

PATH
April 1, 2014, 11:30 noon – 2:00 pm
LewisGale Hospital Montgomery

Present:

Mary Arnold, Carilion NRV Medical Center
Kate Baker, Smart Beginnings NRV
Michelle Brauns, Community Health Center
Kevin Byrd, NRV Planning District Commission
Cathy Callahan, VCOM/Community Health Center
Vicky Collins, Radford City Department of Social Services
Erin Cruise, RU School of Nursing
Beth Deskins, RU School of Social Work
Amy Epperley, Carilion NRV Medical Center
Deena Flinchum, RSVP/NRV Agency on Aging
Elizabeth Fontaine, NR Health District
Patricia Gaudreau, Montgomery County Public Schools
Bob Hendrickson, NRCA
Rita Irvin, NAACP
Brenna Ishler, VA Organizing
Tina King, NRV Agency on Aging
Holly Lesko, VT Institute for Policy and Governance
Suzanne Lo, VT Institute for Policy and Governance
Mary Lough, VICPP
Richard Mastalski, Carilion Giles Community Hospital
Matt Mathias, LewisGale Hospital Montgomery
Marya McPherson, Mental Health Association NRV
Dave Nutter, VT Office of Economic Development
Beth O'Connor, VRHA
Molly O'Dell, NR Health District
Trina Porterfield-Pifer, NRCA
James Pritchett, NRVCS
Rhonda Seltz, VRHRC
Melanie Smith
Robyn Stojka, Carilion Clinic
Rosemary Sullivan, NRVCS
Marjorie Young, LewisGale Hospital Montgomery
Bev Walters, NRV CARES
Cleo Williams, CNRVMC
Wanda Wylam, NR Health District

Introductions

Beth O'Connor, Co-Convener, welcomed attendees and thanked LewisGale Hospital Montgomery for hosting PATH and providing lunch. The PATH attendees introduced themselves.

Meeting Schedule for 2014

The remaining 2014 meeting dates are:

July 1 - LewisGale Hospital Pulaski Education Building

October 7 - Carilion NRV Medical Center Fireside Conference Room

Update on PATH Member Invitations

Molly O'Dell reported that she sent out an email invitation for today's meeting to 25 individuals. She heard from 12 who planned to attend today. She welcomed the new members to the meeting.

One Care Legislative Agenda Outcome

Dave Nutter reported that huge legislative steps were made this year thanks to the work of Senators Puckett and Carrico and Delegate Yost. He noted that typically, legislation is more on the punishment side than the education and treatment side.

Delegate Phillip Puckett was the main sponsor of SB 294 which requires that any prescription written for more than 90 days must be registered on the Prescription Monitoring Program. This bill became law and has a delayed effective date of July 1, 2015. This legislation is a step in the right direction. There is interest in reintroducing legislation allowing the Prescription Monitoring Program to recognize Tramadol as a drug of concern.

Dave stated that substance abuse and misuse, particularly prescription drugs, is perceived as a Southwest problem but, in fact, it is all over Virginia.

Workgroup Updates:

Advocacy – Rhonda reported that Advocacy’s first meeting was held today prior to this meeting. Discussion included the role of the workgroup, goals and how to best streamline information. Suzanne suggested organizing internal shared Google folders for different issues—perhaps a folder for each workgroup. Another meeting will be planned in a few weeks.

Rhonda reported that she submitted, on behalf of PATH, an op ed regarding Medicaid expansion to *The Roanoke Times* and that Beth O’Connor submitted a follow-up. Governor McAuliffe has proposed a two-year pilot to expand Virginia’s Medicaid program which would allow time to set up VA Exchange. Republicans whom Rhonda has contacted say “no” to Medicaid expansion if it’s part of the budget process. They want reforms to the current Medicaid program and question whether the federal government will be able to contribute long term. PATH members were encouraged to complete Delegate Yost’s online survey regarding Medicaid expansion.

Vicky noted residents who have been getting information on the national level don’t understand that what each state does is individualized. DSS has been fielding angry calls from residents who completed applications at the federal level. Residents have been told that their applications were sent to the local DSS. Vicky explained that applications were supposed to be evaluated at the federal level and those that appeared to be Medicaid eligible were to be forwarded to the local DSS. A backlog of 50,000 applications have not been screened and, therefore, have not been forwarded to local DSS.

Rhonda mentioned having a conversation with Deena about advocating for seniors. Deena discussed some of their issues. Seniors need a Medigap policy and drug plan to go along with Medicare. Only two companies in the NRV offer Medicare Advantage Plans. Many can’t afford insulin and inhalers. Many make slightly too much to get assistance. Bob mentioned that many physicians don’t accept Medicare.

Michelle discussed a surprise visit by Governor McAuliffe to the Community Health Center. He and his entourage including the media spent an hour at the Center and met with the Board, staff and patients. Michelle noted that 75% of the Center’s patients would be eligible for Medicaid if expansion was to 133% poverty. Matt said that the Governor spent an hour at LewisGale Hospital Montgomery and talked about what Medicaid expansion would mean for the hospital and community. The hospital tour included the CIT assessment Center which was state funded.

Healthy Kids – Elizabeth reported that the Healthy Kids workgroup met at the end of February. Representatives from Blacksburg Family Medicine, Montgomery County Public Schools, VA Tech and the Health Department attended. Goals were discussed. Two focus areas were healthy eating and physical activity. Elizabeth was contacted this morning by Pulaski County Public Schools about their interest in applying for a USDA Farm to School Planning Grant which requires community partners. The next Healthy Kids workgroup meeting will be held in two weeks.

Perinatal Substance Abuse – In Harvey’s absence, Molly reported that a group of 10 from NRV visited Turning Pointe in Beckley, WV. Turning Pointe is in year three of a SAMSA PPW grant. The state provides funding and support as well. Turning Pointe is a minimum 90-day residential treatment program for pregnant and postpartum women with substance use or co-occurring substance abuse and mental health disorders. At the time of the visit, there were 12 adults and 1 baby in the program (the main hospital in Beckley had 15 babies in the nursery; 13 were NAS). Daycare is provided in-house for mothers while they attend therapy sessions. Family therapy is offered and acts as an incentive for visitors to gain additional visiting time if they participate. Everyone is drug screened, including patients’ visitors. Patients come from all over the state. Referrals are generally from self-referral, courts, ob-gyn and outreach efforts of staff. Most patients have Medicaid. West Virginia passed Medicaid expansion. The 16-bed (including baby beds) facility was built by the State of West Virginia. Turning Pointe is co-located with primary care and a crisis center for detox and mental health. They are working toward becoming a primary care medical health home. Turning Pointe staff was excited to host the visit and help with our next steps. Vicky noted that when Linda Nesbitt was Montgomery County’s DSS Director, she and a group worked on a program but were stymied by the licensure piece. Many programs have to start out as outpatient, and it’s possible we could do something regionally.

RWJ Grant Opportunity

Holly reported on an RWJ proposal that is due on April 2nd related to perinatal substance abuse and integrating health care with non-health related activities in the community. The focus is cross agency communication to gain a better understanding of the broader needs in the community and the needs of organizations working with families. Awards should be announced by May 1. The full proposal is due in June and the grant begins in October.

Other Grant Opportunities:

Kevin discussed the NRVPCDC’s proposal for a three-year CDC “Health Impact Assessment for Improved Community Design” funding opportunity. Six proposals across the nation will be funded for \$145,000. Kevin explained that the NRV is well positioned to deliver a successful program because of the recently completed NRV Livability Initiative that focused on numerous issues and opportunities including community health and the built environment. Holly, Molly and Kevin met to strategize. A letter of intent was due last Friday. Kevin thanked PATH for the letter of support.

Suzanne described the “Community Assessment and Education to Promote Behavioral Health Planning and Education” (CAPE) grant which is a collaborative effort of the Department of Health and Human Services Substance Abuse and Mental Health Services Administration, the U.S. Department of Agriculture and a number of land-grant universities. Via a national competition and peer review process, VA Tech’s IPG was one of ten selected to participate. The project team will explore ways in which communities in the NRV currently gain information on behavioral health and then work with the communities to enhance access to needed information and provide information to community decision makers. The project team would like to continue to work with the NRV Livability Initiative’s Community Health Working Group. Suzanne passed around a sign-up sheet for those interested in participating.

PATHways Sharing – Those who signed up shared updates about their agencies/organizations.

Respectfully submitted,
Wanda Wylam
New River Health District