

Network News

Quarterly Newsletter for October 2023- December 2023
The Latest on Network Initiatives, Member Updates, and Rural Health.

HRHN Spotlight: Stroke Prevention

HRHN HD CHW
Program Spotlight:
Compassionate
Holidays



FRHA 2023 Education Summit
Postponement Annoucement!
FL Literacy Coalition, Inc.
40th Annual Literacy Conference
Discussing Diabetes & Defeating
Challenges: Article from CFHC
Telemedicine Talk 15:
Telehealth and Homelessness

Announcements from our partners at:
Central Florida Health Care
Florida Rural Health Association
Tampa General Hospital
National Rural Health Association Southwest Florida
FHCA
NRCA

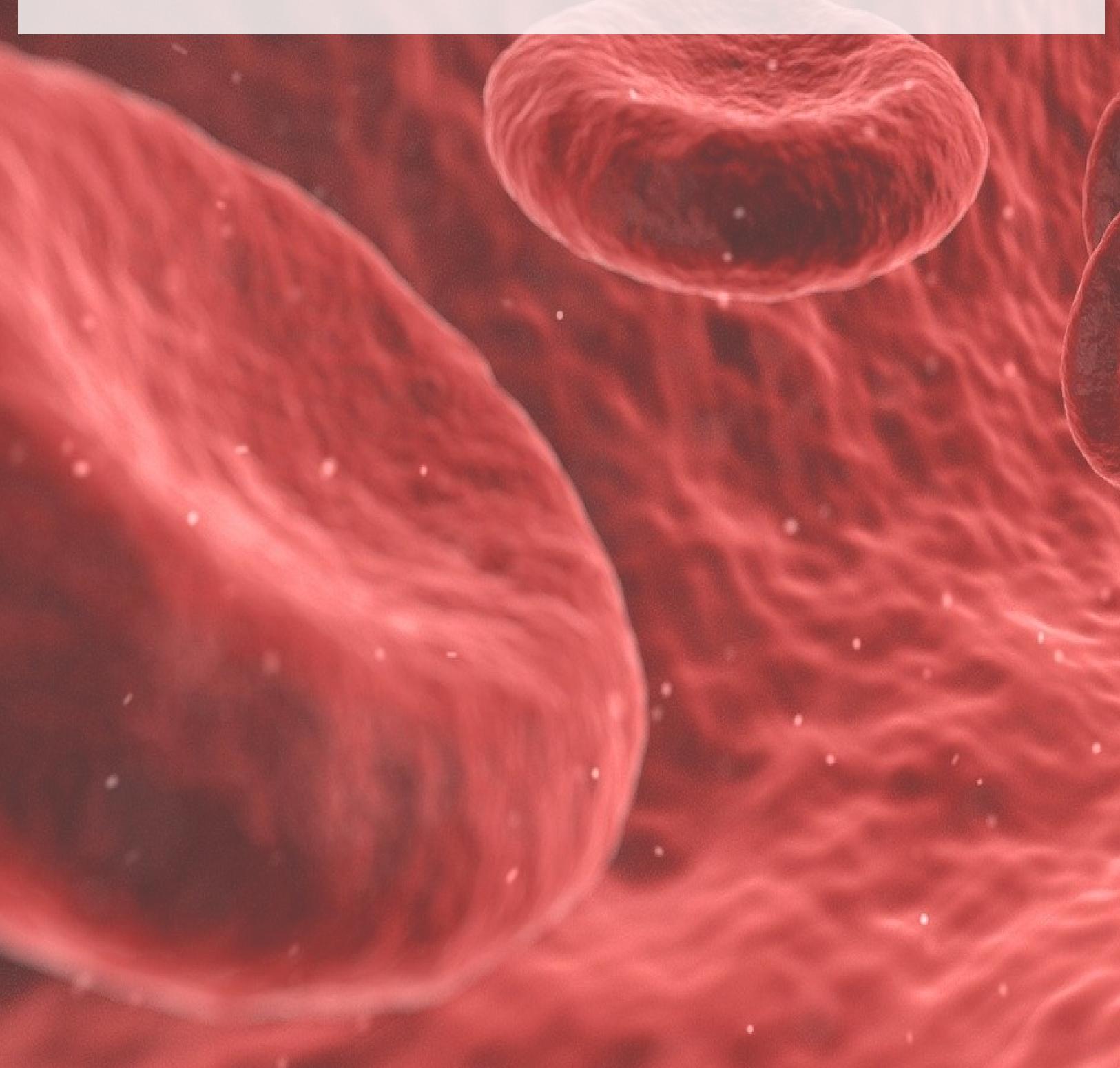
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A stroke is also known as a brain attack and is considered a 911 emergency. This happens when something impedes blood supply to the brain or when a blood vessel in the brain bursts, for multiple reasons. Whether there is lack of blood to the brain, or vessel bursts, the consequences can be detrimental and permanent. The first step in preventing further damage to the brain is knowing the signs.



Signs of a person having a stroke:

- Numbness or weakness in the face, arms, or legs
- Confusion
- Trouble speaking or understanding speech
- Trouble seeing
- Dizziness
- Severe headaches

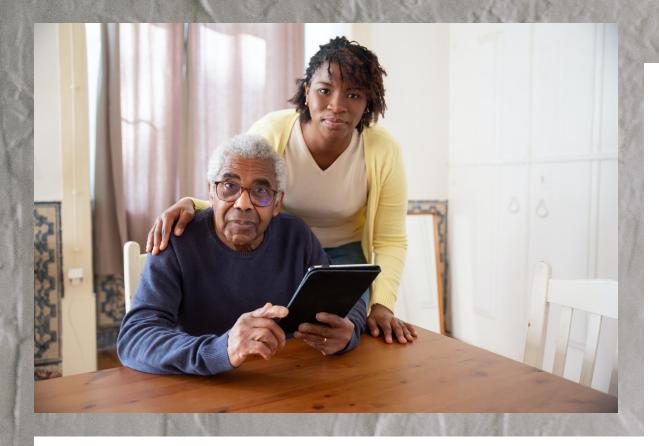
High cholesterol and high blood pressure can highly increase the chances of getting a stroke. So, it is very important to maintain a well-balanced diet that is low in saturated and trans fats, as well as cholesterol, but it is high in fiber. **Getting medical treatment within THREE HOURS of the first symptoms of a stroke can make the difference between recovery and lifelong disability.**

How to achieve stroke prevention:

- Reduce the salt in your diet
- Avoid high-cholesterol foods like: burgers, cheese, and ice cream
- Eat 4 to 5 cups of fruits and vegetables every day
- Consume several daily servings of whole grains and low-fat dairy
- Get more exercise- at least 30 minutes of activity a day
- Quit smiking, if you smoke!

COMPASSIONATE HOLIDAYS: NAVIGATING THE SEASON WITH LOVES ONES LIVING WITH DEMENTIA

BY: TATIANA PHILLIPS



The holidays are often filled with warmth and love and spending time with family and friends. But, many people find this time of year can bring stress and anxiety, especially when including loved ones with dementia. Roughly one in seven Americans over 71 have at least

including loved ones with dementia. Roughly one in seven Americans over 71 have at least one form of dementia. Many people get diagnosed and receive the care required to live as much everyday life as possible. Unfortunately, though, only half of dementia patients receive a proper diagnosis.

WHAT IS DEMENTIA?

Dementia is tricky because it is a term used to describe several diseases affecting memory loss. As we age, our chances of developing one of the many diseases causing dementia double every five years after age 70. By the time you reach 90, 33 people out of 100 will develop dementia. While you may not be at risk for developing dementia, your aging parents might.





DEMENTIA AND COMMUNICATION

Even if your loved one has not yet had a proper dementia diagnosis, the following few tips might be helpful to implement. Communicating with loved ones ahead of time is vital to setting yourself up for less stress around the holidays. Your holiday routines may seem ordinary, but the additional stress may appear unexpectedly. Let loved ones know about the possible or complete diagnosis of dementia before the holiday season. Communicating will help them prepare for repeated conversations, lack of desire to participate in traditions, adjusted roles such as hosting or preparing meals, and potentially adapting to an earlier mealtime if your loved one gets agitated in the evenings.

Living with dementia may be confusing for everyone, but your loved one will benefit from feeling in control of their life as much as possible. Their dementia may require more patience and empathy than you're accustomed to. By adapting your day to include extra time around your holiday get-together for rest for your loved ones and yourself, you will set yourself up for a less stressful day.

During the holiday season, keep an activity or photo album handy for your loved one to stay busy. Ask your loved one about the photos or stories about family traditions. Even if you have heard the stories and traditions before, your loved one will feel included in your holiday celebration. By including your loved one in a two-way conversation, you will keep them engaged. Also, ask family members to refrain from simultaneous conversations, which may confuse your loved one.

Holidays are stressful without the added layer of a dementia diagnosis. Give everyone the grace and space to adapt to your new traditions.



The 27th Annual Rural Health Educational Summit



October 10th-11th 2023

The Westshore Grand, A Tribute Portfolio Hotel 4860 W Kennedy Blvd, Tampa, FL 33609

Registration Open Now!
"Call for Presenters" Submit by July 14th
"Exhibitor Prospectus" Showcase your company!

Due to unforeseen circumstances, the FRHA Board has made the decision to cancel the conference on October 10th-11th, 2023. It was a very tough decision, but ultimately, it is in the best interest of the association. We do intend to reschedule this conference in early 2024, and hope to have your support at that time as well. Registrants have been notified via email regarding their registration. If you have any questions, please email frha@srahec.org.



40th Annual Florida Literacy Conference

Join hundreds of adult and family literacy practitioners, teachers, volunteers, and adult learners next Spring to network, develop new skills and share promising practices during the 2024 Florida Literacy Conference. This premier literacy event offers a wide range of sessions presented by local, state, and national educators.

Sessions are designed to energize you with new ideas and hands-on strategies that you can put to work for your program and students. Sessions promise to be interactive and are sure to help expand your knowledge on a variety of topics related to adult basic education, literacy, ESOL, and family literacy.



Hotel Information

Orlando Marriott Lake Mary 1501 International Parkway Lake Mary, FL 32746

SAVE THE DATE! May 8-10,2024

Registration Rates

Full Conference Early Bird (Deadline Feb. 14) Member- \$295 Non-Member- \$320

Full Conference Standard
(After Feb. 14)
Member- \$340
Non-Member- \$365



WEBINAR Reproductive Health Care, Litigation, Privacy and Public Health 1:00 - 2:30 p.m. ET

Register

The Supreme Court's decision in Dobbs v. Jackson Women's Health Organization eviscerated 50 years of precedent and constitutional rights to abortion. States have since adopted widely divergent reproductive health care access policies, illustrating serious legal questions remaining post-Roe. Attend this webinar for the latest information on litigation in state courts regarding reproductive health care access through state constitutions and statues; and update on how states are protecting reproductive health records through data privacy laws; and how local health departments are serving their communities in the post-Roe landscape.

By attending the webinar, you will:

- Recognize the role state courts and state constitutions and statues play in protecting access to reproductive health care, particularly abortion care.
- Understand state efforts to bolster privacy of reproductive health records and ensure they are not used against patients and providers.
- Identify how different local health department are operating ever-changing state laws regarding sexual and reproductive health to best serve their communities.

Moderator:

- Katherine Schutes, J.D., Staff Attorney, Eastern Region, Network for Public Health Law

Presenters:

- Joanna Suder, J.D., Senior Staff Attorney, Reproductive Health, Network for Public Health Law
- Stephen Murphy, J.D., Deputy Director, Mid-States Region, Network for Public Health Law
- Kathleen Hoke, J.D., Director, Eastern Region, Network for Public Health Law

Our Contact Information

Network for Public Health Law 7101 York Avenue South Suite 270 Edina, MN 55435 952-452-9706



Take Steps to Prevent Pre-Diabetes and Lower Your Chances for Heart Disease and Stroke. Prediabetes is when your blood sugar levels are higher than normal—you don't have type 2 diabetes, but you're getting close. Approximately 96 million American adults have pre-diabetes and more than 80% don't know they have it. Those may be big numbers, but the good news is that you can prevent or delay pre-diabetes:

Talk to your health care provider about your specific risks and ways to avoid life threatening conditions. Move more starting with 30 minutes a day, 5 days a week. Stop smoking or using tobacco products. Avoid sugary drinks and drink more water. Eat healthy meals and pay attention to the quality of food you eat. Manage your stress. Improve your sleeping habits. Take Extra Steps and Try New Recipes.

When you do the work to prevent diabetes or live well with the disease you are also taking care of yourself for a longer, healthier life. The choices of regular exercise and healthier food that can prevent and manage diabetes, are the same healthier choices that can work for everyone, every day.

During the holiday season, don't put a pause on making good choices. Start new traditions such as taking a morning or after-meal walk (or both) and preparing healthier food options.



When Infant Mortality is a Case of "I Love You....To Death"

The death of a child in the first year of life is an unimaginable tragedy. Alabama has the second highest infant mortality in the nation, with more than nine in 1000 newborns dying before their first birthday.

Some of these children die because of extreme prematurity, others because of birth defects. Unsafe sleeping practices, however, are the cause of at least twenty-four percent of these deaths – deaths that are completely preventable. Every single loss of a baby is a tragedy both for a family and for our state. It is especially shocking when the baby is healthy and thriving the day before death.

I have been a pediatrician in Alabama for thirty-eight years. I count it as a personal loss every time I hear of another infant dying as a result of sleeping with an adult, on a sofa, in a lounge chair, in a baby bouncer, face down against a bumper pad, or surrounded by soft bedding. Years ago, a personal friend of mine lost her baby while sleeping on a waterbed.

I have worked on policies in my local hospital to teach new parents about safe sleeping. I have handed out an untold number of pamphlets designed for new moms, dads, grandparents, Latino parents, and African-American parents. I have placed posters in my community and attended many state meetings to discuss the problem. In desperation, I even once told a new mother that if she is going to sleep with her baby, she will have to find another doctor. I can't deal with another senseless death.



More that twenty-five years of experience and research has led to the development of the "ABCs" of safe sleeping: Alone, on the Back, and in a Crib. Every leadership group I have worked with over the years continues to blame lack of education or cultural issues as drivers of this continued loss of life.

Recently, however, I had an "ah-ha" moment. This is not an education issue. This is not a cultural issue. This is a matter of the heart; not the head.

The revelation hit me after attending my county's child death review meeting, followed a week later by the Fetal and Infant Mortality review for Southwest Alabama. The fact is, mothers who sleep with their babies are much more likely to have suffered from adverse childhood experiences (ACEs).

An ongoing research study conducted by Kaiser Permanente and the Center for Disease Control shows that adult illnesses (such as heart disease, liver disease, diabetes, tobacco use, substance abuse,



suicide, asthma, autoimmune diseases, and even early death) are directly linked to what happens during childhood. The study surveys ten types of childhood trauma, including neglect, physical/emotional/sexual abuse, absence of a parent through divorce/death/abandonment, a family member diagnosed with a mental illness, domestic violence, incarceration of a parent/guardian, and drug/alcohol abuse in the family.

If a child suffers four or more adverse experiences, he is 32 times more likely to have learning and behavioral problems in school. As an adult, a person with four or more ACEs has a marked increase in chronic pulmonary disease, hepatitis, depression and suicide as well as many other physical and mental illnesses. (It is also worth noting that the research suggests that having a caring adult who loves the child unconditionally can buffer the effects of ACEs and lead to resilience.)

After our county Child Death Review meeting, the Forensic interviewer from our Child Advocacy Center shared that three of the mothers who slept with their babies had in previous years been victims of child sexual abuse. One had also experienced the suicide of the offending relative. A fourth one suffered from mental illness and drug abuse. At least three of these mothers had been found sleeping with their infants while still in the hospital after delivery. They received extensive education on safe sleeping and even signed a form saying they understood.

The following week, at the Fetal and Infant Mortality Review meeting for SW Alabama, social histories of the mothers who lost a child while

sleeping together revealed that one had been a foster child, one had suffered severe child abuse, and another had been raped twice.

My first thought was that perhaps these mothers felt the need to protect the baby by holding them close – as much and as often as possible. But one of the experienced nurses on the team suggested that these moms have a deep desire for someone to love them in return. Their emotional needs drive them to crave a physical closeness to their child. It is not that that they intentionally disregarded recommended safe sleeping practices. It has everything to do with what happened to them earlier in life that drives this need for touch. Smart people with this information can design new ways to prevent these senseless deaths.

Give the ACEs questionnaire to expectant moms. Identify those at risk. Refer them to a nurse-family partnership program. Discuss ways to have that closeness without bedsharing. I feel sure there are other ways to intervene. Together let's look for the answers.

Marsha D. Raulerson MEd. MD FAAP Pediatrician, Teacher and Child Advocate Brewton, Alabama





Discussing Diabetes &

Diabetes mellitus is a syndrome that mainly describes abnormal carbohydrate metabolism and is characterized by high blood sugar, also known as hyperglycemia. There are different types of diabetes, but most commonly present as Diabetes Type 1, Diabetes Type 2, and Gestational Diabetes.

The Centers for Disease Control and Prevention reported a prevalence of diagnosed diabetes in 2022 of approximately 11.3 percent of adults equivalent to 37.3 million people; 28.7 million with diagnosed diabetes, an estimated 8.5 million undiagnosed, and 95 percent of whom have Type 2 diabetes.

Diabetes Type 1 is an acquired condition characterized by the deconstruction of pancreatic cells in charge of producing insulin. When this happens, there is a deficiency, and patients need insulin. Twenty-five percent of patients require a hospital evaluation at diagnosis. Diabetes Type 1 usually affects the younger population and is unrelated to a specific body mass index.

Diabetes Type 2 is the most common, affecting 90-95% of patients with diabetes. The high blood sugar levels usually occur due to a progressive loss of insulin from the pancreas, accompanied by insulin resistance, that finally results in a relative insulin deficiency compared to the glucose levels present. Most patients affected with this condition are overweight adults, but also could be present in young patients with normal body mass index. Usually is asymptomatic but could present symptoms related to hyperglycemia like increased urine frequency, increased thirst, unintentional weight loss, blurry vision, or susceptibility to infections.



Defeating Challenges

Central Florida Health Care has a new Endocrinologist, Dr. Jessica Castellanos Diaz, who focuses on diabetic patients, among other endocrinologic conditions. Dr. Castellanos-Diaz is a Board-certified Internist and Board-certified Endocrinologist who follows up-to-date guidelines based on the American Diabetes Association and Endocrine Society to offer high-quality service to the patients in our Davenport Health Center. The schedule accommodates as many diabetes patients as possible.

Dr. Castellanos-Diaz provides education in diabetes management, treatment, complications, diet, exercise, and nutritional facts that affect carbohydrate metabolism. Patients are also educated and trained in diabetes technology like insulin pumps and continuous glucose monitors. Patients receive a complete evaluation and assessment of complications and risks on the first visit and are offered close follow-up visits to provide the support that diabetes patients need to be successful.

Central Florida Health Care also offers telemedicine to allow patients with transportation issues to benefit from this new service. The patient has access to a patient portal where the provider shares laboratory results and treatment recommendations and answers medical questions promptly. We look forward to serving you and helping with any healthcare needs.

Need an Appointment or Have Other Questions?
Please contact our Call Center 866-234-8534





Hardee DeSoto Community Health Worker Program

The HD CHW Program is a care coordination program that is led by a community health leaders. The goal of the HD CHW Program is to empower and support the target population to improve access to care while making it easier for the target population to navigate the appropriate channels to receive all needed and requested care, improving their overall impression of their current health status- regardless of race, income level, or immigration status. The HD CHW Program utilizes a set of strategies that lead to the following outcomes: positive changes in the individual's personal health, increase in knowledge and confidence in individual's ability to navigate the health care system, reduced barriers to accessing health care, increased care coordination, increased collaboration and engagement between participating providers, and increased preventative care. We achieve this by creating linkages to care, home-based health education and assisting accessing and using community resources.

Services are offered in the following Counties: Hardee, DeSoto, Highlands, and Polk Counties.

Do you want help navigating healthcare? Please call us!

For more information, you can call our CHW Program Offices at 863-494-8509, email the Executive Program Director, Valeria Carrasquillo Rivera at valeria.rivera@hrhn.org or visit the HD CHW Website at hrhncommunityhealth.org.





Our partners at Tampa General Hospital offer Community Programs every month. These programs include, but aren't limited to caregiver classes and support, cancer support groups, mental health first aid, tobacco cessation, community medical support, town halls, and many more! Some of these community programs are even offered solely in Spanish!

You can check them out for yourself by visiting their calendar online at any time. You can **click here** to check out current offerings.



Telemedicine Talk

Episode 15: Telehealth Can Improve Health Outcomes for Homeless Population

In a study recently published in the Telemedicine and e-Health Journal, researchers gathered data from a community health clinic serving homeless residents in an urban southern city and staffed by MUSC care providers to measure access to care, quality of care, and patient satisfaction. The clinic offered both in-person and telehealth services.

High costs of care, transportation access, and lack of health insurance often prevent homeless individuals from seeking and receiving the healthcare services they need. Using telehealth for this population may present a way to overcome these barriers.

According to the study, telehealth yielded an overall satisfaction rate of 92.7 percent from this population. More than nine in ten patients said they felt the telehealth visit improved their health, saved them time, and made it easier to get in touch with a doctor. These satisfaction levels were comparable with the patients who received in-person visits.



Click here and read the article in its entirety.





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Elder 1-800-96-ELDER Information & Referral Available in Spanish (1-800-963-5337) Available in Spanish



Call for Presentations



FHCA 2024 Annual Conference & Trade Show Rosen Shingle Creek Orlando, FL July 21 - 25, 2024

Each year, FHCA's Annual Conference Committee strives to offer a remarkable lineup of education featuring a program that is both inspirational and thought provoking for attendees.

Long term care professionals are invited to submit a presentation for the Florida Health Care Association 2024 Annual Conference & Trade Show. The Annual Conference Committee is looking for interesting, educational, empowering, and inspirational presentations that will equip attendees with effective strategies to achieve operational success and continuous quality improvement. Annual Conference CE Sessions focus on topics and issues that impact providers, direct and indirect care staff, residents and the long term care community, now and into the future.

Call for Presentations through the FHCA Portal

The Call for Presentations for the 2024 Annual Conference & Trade Show will be open November 1 through January 9, 2024. If you are interested in presenting, please log in to the FHCA Portal and select Submissions from the menu. For more information and step-by-step instructions on how to submit, click here.

Any questions about a submission can be directed to Christina Michael at cmichael@fhca.org.

Annual Rural Health Conference May 7-10, 2024 New Orleans La May 7-10, 2024 New Orleans, La.



Let's march on down to New Orleans

Join NRHA and hundreds of rural health leaders from across the country down in the bayou to help raise the standard for rural health with over 80 innovative, practical, and cost-saving sessions and much more.

NRHA's 47th Annual Rural Health Conference, 9th Rural Hospital Innovation Summit, and associated events are May 6-10 in New Orleans, La.

Don't miss NRHA's expanded Health Equity Conference May 6-7 and Rural Medical Education Conference occurring immediately beforehand on May 7.

"If you're interested in actively engaging in transformational work on behalf of rural communities, NRHA's annual events are where it's at." - NRHA member Peggy Wheeler

We are so excited to see everyone in New Orleans this spring.

There's even more in store

Don't forget to also register for NRHA's 47th Annual Rural Health Conference, the nation's largest gathering of rural health pros, occurring immediately afterward May 7-10.

These events are created for anyone with an interest in rural health care, including rural health practitioners, hospital administrators, clinic directors and lay health workers, social workers, state and federal health employees, academics, community members and more.

We'll help you navigate the shifting currents of rural health with more than 80 innovative, practical, and cost-saving sessions — and even more at NRHA's 9th Rural Hospital Innovation Summit.

Heartland Rural Health Network, Inc. is happy to share with you some great updates from our members and community partners! Thank you for your continued commitment to improving rural health care through your association with Heartland Rural Health Network. A full description of current Network initiatives can be found online on our website.

If the Network can partner with your organization on a project, please contact us to discuss. We value community partnerships to accomplish the mission of the Network.

Please feel free to forward this newsletter to a friend or colleague.



Heartland Rural Health Network, Inc. www.hrhn.org

863.471.6007

Mission: Improving access to quality health care by implementing creative solutions in collaboration with network members and community partners.

Vision: To be a leader of innovative, collaborative, and quality driven rural health initiatives.

2022 – 2023 Board of Directors: Vince Sica, President; Blake Warren, Vice President; Robert Rihn, Past President; Denise Collazo and Holly Murphy.