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Rural Health News

A resource exchange from the Pennsylvania Office of Rural Health for health professionals, extension and outreach coordinators, and community organizers

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Annual Rural Health Conference Seeks Different Solutions to Common Challenges

by S. William Hessert, Jr.

For the 13th consecutive year, Pennsylvania rural health advocates gathered to share their expertise, address issues and celebrate the progress that has been made in tackling the myriad healthcare challenges facing rural residents of the Commonwealth. The annual Pennsylvania Rural Health Conference – “Strengthening Rural Health: Different Solutions for Common Challenges,” held June 7 - 9 at the Crowne Plaza Hotel in Harrisburg – once again provided useful information designed to help attendees develop and enhance their community, regional and statewide efforts to improve the health status of rural Pennsylvanians.

Approximately 175 health administrators, researchers, educators, advocates, physicians, nurses, agency representatives, extension educators and students from across the state attended this year’s conference, which featured concurrent presentations on healthcare infrastructure; issues facing geriatric and special populations; community-based programs; and rural health policy. Sponsors for this year’s conference included the Pennsylvania Department of Health, the Pennsylvania Rural Health Association, the Pennsylvania Geriatric Education Center, Penn State Outreach, Penn State Cooperative Extension and other partners in the state.

For the first time in 11 years, the conference was held somewhere other than State College. It also marked a collaboration between the Pennsylvania Office of Rural Health (PORH) and the Southern Rural Access Program (SRAP), an organization funded by the Robert Wood Johnson Foundation and administered by the Penn State College of Medicine. This partnership provided opportunities for participants to learn from, network with and compare issues facing rural health advocates in states served by SRAP: Alabama, Arkansas, Georgia, Louisiana, Mississippi, South Carolina, eastern Texas and West Virginia.

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Program Benefits Individuals Affected by Agriculturally Related Injuries or Illnesses

by S. William Hessert, Jr.

Was that rash caused by pesticide exposure in a strawberry field or is it just a nasty case of poison ivy? Is your fatigue simply the result of a long day on the farm or was it caused by a shot of silo gas? These are just a few of the questions that state agromedicine programs try to answer by serving as resources to local doctors and the public on agriculturally related medical problems.

Agriculture – including farming, forestry and fisheries – is Pennsylvania’s premier industry; it is also one of its most dangerous, ranking second behind mining in terms of occupational injuries and illnesses. The impact of those injuries and illnesses extends well beyond the individual as well, as family members, neighbors and friends also can be affected.

Fortunately for state residents employed by the agriculture industry, Pennsylvania is one of only 16 states that offers a program specifically designed to tackle agriculturally related medical issues. The Pennsylvania Agromedicine Program, based at the Penn State College of Medicine and funded by the Pennsylvania

Department of Agriculture, serves as a valuable resource for physicians and the public by combating suspected agriculturally related injuries and illnesses. Established in 1994, the Pennsylvania Agromedicine

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From the Director...



In the Winter 2005 issue of *Pennsylvania Rural Health News*, this column provided some grim news for rural health advocates regarding the federal and state budgets. The President's 2006 budget called for drastic cuts or eliminated funding altogether for many federally-funded rural health programs. The good news is that on July 11, the Senate Appropriations Committee voted 27-0 to approve a Labor, HHS and Education bill that restored funding to many rural health programs. Fund-

ing recommendations included level funding for the Rural Health Outreach grant program, rural policy and research, the Rural and Community Access to Emergency Devices program and the State Office of Rural Health Program. A 0.9 percent increase was recommended for Title VII and VIII Health Professions Training was an increase of 63.8 percent for the Medicare Rural Hospital Flexibility Program. However, decreases were seen in funding for the National Health Service Corps and the Rural Telehealth program at 3.5 percent and 0.7 percent, respectively.

The bill also authorized \$145.7 billion in discretionary funding for the departments of Labor, Health and Human Services and Education and included funding for some programs that was higher than that recommended in President Bush's proposed budget. Included in these increases were \$29.4 million for the National Institutes of Health and \$65.4 million for the Department of Health and Human Services; the Centers for Disease Control and Prevention would receive additional funds to expand and improve agency facilities. The Senate also voted to increase funding for the Women, Infants and Children program by \$22 million more than in fiscal year 2005.

However, the House of Representatives voted to drastically cut funding to rural programs. In the coming weeks, and probably by the time you read this column, the House and Senate will have reconciled their bills and the final numbers will be in.

Here in Pennsylvania, the legislature passed a \$24.3 billion budget on July 7. Based on higher-than-anticipated revenues and using \$40 million in interest from the tobacco settlement funds, the budget restored \$143 million in proposed cuts to the state's Medical Assistance (MA) program. Under the budget, coverage for monthly prescriptions and hospital admissions for women and children will not be limited and increases on co-payments for prescriptions will not be implemented. The MA budget also provided funds to serve an additional 100,000 people across all MA programs and restored pass-through payments for hospitals and higher reimbursements to nursing homes.

The state budget also includes fund transfers that will allow the adultBasic program to cover 48,000 Pennsylvanians, an increase of 25 percent of those covered in the previous fiscal year. The budget also includes funds to cover an additional 100,000 children through the Children's Health Insurance Program. The Pennsylvania General Assembly also approved a pay increase for the state's legislators, making Pennsylvania second only to California as having the highest paid legislature in the nation. This pay increase may lead to an increase in the state minimum wage.

So, as we bid farewell to the summer of 2005, I hope that all of you were able to enjoy time with family and friends and take a minute to relax. Your state office of rural health has geared up for the fiscal year ahead and is looking forward to exciting and rewarding activities, especially to our interactions with all of you. Be sure to keep in touch. ❖

2005 Rural Health Leaders Honored

Four community leaders, a regional healthcare network and an innovative health program were among those honored for their efforts to improve the health status of rural Pennsylvanians during the Pennsylvania Rural Health Awards ceremony on June 9 at the Crowne Plaza Hotel in Harrisburg. Dr. Calvin B. Johnson, secretary of the Pennsylvania Department of Health, was the keynote speaker for this year's luncheon and awards presentation.

The **Pennsylvania Mountains Healthcare Alliance (PMHA)**, a regional network of seven community-based rural hospitals in the north-central mountains of Pennsylvania, received the 2005 State Rural Health Leader of the Year Award. PMHA was recognized for creating a partnership that maximizes the resources of the hospitals and ensures that residents of the region continue to receive quality healthcare services. As a result of its efforts, PMHA now stands as a model for other rural hospitals that hope to reduce costs, evaluate services, adopt best practices and improve health care.

Dr. Walter Thomas, director of dental medicine at the Valley Medical Center in Conneautville, was named the 2005 Rural Health Hero of the Year. Over the years, Thomas has worked tirelessly to provide dental care to Crawford County's low-income and indigent populations. He has also investigated methods to revise Medical Assistance's treatment and reimbursement models while trying to lower costs within his own dental practice.

"**Fit and Fun**," a program coordinated by a team of nutrition education advisors in Lackawanna and Luzerne counties as part of the **Penn State Nutrition Education Links Programs**, received the 2005 Rural Health Program of the

Year Award. The team provided families in the area with totes and backpacks filled with jump ropes, stretch bands, weights, basketballs and pedometers, which made it possible for families to exercise in their homes for 15 to 30 minutes a day.

Tana DeWire, executive director of the Lycoming County Health Improvement Coalition, and **Dr. Linda Famiglio**, associate chief medical officer of the Danville-based Geisinger Health System, were co-recipients of the 2005 Community Rural Health Leader of the Year Award. DeWire was honored for the remarkable strides she has made during her six years at the helm in building bridges among the more than 100 health and human service organizations in Lycoming County and for representing the area's health concerns at the local, state and national levels. Famiglio was recognized as the driving force behind the success of the Pennsylvania Rural Stroke Initiative, a program that enables healthcare professionals in a 31-county region to collaborate on guidelines and best practices for treating stroke patients who live in a rural setting.

Pennsylvania Senator Joseph Scarnati (R-25th District) received the 2005 Legislator of the Year Award. Scarnati has been a champion of rural health care within his district and as a member of the Senate Health and Public Welfare Committee. For example, he introduced a bill that led to the creation of the HealthLink program, which provides grants or interest-free loans to hospitals and health centers for the purchase of technologically advanced equipment. ❖

Tyrone Hospital Receives Technology Grant

Elected officials and business leaders gathered at Tyrone Hospital as representatives of U.S. Senator Arlen Specter's office and Tyrone Hospital leaders announced that Tyrone Hospital will receive a \$500,000 federal grant to develop the hospital's health information system.

The funds were earmarked for Tyrone Hospital by Specter as part of the 2006 Labor, Health and Human Services and Education Appropriations bill. Bettilou Taylor, staff director of the Subcommittee on Labor, Health and Human Services and Education Appropriations and Doug Saltzman, executive director of Specter's Pittsburgh regional office made the announcement on behalf of the senator.

"I am pleased my colleagues in the Congress have provided this important funding for Tyrone Hospital; improving Tyrone Hospital's ability to share and obtain patient information regarding medications, allergies and other critical data will ensure that individuals receive quality care," Specter said.

Walter S. Van Dyke, CEO of Tyrone Hospital, said he is pleased to see these resources coming into the community.

Tyrone Hospital will utilize the funds to develop the hospital's technology infrastructure to position it for future technology, to enhance administrative decision support sys-

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Tyrone Hospital leadership poses with staff from Senator Specter's district and Washington offices.

2005 Rural Health Leaders Honored

State Rural Health Leader of the Year
Pennsylvania Mountains
Healthcare Alliance



Rural Health Hero of the Year
Dr. Walter Thomas



**Community Rural Health
Leader of the Year**
Tana DeWire



**Community Rural Health
Leader of the Year**
Dr. Linda Famiglio



Legislator of the Year Award
Senator Scarnati



Rural Health Program of the Year
"Fit and Fun"



Safe Medication Practice Reduce Errors

The Pennsylvania Office Rural Health (PORH) recognized the power of collaboration for its small rural hospitals within the Small Hospital Improvement Plan category of reducing medical errors and quality improvement. Encouraged by its network of Critical Access Hospitals and their participation in a Balanced Scorecard data collection project, PORH facilitated the development of Pennsylvania's Safe Medication Practice Quality Initiatives collaborative.

Through a contract with the Institute for Safe Medication Practices (ISMP), PORH is working with 10 participating hospitals to standardize data collection and safe medication practices to reduce the system-based causes of medication errors. SHIP funds are used to

subscribe to the ISMP collaborative; ISMP collects and aggregates data and works with the collaborative to improve safe medication practices in each participating hospital.

This 15-month project consists of three phases: 1) development of the collaborative and assessment of current practice; 2) defining outcome measures/quality monitoring indicators for collaboration and recommendations for standardizing and improving error reporting; and 3) ongoing support and education for hospital and collaborative data collection and reporting. ❖

For more information, contact Larry Baronner, critical access coordinator at 814-863-8214 or ldb10@psu.edu

Tyrone Hospital To Receive Technology Grant

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tems and to develop clinical information systems.

Van Dyke said there will be a great deal of planning involved to achieve these technology goals, with most areas of the hospital being involved in the development of these systems over the next two years.

Stephen Gildea, Tyrone Hospital's CIO, will oversee the development and implementation of the hospital's health information system. Gildea said the federal government's goal is to move healthcare organizations toward expanded use of information technology over the next decade to improve patient safety and reduce costs. The funds Tyrone Hospital has received will help the facility move toward that broad goal at the local level.

Gildea cited several examples of how Tyrone Hospital's operations will be affected once the health information system is fully implemented; for instance, physician offices will have the ability to check on patient status and test results from their offices.

Most of the administrative documentation that is now done on paper (e.g., test ordering and entering information on the patient's bill) will be automated, thus eliminating manual effort, missed information and errors. This will improve greatly the overall efficiency of the hospital and create financial improvements.

The safety with which patient medications are administered will be enhanced greatly through the ability to scan a barcode on the patient's wristband and scan a barcode on the medication label. The medication and patient will be crosschecked to ensure it is the correct medication for the correct patient. Dosage information can also be crosschecked against the latest allergies, vital signs, test results, height, weight, etc., and the nurse or physician can be alerted to a possible adverse reaction or alternate drug. More up-to-date medication desk reference guides will be possible. This aspect is

where a dramatic improvement in patient safety and quality of care will be realized. ❖

For more information, contact Larry Baronner, critical access coordinator at 814-863-8214 or ldb10@psu.edu

PANA Announces Upcoming Events

Pennsylvania Advocates for Nutrition and Activity (PANA) has announced the first-ever statewide **Kids Walk to School Day** on Wednesday, October 5, to encourage physical activity and the important role it plays in good health. Schools can participate by logging onto PANA's Web site at www.panaonline.org/programs/khz/enterthezone/. The first 100 schools to register will receive a free Walking School Bus Toolbox, which includes signs designating safe walking routes, reflective zipper pulls for student walkers, reflective vests for adult chaperone "bus drivers," stickers for students and template ID badges to identify adult volunteers accompanying student walkers.

PANA has also announced the Second Annual Great Pennsylvania Apple Crunch will take place on Wednesday, October 19. Schools, work places and businesses are invited to join the event to help promote healthy eating and physical activity. PANA is asking schools to offer apples on their menus as a way to get your "5 a day" serving of fruits and vegetables. To obtain more information about the Great Pennsylvania Apple Crunch, visit www.panaonline.org/programs/khz/enterthezone/applecrunch05/. ❖

Annual Rural Health Conference Seeks Different Solutions to Common Challenges

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June 7 was devoted to meetings of SRAP grantees and featured a welcoming reception. The conference formally kicked off the morning of July 8 with pre-conference workshops focusing on customized place-based initiatives for Pennsylvania and policy skill development and advocacy. SRAP also offered pre-conference workshops on provider recruitment approaches, state and community partnerships and various best practices from states within the program.

Hilda Heady, president of the National Rural Health Association, gave the day's keynote address. Her presentation, entitled "Values-driven Rural Health Advocacy," highlighted the strengths that rural values bring to the table that help individuals and organizations tackle rural healthcare issues.

"I'm going to ask you to look beyond the statistics and data and the balancing act you have to perform every day in work and your personal lives," Heady said. Heady also provided a glimpse of the Institute of Medicine's report, "Quality through Collaboration: The Future of Rural Health" and outlined areas where the National Rural Health Association is trying to help rural healthcare advocates find solutions to ongoing issues.

Following Heady's keynote address, conference participants attended concurrent sessions on a variety of topics, including the use of information technology in rural hospitals; intergenerational health and wellness programs; statewide efforts to tackle the growing obesity epidemic; funding opportunities available from the U.S. Department of Agriculture; home and community-based services; and information regarding the Pennsylvania ACCESS Plus program.



*Dr. Calvin Johnson
Pennsylvania Secretary of Health*

The day's activities concluded with the annual meeting of the Pennsylvania Rural Health Association and a reception for all conference attendees.

On the second day, Dr. Gary Wiltz, CEO of the Teche Action Clinic in Louisiana, delighted the crowd with stories of how he became a rural healthcare provider, how the Teche Action Clinic was established and grown and current and pending legislation in Louisiana that promises to improve the health status of rural residents in that state.

Wiltz's keynote address was followed by morning concurrent sessions on federally funded rural health networks in Pennsylvania; caregiving services available for older adults in rural areas; results of surveys assessing the health needs and concerns of rural Pennsylvanians; the role of pharmacists in rural communities; the evolution of the Pennsylvania Mountains Healthcare Alliance; chronic disease prevention and management; and information on the Medicare Modernization Act.

The conference closed with a luncheon and remarks by Dr. Calvin B. Johnson, secretary of the Pennsylvania Department of Health, who reiterated the pledge that he made at the Pennsylvania Rural Health Conference two years ago – a pledge to keep rural health issues at the forefront of the department's

agenda. The secretary reminded the audience that his visit two years ago was also his first public appearance as secretary of health; since that time, he says he has learned a tremendous amount about the health needs of rural Pennsylvanians. "I hope that our department has kept that pledge," he said. And if we have, it's largely because of the people here in the audience – I've learned a tremendous amount from you and have enjoyed doing it."

The secretary also assisted with the presentation of the annual Pennsylvania rural health awards. Awards again were given to this year's state rural health leader of the year, rural health hero of the year, rural health program of the year, community rural health leader of the year and legislator of the year. See the article on pages 3 and 4 for highlights from the awards ceremony.

Twenty-one exhibitors were also on hand throughout the conference, distributing promotional and educational materials and answering questions from attendees. The exhibitors represented various interests such as aging, agricultural health and safety, illness care and disease management and government-funded healthcare services. Planning is already underway for the 2006 conference, which will take place June 26 and 27 at the Penn Stater Conference Center Hotel in State College. Stay tuned for more details! ❖

For more information, contact Terri King, outreach coordinator at 814-863-8214 or tjc136@psu.edu.

Penn State Awarded Grant for Cancer Outcomes Measurement Research

The National Cancer Institute (NCI) recently awarded a five-year, \$1.3 million grant to Penn State for ongoing support of its work to reduce cancer-related health disparities in medically-underserved rural communities of Pennsylvania and southern New York.

The Northern Appalachian Cancer Network (NACN) is organizing these efforts. NACN is a partnership of Penn State faculty, physicians, staff and community members to improve cancer outcomes, test community interventions and collect data about their effectiveness.

The NACN recently completed a community-based pilot study with community coalitions. The results indicated that cancer education materials were more likely to be distributed in counties with cancer coalitions than in counties that were approached by only staff of Penn State. According to the study, effectiveness of community-academic partnership in cancer prevention and control was proven to be successful.

In the past five years, community coalitions completed 724 community-based interventions, 98 of which were in partnership with healthcare providers. As a result in, 6,845 rural, low-income individuals being screened for breast, cervical, prostate and colorectal cancers. ❖

For more information, contact the Penn State College of Medicine,
Strategic Services at 717-531-8606

Program Benefits Individuals Affected by Agriculturally Related Injuries or Illnesses

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Program relies on the expertise of several physicians affiliated with the College of Medicine who are familiar with agriculturally related medical problems and understand the conditions that make modern agriculture so dangerous.

"In terms of agricultural safety programs, we provide the connection to the medical community in Pennsylvania, including resources that are available through the (College of Medicine)," says Dr. George F. Henning, associate professor of family and community medicine in the Penn State College of Medicine and director of the Pennsylvania Agromedicine Program.

Those resources aren't limited to seeing patients and consulting on specific cases – "we provide a variety of other services and activities," Henning notes. For example, with support from the Pennsylvania Farm Bureau, the Pennsylvania Agromedicine Program surveyed 2,800 farmers and other residents in rural Pennsylvania communities to assess their health and safety needs. The results of that survey have been submitted to a national refereed journal for possible publication. The program also submits an annual report to the Pennsylvania Department of Agriculture on pesticide exposure and pesticide poisoning based on data from the western and eastern centers.

In addition to physicians affiliated with the College of Medicine, the Pennsylvania Agromedicine Program utilizes the expertise of 14 physicians throughout the state who have a special interest in agromedical issues and are available for consultation and advice. These physicians consult and advise on a variety of medical issues ranging from skin cancer to spider bites; however, pesticide and chemical exposure are the most common problems. Any of these problems can be acute with fast, dramatic onset, but more often are chronic conditions with low-level side effects that are easily confused with symptoms of other medical problems or aging.

Information on the Pennsylvania Agromedicine Program is distributed at agricultural production and health and safety meetings throughout the state through a subcontract from the Penn State College of Medicine to the Pennsylvania Office of Rural Health.

Medical personnel or other individuals interested in contacting the Pennsylvania Agromedicine Program can do so by calling 717-531-8736 or by sending an e-mail to agromedicine@hmc.psu.edu. You may also visit the program's Web site at www.pennstateagromedicine.com. ❖

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Conference Calendar

September 14-15

eHealthcare: From Research to Practice
State College
Contact: www.pahomecare.org

September 16

2005 Trends In Management of Dental Disease Conference
Williamsport
Contact: Northcentral Pennsylvania Area Health Education Center at 570-724-9145 or kimberlycm@ncpaahhec.org

October 3 - 4

First Annual Quality Conference
Kansas City, MO
Contact: Kathy Siress at 816-756-3140 or siress@NRHArural.org

October 4 - 7

“National” Critical Access Hospital Conference and Rural Health Clinic Conference
Kansas City, MO
Contact: Kathy Siress at 816-756-3140 or siress@NRHArural.org

October 19

2005 Keystone Breast Cancer Conference
Harrisburg
Contact: Kim Eubanks 800-377-8828 or kim@pabreastcancer.org

October 25 - 26

Rural Summit: Creating Opportunities for Rural Pennsylvania
Seven Springs Mountain Resort
Contact: Pennsylvania Rural Development Council at 717-705-0431 or www.ruralpa.state.pa.us

November 18

Winning at Wellness Symposium
Carlisle
Contact: Cliff Deardorff at 717-960-9009, ext. 8

January 9 - 11

National Conference on Health Disparities
Washington, DC
Contact: <http://www.omhsummit2006.org>

