

Brian P. Kemp, Governor

Frank W. Berry, Commissioner

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STATE OFFICE OF RURAL HEALTH ADVISORY BOARD MEETING STATE OFFICE OF RURAL HEALTH Oct 1, 2020

Present: Stuart Tedders, Member/Secretary

Damien Scott, Member Jennie Wren Denmark, Chair

Robin Rau, Member Carla Belcher, Member Ajay Gehlot, Member Joe Robinson, Member Sheila Ramer, Member Denise Kornegay, Member Jennifer Dunn, Member Sallie Barker, Member

Absentees: Tracie Haughey, Member

SORH Staff: Stephen Register, SORH Executive Director, Ex-Officio

Sheryl McCoy, Board Recording Secretary

Dawn Waldrip, SORH Nita Ham, SORH Tiffany Hardin, SORH

Olakesta Outlaw-Houser, SORH

Tina Register, SORH Dorothy Bryant, SORH Cole Edwards, SORH Amanda Laughter, SORH

Visitors: Kerry Trapnell, Elbert Memorial Hospital

Denise Ballard, Winship Office of Community Outreach & Engagement

Tonya Kemp

Opening Remarks:

Jennie Wren Denmark, SORH Advisory Board President, called the meeting to order and asked for approval of the minutes. The minutes were approved as submitted and the meeting continued according to the agenda.



Jennie Wren introduced Stephen Register, new Executive Director of SORH. Stephen welcomed everyone and then introduced Kerry Trapnell, CEO, Elbert Memorial Hospital (EMH). He recognized Elbert Memorial Hospital as the NOSORH Community Star for Georgia this year.

Mr. Trapnell gave a presentation titled "Partnering with the SORH Saved my Hospital."

- History of Elbert Memorial Hospital
 - Opened in 1950 and celebrated 70 years this year
 - o Managed by Quorum for 20+ years and AnMed, Anderson, S.C. for 4 years
 - o Terry Trapnell became CEO in Feb. 2017 and EMH became independent on March 1, 2018
 - Started pursuing Critical Access Designation in March 2018

Patsy Whaley, Executive Director, SORH, met with Mr. Trapnell and committed the SORH team to assist EMH with the process to become designated as a Critical Access Hospital (CAH). She also offered funding from the Rural Hospital Stabilization Grant program for Phase 4 to receive \$750,000.

- Stabilization Grant Projects
 - o ER Renovations
 - New 80-Slice CT Scanner
 - o New PACS System
 - o Medical Office Building to provide access to specialty care
 - o Improve IT capabilities
 - o New X-ray maching for Orthopedic Surgeon
 - New Hospital Website

Mr. Trapnell explained that the community had been sending Emergency Room (ER) patients to other hospitals because they were displeased with the previous owner's care in the ER. They started working with the community to use the EMH after their ER projects were completed and had a12% increase in total visits in 2019. Also a 20% increase in CT Scans from 2018 to 2020 after grant projects were completed.

The Swing-bed program brought in a large amount of revenue during the Covid epidemic.

• February through June: \$1,500,000

• July through August: \$500,000+

The entire process to become a CAH hospital took 22 months from start to finish. Everyone told them it would never happen but with the State Office of Rural Health's willingness to do anything to save the hospital, it became a reality.

The Stabilization Grant was a catalyst to future projects, grants and eventually Critical Access Designation.

Robin Rau asked if hospital had a cost report since conversion to CAH status.



Mr. Trapnell replied the hospital had a 6-month cost report from January through June. They are expecting to have to pay a small Medicare refund. It will take a while for adjustments to settle in order to know exactly how it will balance out.

Damien asked if they are able to take positive Covid patients.

He explained they have 6 swing-beds and they are able to take Covid positive patients. This has greatly helped other counties in the area as well.

Stephen introduced Denise Ballard, Program Director, Office of Community Outreach and Engagement, Winship Cancer Institute at Emory University.

Ms. Ballard introduced the new Winship's Office of Community Outreach & Engagement (C.O.E.)

The Associate Director of the C.O.E. is Colleen McBride, PhD, and she is working with Ms. Ballard to organize the new office.

- National Cancer Institute (NCI)-Designated Comprehensive Cancer Centers (CCC)
 - o Georgia's Sole NCI-designated CCC
 - Comprehensive Cancer Center-designation is the highest ranking awarded by the National Cancer Institute
 - NCI-designated cancer centers are institutions dedicated to research in the development of more effective, cutting-edge approaches to prevention, diagnosis and treatment of cancer
 - CCCs have a primary focus and expertise in laboratory, clinical and/or population-based science along with substantial transdisciplinary research that bridges these scientific areas
 - Other NCI-designations: Cancer Centers and Basic Laboratory Centers

The NCI will establish community advisory board(s) and partnerships with other healthcare delivery systems, state and community agencies for dissemination of evidence-based findings. They will endeavor to engage communities to decrease cancer burden, particularly among minority and under-represented populations.

The Winship Cancer Institute, Office of Community Outreach & Engagement will monitor and evaluate statewide cancer data, accelerate the delivery of interventions to reduce risk and improve access to clinical trials and cancer care and offer support to community partners to reduce cancer burden and related disparities.

The Winship C.O.E. has a variety of statewide organizations and local organizations that will serve key audiences. The C.O.E. has an expert advisory panel consisting of:

- Emory/Winship Scientists
 - o Cancer Immunology
 - Cancer Prevention and Control
 - Cell and Molecular Biology
 - O Discovery & Developmental Therapeutics



The proposed tools to build partnerships consists of small grants to foster collaborations, engage MPH students in practicums and training and capacity building. In summary, all efforts will be data driven and evidence-based to ensure optimal outcomes with the ultimate goal of reducing cancer disparities.

After Denise Ballard's presentation, Stephen introduced himself by summarizing his background in healthcare followed by his vision for the SORH office under his leadership.

Stephen has titled his vision, "The Next Generation SORH" with the vision to Promote Our Value, Enhance Our Reach and Foster Growth. The mission statement is, "to provide the best quality technical assistance and access resource collaboration to attain the highest level of Health for all Rural Communities in Georgia.

He asked the questions, "How do we promote our value now and how can we be better connected? Do the rural communities know what the SORH does and what does that means to the community?" The SORH wants to focus on collaborating with different healthcare providers, but also with the community to enhance outreach. He referenced the Hub and Spoke model of the RHSC as an example of SORH's vision. He explained the mission of the SORH will include everything on the present agenda, but also foster growth with the team to enhance the perception of the SORH by indicating our role, growing the support system and expanding the impact on health care disparities. The SORH tag line is "Leading the Fight Against Rural Disparities."

One of the first things tackled since his arrival was to overhaul the SORH Web page on the DCH website. The office wants to have great content but to be warm and welcoming to encourage people to want to go to the page and recognize its value. The name of the newsletter has been changed to "SORH Short Rows" to indicate the desire to impact the end of health care disparities and be perceived in that way.

One of the goals of the SORH is to have a strategic mindset to provide in-depth data that will show analysis, visualization and sustainable outcomes.

Stephen referenced the PCO program as one of the leaders in the field that has shown a tremendous increase in the past few years:

- National Health Service Corps (NHSC)
 - o 2016 \$4,611,149, 106 awards
 - o 2019 \$8,559,388 172 awards
- J-1 Visa Program
 - o 37 applications received
 - 7 Primary Care
 - 23 Specialist Physicians

Specific to the Covid-19 pandemic, federal funding was provided through HRSA, Coronavirus Aid Relief and Economic Security (CARES) Act to rural providers, hospitals and clinics. See below the award funding disseminated through the SORH office:



- Hospital Services
 - o \$4,8M to 57 SHIP Hospitals
- Georgia Farmworker Health Program
 - o \$1.5M dispersed equally to 6 Sites
- SORH Rural Hospital Stabilization Program
 - $\circ\quad\$2.6M$ provided to Small Rural Hospitals and Critical Access Hospitals
- Primary Care Office

The meeting adjourned at 1:00 PM

o \$1.2M provided to 70 Rural Health Clinics

Jennie Wren and Denise Kornegay commended the SORH for their excellent customer service and their work during the Covid-10 pandemic.

Mr. Register thanked everyone for their attendance and he hopes to meet face-to-face in February 2021.

Respectively,	
Chairman	Secretary
Recording Secretary	