrate. She noted that we're back to square one on Medicaid expansion; it appears that legislators want to put more money into community health centers and free clinics. If anyone has any new information, pass it along to Rhonda. She noted that Dave Nutter did an op ed in *The Roanoke Times*. Aaron suggested that PATH and Healthy Roanoke co-write an op ed. Deena noted that on January 1 Medicaid took a serious cut on what they pay doctors—as much as 40%. This results in many clients not being able to find a provider.

Perinatal Substance Abuse: Rosemary reported that she and Molly are on the state Perinatal Substance Workgroup made up of DSS, behavioral health, Medical Society, physicians, nurses, etc. There are so many opinions and not everyone is on the same page as to the definition of substance abuse. Indicators show there is an increased number of pregnant women in treatment.

Childhood Obesity: Pam Ray reported that this group is morphing into NRV Obesity—it's great working with children but it's hard when the parents won't buy in. So, we have to take a different approach—create and expand a

citizens group that will develop a strategic plan for obesity prevention in the NRV. This will be an expansion of the Healthy Kids NRV group. Obesity rates for most the age ranges in the NRV equal or exceed the Virginia rates. The goal is to educate and offer opportunities for better eating and increasing activity level. There are successful models already in place in other states based on the Move More, Eat Smart initiative using the Healthy People 2020 guidelines. A sign-up sheet was sent around for those interested in helping devise the strategic plan; the first meeting will be in mid-March. Pam reported that the \$99,000 VDH Obesity Prevention Grant has a three-pronged approach—increase safe walking, increase biking and develop a strategic plan to promote obesity prevention. A partnership with the Town of Christiansburg was developed for infrastructure improvements that include ADA curbs to increase access to sidewalks, crosswalks at key intersections downtown and at important recreation links, increase access to the new farmers' market on Hickok Street and link the sidewalks to the Farmacy Garden at the Health Department and bike racks in specific locations to support biking. She also noted that Pulaski County Schools has a Farm to School grant which is a joint venture with the VA Tech Center for Public Health Practice and Research and NRHD. The Project Manager is Ethelene Sadler and Project coordinator is Shelly Rasnick.

PATHWAYS SHARING:

1. Pam announced that the NRHD and the NRV Agency on Aging are partnering to help individuals take charge of their lives by offering practical ways to manage chronic disease through the Chronic Disease Self-Management Program (CDSMP). Workshops in Montgomery and Pulaski Counties are free to all citizens 18 years and older. Linda Pearce noted that the Blacksburg workshops begin on March 6 at the Blacksburg Recreation Center. The series of six workshops are 2 ½ hours each and are outcome and evidence based. Referrals to the CDSMP can be made to Brenda Burrus of NRHD who is the lead for the program.
2. Tina announced that the NRV Agency on Aging's annual Caregiver Conference and Resource Fair will take place on Saturday, March 21, at New River Community College. She distributed a brochure that included an agenda and registration form. Also, Pulaski Area Transit is having its annual golf tournament fundraiser on May 20.
3. Marya announced that Mental Health America of the NRV's peer support group for depression and bipolar will meet on the third Tuesday of each month from 6:00-7:30 pm at the office on Elm Street in Christiansburg.
4. Gayatri Ankem introduced herself as the CHC NRV's Women's Health Coordinator. Her focus is access to health services for women. Her hope is to partner with other PATH organizations. The CHC NRV offers family planning services as well as cervical cancer and pap screenings.
5. Katherine Bebko at the CHC NRV is one of four Certified Application Counselors who provides education about the Marketplace and helps individuals decide on an insurance plan. Flyers have been passed out and information sessions have been held. Katherine has helped individuals go through the Marketplace insurance application question by question and also answer questions when they call the 800 number.
6. Rhonda distributed a new FAMIS flyer noting there is no longer a four-month waiting period and income is being assessed differently.
7. Cathy Callahan announced that CHC NRV received a private donation from The Secular Society for those at risk for unintended pregnancy. The CHC NRV is able to provide women of all ages with preventative and acute medical services in the form of exams, screenings and testing. This will help facilitate health care services at the Women's Resource Center and for women who are uninsured. IUDs and LARC will be provided free to these women.

Vicky reminded PATH members that the co-convenor position is open. She noted that this position is not overwhelming as the steering committee works well together. They will meet soon to work on the agenda for the April meeting.

PATH members were asked to send their website and Facebook links to Wanda to compile and distribute.

The meeting adjourned at 1:45 pm.

2015 meetings: April 7 – Carilion Giles Community Hospital
July 7 – LewisGale Hospital Pulaski
October 6 – Carilion NRV Medical Center