

PENNSYLVANIA

Rural Health

Winter 2006

EMERGENCY

The Picture of Success:
Wayne Memorial Hospital

WAYNE MEMORIAL HOSPITAL
MAIN ENTRANCE
EMERGENCY
AMBULANCE ENTRANCE

From the Director

Welcome to the inaugural issue of *Pennsylvania Rural Health*, the Pennsylvania Office of Rural Health's (PORH)'s new magazine! For the past 14 years, PORH has delivered a quarterly newsletter that focused on successful rural health programs, state and national news important to rural health advocates, funding opportunities, conferences and more. Our new format will expand our ability to discuss the salient issues affecting the health status of rural Pennsylvanians, showcase effective rural health initiatives in the Commonwealth and offer more in-depth information on rural health policy and legislation.

In this issue, we share the exciting story of Wayne Memorial Hospital and the difference it is making on the health and well-being of its neighbors; we also look at ongoing efforts to improve the oral health status of rural Pennsylvanians. We also take a look back at the 2006 Pennsylvania Rural Health Conference, profile one of the state's Critical Access Hospitals and showcase other happenings throughout the Commonwealth.

By the time this publication reaches you, we will know the results of the November 7 election. With that in mind, please

be sure to contact and schedule a meeting with any newly elected or incumbent state and national legislators in your area as soon as you can. Doing so gives you the opportunity to inform them about the most pressing healthcare issues facing rural Pennsylvania, introduce them to effective, locally developed models of care and discuss how they can play a key role in boosting your efforts to enhance the health status of rural Pennsylvanians. In the coming months, we will provide details on how the Pennsylvania and National Rural Health associations will seek support from our elected officials on rural health issues.

We hope you enjoy this issue of *Pennsylvania Rural Health* and welcome any comments and suggestions you might have on how future issues of this publication could meet your needs. As always, thank you for your support of your state office of rural health — please be sure to keep in touch.

Sincerely,

Lisa A. Davis, Director

PENNSYLVANIA

Rural Health

Winter 2006

Lisa A. Davis

Director, Pennsylvania Office of Rural Health

Terri J. King

Outreach/Magazine Coordinator

S. William Hessert, Jr., Bill Hessert Ink

Magazine Writer/Editor

Beth Collitt

Magazine Designer

Table of Contents

2006 Pennsylvania Rural Health Conference	3
“The Picture of Success”	
Wayne Memorial Hospital Making a Difference	6
Pennsylvania Office of Rural Health	
Receives National Award	9
Improving the Oral Health Status of Rural Pennsylvanians	10
Pennsylvania Rural Health News and Notes	12
Critical Access Hospital Profile: Jersey Shore Hospital	14
Agricultural Health and Safety	15
Calendar of Events	16

Articles may be reprinted with permission; contact Terri King at (814) 863-8214 or tjc136@psu.edu for more information. Please address general correspondence or subscription requests to PORH at 202 Beecher-Dock House, University Park, PA 16802.

Penn State is committed to affirmative action, equal opportunity and the diversity of its workforce. This publication is available in alternative media on request. U.Ed. HHD 07-XX.

Pennsylvania Rural Health is published 2-3 times a year by the Pennsylvania Office of Rural Health (PORH). PORH receives support from the Federal Office of Rural Health Policy of the U.S. Department of Health and Human Services, the Pennsylvania Department of Health and the Pennsylvania State University and is located at the Penn State University Park campus.



IMPACT OF STATE, FEDERAL POLICIES FOCUS OF **2006 Rural Health Conference**

by S. William Hessert, Jr.

***“Preserving Pathways
to Rural Health”—
helping rural healthcare
providers and advocates
understand current
health policies and their
impact on delivering
healthcare services to
rural communities—was
the theme for the 2006
Pennsylvania Rural Health
Conference, held June 26
and 27 at the Penn Stater
Conference Center Hotel
in State College.***

The 14th annual conference, hosted by the Pennsylvania Office of Rural Health, informed participants about the latest state and federal legislation, programs and policies that are currently shaping or have the potential to shape future rural healthcare services. The conference also highlighted “best practices” and provided suggestions on developing strategies and partnerships that enable participants to respond to the healthcare needs of rural Pennsylvanians in an era of rapidly changing healthcare policy and dwindling resources.

Pre-conference workshops on Monday morning gave early-arriving attendees a chance to learn more about building successful partnerships or communicating more effectively with the populations they serve. “Building Sustainable Infrastructures to Support Rural Health Initiatives,” provided participants with advice for creating and sustaining successful community-based programs using techniques and “lessons learned” by leaders of existing local, state and regional programs. The second, “Perspectives in Health Literacy: Theory and Practice for Older and Special Populations,” showed attendees how health literacy influences patient behavior and taught them how develop materials that adhere to basic health literacy principles.

The conference officially kicked off with a luncheon and keynote address by Tim Size, executive director of the Rural Wisconsin Health Cooperative. During his presentation, entitled “Rural Health Advocacy, 24 Hours a Day, Seven Days a Week,” Size explored some of the myths that mislead those developing private and public health policy. He also shared what he dubbed the “2005 Almost Worst Rural Health Policy Awards” and suggestions on how attendees could become more effective and active advocates on behalf of rural health.

Attendees then had the chance to attend one of four concurrent sessions:

- Jack Dennis, manager of grants and development at Wayne Memorial Hospital, shared the story of the creation of a successful dental clinic in Wayne County;

- Serina Gaston, former director of the Division of Plan Development in the Pennsylvania Department of Health's Bureau of Health Planning, offered an overview of the 2006-2010 State Health Improvement Plan and the state's new Office of Health Equity;
- Jonathan Johnson, senior policy analyst for the Center for Rural Pennsylvania, provided demographic data on health insurance in Pennsylvania; and
- Joe Yarzebinski, program director for the Rural Local Initiatives Support Corporation, led a session that explored the impact of resident-led rural community development corporations.

One of the highlights of this year's conference was a legislative forum sponsored by the Pennsylvania Rural Health Association. Candidates from both major parties for the 2006 Pennsylvania gubernatorial race were invited to attend the forum. Governor Ed Rendell and Republican nominee Lynn Swann both sent representatives to field questions and outline candidates' views on rural health-related issues.

Candidates for Pennsylvania's contested seat in the U.S. Senate also were invited. U.S. Senator Rick Santorum was in attendance and spoke of efforts he has supported or undertaken to improve the health status of Pennsylvanians, particularly those in rural communities. He also noted that access to rural healthcare providers was a major issue – and one that could possibly be addressed by reforming the medical malpractice system.

"Twenty-three percent of the population lives in rural areas, but only 12 percent of the physicians practice there," Santorum said. "And one of the primary reasons for a lack of providers, particularly in rural areas, is medical liability. This is the number one healthcare issue in Pennsylvania – we need to put balance back in healthcare litigation. I am all for maintaining the right to sue and for being compensated for losses; however, I think rewards for 'pain and suffering' must be limited."

State Treasurer Robert Casey, the current Democratic candidate, was not represented.

Monday's activities concluded with the annual membership meeting of Pennsylvania Rural Health Association followed by a reception for all conference attendees. During the reception, William Sturges, executive director of the Pennsylvania Rural Development Council, presented a proclamation from

Gov. Rendell that officially declared June 26-30 as "Rural Health Week 2006" in Pennsylvania.

The second day of the conference began with a keynote address by Jennifer Friedman, vice president for governmental affairs for the National Rural Health Association (NRHA). During her presentation, entitled "The 2006 Rural Policy Landscape," Friedman discussed proposed federal funding levels proposed in the 2006-2007 budget, additional national policies and regulations that could affect rural health and NRHA's responses to the budget and those policies. She also shared some suggestions on how attendees could be effective rural health advocates, including how to make your best case to legislators.

During the brunch following Friedman's address, Brian Ebersole, special assistant to Pennsylvania Secretary of Health Dr. Calvin Johnson, provided an overview of several programs that, although not designed specifically with rural Pennsylvanians in mind, have benefited rural Pennsylvanians greatly. Ebersole also assisted with the presentation of the Pennsylvania Rural Health Awards, which were presented to this year's State Rural Health Leader, Rural Health Hero, Rural Health Program and two Community Rural Health Leaders.

Following the awards presentation, a plenary session entitled "The Alphabet Soup of Who's Who and What's What" gave an overview of the various organizations and programs devoted to addressing rural health concerns in Pennsylvania and the resources they provide.

This year's conference closed with remarks by Mike Glazer, district representative for U.S. Representative John Peterson. During his presentation, Glazer highlighted some of Rep. Peterson's accomplishments for rural Pennsylvanians as co-chair of the House Rural Health Caucus and a member of the House Appropriations Committee.

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 and Penn State Cooperative Extension. More than 30 exhibitors were also on hand throughout the conference, distributing promotional and educational materials and answering questions from attendees.

Planning is underway for the 2007 conference, which is scheduled for June 12 and 13 at the Penn Stater Conference Center Hotel. Details will be forthcoming.

“Twenty-three percent of the population lives in rural areas, but only 12 percent of the physicians practice there.”

PORH Presents 2006 Pennsylvania Rural Health Awards

Three healthcare providers, a state rural health advocate and an innovative wellness program received this year's Pennsylvania Rural Health Awards.

As in previous years, the 2006 Pennsylvania Rural Health Awards were presented during the Pennsylvania Rural Health Conference. Brian Ebersole, special assistant to Pennsylvania Secretary of Health Dr. Calvin B. Johnson, assisted with the presentation.

This year's recipients included:



Larry Baronner, Critical Access Hospital coordinator, Pennsylvania Office of Rural Health (State Rural Health Leader of the Year): By consistently addresses the needs and concerns of Critical Access Hospitals, Baronner has allowed them to increase their visibility within the rural communities they serve. As a result of his efforts, Pennsylvania is viewed as a national model within the Medicare Rural Hospital Flexibility Program, particularly in terms of rural network development, performance management improvement, medical error reduction and health information technology.



Dr. James B Hayden, Huntingdon County physician and medical director of the Broad Top Medical Center (Rural Health Hero of the Year): Regardless of whichever medical "hat" he is wearing, Hayden works tirelessly to improve the health status and quality of life of rural residents living in Huntingdon County and throughout Pennsylvania. In addition to his practice, Hayden is actively involved in numerous professional and community organizations that help improve the health and well-being of those in the Broad Top region. They include the Huntingdon County Telehealth Workgroup, an organization that offers and supports telemedicine services and distance learning opportunities; and the Huntingdon County Oral Health Workgroup, which helps communities provide access to much-needed dental services.

CHAIN, a task force of the Action Health Medical Clinic, Northumberland County (Rural Health Program of the Year): For years, CHAIN has played a key role in addressing domestic violence, child abuse and unintentional injuries affecting women and children in five central Pennsylvania counties. One of those programs, "Queen for a Day," offers educational programs and "pampering activities" to economically disadvantaged women in a format similar to a

women's health conference. Participants pamper themselves with facials, manicures, massage and aromatherapy and attend educational sessions on women's health issues, domestic violence prevention, home safety and parenting. Childcare is also provided, and children have the chance to enjoy puppet shows, storytelling and other fun learning activities. Since 2004, "Queen for a Day" has brightened the lives of more than 200 women and their children.

Dr. Mashukur Khan, medical director, Hyndman Area Health Center (HAHC), Bedford County (Community Rural Health Leader of the Year). Since arriving at HAHC, Khan has implemented new ideas and programs that deliver excellent healthcare services to residents of Hyndman and surrounding communities. Khan supervises HAHC's Indigent Drug Program, which offers prescriptions at no cost to uninsured/underinsured and Medicare patients in the region – medications these individuals could never afford without the assistance of such a program. Khan also arranged for a mobile mammogram to visit HAHC for women who otherwise could not afford this service. Khan goes to great lengths to offer each patient the best health care he can offer regardless of their ability to pay – and does so with patience, compassion and respect.



Deborah Neff, director of emergency services, Blue Mountain Health System, Carbon County (Community Rural Health Leader of the Year). Neff was instrumental in establishing a partnership that enhanced the treatment of cardiac patients living in rural parts of the Lehigh Valley. Working in conjunction with Lehigh Valley Hospital, Neff and her team at Gnadon Huetten Memorial Hospital created the "MI (Myocardial Infarction) Alert Program," which established a comprehensive treatment and transfer process that has improved the treatment and outcomes for heart attack patients. The time it takes to treat and stabilize cardiac patients at Gnadon Huetten, transport them to Lehigh Valley via helicopter and begin additional treatment has been reduced by 44 percent, from an average of 188 minutes to 106 minutes – results so significant that they were presented during the American Heart Association's scientific forum on Quality of Care and Outcomes Research in Cardiovascular Disease.



WAYNE MEMORIAL HEALTH SYSTEM: The of Picture Success



Unfortunately, the stories have become all too common ... tales of rural communities having difficulty attracting healthcare providers while others are in the fight of their lives to keep their local doctor's offices and hospitals open. While the details of each story may differ slightly, the bottom line is that too many rural communities lack or are struggling to maintain many of the healthcare services they so desperately need.

That is what makes Wayne Memorial Health System even more special. Rather than becoming another story of a rural healthcare provider fighting for survival, this Honesdale-based health system in northeastern Pennsylvania provides an example of how a rural provider can actually grow in today's challenging healthcare environment.

What has been their secret?

“One of the things I have always liked about Wayne Memorial is its ability to think outside the box,” says Donna Decker, Wayne Memorial’s community health manager and leader of its Prevention Initiative. “For the most part, we’ve been able to look at the community and determine its greatest needs in terms of health care, identify what programs or services were there or needed to be there to meet those needs, identify what barriers were preventing access to those programs and services and do what we could to overcome those barriers.”

Decker and others agree that one of the best ways to do all of that has been to make the community part of the process. That has been the case from day one, when members of the community came together in 1920 and raised the money needed to create Wayne Memorial Hospital. Eighty-six years later, that commitment has enabled Wayne Memorial to grow from a small facility located in a renovated private home in Honesdale into a healthcare system with facilities at ten locations within a 1,200-square-mile radius.

“The number one key [to our success] is our community,” Decker says. “Everyone here truly cares about the community and about each other – they look out for each other, and they work hard at separating politics from what needs to be done in everyone’s best interests.”

“As a health system, we realize we need to be here to serve the community,” adds Lisa Champeau, Wayne Memorial’s public relations manager. “At the same time, however, the community realizes how much it can benefit from a stable health system.”

Nowhere is the strength of that community/healthcare provider relationship more evident than in The Prevention Initiative, a community health project established by Wayne Memorial, area school districts, local healthcare professionals, the Pennsylvania Department of Health, the Pennsylvania State Police and other local health organizations. Created in 1994, the Prevention Initiative was created to improve the health of the community through educational efforts, community health fairs, public awareness campaigns, screening programs and other proactive measures.

One of the first programs undertaken by the partnership was the “Together for Health” school program. “The program actually came about in 1995 after one of the local school district superintendents suffered a heart attack,” Decker recalls. “He wanted to know if the hospital could do lipid profiles and cholesterol screenings on juniors so a health program/curriculum could be built around the studies for the students’ senior year.”

Today, the program offers health screenings, health evaluations and blood work/lipid testing (on





a voluntary basis) to seventh and eleventh graders in Wayne, Pike and surrounding counties each year. Wayne Memorial and the participating school districts also sponsor a Resource Day for seventh graders each spring and eleventh graders each fall. Students are split into five or six groups and rotate through workshops on various health-related topics. Topics for the day are a combination of subjects that students had identified on surveys the previous year as being the most pertinent to them plus those that have been identified through previous trends as being most interesting – safety and violence, tobacco and substance use and unhealthy eating, to name a few.

In addition to providing seventh and eleventh graders with critical health information that may not be available to them otherwise, “Together for Health” provides school districts with useful health data regarding their students. Although detailed information on each student is kept anonymous, each district receives an executive summary that identifies health trends and areas that need to be addressed within the student body.

“For example, we have collected BMI data on seventh graders for the past 12 years,” Decker says. “That information is very helpful when trying to discuss and address overweight/obesity concerns in the schools.”

The development of the school program led to the creation of another much-needed resource: the Together for Health Dental Clinic. Recognizing the connection between good oral health and a person’s overall health and the need

for dental health services among the uninsured and underinsured in the region, Wayne Memorial created the dental clinic in 1999 to provide dental services to any Wayne or Pike county resident up to 21 years of age. Today, the clinic provides prevention, treatment, education, periodontal services and restorative procedures to nearly 250 children and youth each month.

Based on the success of “Together for Health,” the dental clinic and other programs, the Pennsylvania Department of Health in 2000 recognized the Prevention Initiative as an official partner in the State Health Improvement Plan (SHIP). Although nearly 100 community health projects exist in Pennsylvania, the Prevention Initiative is one of only 28 to be named a SHIP partner.

“Being recognized as a SHIP partner was a big step for us,” says Jack Dennis, manager of grants and development.

It also led Wayne Memorial and its partners to “formalize” the Prevention Initiative “under guidance” of the health system’s community advisory board. The board – which includes community leaders from Wayne and Pike counties – assesses the health and wellness concerns of the region on an ongoing basis and develops programs that address those concerns.

Some of the other projects developed in the past few years include “Wayne County on the Move,” a program designed to help people eat better and become more physically active; and a winter walking program which provided a safe place for community members to walk in the evenings.



Another Success Story: PORH Receives National Honor

The Pennsylvania Office of Rural Health (PORH) received the 2006 Award of Merit from the National Organization of State Offices of Rural Health (NOSORH) during the organization's Annual Membership Meeting in Portland, Maine.

NOSORH was created in 1995 to serve as an influential voice for state rural health concerns and to promote a healthy rural America through state and community leadership. The organization presents its Award of Merit each year to a state office that has made outstanding contributions, developed innovative programs and/or conducted significant activities that advance the missions of state offices of rural health and improve the health status of rural Americans.

"The [Pennsylvania] Office of Rural Health has been a model for pushing the boundaries of rural health projects and sharing that knowledge with others," said Denny Berens, director of the Nebraska State Office of Rural Health who nominated PORH for the award and presented it to the office. "This has been the office that has shown a tremendous amount of courage in instituting innovative new programs; this is the office that has worked hard to have us understand the importance of strategic planning; this has been the office that when something needs to be done, they step up and say 'we'll help.'"

Through the Prevention Initiative and other programs/services it offers, Wayne Memorial has become a catalyst for improving the health and wellness of residents in the area. On October 1, for example, Wayne Memorial Hospital went "tobacco free." To show their support, more than 30 businesses and groups in the area also decided to go tobacco free as of October 1.

Of course, that doesn't mean the health system has not had its fair share of challenges along the way. One of those challenges came in 2003, when the malpractice insurance crisis left Wayne Memorial facing the possibility of losing eight of the ten physicians on staff who delivered babies.

"We are the only hospital in Wayne County and there are no hospitals in Pike County," Champeau says. "So our board of directors decided that the hospital would tackle the medical malpractice issue head on – we would aggressively increase recruitment efforts, stay open and also look for other sources of revenue."

By all accounts, they have been successful in doing so. In addition to the accomplishments through the Prevention Initiative, Wayne Memorial in recent years has opened a

wound care clinic; partnered with Good Shepherd to open an inpatient rehabilitation center; expanded its emergency department to three times its original size; launched a patient safety initiative; and purchased state-of-the-art equipment that enhances its delivery of services. In October, Wayne Memorial received a \$155,213 grant from the Rural Development Office in the U.S. Department of Agriculture that will also allow the health system to expand its perinatal monitoring and home health programs.

In fact, in just over a year, Wayne Memorial has received more than \$1 million in public and private grants to support its programs and services. Such aid is "essential for the future of healthcare access for the community and access to the latest technologies for the hospital and providers in an area of high growth such as ours," Dennis says.

By the sounds of things, this is one success story that is a long, long way from ending.

For additional information, please contact Lisa Champeau at Wayne Memorial at (570) 253-8631 or champeau@wmh.org.



ORAL HEALTH DISPARITIES STIR A “Call to Action”

Six years ago, then-U.S. Surgeon General David Satcher released a groundbreaking report, *Oral Health in America: A Report of the Surgeon General*, that addressed the role that good oral health plays in the overall health and well-being of Americans. Among other things, the report indicated that oral diseases and disorders “in and of themselves” have a lifelong effect on a person’s health and well-being, and that lifestyle behaviors which negatively affect a person’s general health have similar negative effects on his or her oral health.

The report also indicated that safe and effective measures already exist to prevent most common dental diseases; but, because of the “profound and consequential” oral health disparities that exist, not all Americans know about or take advantage of appropriate oral health promotion measures. “This silent epidemic of oral diseases is affecting our most vulnerable citizens – the poor children, the elderly, and many members of racial and ethnic minority groups,” the report indicated.

Not surprisingly, rural communities in Pennsylvania and throughout the United States are among those most affected by oral healthcare disparities. One of the primary reasons that such disparities exists in these communities is the simple fact that there aren’t enough health professionals to serve the population. Nationally, at least 25 million people live in dental care shortage areas as defined by Health Professional Shortage Area criteria. Within Pennsylvania, statistics indicate that there are 33 percent fewer dentists and 24 percent fewer dental hygienists for every 1,000 rural residents than for urban residents.

“Nearly 100 percent of all dental diseases are preventable,” says Pennsylvania State Dentist Howard Tolchinsky, DMD. “We must do more outreach and education on preventative measures in order to ensure proper oral health and reduce the risk of dental disease in Pennsylvanians.”

Dr. Lyle Snider, a member of the Appalachian Regional Commission’s Appalachian Health Policy Advisory Council

(AHPAC), says two factors limit oral healthcare access in low-income populations: Medicaid dental reimbursement rates that are substantially lower than those from private dental insurance and fee-for-service collections; and, a high rate of missed appointments in low-income populations. Missed appointments are more of a problem for dentists than primary care providers because the average appointment time is longer for oral health care than for primary care.

These two factors affect access to oral health care in rural areas more than urban areas because a higher proportion of rural residents are low income and/or enrolled in Medicaid. Most dentists respond to both factors by refusing to accept all or almost all Medicaid recipients and other low-income people.

Oral health beliefs and expectations also affect the extent to which people seek oral health care. “If someone has a physical injury or illness, they usually try to keep their appointment,” Snider says. “But if they lose a tooth, they don’t see it as being as big a deal because ‘everyone loses teeth.’ These beliefs lead to inadequate oral health care that affect not only oral health, but overall, health status.”

In addition to an insufficient number of providers, another major oral health concern in rural communities is the lack of a fluoridated water supply. “Fluoride in public water supplies is a very important step in preventing tooth decay,” Tolchinsky says. “Unfortunately, only 54 percent

of Pennsylvanians (5.4 million) are being served by community water systems with fluoridated water.”

Oral Health in America did much more than affirm that good oral health is an essential component in the health and well-being of Americans – it also led the Surgeon General’s Office to announce a “National Call to Action to Promote Oral Health” in 2003. The intent was to stir policymakers, community leaders, private industry, health professionals, the media and the public to take action and improve the oral health status of citizens, especially those living in areas where oral health disparities exist.

The “Call to Action” has prompted individuals and agencies at all levels – local, state and national – to take a closer look at efforts to enhance oral health initiatives. For example, Snider says the call to action has encouraged AHPAC to explore the topic more closely and become a stronger advocate for oral health initiatives in the region. “We’ve appointed a workgroup to sort through the issues and propose some recommendations that we can promote,” he says.

In Pennsylvania, the “Call to Action” coincided with the development of a statewide oral health strategic plan. The plan, originally created in 2002 and currently being revised, aims to assess the oral health status of Pennsylvanians, offer programs that promote and teach people good oral health practices and expand access to dental health services for the underserved. Tolchinsky says that an example of a successful program has been the school-based, school-linked sealant program for low-income children administered by Dr. Larry Kanterman in the Allegheny County Department of Health.

At the same time, pending legislation – HB 1588, the Community Water Fluoridation Act – would require fluoridation of public water supplies serving 1,000 or more domestic lines. The bill was passed overwhelmingly by the State House of Representatives in June and is now being considered by the Senate.

The “Call to Action” also encourages scientists to conduct more research and collect more data to help improve America’s oral health and reduce health disparities. That makes the work of research centers such as the Center for Oral Health Research in Appalachia (COHRA) even more important. Established in 2002 with funding from the National Institutes of Health, COHRA strives to identify factors that lead to oral health disparities in children and families in Appalachia, which has the largest burden of oral health problems per capita in the United States.

Under the direction of Dr. Robert Weyant, professor and chair of the Department of Dental Public Health at the University of Pittsburgh, COHRA researchers are currently studying the social epidemiology of oral disease in 500 families in Pennsylvania and West Virginia. “We’re looking at socio-economic factors; we’re also looking at genetics, behaviors and attitudes, family dynamics and community influences,” Weyant explains. “It’s time to get the big picture.

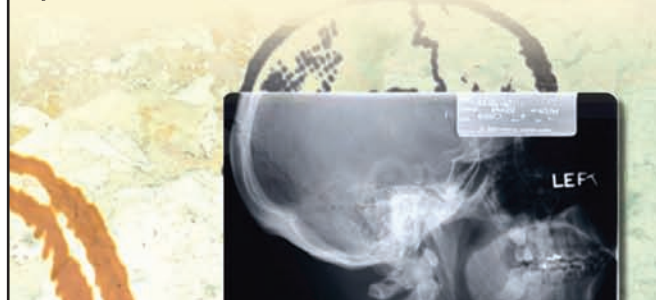
Doing so enables COHRA to determine if there are ways to categorize families so it is easier to identify the ones which need immediate intervention – and to design the appropriate intervention. “We want to [use our data] to design the right interventions to help children,” he says.

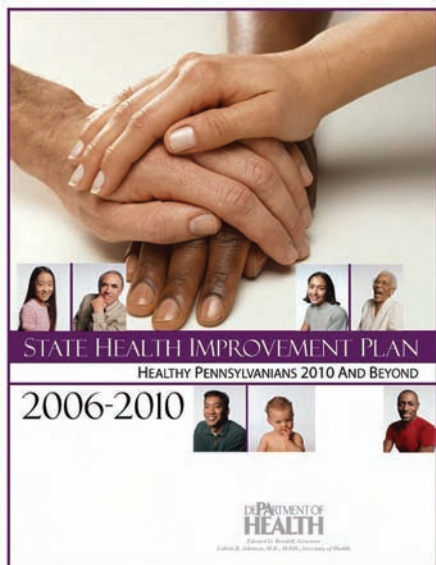
Did you know?

- Nearly one-third of all Pennsylvania residents live in rural areas, yet only 13.5 percent of all Pennsylvania physicians practice there.
- There are almost half as many physicians for every 1,000 rural residents as there are for urban residents.
- Only 15.2 percent of Pennsylvania RNs practice in rural counties, compared to 84.8 percent in urban counties.
- There are 33 percent fewer RNs for every 100,000 rural residents than for urban residents.
- Only 28 percent of Pennsylvania LPNS practice in rural counties, compared to 72 percent in urban counties.
- Only 15.3 percent of Pennsylvania dentists practice in rural counties, compared to 84.7 percent in urban counties.
- There are 33 percent fewer dentists for every 1,000 rural residents than for urban residents.
- Only 16.7 percent of Pennsylvania dental hygienists practice in rural counties, compared to 83.3 percent in urban counties.
- There are 24 percent fewer dental hygienists for every 1,000 rural residents than for urban residents.

Sources:

Office of Health Equity, Pennsylvania Department of Health; 2000 U.S. Census





Health Department Releases Latest State Health Improvement Plan

The Pennsylvania Department of Health has revised the Commonwealth's state health improvement plan to help communities, stakeholders and other state agencies identify the most significant issues and trends affecting the health of citizens.

Pennsylvania's "State Health Improvement Plan (SHIP) 2006-2010" also links statewide efforts associated with "Healthy People 2010," a federal initiative that serves as the blueprint for addressing the nation's most pressing health promotion and disease prevention concerns.

The department initially released SHIP in 1999 and updates it periodically so it can address its mission to promote healthy lifestyles, prevent injury and disease and ensure safe delivery of quality health care to all Pennsylvanians most effectively. Although the latest plan focuses on activities that will be conducted primarily between 2006 and 2010, it also lays significant groundwork for public health strategies beyond 2010.

One of the primary objectives outlined in "SHIP 2006-2010" is the

reduction or elimination of health disparities across various population groups. SHIP draws attention to the unequal disease burden experienced by individuals or communities as the result of gender, race, ethnicity, education, income, geographic location, age, sexual orientation or other characteristics and provides vital information and resources to help stakeholders reduce those disparities.

"SHIP 2006-2010" and other SHIP-related reports can be found at www.health.state.pa.us/ship.



New State Office to Address Health Disparities

Pennsylvania recently reinforced its commitment to ensuring that all Pennsylvanians have access to the same healthcare resources by creating the Office of Health Equity (OHE).

"Health disparities kill and they cost, but they can be cured," Pennsylvania Governor Ed Rendell said when announcing the office's formation within the Pennsylvania Department of Health's Bureau of Health Planning. "We know that conditions such as diabetes, hypertension, obesity and asthma are more dramatic in different segments of our population and we must address that. The goal of [OHE] is to help eliminate the barriers and challenges that people face in terms of access to and quality of health care in Pennsylvania."

Through continued collaboration and coordination with academic institutions, community-based organizations, state agencies and others, OHE plans to work

with policy makers, insurers, healthcare providers and communities to implement policies and programs that result in a measurable and sustained improvement in the health status of underserved and disparate populations. For example, OHE and the Pennsylvania Forum for Primary Health Care recently teamed up to provide health assessments, blood pressure screenings, body mass index calculations and other health information at 23 state health centers in conjunction with the national "Take a Loved One for a Checkup" Day on September 19.

Additional information on OHE can be obtained by calling 1-877-PAHEALTH or visiting the Department of Health Web site at <http://www.health.state.pa.us>.

Prevention Program Recognized by 4-H

A program that brings Penn State researchers, Penn State Cooperative Extension, local school districts and community service agencies together to strengthen families and help young people avoid substance abuse and behavioral problems has been named a Program of Distinction by the National 4-H Headquarters.

PROSPER, or **P**romoting School-Community-University **P**artnerships to **E**nhance **R**esilience, has been added to the National 4-H Programs of Distinction database (<http://www.national4-hheadquarters.gov/about/pod.htm>). Users can access the database to obtain information on any of the high-quality youth development programs throughout the United States that have been recognized by the organization.

"We're happy that National 4-H has added PROSPER to its national database," says Dr. Claudia Mincemoyer, Penn State associate professor of agricultural and extension



or dfp102@psu.edu) or Mincemoyer ((814) 863-7851 or cxm324@psu.edu) for additional information.

Cooperative Extension Web Site Offers "Solutions" to Everyday Questions

Looking for trustworthy information and advice on everyday home, family, lawn and garden, health or environmental matters? Then you may want to bookmark a Web site recently created by Penn State Cooperative Extension.

Solution Source (<http://www.solutions.psu.edu>) offers more than 800 pages of useful information provided by reliable and knowledgeable Penn State experts. Whether posing serious questions – such as how to manage finances between jobs – or relatively light-hearted ones – such as how to attract bluebirds in your backyard – the Solution Source is the place to turn for practical, easy-to-follow advice.

Topics featured on the Web site include child and youth development; parenting; family living and financial management; food preparation, safety and storage; horticulture; gardening; landscaping; insects and pests; nutrition and fitness; managing natural resources and wildlife; homes; and agriculture, to name a few.

Solution Source is the latest example of how Penn State Cooperative Extension continues to help Pennsylvania residents address everyday issues by utilizing university research and resources. Individuals can gain an even better understanding of the resources offered by Cooperative Extension by visiting <http://www.extension.psu.edu>.

Additional information on Solution Source can be obtained by contacting Nancy Stevens ((610) 489-4315 or nbs1@psu.edu) or Judy Richardson ((814) 863-2784 or jlrm36@psu.edu).

education department and a PROSPER co-investigator. "This added exposure will help communities and their families become aware of this quality youth prevention program."

According to Dr. Daniel Perkins, Penn State professor of agricultural and extension education and another program co-investigator, PROSPER utilizes a "partnership" model to foster youth development and reduce rates of substance abuse and other problem behaviors. These goals are accomplished by trying to improve parent-child communication, helping youth enhance their planning and problem-solving skills and strengthening their resistance toward problem behaviors among peers.

Studies show PROSPER participants are less prone to experiment with drugs, tobacco or alcohol than their peers and are less likely to have used marijuana or inhalants in the last year compared to non-participants.

Recent economic studies also show that this type prevention program is cost-effective to communities.

"Because there is less need for the use of the court system and drug and alcohol rehabilitation services, PROSPER communities are saving money," says Dr. Mark Greenberg, holder of the Edna Peterson Bennett Chair of Prevention Research and co-principal investigator for the project. "For every dollar the community spends on prevention programming, they are potentially saving \$9.60 in related services."

PROSPER reaches about 6,000 youths in seven Pennsylvania school districts throughout the Commonwealth. The project is funded by the National Institute on Drug Abuse and the National Institutes of Health and is being conducted in collaboration with Iowa State University.

Visit the PROSPER Web site (<http://www.prosper.ppsi.iastate.edu>) or contact Perkins ((814) 865-6988



A CENTURY OF CARING: Jersey Shore Hospital

*Editor's Note: Critical Access Hospitals are a crucial piece of the rural healthcare puzzle, providing much-needed inpatient and outpatient services to rural citizens throughout the Commonwealth and the nation. For that reason, **Pennsylvania Rural Health** will use a section of each issue to profile the work of one of Pennsylvania's Critical Access Hospitals.*

Jersey Shore Hospital began as a private hospital in the early 1900s after four local physicians put their resources together to serve the community's need for medical care. The hospital was turned over to the community in 1922 and later merged with the private Sanford Hospital, which allowed for the creation of a larger facility with greater capabilities. The contributions of these local physicians and their combined vision provide the backdrop for the present-day Jersey Shore Hospital (JSH).

Now operating a Critical Access Hospital, JSH today provides inpatient, critical care, sub-acute and outpatient services to nearly 45,000 residents in western Lycoming County (near the Clinton County border). Building upon its longstanding strengths in quality and efficiency, the hospital also operates a commercial laboratory program which supports a significant occupational health program for local industry and agencies such as Pennsylvania's departments of Transportation and Corrections. Inpatient and outpatient surgery has grown significantly over the last decade, as have outpatient diagnostic services, including full time MRI, mammography, nuclear medicine, ultrasound and multi-slice CT scanning. JSH now has more than 65,000 inpatient and outpatient contacts and 12,000 emergency department visits each year annual basis.

JSH is also one of the founding members of the Susquehanna Valley Rural Health Partnership (SVRHP), a rural network of providers that includes two other Critical Access Hospitals (Muncy Valley Hospital and the Bucktail Medical Center), the Williamsport Hospital and Medical Center and several local health improvement agencies. By combining their efforts, the partners have been able to increase their use of state-of-the-art technology and strengthen the continuum of care provided to residents in the region.

SVRHP has undertaken several important initiatives during the last five years, the most important being the sharing of a common medical record for the region. The network is currently considering the development of a centralized automated pharmacy program which would provide each facility with 24/7 coverage, automated remote dispensing and, eventually, bar coding. JSH also plans to install a Picture Archive Communication System in its Radiology Department, which will enhance its information-sharing capabilities with other members of the partnership.

Jersey Shore Hospital was constructed on its current site in 1951. A major addition took place in 1967 and several smaller renovations occurred in the 1970s and 1980s. Faced with limited space and limited ability

to support today's technology, the hospital recently commissioned a facilities master plan that will add a 45,000-square foot, 2½-story wing to the existing structure. The addition will provide a new medical surgical floor, critical care unit, swing beds, surgical suites, imaging department, emergency department and a new power plant. Patient rooms in the new facility will all be private, with a few exceptions in the swing bed unit.

Following the completion of the new building, JSH will renovate the existing facilities, which will house laboratory, rehabilitation, cardiopulmonary and support services. A new central lobby and registration area in the renovated building will reinforce JSH's highly efficient, centralized registration process.

JSH expects to complete the entire project by December 2007, thanks to a highly successful capital campaign that raised \$1.4 million, grants that provided another \$1.4 million and two loans from the U.S. Department of Agriculture.

JSH is also a key contributor to the local economy, with more than 250 full- and part-time employees. Their commitment to and pride in JSH are hallmarks of the hospital's mission and a major factor in its positive reputation in the region.

Additional information on Jersey Shore Hospital, can be found on the Web at www.jsh.org.





Be Prepared: PORH Program Eases Confusion about Worker Protection Standards

For most people, the word “pesticides” has a lot of negative connotations. For most farmers, however, pesticides play an essential role in the raising of crops.

A majority of Americans are not aware of the rigorous standards governing the creation, production and use of pesticides. One of these standards is the Worker Protection Standard (WPS), which outlines requirements that farmers must follow to protect themselves, their employees and the environment from pesticide contamination. Implemented and enforced by the U.S. Environmental Protection Agency, WPS requires that farmers and their employees understand the pesticides they are using and the potential hazards they cause, and that they are properly trained to deal with any pesticide-related spills or accidents that may occur.

Although WPS requirements are fairly straightforward, they still can be confusing – and, as a result, sometimes ignored – by growers. Fortunately, the Pennsylvania Office

of Rural Health’s Farm Worker Safety Protection Program, funded by the Pennsylvania Department of Agriculture, is available to help. Jim Harvey coordinates the office’s efforts in this area by holding informational meetings and distributing educational material that helps ease the farmers’ confusion.

The best service we provide is an onsite visit,” Harvey says. “We can visit any grower’s farm, greenhouse, orchard or forest and go over all aspects of WPS compliance,” Harvey says. “If something is wrong we can usually fix it immediately.

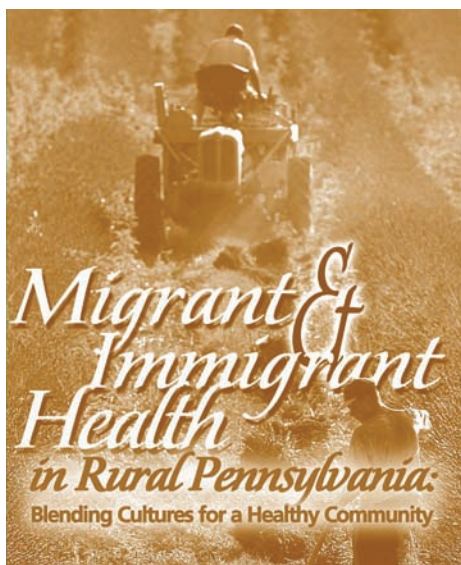
If you would like more information about WPS or would like to arrange a site visit, please contact Jim at (814) 863-8214 or jdh18@psu.edu. “With the Pennsylvania Department of Agriculture doing more WPS enforcement, more growers should consider a site visit that will help them prepare for a WPS inspection,” he says. “You want your first inspection with your area pesticide inspector to be a good one; if they find problems, they will be back fairly quickly.”

Be Informed ... and Keep Us Informed!

Would you like to be kept “in the loop” about the latest rural health news, conferences/events, grant opportunities and policies between issues of *Pennsylvania Rural Health*? If so, then visit us on the Web at <http://porh.cas.psu.edu> or contact Kathy Branstetter ((814) 863-8214 or kbr16@psu.edu)

so we can add you to our e-mail list. Also be sure to contact Kathy or Terri King ((814) 863-8214 or tjc136@psu.edu) if you have any news to share in an upcoming issue of *Pennsylvania Rural Health*. We want this publication to be both *for* you and *about* you!

Save the Dates



March 27 & 28

This conference brings together the agricultural production and the healthcare communities to discuss the healthcare issues of the migrant and immigrant farmworker population and identify strategies to assist this population in achieving optimal health.

January 8

"Housing Conditions and the Health of Mexican Migrant Farm Laborers in California"

Western Center for Agricultural Health and Safety Video Webcast
(530) 752-4050; agcenter@ucdavis.edu

February 26-28

18th Annual National Rural Health Association Rural Health Policy Institute
Grand Hyatt Washington, Washington, DC
www.nrharural.org/conferences/sub/PI.html

March 27 & 28

6th Annual Pennsylvania Migrant & Immigrant Farmworker Health Conference
Best Western Gettysburg Hotel
Gettysburg
(814) 863-8214; tjc136@psu.edu

April 5-7

HIV/STD Prevention in Rural Communities: Sharing Successful Strategies
Bloomington, IN
(812) 855-3936; aids@indiana.edu

May 1-4

CSREES Children, Youth, and Families at Risk Conference 2007

Hyatt Regency McCormick Place
Chicago, IL
<http://www.csrees.usda.gov/nea/family/cyfar/announcement.html>

June 7-9

"The Amish in America: New Identities & Diversities" (Amish Conference 2007)

Young Center of Elizabethtown College
Elizabethtown
<http://www.etown.edu/YoungCenter.aspx?topic=Amish+Conference+2007>

June 12 & 13

2007 Pennsylvania Rural Health Conference

Penn Stater Hotel and Conference Center
State College
(814) 863-8214; tjc136@psu.edu



Pennsylvania Office of Rural Health
202 Beecher-Dock House
University Park, PA 16802-2315



W E A R E P E N N S T A T E

Nonprofit Org.
U.S. Postage
PAID
The Pennsylvania
State University