

NETWORK NEWS

Bittersweet October. The mellow, messy, leaf-kicking, perfect pause between the opposing miseries of summer and winter. —Carol Bishop Hippias

PRESIDENT BUSH SIGNS INTO LAW NEW GRANT PROGRAM FOR HEALTH CARE SERVICES

THE NEW LAW

On Wednesday, June 29, 2005, President Bush signed into law the "Patient Navigator Outreach and Chronic Disease Prevention Act of 2005," which amends the Public Health Service Act authorizing the Secretary of Health and Human Services to make grants for the development and operation of programs that provide "patient navigator" services. This newly adopted legislation was sponsored by Representatives Robert Mendendez (D-NJ) and Deborah Pryce (R-OH) and Senators Jeff Bingaman (D-NM) and Kay Bailey Hutchison (R-TX). This legislation authorizes the appropriation of \$25 million over a five year period (\$2 million in 2006; \$5 million in 2007; \$8 million in 2008; \$6.5 million in 2009; and \$3.5 million in 2010.)

WHAT IS A PATIENT NAVIGATOR?

Patient navigators are health professionals or trained patient liaisons that coordinate health care for patients and assist them in navigating the vast and often complicated health care system. A patient navigator will assist patients and their families through the care continuum, whether it be for cancer, diabetes, or any other type of medical condition. Some examples of navigation services may be arranging various forms of financial support for the pa-

tient and family, arranging transportation and childcare during treatment or appointments, coordinating care among the providers, identifying and scheduling appointments with culturally sensitive caregivers, and coordinating other services to help reduce access barriers the patient may encounter during their treatment. A patient navigator also assists in the diagnosis and treatment of health problems, in part by identifying sources of care, insurance, referral coordination, and facilitating the enrollment in clinical trials.

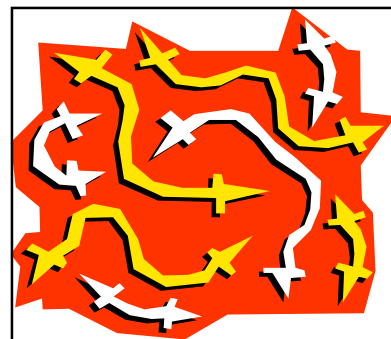
BENEFITS OF A PATIENT NAVIGATOR

Evidence shows that due to unequal access to health care, racial/ethnic minorities and underserved populations do not always receive timely, appropriate advice and care/treatment when confronted with health care diagnoses. A patient navigator can make the difference between someone from an underserved population becoming a survivor rather than a death statistic. By involving a patient navigator early in the patient's diagnosis or treatment a 'road map' can be created which helps steer patients and their families to appropriate care/treatment that can dramatically improve the health outcomes and ensure that the patient is provided with the best care and quality care.

PATIENT NAVIGATOR GRANTS

The Secretary of Health, acting through the Administrator of the Health Resources and Services Administration, may make grants available to eligible entities to develop and operate demonstration programs that provide patient navigator services to improve community health outcomes. According to the Public Law 109-18 document, grant funds can be used to recruit, assign, train, and employ patient navigators who have direct knowledge of the communities in which they will serve to facilitate the care of individuals which would include the following duties:

- * Coordinating health care services and provider referrals
- * Facilitating involvement of community organizations in assisting individuals who are at risk for or who have cancer or other chronic diseases to receive better access to high-quality health care services
- * Notifying individuals of clinical trials and if the patient requests, facilitating enrollment in these trials
- * Anticipating, identifying, and helping patients overcome barriers within the health care system to ensure timely diagnostic and treatment resolution of an abnormal finding of



The complex health care system is like an unmarked map: vast, complex, and confusing

cancer or other chronic disease

- * Coordinating with the relevant health insurance ombudsman programs to provide information to patients with cancer or other chronic diseases about health coverage
- * Conducting ongoing outreach to health disparity populations, including the uninsured, rural populations, and other medically underserved populations

When released, grant information will be available at www.grants.gov

Information for this article extracted from:

1. Public Law 109-18—June 29, 2005
2. www.whitehouse.gov
3. www.eurekaalert.org
4. www.cbo.gov

NETWORK STAFF ATTEND ALL PROGRAMS MEETING IN WASHINGTON, DC

J. Rudy Reinhardt, Network Executive Director, and Kelly J. Johnson, Network Health Planning Director, attended the Health Resources and Services Administration (HRSA), Office of Rural Health Policy (ORHP) All Programs Meeting, held in Washington, DC. From August 22-26, 2005. Heartland Rural Health Network, Inc. was the recipient of a three year Network Development Grant, awarded in 2002. ORHP has various grant programs, which includes Network Planning Grants, Outreach Grants, FLEX Grants, Rural EMS Grants, and many other grants that provide funding for rural health programs.

The All-Programs meeting is a wonderful opportunity for rural health care providers and networks to interact and exchange ideas with other rural health grantees about best practices being implemented across rural America. Marcia K. Brand, Ph.D., Director of the Federal Office of Rural Health Policy, Health Resources and Services Administration and Elizabeth M. Duke, Ph.D., Administrator of the Health Resources and Services Administration, opened the conference. There were various breakout sessions that conference attendees could participate in. Sessions included topics such as Rural Healthy People 2010 goals,



prescription assistance, rural health policy, funding and sustainability of rural health programs, border health, collaboration among safety net providers, staffing of federally funded health centers in rural areas, health information technology, the Medicare Modernization Act, and community health worker programs. There was also an opportunity for states to meet and discuss Statewide priorities, learn more about other attendees from their State, and explore collaboration towards com-

mon goals. Susan Gay, Director of the Florida Office of Rural Health and Robert Pannell, also of the Florida Office of Rural Health, led the discussion. Each grant recipient from the state of Florida was given an opportunity to discuss their program(s) and any issues or concerns they felt were important to address with the Florida group.

The conference provided the Network staff with some valuable information that will be incorporated into the programs that the Network is currently focusing on.

For more information on HRSA and ORHP grant opportunities please visit www.hrsa.gov

NETWORK BECOMES COMMUNITY ACCESS POINT & SUBMITS RURAL HEALTH OUTREACH GRANT

The Department of Children & Families (DCF) new ACCESS Florida program was designed to strengthen Florida's families through private, community, and inter-agency partnerships that promote economic self-sufficiency.

ACCESS stands for Automated Community Connection to Economic Self-Sufficiency. In an effort to provide improved access to services provided by DCF, they are partnering with community agencies to create a "multiple access" approach. By maximizing shared resources, DCF can increase customer access to services through community partners that provide various levels of ACCESS services. There are 4 different levels of service that an agency can commit to provide in partnership with DCF. A Partner offers a paper application pick-up point; Bronze Level provides partner level services plus access



to computers with web application, access to a telephone to call the DCF Customer Call Center; Silver Level pro-

vides bronze level services plus access to a printer to print application summary from web application and the agency also verifies the identify of the applicant; and lastly, the Gold Level provides all of the services listed above in addition to providing access to a fax machine to fax DCF application and/or other required documentation, provides access to a copy machine to copy required documentation for DCF, provides general assistance in explaining the application process. The Heartland Rural Health Network, Inc. has agreed to provide Gold Level services and has signed an agreement with DCF formalizing the partnership between both agen-

cies. According to the DCF website, 22 agencies in Highlands County, 14 agencies in Hardee County, and 0 agencies in DeSoto County, have agreed to partner with DCF providing various levels of support. It should be noted that community partnerships with DCF will continue to grow as more agencies learn of the new DCF ACCESS program. Although DCF partners with community agencies, DCF remains the designated state agency to determine eligibility for program services and/or benefits.

HRHN will incorporate ACCESS into their Heartland Rural Health Services (HRHS) Outreach program that provides health assessments (physical, psychosocial, substance abuse), referrals to HRHS community partners, and prescription assistance to residents of Hardee and Highlands Counties. The Network recently submitted a Rural Health Outreach Grant application to the Health Resources & Services Administration. If funded, this grant would

provide three years of funding to support current HRHS program services, expand services into DeSoto County, and incorporate additional services including comprehensive Case Management, Direct Service vouchers (eligible clients) that would pay for a client's visit to a primary care office/clinic, and transportation to and from scheduled appointments. By providing such services, the HRHS program is increasing access to care by addressing specific access barriers experienced by the uninsured, underinsured, and vulnerable populations of our rural communities. The grant awards will be announced May 1, 2006. Due to current funding limitations, the HRHS program is being operated on a much smaller scale until further funding is secured.

For more information on ACCESS or the HRHS program please contact Bea Walsh, Network Clinical Integration Coordinator, at 863-452-6530



NETWORK MEMBERS IN THE NEWS



If your agency/organization would like to submit information or an article to be included in our quarterly newsletter please e-mail Kelly Johnson at kelly.johnson@hrhn.org

TRI-COUNTY HUMAN SERVICES JASA PROGRAM RECOGNIZED

The Florida Department of Children and Families Best Practices Awards Program recognizes programs that exemplify "best practice" methods in substance abuse prevention and treatment services, efforts that measurably improve service outcomes and the quality of life for program participants. The award process is designed to bring recognition to the recipients, to the quality of client care, and to the efforts being made in providing substance abuse services within Florida. Awards were sponsored by the Florida Department of Children and Families and the Florida Alcohol and Drug

Abuse Association (FADAA). The programs that were selected in this year's Best Practices Program participated in a competitive process. Those programs selected can be used as practice models of service, which can improve the quality of life for all Floridians. Evidence-based practices should become the standard for care, not the exception.

Tri-County Human Services, Inc. Women's JASA Program was recognized as a Best Practices Program. They received a \$750.00 award for their exceptional program. The Male JASA program also received the same award in

Year 2002 from FADAA. The Women's JASA program was developed to provide treatment and services to the unique needs of the female population within the Polk County jail. Many of the women entering the program have special issues relating to traumas and events that have occurred in their lives and other mental health issues which results in a co-occurring diagnosis. The program is specifically designed to help them gain a better understanding of themselves, their particular situation, and the development of appropriate skills to change their lives. The program began in June, 2003 and the statisti-

cal data that has been collected on 44 clients through December 7, 2004 shows that 69% have not been rearrested within Polk County after one year of release from the program and of that amount 59% have no rearrests in Polk County into the second year after their release. Congratulations to Tri-County Human Services for their exemplary program and the positive opportunities provided to their clients.

**Information for this article extracted from the Department of Children & Families and FADAA. For more information on these Best Practice Awards please visit www.fadaa.org*

HEALTHY START CENTERING PREGNANCY TRAINING A SUCCESS

The March of Dimes awarded the Healthy Start Coalition of Polk, Highlands, and Hardee Counties a grant to hold a two-day training on Centering Pregnancy, an innovative model of group prenatal care. The training was conducted June 23 & 24 at the Regency Medical Center in Winter Haven, Florida. 38 prenatal providers and administrative staff attended this training. This free training session focused on how to market the program and how to develop an implementation plan. It created a great deal of interest and commitment to im-

plement Centering Pregnancy among many local providers. The Coalition was invited to submit a request for continued funding from the March of Dimes. They requested support to implement the groups, purchase group materials, and provide the "Advance Workshop" by Sharon Schindler Rising, a certified nurse-midwife. The target audience for this second training session would be prenatal care providers that serve women residing in Hardee, Highlands and Polk Counties



and that attended the 2 day Centering Pregnancy training held in June, 2005. This would include county health department staff, private practice provider staff within the Coalition service area, and providers in neighboring counties who attended the basic training and who serve women who reside in the Coalition service area. The Advanced Workshop is a time for those who have been active leading Centering groups

and/or have been to a basic instructional workshop, to meet for advanced skill development and opportunity to network. Focus will be on development of listening skills and advanced group facilitation skills, with additional time to explore issues around cultural diversity.

For more information on the Advanced Workshop please contact the Healthy Start Coalition office at 863-297-3043 or visit www.healthystarthhp.org

DESOTO HOME HEALTH PRESENTED ACHIEVEMENT AWARD

DeSoto Memorial Home Health Care located in Arcadia, Florida, was presented with the Outstanding Achievement Award by Florida Medical Quality Assurance, Inc. in

recognition of the successes achieved by their participation in Medicare's Home Health Quality Initiative.

DeSoto, in collaboration

with Florida Medical Quality Assurance, Inc., improved patient outcomes in ambulation and locomotion from the admission to discharge. The percentage of patients

who demonstrated improved outcomes in this area increased 11% (from 33% to 44%) over the course of the project.

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- J. Rudy Reinhardt, Network Executive Director

Address Label



NETWORK ELECTS NEW BOARD OFFICERS FOR 2005-2006

The Network would like to recognize the new HRHN Board of Directors officers for 2005-2006. They are as follows:

Kevin L. Roberts, President
Paula Thaqi, MD, Vice President
Mary Kay Burns, Secretary/Treasurer.
Warren L. Santander, Past President

President Kevin Roberts also made committee appointments for the year and they are as follows:

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Spencer Thomas
Kevin J. Roberts, Ex-Officio
J. Rudy Reinhardt, Staff

PRESIDENT BUSH NOMINATES JOHN O. AGWUNOBI AS NEW ASSISTANT SECRETARY FOR HEALTH

On June 30, 2005, President George W. Bush nominated John O. Agwunobi, to serve as the Assistant Secretary for Health in the United States Department of Health and Human Services. This position is contingent upon confirmation by the United States Senate. The confirmation process can take a num-

ber of months. Dr. Agwunobi currently serves as Secretary of the Florida Department of Health and Human Services. Dr. Agwunobi was named Florida's Secretary of Health by Governor Jeb Bush in October, 2001. He has moved the Department of Health towards excellence by pushing for increased

efficiency, customer focus, and productivity. Dr. Agwunobi also leads the call for a healthier Florida by advocating for improved nutrition and exercise, which addresses the state's epidemic of overweight and obesity. He is also currently focusing on decreasing the state's infant mortality rate, lower-

ing tobacco use among all Floridians, diminishing racial and ethnic health disparities, and improving overall access to both medical and dental care. Dr. Agwunobi has a rich background in health care delivery, managed care, health policy, and public health.