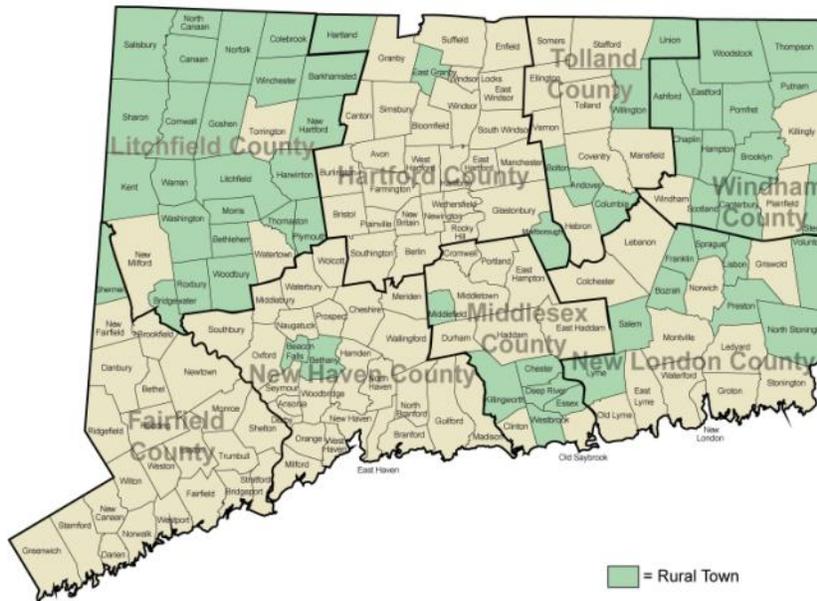


Health care branching
out
to rural
communities



Connecticut State Office of Rural Health

2012
Annual Report



2011-2012 YEAR IN REVIEW

The CT Office of Rural Health (CT-ORH) is proud of the many accomplishments and grant activities highlighted in this our fourth annual report. Funding for the grant initiatives comes to the CT-ORH through the Department of Health and Human Services through the Health Resources and Services Administration's Office of Rural Health Policy. Detailed information about the grant initiatives can be obtained by contacting the CT-ORH. Through partnerships and collaborations, the rural voice is becoming stronger and more important than ever during this time of health care reform.

Early in the year, the 50 State Offices of Rural Health initiated "Celebrate the Power of Rural" campaign and celebrated the first annual National Rural Health Day on November 17, 2011. The CT-ORH held events in eastern and western CT, the two most rural areas of the state. Participants from rural hospitals, skilled nursing facilities, home health care agencies, community health clinics, and legislators met to discuss shared challenges and successes. These meetings opened communication and provided an opportunity to network and form collaborations enhancing quality health care for the rural residents of CT.

In May we witnessed Northwestern Connecticut Community College's first graduates in Nursing receive their associate degrees. This is of great significance since the Office is located on the college's campus. We wish to acknowledge the role Barbara Berger, former Director of the CT-ORH, played in the development and success of this program. Through her efforts and those of many dedicated faculty and staff at NCCC, these newly Registered Nurses will be part of the rural health workforce in northwest CT. Their success is the foundation upon which a steady recruitment stream of qualified nurses will be available to our communities.

The CT-ORH is increasingly being utilized as a resource for health care information through education, information exchange, grant funding and grant management. Please visit the Office's web site www.ruralhealthct.org for grant opportunities and other relevant rural health information including a soon to be released rural video.



NOVEMBER 15, 2012

CT RURAL HOSPITAL QUALITY IMPROVEMENT GRANTS

The CT Office of Rural Health (CT-ORH), through the administration of its Rural Health Grant program awarded grants through a competitive process to two CT rural hospitals. The evidence-based initiatives enhanced quality care and demonstrated through the grant activities how they positively impacted access to care for rural CT residents. Reducing re-admission rates was the focus of both rural hospital quality improvement grants.

Windham Hospital, located in Willimantic, CT received \$6,444 in grant funds to establish an educational support group for identified patients with Chronic Obstructive Pulmonary Disease (COPD) and their families. Key hospital staff planned, developed and implemented the educational program based on data which indicated the reasons for frequent emergency room visits and repeat hospitalizations for the COPD patient population. The “Better Breathers Club” was established and met monthly for six months, addressing a different topic each session. Participants received educational tools and support to assist with managing and coping with their illness with the goal of reducing exacerbations of the disease. Program evaluations indicated the “Better Breathers Club” was successful in positively impacting the participants lives. Beginning this fall, Windham Hospital will be involved in a system-wide collaborative for tracking all hospital readmissions with COPD.

New Milford Hospital, serves many rural towns in southern Litchfield County. The hospital received \$10,000 in grant funds to implement a pilot program to reduce readmission rates for the 65 and older population with Heart Disease, COPD, Pneumonia and Respiratory Infections, Stroke and Myocardial Infarctions. A steering committee was established to guide the grant activities which included conducting a survey of readmissions to identify trends; identify available post discharge community resources and develop staff competencies. Results from the readmission survey identified a local long term care and rehabilitation facility as a source of significant hospital readmissions. The pilot program provided an avenue for the two facilities to collaborate. Through a contractual agreement a hospital-employed Advanced Practice Registered Nurse (APRN) provided oversight to the targeted patient group while hospitalized and after discharge to the long term care facility. A referral system, communication and educational tools for patients and staff are now in place allowing for a seamless continuum of quality care for the targeted patient group. New Milford Hospital is now seeing a decrease in readmissions and is looking at ways to expand the program to other health care settings.

EMERGENCY MEDICAL SERVICE INITIATIVES

CT Office of Rural Health grant funds supported two Quality Assurance and Quality Improvement (QA/QI) training programs for rural Emergency Medical Service providers. The EMS Institute in Sharon, CT and Eastern CT EMS Council each received grants in the amount of \$2,800 to provide the educational program.

The CT-ORH held a collaborative meeting with CT Office of Emergency Medical Services Regional Coordinators, and rural hospital Clinical Coordinators to discuss training needs and issues of concern for rural EMS organizations. The need for QA/QI training was identified as an area of concern. The CT-ORH along with the EMS Regional Coordinators assisted with program development and securing speakers. Topic areas covered included: What is QA/QI, Electronic documentation/reporting compliance, and setting and maximizing budget revenue.

The EMS Institute incorporated the training into their annual symposium held at Hotchkiss School in March. Eight participants attended each session.

Lisbon Fire hosted the training for the Eastern EMS Council in April. This training was an all-day program with QA/QI as the program focus. Seventeen rural EMS volunteers attended the training representing 14 rural towns and 11 EMS agencies.

Evaluations for both programs were positive and indicated the training provided valuable information and resources to enhance their services' daily operations, revenue and delivery of quality care.



CT OFFICE OF RURAL HEALTH SMALL GRANTS

During the 2011-2012 grant cycle, four additional \$2,800 grants were awarded to CT rural health care organizations. The grant initiative activities each demonstrated a collaborative effort with a focus on training and education. Highlights of the grant projects are portrayed in the following pages of this report. Please contact the CT-ORH for more detailed information.

Northeast District Department of Health (NDDH), located in Brooklyn, is one of the oldest health districts in Connecticut. The NDDH provides essential services to the rural residents in 12 north-eastern CT towns. NDDH manages *HealthQuest Northeast CT Coalition*, a regional collaborative health and wellness partnership working to improve community health through policy change. This partnership earned them the designation as a national Action Community for Health, Innovation, and Environmental Change (ACHIEVE) community by the Centers for Disease Control and Prevention (CDC) in 2009. The partnership is working to implement numerous chronic disease prevention initiatives. CT-ORH grant funds awarded to NDDH were used to augment activities in implementing *Follow the Fifty: Models of Heart Health* initiative and demonstrated the impact a supportive collaborative partnership has on rural communities. A total of 129 *Follow the Fifty* participants were CPR/AED trained and certified over the course of four evenings. Ten regional rural ambulance corps, along with EMS and fire companies worked together to provide 19 sets of training mannequins and 24 AED trainers. The CPR/AED trainings also provided training experience for nine rural ambulance service personnel working toward their CPR trainer certification.

Thank you to everyone trained in this life-saving skill.



United Services, Inc., is the major provider of children, family and adult behavioral health and social services in northeastern Connecticut. Located in Dayville, CT, their catchment area includes 19 rural towns. Their mission is to provide an effective response to the youth, family, and adult social and behavioral health needs in its community. Department of Public Safety statistics indicate that northeastern CT has some of the highest rates of Child Sexual Abuse in the state. United Services identified the need to respond and received grant funding to provide training and bring awareness to this issue. Two “Stewards of Children” trainings were conducted by the only Darkness2Light Certified “Stewards of Children” facilitator in CT. One training session was held for 26 EMTs and other first responders including a participant who traveled from Stratford to attend. The second session included 20 participants from local, non-profit and human services community providers. “Stewards of Children” is the only nationally available program scientifically proven to increase knowledge, improve attitudes and change child-protective behaviors. Program topics included:

- * Facts about the problem of child sexual abuse
- * Types of situations in which child sexual abuse might occur
- * Effective and simple strategies for protecting children from sexual abuse
- * Importance of talking about prevention of sexual abuse with children and adults
- * Signs of sexual abuse and how to intervene and react responsibly

Program evaluations were favorable and indicated the training was beneficial, resourceful and provided tools to share with others. Participants suggested the program be taught in all school systems, shared with pediatricians, parents and anyone in contact with children.

It is evident the need exists to have more trained facilitators available to offer the “Stewards of Children” program to other rural communities in the state.

Visit the Rural Health Data Portal on the Connecticut Data Collaborative web site <http://ctdata.org>. Connecticut organizations and residents can access a wide range of data from federal, state, local and private sources relating to the health, well-being and economy of the residents of the State of Connecticut. The central portal features innovative web-based visualization tools, such as Weave, to help users analyze the data. The Collaborative is building relationships with state agencies, nonprofit think tanks, and issue-based coalitions to make their data publicly available at this site.

If you are interested in a regional approach to improving access to and enhancing health care for rural residents, consider becoming a member of the New England Rural Health Roundtable. Please visit <http://www.newenglandruralhealth.org>

Johnson Memorial Hospital and the Eastern Highlands Health District (EHHD) provide services to the rural towns of Ashford, Union and Willington. Available data shows a prevalence of malignant lung cancer in these towns. Johnson Memorial used grant funds and collaborated with EHHD to launch a tobacco-free initiative through education. An attempt to provide smoking cessation courses to the residents in the identified towns was met with low interest and enrollment despite an aggressive marketing campaign. Grant funds were re-directed to allow for 17 residents to participate in a Freedom From Smoking on-line program offered through the American Lung Association. Various educational materials were also purchased and distributed to area schools for use during the 2012-13 academic year. The CT-ORH will continue to evaluate this initiative and its impact on smoking cessation rates.

Thompson Ecumenical Empowerment Group, Inc. (TEEG), located in very rural North Grosvenordale, CT, provides human services to low-income families and empowers individuals to move beyond poverty. In recent years TEEG has become a key resource in disseminating health education through various forums and is recognized in their area as part of the rural mental health care infrastructure. A particular challenge is providing support to families with children exhibiting behavioral disorders. TEEG's grant initiative included the planning, development and implementation of a community training program for persons working with behaviorally disordered youth. The goal was to increase positive interactions and successful participation in community activities for the targeted youth. Promotion of the program was conducted through outreach to schools, Recreation Departments, Scouting organizations and faith-based groups. Local radio, print and electronic flyers were used to recruit participants and promote the training. Fourteen participants attended the two evening training sessions conducted by a Child Psychologist. Attendees included adoptive parents, bus drivers, paraprofessionals, coaches and Sunday school teachers. Participants asked many questions and engaged in dialogue during each session extending the training each night by an average of an hour. Program evaluations were all positive and indicated the information was presented in "laymen's terms" and the content was not too clinical. It was recommended the program be offered again allowing more community members access to this valuable information.



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located at
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CT Office of Rural Health Mission Statement:

Working together to promote the health of persons living in rural Connecticut through education, communication and partnership, focusing on the enhancement, access and promotion of quality health care for rural Connecticut

Projects and initiatives from the CT Office of Rural Health (CT-ORH) are funded through the Federal Office of Rural Health Policy grant program, CFDA # 93.913, from the Health Resources & Services Administration. The grant CFDA 93.913 is awarded to Northwestern CT Community College to maintain the CT-ORH. Projects must be consistent with the CT-ORH's mission to support the planning, enhancement, education or evaluation of programs.

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