

NETWORK NEWS



"A perfect summer day is when the sun is shining, the breeze is blowing, the birds are singing, and the lawn mower is broken"- James Dent



WALKING A TIGHTROPE: THE FUTURE OF SAFETY NETS

Despite years of debate about the availability of health insurance for Americans, and after several attempts to create programs or policies for universal health care coverage, more than 43 million U.S. residents are uninsured. This staggering number is in addition to the millions more who are underinsured for vitally important health services. Where do these people go for their health care? Answer is many of these individuals receive care from the health-care *safety net*— a term that has come to refer broadly to public hospitals, community health centers, public health departments, and others who, either by mission or mandate, provide significant amounts of healthcare to people who are uninsured or underinsured and who cannot cover the costs of care from their own resources. Among those most often served by the safety net are the uninsured, those on Medicaid, the poor, and the homeless.

Urgent Matters is a national initiative of the Robert Wood Johnson Foundation. This program is designed to assess the state of America's healthcare safety net while working to improve access by addressing the crisis in a critical part of the safety net: crowded emergency depart-

ments. *Urgent Matters* rests on the assumption that there is an important relationship between emergency department use and the performance of the health care safety net. The *Urgent Matters* program conducted safety net assessments in 10 communities across the county. Each assessment examined key issues that shape health care networks available to uninsured and underserved residents. An analysis of data from residents' use of the emergency department was also done and the report provides estimates of the use of the emergency department for care that could safely be delivered in a primary care setting.

Key Findings on Emergency Department Use:

- * A significant percentage of visits to the ED could have been treated in settings other than the ED. Four of ten ED visits that did not result in an inpatient admission could have been safely treated outside of the ED.
- * About 60% of ED visits were for patients who were either uninsured or covered by Medicaid & SCHIP.
- * Rates of use of the ED for primary care treatable conditions are far higher for children than for

adults or elderly patients.

- * Patients used the ED for primary care treatable conditions at relatively comparable rates during the hours of 8 a.m. to 4 p.m., when clinics and private practice providers are open, and the hours of 4p.m. to midnight.

Strategies for Strengthening the Safety Net:

- * Collaboration among existing safety net providers should be encouraged and developed as a way of increasing overall capacity and improving quality of care for uninsured and underserved populations.
- * Safety net providers should implement information systems that follow patients across care, allowing providers to share patient files across various sites of service. This would improve patients' quality of care by streamlining eligibility and registration processes and enables providers to have more up-to-date information on a patient's clinical profile and history.
- * Safety net providers must develop programs to provide language services, health education,



and culturally appropriate outreach that effectively meets the needs of the population.

Florida's Step Towards Addressing the Situation:

During the 2004 Legislative Session (March 2-April 30), Senate Bill 1629, which addresses Affordable Health Care, was passed. The bill focuses on affordable and accessible employment-based health insurance through several initiatives. One initiative authorizes hospitals to work cooperatively with county health departments, federally funded community health centers, and local health care programs to develop health care to persons who currently go to hospital emergency departments for non-emergency medical problems.

Information extracted from *Walking A Tightrope: The State of the Safety Net in Ten U.S. Communities*
www.urgentmatters.org

Lateral Thinking



- * "One sees great things from the valley, only small things from the peak."
G.K. Chesterton
- * "Whether you believe you can, or whether you believe you can't, you're absolutely right."
Henry Ford
- * "Every exit is an entry somewhere else."
Tom Stoppard
- * "The human mind is like a parachute - it functions better when it is open."
Cole's Rules

"Highlands County received a grant to establish the Highlands County Community Coalition for Substance Abuse Reduction"

DESOTO HEALTH RESOURCE MARCHING AHEAD: OPENING IT'S DOORS IN AUGUST

DeSoto Health Resource, Inc. (DHRI) is marching ahead with plans to open it's doors in early August. They are expecting to incorporate in August and obtain a 501 c3 designation from the IRS later in the year. The mission of the organization is to improve the quality of life for all residents of DeSoto County by implementing creative healthcare solutions in collaboration with interested and committed community partners. Volunteers will assist eligible individuals fill out the necessary paperwork to obtain free or reduced cost medi-

cations from Pharmaceutical Compassionate Programs. Most major drug companies offer Compassionate Prescription Assistance, but each company has their own eligibility criteria and it can be very confusing to individuals trying to obtain free or reduced cost medications. DeSoto Health Resource makes the process easier for individuals by using a software program that provides the necessary eligibility criteria and forms to obtain clients' medications. DHRI is hoping to offer vouchers for acute needs. Arcadia Drug Store in DeSoto County made a gra-

cious contribution of \$1,200 for the first year of operation. This money will be used for acute and emergent medication needs. Individuals must meet specific criteria to qualify for vouchers. The voucher system will be determined by the amount of funds available.

If you are interested in volunteering or making a donation to DHRI please contact Jan LoPorto at 863-494-5041. The program will be open on Tuesdays from 9:00 a.m.– 3:00 p.m. The office is located at 1901 S.E. Baker Street in Arcadia.

HRHN WELCOMES NEW STAFF MEMBER

Heartland Rural Health Network, Inc. would like to formally welcome Bea Walsh as the new Clinical Integration Coordinator. Bea is a Registered Nurse and has her Bachelor's of Science in Nursing (BSN) from

Seton Hall University. She has been involved in the healthcare setting for many years having worked in the hospital setting, home health care, and drug and alcohol recovery programs. In her spare time Bea is

involved with the Highlands Little Theatre located in Sebring and also enjoys spending time with her family.



HIGHLANDS COMMUNITY COALITION GOING STRONG

In January 2004, Highlands County received a grant to establish the Highlands County Community Coalition for Substance Abuse Reduction (HCCC). The mission of this organization is to organize, inform, and unite the community in its efforts to reduce substance abuse. In September 2003, Gov. Jeb Bush launched the Drug Free Communities program

and set aside more than \$4.5 million to help communities stem the tide of drug abuse. This money is to be used to form community coalitions, which will help prevent the illegal use of alcohol, tobacco and drugs.



Many individuals and local agencies have come together to form the HCCC. Several training sessions on building a coalition have been held. If you are interested in learning more about this organization or are interested in joining please contact Laura Van Horn at 863-471-5662 or vanhornl@highlands.k12.fl.us

FLORIDA ASSOCIATION OF RURAL EMS PROVIDERS: A NEW VOICE FOR RURAL EMS

The Florida Association of Rural Emergency Medical Service (EMS) Providers was created to bring a voice of reason at a State and Local level to ensure support for proper treatment of patients in Florida's rural communities. The Association wants to ensure that rural communities receive the resources necessary to provide proper EMS staff training and effective emergency services to all rural residents. On July 6th, over fifty rural EMS providers met in Orlando during the EMS Advisory Council Sessions. Dan Harshburger, President of the Association stated, "The response was incredible. We had agencies from around the state attend

and the ones that were unable to attend appreciate the idea and want to be a part of the constituency group." The Association will start looking at issues such as the Florida EMS aggregate data collection, forming a committee to look at a supply contract with vendors to help lower the costs of medical supplies for rural agencies, and many other issues currently being discussed by the Advisory Council. With the committed partners in this Association, rural EMS providers will now have a voice at the state level. The Board of Directors and Executive Officers



for 2004-2005 are:

President- Dan Harshburger, Hardee County Fire Rescue, Wauchula Florida

Vice-President- David Duke, Tampa General Hospital Aeromed, Tampa, Florida
Secretary-Tommy Baker, Gadsden County EMS, Quincy, Florida

Treasurer-Chad Reed, Dixie County EMS, Cross City, Florida.

For more information on the Association please contact Dan Harshburger at 863-773-4362 extension 205 or by e-mail: dan.harshburger@hardeecounty.net

RURAL CALENDAR



August 3- DeSoto Health Resource, Inc. Volunteer Training 9 a.m.-12 p.m., 1901 SE Baker St., Arcadia, FL 34266

August 11- Highlands County Community Coalition for Substance Abuse Reduction Meeting @ Florida Hospital Heartland Conf. Room 3, 9 a.m.

August 12- Health Care Alliance of Polk 9 a.m., United Way in Lakeland.

September 15-HRHN Board Meeting 11:30 a.m. at Highlands Regional Medical Center

NETWORK STAFF VISIT GADSDEN COUNTY: INTRODUCES CLINICAL INTEGRATION PROJECT

Gadsden County is like no other part of Florida, with rolling hills, large forested tracts of land, rivers and an abundance of streams. It encompasses 528.49 square miles and is located 10 miles west of Tallahassee. It is designated as a rural community and like many rural communities in the United States, Gadsden County experiences gaps in healthcare delivery and services compared to their urban counterparts. On July 8, 2004, the Network staff met with Gadsden County healthcare providers to introduce them to the Clinical Integration Project for Healthcare Delivery in Rural Communities. The Integration Model moves

the Network into a collaborative relationship whereby the staff will be working side by side with Gadsden healthcare providers in resolving healthcare delivery issues common to almost all rural areas. The Model should demonstrate the reduction in outmigration, expansion of services, increasing revenues to local providers, and greatly enhancing the access to care and make certain that it is efficiently delivered to all Gadsden residents. The Gadsden Steering Committee includes Mike Walsh, Sr. Vice President of DasSee Community Health Systems, Dr. Miriam Gwathney, Alma Jones, Administrator, and Earline Daw-

son, Chief Nursing. The Steering Committee will review data and decide which service line to focus on. They will appoint a Clinical Integration Team who will examine process and infrastructure issues within the particular service line and determine possible solutions and implement necessary changes. Once a service line has been reviewed and changes have occurred the Steering Committee will choose the next service line to be studied and choose the appropriate Clinical Integration Team and the process starts again until all necessary service lines have been reviewed.

"...like many rural communities in the United States, Gadsden County experiences gaps in health care delivery and services..."

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Board of Directors 2004-2005

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Sandy C. Griffin, Provider
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Clifton Timmerman, Hardee County Governmental Representative
Blake Warren, Education
David Robbins, Provider
Robert C. Rhin, Provider
Alice C. Rast, Provider
J. Rudy Reinhardt, Network Executive Director

Address Label

WELCOME NEW NETWORK MEMBERS

The Network would like to welcome new members: Florida Gulf Coast Chapter of the Alzheimer's Association, Manatee County Rural Health Services, Inc., and the Hardee County Emergency Medical Services. If you are interested in becoming a Network member or would like more information on the Network, please visit www.hrhn.org or call 863-452-6530.

NETWORK BOARD MEETS: ELECTS 2004-2005 OFFICERS

The Network Board Meeting took place on July 7, 2004 at Florida Hospital Wauchula. Board President, Warren L. Santander, opened the meeting by introducing James R. Chromik who accepted the position of President/CEO of DeSoto Memorial Hospital on June 21, 2004. He also introduced Bea Walsh who joined the Network staff in early June and thanked Dr. Clifton Timmerman, a Hardee County Commissioner, for his attendance. The Bylaws committee met just prior to the Board meeting to address two Bylaw issues that had been discussed at the Nominating/Membership Committee that was previously held on June 2, 2004. The two recommendations from the Bylaws Committee were presented and actions were taken on both recommendations. The Bylaws Committee will meet several times throughout the

year to review sections of the bylaws and to bring and recommendations for appropriate changes to the Board. The Florida Gulf Coast Chapter of the Alzheimer's Association, Manatee County Rural



Health Services, Inc., and the Hardee County Emergency Medical Services were accepted as new members of the Network. The Nominations Committee recommended that both the current President, Warren L. Santander, and Vice-President, Kevin Roberts, be elected to another term in office. Nancy Zachary remains Secretary and David Ottati will serve as Treasurer

for one more year. The Board voted and accepted the Officers for Year 2004-2005. Kevin Roberts presented a plaque to Warren Santander in "grateful appreciation for three years of Outstanding Leadership, Dedication and Commitment to improving rural health care." The Board reviewed the fiscal year financial reports and proposed work plans for FY 2004-2005. All reports were approved by the Board. J. Rudy Reinhardt briefed the Board on the recent meetings held with Dr. Orban, USF, College of Public Health as well as the faculty of Florida State University. The next Board of Director's meeting is scheduled for September 15, 2004 at 11:30 a.m. at Highlands Regional Medical Center in Sebring.