
MODELS FOR PRACTICE

FOCUS AREA: EDUCATIONAL AND COMMUNITY-BASED PROGRAMS

Program Name: New River Valley Partnership for Access to Healthcare

Location: Radford, Virginia

Problem Addressed: Education and Community Health Development

Healthy People 2010 Objective: 7

Web Address: None

SNAPSHOT

Partnership for Access to Healthcare (PATH) is committed to enhancing communications, optimizing resources, and increasing access to health care for all residents of the New River Valley (NRV), especially the uninsured and underinsured. PATH is a collaborative, community-focused alliance of over 50 public and private health and human service organizations, universities, local governments, local/state/national legislators, local elected officials such as members of city councils and boards of supervisors, the faith community, public school systems, civic groups, health care professionals, businesses, and consumers.

THE MODEL

Blueprint: PATH is a collaborative, community-focused partnership chaired by two co-conveners and governed by the full membership. Six work groups under the leadership of a chairperson address identified issues. The five local hospitals and Radford University host the meetings that are held every 12 weeks.

PATH is a partnership of volunteers; there are no paid or donated staff. The co-conveners and secretarial staff of PATH members donate their time and carry out the majority of the organization's business.

Med-Ride, PATH's first initiative, addressed a documented, serious gap, transportation, which is a barrier in the community's health care delivery system. PATH also addresses access to medical care for the low-income uninsured/underinsured by offering non-emergency transportation to all health care services.

The Pro Bono Counseling Program is based on a "free clinic model" for the delivery of mental health care. The program addresses the problem of access by providing free mental health counseling for low to moderate income uninsured while allowing practicing mental health professionals a legal and convenient way to volunteer their services. An anti-stigma campaign was

also initiated. (See also the Pro Bono Counseling model in the Mental Health and Mental Disorders focus area for more information.)

PATH has also collaborated with the Council of Community Services on the Directory of Community Services. This directory, available on-line and via an 800 number, offers free, comprehensive information on more than 2,000 public and private health and human service providers/programs in southwestern Virginia. This directory assists professionals in locating and linking residents with appropriate services.

PATH members and the Council of Community Services sponsors the NRV Community Resources Fair on the campus of Radford University every 18 months. The Council of Community Services applied for a grant from the Carilion Community Foundation, with letters of support from numerous PATH members to fund this event. The last Community Resources Fair, held in March 2003, had the theme “Forming Partnerships.”

The Family Access to Medical Insurance Security (FAMIS) Outreach Program was started as a PATH collaboration to assist children from families with too much income to be eligible for Medicaid. PATH members wrote letters of support for Radford University’s applications for grants from the Carilion Community Health Fund and the Radford Community Fund. After the grants were funded and the project coordinator hired, PATH members collaborated in providing sites for uninsured families to be contacted and applications completed.

The Pulaski County Senior Health Screening Event resulted from a collaborative PATH effort by members of the chronic illness subcommittee. PATH members and Radford University nursing students conducted preliminary case-finder interviews with elderly residents. Based on these health screenings, a community-wide health screening was conducted.

Program interventions occur in all community settings including private physicians’ offices, hospitals, health and human service organizations, the faith community client homes, mobile clinics, a university-based clinic, and the schools.

Making a Difference: PATH’s success is indicated by positive service outcomes and tangible results that improved the community’s health status. Another indicator of PATH’s success is the successful recruitment of volunteers. The majority of Med-Ride’s services are accomplished with volunteers. The Pro Bono Counseling Program operates with volunteer counselors and psychiatrists—40 percent of all mental health professionals in the New River Valley Partnership volunteer in the program. The New River Valley Community Health Needs Assessment utilized community health assessment teams composed of diverse community members, as well as student volunteers from Radford University, to coordinate and conduct the assessment. An independent data analysis firm, Martin Research,

analyzed the data. Further analysis was conducted on a voluntary basis by Carilion staff, Virginia Tech faculty, and a sub-team of PATH members.

Beginnings: The original stakeholders and founders of PATH were the Free Clinic of the New River Valley, Program for Special Medical Care, and the New River Health District. The first official meeting included the three founding members and the Mental Health Association of New River Valley, New River Valley Community Services Board, Radford Community Hospital (now known as Carilion New River Medical Center), Pulaski Community Hospital, Giles Memorial Hospital, Montgomery Regional Hospital, Carilion Psychiatric Services, Free Clinic of Pulaski County, Giles County Department of Social Services, and Children’s Health Improvement Partnership of New River Valley. All are currently partners of PATH.

In the spring of 1999, PATH conducted the New River Valley Community Health Needs Assessment to obtain a current health profile of NRV communities. The survey also included a behavioral risk factor assessment. This was the first standardized and nationally comparable assessment ever conducted in the region. The assessment consisted of five data components—focus groups, provider survey, secondary health indicator data, citizen mail-out survey, and personal interviews within targeted groups. It was coordinated by a subcommittee of PATH representatives from the New River Valley’s two health care systems—Carilion and Columbia, the NRV Health District, Radford University, Virginia Tech, and the Free Clinic of the NRV. This subcommittee also collaborated with the New Century Turning Point Partnership in looking at health needs on a regional basis. Major health issues identified included mental health treatment, poverty, medication costs, work skills, lack of affordable insurance, family abuse and violence, management of chronic health conditions, and drug abuse. To address these identified issues, PATH initiated six work groups: dental health, mental health, medications, chronic illness, child health, and faith and health.

Challenges and Solutions: PATH found that community partnerships breed success. Cross-sectoral collaboration is a complex undertaking. Collaboration involves the creation of functional relationships among numerous people from diverse backgrounds who work at various levels in different organizations. The process by which these relationships are promoted has a profound effect on the success of the collaboration.

PATH also found that the keys to successful partnerships are:

- Do your homework. Develop a shared mission, vision, and plan; be realistic in understanding that partnerships require time and attention. The community must be understood in its totality, including its cultural, political, social, and economic dimensions.

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- Invite the right partners. Define the stakeholders, organizations, individuals, and community organizations; mobilize them in a holistic way. Realize that shared needs provide an opportunity to partner while unique needs may interfere with an opportunity to partner.
 - Make the scope of the project practical and feasible. The scope should not be too big to be realized or too small to matter. Use the incremental approach to identify bite-sized pieces of the problem to work on.
 - Establish priorities early. Clearly identify perceived needs, high values, low threats, low costs, and feasible options.
 - Select the right projects. Chose projects in which outcomes are measurable, success is definable, and that people care about.
 - Develop a management structure that works. Use the approach of “less is more.” Clearly communicate roles and responsibilities.
 - Celebrate successes.
 - Appreciate relationships. True partnership begins with a good working relationship—sharing urgent needs; having complementary strengths; trust, respect, and reciprocity; equity in the relationship; democracy; straight forward open communication and dialogue; risk-taking; shared vision, leadership, and responsibility.
 - Use a facilitator. Turf issues, fears and insecurities, egos, personalities, and personality disorders can be uncomfortable for all parties to discuss. It can be extremely valuable to utilize a neutral convener and a skilled facilitator who have the trust and respect of all partners.
 - Cultivate strong and successful partnerships. Require visionary and proactive leadership; promote community, capacity building, and assets-based approaches. Build capacity for policy/system change; value skills in change-making; focus on problem solving; ensure adequate infrastructure support; assure sustainability with community resources, and evaluate data. A good data collection system should be developed and implemented from the start. Data are valuable as a management tool, as well as a fundraising and public relations tool.
 - Collaborate successfully. Involve all partners at the planning stage; clarify each partner’s roles and responsibilities early in the endeavor, and be responsive to the partners’ needs.

PROGRAM CONTACT INFORMATION

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