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Risa Lavizzo-Mourey, MD, MBA, was named as the successor to Steve Schroeder, MD, president and CEO of The Robert Wood Johnson Foundation

## **RWJF awards REAP over \$800,000 in new grant money**

Earlier this year the Robert Wood Johnson Foundation reauthorized the Southern Rural Access Program (SRAP) for an additional four years. The Georgia project, known as the Rural Enrichment and Access Project (REAP), was awarded an \$808,450 grant, July 1. The other seven SRAP grantees received their grant awards, April 1.

Georgia's project is lead by the Georgia Department of Community Health and its primary partner, the Mercer University School of Medicine. The new funding will allow REAP to continue its practice management recruitment and retention project, its East Georgia Health Cooperative network effort and its revolving loan fund planning. First time support will be provided for the Spring Creek Cooperative and the Albany State University-led rural leaders effort.

### **Recruitment and Retention**

Support will be provided for two staff positions to provide practice management technical assistance to physicians, community health centers and certified rural health clinics and other practitioners in the target region. The individuals, housed at the Medical College of Georgia's statewide Area Health Education Centers, will address both fiscal issues (billing, coding, and revenue reimbursement maximization) and practice efficiency issues (patient flow, scheduling, customer-oriented service and corporate compliance).

### **Rural Health Leaders**

Albany State University will expand its health careers opportunity program to provide summer opportunities for students residing in the target region and develop a year-round component that includes student support, placement opportunities, tutoring and mentoring. A second element to the effort is the development of a graduate nurse practitioner enrichment summer program with year-round activities. State and university funds will match the SRAP investment in this effort.

### **Rural Health Networks**

Transitional funding was approved to support the director of the nine-county East Georgia Health Cooperative (EGHC). The director will provide leadership for its diabetes case management/tracking program along with continuation of the regional medical society and planning for an oral health initiative. Since its inception EGHC has made significant progress, including development of a shared biomedical waste removal service, development of a regional medical society that allows joint peer review activities, professional credentialing and formalized continuing education opportunities, establishment of a member E-mail network, installation of a new computer network among its community health centers and three of its hospitals and a nurse-led diabetes case management system.

### **Revolving Loan Fund**

Georgia will complete the planning process associated with the development of a revolving loan fund. The fund will be established by the Development Corporation of Middle Georgia, which will serve as the administrative agency and intermediary for the loan fund. Additional planning is needed to confirm and finalize leveraging and matching fund commitments and develop a revolving loan fund application.

## Target Region

The targeted geographical region, referred to as Regions 8 and 10, comprises 30 counties and is home to 370,000 people. Region 8, located on the southwestern side of the state bordering Alabama, includes Chattahoochee, Clay, Crisp, Dooly, Harris, Macon, Marion, Muscogee, Quitman, Randolph, Schley, Stewart, Sumter, Taylor, Talbot and Webster. Region 10, located in the southwest quadrant of the state bordering Alabama and Florida, includes Baker, Calhoun, Colquitt, Decatur, Dougherty, Early, Grady, Lee, Miller, Mitchell, Seminole, Terrell, Thomas and Worth counties.

More information about REAP can be obtained from Andre' Thomas, project director, at 478-301-2723.

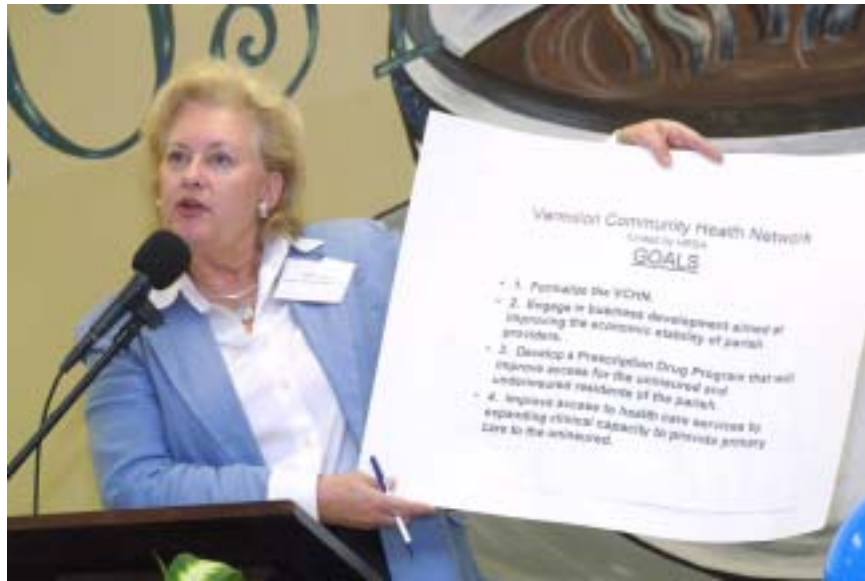
## At news conference in Abbeville LRHAP staff celebrate Louisiana successes and outline use of new grant funds



Allen Parish Health Enrichment Network Director **Sandy Ray** discussed plans to combine the efforts of the Chamber of Health strategic planning process with that of network development in Phase II to support and build local capacity.

Project Director **Marsha Broussard** provides an overview of the Louisiana Rural Health Access Project. In her remarks she said the program “is a testament to the strength and resolve of rural communities to address local health issues and the generosity of the Robert Wood Johnson Foundation and Pfizer Foundation have made it possible for the Louisiana Rural Health Access Project to make significant progress in achieving that goal.”





**Margaret Jackson**, Executive Director - Vermilion Parish Rural Health Network, highlights Phase II goals of the parish’s community health network. Although not present for the conference, Southern Rural Access Program Deputy Director **Curtis Holloman** was quoted in the news release as saying, “We have seen innovation in the areas of community capacity building and network development. With the incorporation of the federal Rural Delta Network initiative and its leveraging of other foundation dollars, such as those from Pfizer Foundation, LRHAP will have the resources to continue to bring about greater access. The Louisiana project has been a model for the leveraging of new resources and the maximizing of existing resources within the SRAP region.”

Mississippi **Governor Ronnie Musgrove** (c) takes time to pose for the camera with Mississippi Access to Rural Care’s (MARC) **Alvin Harrion** (l), recruiter administrator and **Marcus Garner** (R), Project Director. MARC was awarded over one million dollars through Southern Rural Access Program Phase II funding to improve access to healthcare.



## *Two 21<sup>st</sup> Century Challenge Fund grantees report success as SRAP grant funding ends*

Two 21<sup>st</sup> Century Challenge Fund grantees, CATCH Kids, Inc. and the Catahoula Parish Hospital District No. 2, both reported success with their programs and are finding ways to sustain their efforts as funding from the Southern Rural Access Program comes to an end. Funding for these projects represents a small portion of the \$2.5 million Phase I allocation of funds dedicated to this matching grants program.

### **CATCH Kids**

Although it was one of the smallest funded programs, the CATCH Kids project was able to use its \$50,000 grant to expand services with the establishment of two new clinics, one school-based and one community-based, and the implementation of a dental care component. According to project director **Valerie Long**, “The grant was a great boost for us and the prospect for the two new sites continuing service for at least the next year is excellent.”

The school-based clinic in the Tupelo City School District has a high number of students from low-income families as evidenced by over half of its 800+ students being eligible for free lunches. The school nurse staffs the clinic at no additional cost so most of its expenses come from equipment and supplies. Plus, eight local pharmacies are providing medications at or nearly at cost.

“A big plus for the program is an enthusiastic school nurse that is willing to promote the program and a school principal who was very eager for a CATCH Kids Clinic to be opened at his school,” emphasized Long. “Since the clinic opened in November 2001, 38 children have been seen. Local funding sources and the school PTO are providing funding beyond SRAP’s support so we will be able to continue to provide care to more children.”

The community-based clinic in Haven Acres has obtained 501(c)(3) status through the local Community Development Association and is currently working to obtain additional funding. According to Long, “The Tupelo neighborhood’s concern regarding healthcare for its youth greatly impacted the success in establishing this community-based clinic. The Haven Acres Neighborhood Association assisted in finding a site in the community, publicizing the clinic’s operations and supporting the program with volunteers.”

In the program’s first year of operation 105 children were served in a neighborhood of 400 children under the age of 18.

The pediatric oral component was successfully implemented with the recruitment of a dentist to the CATCH Kids Board of Directors who was instrumental in securing the services of volunteer dental hygienists at all the clinics served by CATCH Kids. The dental hygienists provided preventive screenings, including dental hygiene instructions and the distribution of basic oral hygiene products to children at risk. In addition, a \$5,000 grant from the Foundation of the Midsouth provided funds to pay local dentists for restorative and emergency dental services.

### **Catahoula Parish Hospital District**

The Catahoula Parish Hospital District project used its \$249,668 grant to acquire mobile dental equipment to provide dental services to residents in four parishes. The Rapides Foundation has made a five-year commitment of \$500,000 to the project and another \$170,845 has been secured in other matching support. Known as “Operation Smile” the project was successful in starting a program to break down access barriers to oral health care by bringing care to patients who were either without transportation or had a transportation dependence on caregivers or providers who are not always available to transport them to dental appointments.

The project had three key objectives:

- reduce geographic barriers by establishing a mobile dental service that will provide regular services in four parishes
- reduce the high cost and lack of healthcare coverage for low-income workers, their children and senior adults
- provide educational and outreach services and promotion of the program.

While the program was slow in serving its first patient due to staffing issues and equipment delays, once it was operational the mobile unit provided care to 319 school-age children in its first 28 days of service. As of July 2002 Operation Smile had provided oral health services to 225 patients and has another 90 patients in need of additional care.

In addition to the services provided to school-age children, the project provided preventive and restorative oral healthcare to three-year olds at a reduced fee through support from local Head Start Centers. Contractual arrangements are also being developed with local nursing homes to bring care to patients who are unable to visit a dentist.

Through the efforts of the outreach worker a successful awareness campaign was launched using digital signage, radio spots, brochure dissemination, neighborhood door-to-door campaigns and presentations at health fairs and healthcare-related events.

Through support from program income and the federal Health Resources and Services Administration’s Bureau of Primary Care the program will continue.





## American Heart Association & SRAP partner

### **Operation Heartbeat save lives through training; increased awareness**

Operation Heartbeat, a Southern Rural Access Program (SRAP) 21<sup>st</sup> Century Challenge Fund matching grant project administered by the American Heart Association's Central Louisiana Office, launched a highly successful program to improve cardiac arrest survival rates. The program focused on the Chain of Survival, a four-step progression of action: early 911, early CPR, early defibrillation and early advanced pre-hospital care and included awareness, education and the purchase of automated external defibrillators (AED).

The success of the program can best be demonstrated by the saving of a 65-year-old LaSalle Parish man's life by newly trained first responders and the availability of an AED. Prior to AED placement, the average time to access defibrillation for this rural Olla community would have been at a minimum 15-20 minutes – too much time to have saved his life. This man is alive today as a direct result of the AED equipment and training made possible through the resources of the 21<sup>st</sup> Century Challenge Fund, the Rapides Foundation and American Heart Association volunteers.

SRAP funding supported implementation of Operation Heartbeat in six additional rural underserved parishes – Allen, Catahoula, Concordia, Evangeline, Natchitoches and Vernon – resulting in participation by 11 Central Louisiana parishes since the program's inception. Operation Heartbeat made funds available to purchase 203 automated external defibrillators (AED) for public safety departments and train 1,357 first responders in Heartsaver AED, a course in CPR/AED designed specifically for first responders such as the ones who saved the Olla man's life.

Educational opportunities didn't end with the first responders. CPR training and familiarization with AEDs was provided for 325 students in two parishes. As a result of this successful initiative, the Louisiana Legislature has appropriated \$100,000 for a "CPR in Schools" pilot program.

In conjunction with the purchase of AEDs and first responder training was the launch of the "Chain of Survival Call to Action" awareness campaign that resulted in the generation of five million media impressions in the 11 parish-service area supported SRAP funds. The media impressions were calculated by adding together the number of times print ads, billboards and radio spots were read or heard by the general public. In addition, 80,000 "call to action" printed pieces were distributed by Operation Heartbeat Executive Committee members, including 600 envelope stuffers sent out with a local bank's member statements. Presentations also were made to local Rotary Clubs and several news conferences were held to help spread the word.

Although AEDs have been purchased and first responder training conducted, continued training, education and awareness is needed for the program to have lasting impact. To support that goal Operation Heartbeat's Phase II efforts will include generating interest and support from lay community representatives such as church leaders, public officials and business leaders to sustain this life saving program on an ongoing basis.

Portable and weighing less than five pounds, AEDs deliver an electrical shock to the heart – the only known therapy for cardiac arrest. Prior to SRAP funding it was estimated that less than 15 percent of the Central Louisiana's first responders were equipped with AEDs.

Equally disturbing was the fact that the early bystander CPR rate – where family members, bystanders or even strangers perform CPR on cardiac arrest victims – was estimated to be less than five percent. The American Heart Association estimates that at least 40,000 lives a year nationally can be saved by strengthening every link of the cardiac "Chain of Survival" and equipping emergency responders with AEDs.



The project was partially funded with a \$163,762 grant from the 21<sup>st</sup> Century Challenge Fund. More information on this project can be obtained by calling **Sharon Souther-Bethea** at 225-381-2717.

## **SRAP awards 21st Century Challenge Fund grant to ASSIST Agency for pharmaceutical program**

Through its 21st Century Challenge Fund the Southern Rural Access Program awarded the ASSIST Agency of Crowley, Louisiana, \$50,000 to provide training to local healthcare providers on how to access medications for patients using the Patient Assistance Programs offered by major pharmaceutical companies. This new grant also will allow the agency to expand its basic model through computerization and networking of local providers.

The pilot program targets indigent clients in the three-parish service area of Vermilion, St. Mary and Acadia. The United Way of Acadia has committed \$50,000 in matching dollars for the program.

The Program involves training agency personnel and volunteers to serve as intermediaries between patients and pharmaceutical companies in determining program eligibility and maintaining contact between the provider and the pharmaceutical companies. In turn, the newly trained ASSIST staff will then conduct training programs to help other healthcare providers assist clients in obtaining much needed medications.

The ASSIST Agency first started its involvement in pharmaceutical assistance five years ago. In 2001, the ASSIST Agency helped over 300 patients obtain more than \$500,000 worth of free medications. The agency also took the lead in shaping the direction of medication assistance programs for uninsured and underinsured residents of the newly formed Vermilion Parish Chamber of Health, a SRAP-supported effort through the Louisiana Rural Health Access Program.

James Grant, GSW, PhD, will serve as project director. He can be reached by calling 337-783-7490.

## News From Around the States

The Lowcountry AHEC was awarded a \$295,369 grant from HRSA in support of the South Carolina Rural Interdisciplinary Program of Training (SCRPT). The funding represents the fourth round of federal funding for the nine-year old program. SCRIPT provides an intense five-week immersion in a rural community for students from one of 13 healthcare disciplines working on interdisciplinary teams to improve healthcare and foster rural health leadership through an educational curriculum. It is anticipated that the grant will provide funding for three more summer sessions. Along with funding from the Southern Rural Access Program (SRAP) the program will be expanded statewide with SRAP funds supporting efforts in the Lowcountry and the Pee Dee Region.

In May, Georgia Governor Roy Barnes signed HB 1565 into law to amend the definition of rural physician and rural hospital for the purpose of qualifying for income tax credits. Effective January 1, 2003 the new law defines a rural hospital as an acute-care hospital located in a rural county that contains fewer than 100 beds and a rural physician as a physician licensed to practice medicine in this Georgia who practices in a rural county and resides in a rural county or a county contiguous to the rural county in which such physician practices.

In other Georgia state news, the General Assembly appropriated \$5 million to assist 60 rural hospitals with infrastructure development, strategic planning, nontraditional healthcare delivery systems and the provision of 24-hour emergency care services. Criteria for eligibility included location in a county with a population of less than 35,000 residents, acceptance of both Medicaid and Medicare patients, provision of healthcare services to indigent patients and operation of a 24-hour emergency department.

In an attempt to expand primary healthcare services by increasing community health centers' ability to serve more people and improve health status, the US Department of Health and Human Services recently awarded 131 Expanded Medical Capacity Initiative grants totaling \$55.8 million to needy rural and inner-city areas across the nation. Grantees within the SRAP target region receiving funds include CareSouth Carolina (\$508,333) and Beaufort-Jasper-Hampton Comprehensive Health Services Hospital District (\$525,000) both in South Carolina and Minnie Hamilton Health Care Center (\$447,150) and Valley Health Systems (\$525,000) both located in West Virginia. In addition, Minnie Hamilton Health Center received a \$200,000 Oral Health – New Access Service Expansion grant while Family Health Center in South Carolina received a \$100,000 Mental Health/Substance Abuse Service Expansion grant. The grants are part of President Bush's Consolidated Health Center Program.

The East Texas Rural Access Program (ETRAP) was a featured grantee in a Robert Wood Johnson Foundation-sponsored "Roll Call" ad. The "Roll Call" project is designed to raise the profile of RWJF grantees to key members of Congress and their staff and to give visibility to the breadth of issues that the Foundation supports. ETRAP Project Director Ingrid Bowden took the lead in Texas to arrange the photo shoot for this ad.

## Newsmakers

Congratulations to **Regina Benjamin, MD, MBA**, on making Medical Association of State of Alabama (MASA) history when she was named MASA's 127<sup>th</sup> president. Dr. Benjamin, a family physician and member of SRAP's National Advisory Committee, is the first African-American – and the first female – MASA president since the organization's founding in 1873. In addition to these roles, Dr. Benjamin is the associate dean for Rural Health at the University Of South Alabama College Of Medicine in Mobile. You can read an interview with Dr. Benjamin in the September 16 edition of [American Medical News](#).

Congratulations to **Mary McIntyre, MD**, associate medical director – Alabama Medicaid Agency, on being named RWJF National Advisory Committee chair for the State Action for Oral Health Access Program. Dr. McIntyre is also the project director of Smile Alabama, a Southern Rural Access Program 21<sup>st</sup> Century Challenge Fund grantee.

Congratulations to **James W. Nemitz, PhD**, upon being named [2002 Educator of the Year](#) by the American Osteopathic Foundation. The award recognizes an osteopathic educator who “demonstrates compassion, exhibits leadership and displays a commitment to education and the osteopathic philosophy.” Dr. Nemitz is a professor of anatomy at West Virginia School of Osteopathic Medicine in Lewisburg where he also directs the School's recruitment and retention activities.

Best wishes to **Kristy Nichols**, former rural community health network development director – Louisiana Rural Health Access Program, on her recent appointment as the new director of the Office of Rural Health for the Louisiana Department of Health and Hospitals. And, a warm welcome is extended to **Maggie Shipman**, her replacement and **Carl Kelly**, the new rural community health network development coordinator.

Congratulations to **Karen Minyard, PhD**, upon her appointment as executive director of the Georgia Health Policy Center. In this role, Karen will provide leadership for policy, research and technical assistance programs at the Center. Karen had been serving as interim director.

Congratulations to **Tina Anderson Smith** upon her appointment as the new director of Community Health System Programs for the Georgia Health Policy Center. Tina will direct the Center's technical assistance work with Georgia's Office of Rural Health Services, the Philanthropic Collaborative for Healthy Georgia and individual communities and networks in Georgia.

## A message from the program director . . . Michael Beachler



In the past month, Curtis Holloman and I made site visits to Alabama and Mississippi and are planning trips in the near future to West Virginia, Louisiana and Georgia. We both came away impressed with the deeper dialogue and sharing of ideas that occurred on these visits. The involvement of Grahams Adams and Mitch Wilkins from South Carolina, Catherine Liemohn from Georgia and Bill MacBain, our office's longstanding consultant, added significantly to both the content and the tone of the visits. The use of consultants from the Southern Rural Access Program family is not new, but it is something we will increasingly utilize over the next three and a half years.

Each one of the SRAP states has programs of excellence and individuals who have provided tremendous leadership that can help other states involved in the program. These "peer leaders" help foster further development not only through the delivery of program content, but also through their honesty concerning the challenges their "model" efforts still face. There are multiple winners and learners in these exchanges. Graham Adams, Director of South Carolina's Office of Rural Health, said it best when he indicated "a major reason I am glad to be in Jackson is because I know I will benefit from learning about Mississippi's Access to Rural Care program." I know he came away particularly impressed with the scope and scale of the Mississippi Hospital Association-led practice management program and its strong partnership with the State Office of Rural Health, the Primary Health Care Association and the Mississippi-based Bowers Foundation.

These developments are very positive signs of an increasingly mature program. Assuming that progress continues, it won't be long before greater national recognition starts to shine on the rural health infrastructure building efforts that the Southeast region is producing.

## RWJF announces new president and CEO

Risa Lavizzo-Mourey, MD, MBA, senior vice president and director of the Health Care Group, was named successor to Steve Schroeder, MD, president and chief executive officer of the Robert Wood Johnson Foundation. She will assume her new duties January 1.

“Risa has a superb record of accomplishment in academic medicine, her specialty-geriatrics, government and her most recent stint as senior vice president at RWJF,” said Robert E. Campbell, chair – RWJF Board of Directors, in an email to RWJF friends and colleagues. “We know that she will continue the exemplary legacy of leadership and service in improving health and health care for all Americans set forth by Steve Schroeder and his predecessors, and we look forward to Risa’s long and successful tenure.”

Prior to joining RWJF as senior vice president in 2001, Risa served as Sylvan Eisman Professor of Medicine and Health Care Systems at the University Of Pennsylvania School Of Medicine. She also directed the Penn’s Institute on Aging and was chief of the Medical School’s Division of Geriatric Medicine. From 1992 to 1994, Risa was deputy administrator of the federal Agency for Health Care Policy and Research while on leave from Penn. She also held faculty appointments at Penn’s Wharton School of Finance and the School of Nursing.

A native of Seattle, Risa began her undergraduate education at the University of Washington. She transferred to the State University of New York at Stony Brook and, after completing her junior year there, was admitted to Harvard Medical School. After completing her medical degree at Harvard she did her internship and residency in internal medicine at Brigham and Women’s Hospital in Boston. In 1984, she was named an RWJ Clinical Scholar at the University of Pennsylvania and received her MBA in Health Care Administration from Penn’s Wharton School in 1986. She was appointed assistant professor in the Section of General Internal Medicine at Penn in 1986, associate professor in 1992, and became Sylvan Eisman Professor of Medicine in 1997.

In announcing Risa’s appointment Schroeder said, “Almost 20 years ago, the Foundation identified Risa as an up-and-coming young leader in healthcare, when she was named a Robert Wood Johnson Clinical Scholar. Time and experience has only burnished our confidence in her. She has accomplished great things since then in academic medicine, as a nationally recognized expert in healthcare policy, government, and as an independent researcher and analyst. Last year, we were able to attract Risa to the Foundation as senior vice president and director of our Health Care group, and in only a short time, her vision and passion have helped the Foundation identify and work toward our goals, and those of our grantees, to ensure that Americans have access to quality health care at reasonable cost and to improve care for those with chronic conditions. Risa will be a terrific leader for this Foundation as we embark on our next phase of improving health and health care for all Americans. This is a wonderful choice for a wonderful organization.”

Lavizzo-Mourey is a member of the Institute of Medicine (IOM) of the National Academy of Sciences. She recently served as co-vice chair of the IOM committee on eliminating racial and ethnic disparities in medical care, which recently issued the report Unequal Treatment. She is a Master and former Regent of the American College of Physicians and has chaired its ethics

and human rights committee. She served on the Board of Directors of the American Board of Internal Medicine, as well as several corporations. She has also lectured and published extensively on issues of health care and health policy.

“I know that I speak for the entire RWJF board when I say how enthusiastic we are that Risa will be leading the Foundation as it continues on its path to improve health and health care for our nation and people,” said Campbell.