

Fall Conference 2022



Thriving Rural Communities:
Navigating An Ever Evolving Landscape

Killington Resort | Killington, VT | Nov. 1-2

Conference Agenda

Schedule At-A-Glance

Tuesday	Wednesday
10:00 Check-In Opens	7:00 - 8:30 Check-In and Continental Breakfast, Recognition Speech (Comm. Stars, Volunteers, etc.)
11:30 - 12:45 Continental Lunch & Explore Exhibitors	8:30 - 9:30 Breakout Sessions
12:45 - 1:00 Welcome	9:30 - 10:00 Break, Exhibitors & Snacks
1:00 - 2:00 Keynote Panel	10:00 - 11:30 Federal Panel & Fireside Chat
2:00 - 2:30 Break, Exhibitors & Snacks	11:30 - 12:30 Lunch (lunch member meeting)
2:30 - 3:30 Breakout Sessions	12:30 - 1:00 Poster Presentation Session
3:30 - 4:00 Break, Exhibitors & Snacks	1:00 - 2:00 Breakout Sessions
4:00 - 5:00 Breakout Sessions	2:00 - 2:30 Break & Snacks
6:00 - 8:00 Reception, Small Plate Dinner	2:30 - 3:30 Breakout Sessions
	3:45 Closing Remarks & Prize Drawings

Tuesday 2:30 – 3:30

COVID Schmovid, Community Impacts of Addiction Continue The impacts of addiction on a rural community are multi-leveled and complicated to measure. COVID-19 exacerbated conditions in which addiction thrives. North Quabbin, a rural cluster community in north-central Massachusetts is taking unique approaches to address social isolation, increase access to treatment, build a recovery aware region, and most of all establish true community connectedness. *Heather Bialecki-Canning, Executive Director, North Quabbin Community Coalition, MASS*

Optimizing Clinic Workforce: Making Do with What You Have Due to staffing shortages, clinic leaders must focus on operational efficiency and optimizing their workforce. During this session, acquire best practices in clinic operational efficiency amidst staffing shortages. *Opal Greenway, Principal, Stroudwater Associates, ME*

Restoring Joy with Your Healthcare Workforce Retaining healthcare workers in rural communities has always been a challenge. COVID-19 only further exacerbated this issue. Providers are leaving their jobs or stepping away from healthcare entirely. Remaining teams are battered and struggling to keep pace. This session will explore strategies to mitigate burnout and strengthen your workforce. *Marguerite McLaughlin, Director, Healthcentric Advisors, RI*

Developing Statewide Rational Service Area Maps That Prioritize Rural Need in NH and ME – A New Approach The process for defining service areas for HPSA (Health Professional Shortage Areas) designation is changing, with a new federal mandate to develop pre-defined statewide maps. New Hampshire and Maine have employed a powerful new approach, using access patterns in claims data, to produce maps that prioritize pockets of rural need in the primary care landscape. *Eric Turer, Director, JSI, NH*

Tuesday 4:00 – 5:00

Expanding Rural Access to Hepatitis C Treatment: Utilizing Harm Reduction and Telehealth to Treat People who Use Drugs There are many barriers to accessing hepatitis C treatment for people in rural settings and greater barriers for those actively using drugs. Our session will provide an overview of our innovative harm reduction program utilizing telehealth to bring hepatitis C treatment to clients of syringe service programs throughout rural Berkshire County in Massachusetts. *Sarah Kangas, Nurse Practitioner, Berkshire Harm Reduction, MASS & Jennifer Mygatt, Nurse Practitioner, Berkshire Harm Reduction, MASS & Sarah DeJesus, Harm Reduction Practice Manager, Berkshire Harm Reduction, MASS & Jenna Herrmann, Hepatitis C Patient Navigator/Harm Reductionist, Berkshire Harm Reduction, MASS*

Improving Access to Mental Health Services in Emergency Departments through Telehealth Vermonters with mental health needs are arriving at Emergency Departments (EDs) and waiting days before getting admitted to psychiatric inpatient care or discharged. This session introduces the Vermont Emergency Telepsychiatry Network, a system for individuals presenting to EDs with mental health crises to better access timely psychiatric assessment via telehealth. *Ali Johnson, Quality Improvement Specialist, Vermont Program for Quality in Health Care, Inc., VT*

Implementing an Experiential Learning Toolkit in Primary Care Settings The University of New England collaborated with two Federally Qualified Health Centers serving rural Maine to create and implement an Interprofessional Experiential Learning Primary Care Toolkit to enhance clinical rotations and encourage students to pursue careers in primary care and rural health. Lessons learned from this experience will be shared. *Tobo Soma, Senior Research Associate, University of New England, ME & Melanie Caldwell, Project Manager, University of New England, ME & Micaela Maynard, Project Coordinator, University of New England, ME*

Educating Future Physicians in Rural Communities Rural communities have a shortage of physicians, in part because medical education happens mostly in urban settings. Simply put, physicians tend to practice where they have trained. This session describes MaineHealth programs that train future physicians in rural settings. It presents data on recruitment to rural communities from these programs. *Frank Chessa, Assistant Professor of Medicine and Director of Clinical Ethics, Maine Medical Center, ME & Dena Whitesell, Assistant Professor of Medicine and Associate Residency Program Director, Maine Medical Center, ME & Isabelle Doan Van, Medical Student, Tufts University School of Medicine (MaineTrack), ME*

Evolving for Equity: Results of a Pilot Redesign to Increase Access to Health Careers Exploration Program in VT This presentation will discuss how Southern Vermont Area Health Education Center (AHEC) adapted its signature health careers exploration program for high school students from a conventional week-long regional summer camp experience to a localized 3-day day program to increase access to educational enrichment opportunities for underserved students. *Jennifer Scott, PsyD, ABPP, Executive Director, Southern Vermont AHEC, VT & Amanda Richardson, BA, MA, Director, Health Careers Exploration, Southern Vermont AHEC, VT*

A Collaborative Design for an Inclusive Local Economy A region's largest employers can use their purchasing power, their employment practices, and their investment in community services to impact the economic and social wellbeing of the community both inside and outside the institutions' walls. The North Central Massachusetts Anchor Collaborative is doing just that. *Chelsey Patriss, Executive Director, Health Equity Partnership for North Central MA, MA & Ayn Yeagle, Executive Director, Growing Places Inc, MA*

Building Blocks for a Brighter Future: How a Collaborative Partnership is Addressing Social Determinants of Health for Underserved Rural Cape Codders Many residents of the rural Outer Cape are underserved and at increased risk for health disparities, despite the vastly-held perception that Cape Cod is the wealthy's summer playground. A partnership led by nonprofit rural health network Outer Cape Community Solutions is combating misconceptions and tackling SDOH head on. *Brianne Smith, Community Resource Navigator, Outer Cape Health Services, MA & Ted Quinn, CEO and Co-Founder, Active Care, MA*

Creating Value in Healthcare Management for Rural Populations Join two healthcare leaders as they review ACO participation options available in 2023 and discuss lessons-learned for achieving long-term, population health success. Speakers will discuss the benefits and important aspects of the Medicare Shared Savings Program and CMS' newly announced ACO REACH program. *David Latzer, Regional Vice President, Caravan Health, MI & Christopher Camillo, Vice President, Medical Group, Berkshire Health System, MA*

Successes and Challenges of Improving Transitional Care Management for Medicare Beneficiaries: Two Sides of the Story The Dartmouth GITT-PC training program in Medicare Transitional Care Management included over 60 individuals from ten primary care practices in three northeastern states. We will describe the training and support model as well as our ongoing program evaluation and measurement methods and share two different perspectives: one from the implementation (participant) side, and the other from the evaluation side. *Sharon O'Connor, Senior Research Scientist, Center for Program Design & Evaluation at Dartmouth College, NH & Maureen Boardman, FNP and Director of Clinical Quality, Little Rivers Health Care, VT*

Wednesday 8:30 – 9:30

Meet Them Where They're At: Expanding Access to Care for Students and Families Today's high school students face unprecedented behavioral health and SDOH challenges. On rural Outer Cape Cod, services for adolescents are especially hard to find. Learn how one FQHC partnered with the local high school to embed a School Health Navigator to improve access to care via telehealth and wrap-around supports. *Brienne Smith, Program Manager, Community Resource Navigators, Outer Cape Health Services, MA & Jennifer Ferron, School Based Navigator, Outer Cape Health Services, MA*

ALL Recovery Reimagined: Not Just Another Teen Meeting About Substance Use How to create partnerships that support youth attendance at meetings designed specifically for them. *Emily Zanleoni, Executive Director, Hartford Community Coalition, VT & Sarah Mekos, CRC, Executive Assistant/ Recovery House Manager, Second Wind Foundation, VT*

Preventing Intentional Self-Poisoning in Youth Intentional self-poisoning is a common method of suicide attempt. Incidences among young people have risen over the past decade, representing an acute issue in northern New England instead and across the county. This session focuses on data and trends related to intentional self-poisoning in youth and describes available resources for health care providers and office staff, as well as tools to educate patients and their support networks about the risk of self-poisoning and ways to prevent it. A nationally accredited health care provider toolkit, Preventing Intentional Self-Poisoning in Youth: A Toolkit for Vermont Health Care Providers, will be highlighted. *Gayle Finkelstein, Poison Prevention Educator, Northern New England Poison Center, VT & Abby Beerman, Injury Prevention Coordinator and State Coordinator for Safe Kids VT, University of Vermont Medical Center, VT*

Advancing Health Equity in Vermont: Building a Community Health Worker Network and Infrastructure Southern Vermont Area Health Education Center (AHEC), in partnership with the Vermont Department of Health and community allies, is leading a statewide health workforce initiative to build a diverse, trained, and sustainable public health workforce of CHWs. This presentation will share project aims, key strategies, opportunities, impact, and challenges. *Katina Cummings, MCP, Project Director, CHW Workforce Development, Southern Vermont AHEC, VT & Jennifer Scott, PsyD, ABPP, Executive Director, Southern Vermont AHEC, VT & Jennifer Woolard, MPH, Chronic Disease Program Specialist, Vermont Department of Health, VT*

Where Health Happens: How CHWs in Rural Maine are Helping Patients Meet Their Wellness Goals The MaineGeneral CHW program works as part of the patient's primary care team to increase patient's knowledge and skills and remove the barriers to wellness. By making small changes in their behaviors and daily lives, patients can improve both their physical and mental health and overall sense of wellness. *Betty St. Hilaire, Community Programs Manager, MaineGeneral Health, ME & Katie Rugg, Community Health Worker, MaineGeneral Health, ME*

Advancing Health Equity for Migrant Workers in Vermont A panel comprised of Community Health Workers serving all corners of the state speak to the current health care landscape for migrant workers in Vermont. As integral partners in advancing health equity, CHWs share their unique perspectives and experiences navigating systemic and individual barriers to health. *Naomi Wolcott-MacCausland, Migrant Health Programs Leader, University of Vermont Extension, VT & TBD, Community Health Worker, UVM Extension, VT*

Telehealth Post-PHE: Legal and Compliance Trends Telehealth utilization has grown dramatically during the COVID-19 public health emergency ("PHE"), partially because of a range of waivers removing historic barriers to telehealth coverage and reimbursement and scope of practice issues involving licensure and prescribing. Providers will need to recalibrate when certain waivers expire; this session will explore what

we know and what remains unknown for telehealth post-PHE. *Jeremy Sherer, Partner, Digital Health Co-Chair, Hooper, Lundy & Bookman, P.C., MA*

Civil Legal Needs Impacting Vulnerable Populations: Addressing Health Harming Legal Needs within Rural Communities for Improved Population Health Medical Legal Partnerships create the connection necessary to enhance the available resources and supports to some of the most high-risk populations. Join our session to learn more about how we partnered across organizations and implemented a medical legal partnership in two diverse organizations that support vulnerable young children and families. *Holly Gaspar, Senior Community Health Partnership Coordinator, Dartmouth Health, NH & Tonya Suarez, Licensed Clinical Social Worker/ Addiction Recovery, Dartmouth Health, NH*

Wednesday 1:00–2:00

Implementing Best Practices in Rural Northern New England: Using the ECHO Model to Support SUD Treatment and Recovery Professionals Participants will learn about the benefits of the ECHO model, how it's been used with SUD treatment and recovery professionals in rural Northern New England to improve care and how they can participate in this exciting learning community! *Adelaide Murray, Consultant, JSI Research and Training Institute Inc., NH & Melissa Schoemmell, JSI/NH Community Health Institute, NH*

Addressing the Impact of COVID-19 on the Behavioral Health of Rural Northern New England and New York: A Telehealth Technology-Enabled Learning Program Approach The Northern New England and New York region includes rural communities with some of the nation's highest rates of substance use and behavioral health needs. To address this, the region's top public health institutes and universities have come together to develop a learning community of interprofessional collaborators via Project ECHO. *Michaela Fascione, Telehealth Project Coordinator, MCD Global Health, ME*

Innovative Strategies to Support Behavioral Health and Support Services During COVID-19 The New England AIDS Education and Training Center increased the capacity of behavioral and support services to older adults with or at risk for HIV. Innovative approaches included a Community of Practice to support caregivers and peer support and technology to help clients cope during the COVID-19 pandemic. *Vanessa Carson-Sasso, Co-Investigator/Senior Project Director, New England AIDS Education and Training Center - UMass Chan Medical School, MA & Gillian LaPlante, Program Manager, MaineGeneral Health – Horizon Program, ME & Michael Fletcher, Peer Advocate, MaineGeneral Health – Horizon Program, ME*

Supporting the Next Generation of Rural Health Care Leaders This session will engage rural health communities in the conversation regarding workforce recruitment and retention. Participants will be engaged in a dialogue on ways to support rural health career paths, considerations for leadership development, and the value of taking advantage of workforce/education strategic partnerships. *Kathleen Patenaude, Director of Graduate Programs in Health Care Management, Granite State College, NH & Courtney Rice, Director of Undergraduate Health and Wellness Programs, Granite State College, NH*

Building a Rural Behavioral Health Workforce for the Future The session will focus on lessons learned while developing and implementing training for a wide range of behavioral health careers and adapting training to fit rural needs. How to build partnership with employers and training providers to support a workforce pipeline. *Rebecca Bialecki, Executive Director, MassHire Workforce Board for Franklin Hampshire Counties, MA*

Ambulance Deserts: Addressing Geographic Disparities in the Provision of Ambulance Services This study's primary objective was to identify areas within 39 U.S. states that are ambulance deserts, defined as populated areas of the state that are not within a 25-minute minimum access standard of an existing ambulance service. This study is the first to document the percent of the state's population(s) living within these deserts, the variation across states and census regions in ambulance service coverage, and the need for policy makers to address coverage gaps. *Yvonne Jonk, Associate Research Professor, Muskie School of Public Service, University of Southern Maine, ME*

Building a Mobile Integrated Health Program - The Dartmouth Health - Lebanon Fire Department Experience This session will discuss the process and challenges of developing a mobile integrated health (MIH) / community paramedic program and utilize the experiences of the recently developed joint program between Dartmouth Health - Lebanon Fire Department MIH as a case example. *Thomas Trimarco, EMS Medical Director, Dartmouth Health, NH & Barbara Farnsworth, Director, Community Health Partnerships, Dartmouth Hitchcock Population Health, NH & Jeremy Thibeault, Community Paramedic / Firefighter, Lebanon Fire Department, NH*

Wednesday 2:30–3:30

Self-Management and Chronic Pain Treatment: How ECHO® Expands Knowledge to Rural Providers Chronic pain is a public and rural health issue. Research shows that medication and procedures alone are not enough. We combined a robust curriculum with evidence-based programs, Better Choices, Better Health® and Project ECHO®. This is a public health solution to share knowledge with rural providers and improve health outcomes. *Katherine Cox, Project Director, Institute for Health Policy and Practice, University of New Hampshire, NH & Kelsi West, Project Director, Institute for Health Policy and Practice, University of New Hampshire, NH & Melissa Lee, Field Specialist, UNH Extension, NH*

Sociodemographic Disparities in Understanding and Benefits of Precision Oncology Rural cancer patients and those with low income and low educational attainment may not understand large-panel genomic tumor testing (GTT) and may be less likely to receive genome-targeted treatment. We explored rural-urban differences in patients' understanding of GTT and clinical treatment for patients who receive GTT. *Jessica DiBiase, Research Data Analyst, MaineHealth Institute for Research, ME*

Evaluating and Minimizing the Effect of Rurality in Patients with Cardiac Arrest Patients with cardiac arrest in rural areas have treatment limitations. Care can vary in the field, and delays can occur in the time between emergency department arrival and intensive care unit admission. We discuss the effect of rurality on outcome in cardiac arrest and explore opportunities for transporting and receiving centers to optimize cardiac arrest care. *Teresa May, DO MS, Maine Medical Center, ME & Yvonne Jonk, PhD, University of Southern Maine, ME & Michael Burla, DO, Southern Maine Health Center, ME*

Going Through the PACES: Stories of Resilience and Substance Misuse Prevention This session will cover a new New England Prevention Technology Transfer Center product, and talk about how gathering and using stories of prevention and resilience from your community can bolster prevention efforts through human connection. *Sarah Johnson, Training and Technical Assistance Coordinator, New England Prevention Technology Transfer Center, ME*

Food As Medicine Socioeconomic factors, including a patient's food security status can serve as barriers to successful treatment and management of disease. MaineHealth and Healthy Community Coalition are working to improve health outcomes and bridge the gap between clinical and community care through a hospital-based food pantry and Food As Medicine Program. *Ellen Thorne, Program Manager, Healthy Community Coalition, ME & Gina McKenney, Program Management Specialist, MaineHealth, ME*

Addressing Ageism in Rural Healthcare: Why We Must Do Better and How We Can The aging of rural populations demands that health systems develop expertise in the care of older adults, yet ageist beliefs shape how we approach their needs and affect the outcomes of care. This session will focus on ageism in healthcare and will share tools to create age-friendly health systems. *Margaret Franckhauser, Director of Aging Services, JSI/NH Community Health Institute, NH & Mary Lou Ciolfi, Senior Program Manager, University of Maine Center on Aging, ME*

Oral Health is More Than Just the Mere Presence or Absence of Teeth This session will discuss the impact of aging on the oral health of people with HIV. While specific to PWH the information on impacts on oral health, co-morbidity contributions to oral issues and promotion of oral health would apply to all seniors. *Helene Bednarsb, Dental Director, NEAETC, MA*