

CAMC General Hospital

CAMC Memorial Hospital

CAMC Women and  
Children's Hospital



# 2015 Community Benefit Report and Report on 2014-2016 Implementation Strategies



**Charleston Area Medical Center  
CAMC General Hospital, CAMC Memorial Hospital and  
CAMC Women and Children’s Hospital  
Charleston, West Virginia**

**2015 Community Benefit Report and Report on 2014-2016 Implementation Strategies**

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**Charleston Area Medical Center**  
**CAMC General Hospital, CAMC Memorial Hospital and**  
**CAMC Women and Children's Hospital**  
**Charleston, West Virginia**

**2015 Community Benefit Report and**  
**Report on 2014 - 2016 Implementation Strategies**  
**Executive Summary**

This community benefit report describes the programs and services that take place every day at Charleston Area Medical Center to improve the health of our community.

In 2015, Charleston Area Medical Center provided \$116,093,980 in community benefit. Our programs and services go well beyond the traditional health care we often think of when we consider hospital care and are delivered both inside and outside the walls of our hospitals. They are driven by our mission, *Striving to provide the best health care to every patient, every day.* Our hospitals and outpatient programs and services bring our mission to life – providing effective, efficient, equitable, timely and safe care to all, regardless of ability to pay.

Charleston Area Medical Center is a not-for-profit four-hospital system comprised of CAMC Memorial Hospital, CAMC General Hospital and CAMC Women and Children's Hospital. CAMC Teays Valley Hospital was added in March 2014 and has its own community health needs assessment, implementation strategies and community benefit report. Our hospitals operate under one administrative structure and participate in joint strategic planning and budgeting processes. Each hospital has responsibility for key service lines. Our hospitals are designed to provide care for our community residents throughout every stage of their lives. Our patients depend on us to provide convenient and compassionate care – care delivered regardless of a patient's ability to pay. We provide our community with programs of excellence in cardiovascular services, medicine, surgery, oncology, trauma, neurology, orthopedics, rehabilitation, bariatrics, and women and children's services.

We give back to our community because we understand the impact that exceptional medical care, charity care, education, corporate contributions and community partnerships have on the lives of real people. In this report, you will read about examples of the programs we provide to the community and how we demonstrate our community commitment.

CAMC General Hospital



CAMC Memorial Hospital



CAMC Women and Children's Hospital



# 2015 COMMUNITY BENEFIT SUMMARY for CAMC MEMORIAL, CAMC GENERAL, CAMC WOMEN and CHILDREN'S, and CAMC TEAYS VALLEY HOSPITALS\*

## CHARITY CARE AT COST

**\$13,331,625**

Free or discounted health services provided to persons who meet the organization's criteria for financial assistance and are thereby deemed unable to pay for all or a portion of the services. Charity care is reported in terms of costs, not charges. Charity care does not include: (1) bad debt or uncollectible charges that the hospital recorded as revenue but wrote off due to failure to pay by patients, or the cost of providing such care to patients, (2) the difference between the cost of care provided under Medicaid or other means- tested government programs or under Medicare and the revenue derived therefrom, or (3) contractual adjustments with any third-party payors.

## GOVERNMENT SPONSORED MEANS-TESTED HEALTH CARE SHORTFALLS

Includes the unpaid costs of public programs for low income persons; the "shortfall" created when a facility receives payments that are less than cost of caring for public program beneficiaries. This payment shortfall is not the same as a contractual allowance, which is the full difference between charges and government payments.

### Unreimbursed Medicaid

**\$60,645,365**

### Other Public Unreimbursed Costs

**\$516,109**

Includes CHIPS, Prevention First, Catastrophic Illness Commission, Community Access Program

## SUBSIDIZED HEALTH SERVICES

**\$1,134,114**

Clinical programs that are provided despite a financial loss so significant that negative margins remain after removing the effects of charity care, bad debt and Medicaid shortfalls. Nevertheless, the service is provided because it meets an identified community need and if no longer offered, it would be either unavailable in the area or fall to the responsibility of the government or other not-for-profit organization to provide. Subsidized health services at CAMC include Family Resource Center support at \$320,028, the Lactation Support Program at \$173,557 and the Palliative Care Program at \$640,529.

## COMMUNITY BENEFIT PROGRAMS AND SERVICES

**\$40,466,767**

**(CAMC Memorial, CAMC General, and CAMC Women and Children's only)**

See details beginning on page 37.

Community Health Improvement Services	1,840,226
Health Professions Education	38,010,664
Financial and In-Kind Contributions	294,454
Community Building Activities	214,530
Community Benefit Operations	106,893

**TOTAL**

**\$116,093,980**

**In addition to the above, although Medicare and Bad Debt are not included as part of the community benefit report per IRS guidelines, they are reflective of CAMC's role in providing benefit to our community.**

## UNREIMBURSED MEDICARE AT COST

**\$120,930,775**

Medicare is not considered a means tested program and thus is not included as part of community benefit.

## BAD DEBT AT CHARGE

**\$27,235,462**

Unreimbursed charges, excluding contractual adjustments, arising from the failure to pay by patients whose health care has not been classified as charity care.

NOTE: *Charity Care, Unreimbursed Medicare, Medicaid and Bad Debt – The total cost estimate for this care was determined by applying our Medicare ratio of cost to charges generated for these patient financial classifications.*

*\* CAMC Teays Valley Hospital became part of Charleston Area Medical Center, Inc. in March 2014 and all CAMC hospitals are under the same provider number.*



# **Charleston Area Medical Center Charleston, West Virginia**

**CAMC General Hospital, CAMC Memorial Hospital and  
CAMC Women and Children’s Hospital**

## **2015 Implementation Strategy Report**

The Kanawha Coalition for Community Health Improvement was founded in 1994 by Kanawha County hospitals working in partnership with other local organizations. The Coalition's mission is *to identify and evaluate health risks and coordinate resources to measurably improve the health of the people of Kanawha County*. A Community Needs Assessment is conducted through the Kanawha Coalition for Community Health Improvement every three years with the most recent completed in 2014.

The Kanawha Coalition for Community Health Improvement’s goals for the Community Health Needs Assessment process include:

1. Assess the health needs of the citizens of Kanawha County.
2. Inventory available resources.
3. Determine unmet needs.
4. Evaluate and prioritize needs.
5. Involve affected organizations and constituencies in developing possible solutions.
6. Develop consensus.
7. Facilitate implementation.
8. Measure and evaluate outcomes.

The top three issues prioritized by the community from the 2014 Community Needs Assessment are listed below. Each of these issues is being addressed by a Kanawha Coalition for Community Health Improvement work group. Progress reports for each of these workgroups follows.

<b>Obesity/Overweight/Poor Eating Habits</b>
<b>Drugs/Prescription and Illicit</b>
<b>Lack of Physical Activity</b>

# KANAWHA COALITION FOR COMMUNITY HEALTH IMPROVEMENT PROGRESS REPORT WORKGROUP ACCOMPLISHMENTS FOR 2015

## Kanawha Coalition for Community Health Improvement Obesity/Overweight/Poor Eating Habits Workgroup

### Workgroup Membership

American Heart Association  
April's Kitchen  
Cabin Creek Health System  
Charleston Area Alliance  
Charleston Area Medical Center  
Highland Hospital  
Kanawha County Schools  
Kanawha-Charleston Health Department  
KEYS 4 HealthyKids  
RESA 3

Thomas Health System  
United Way of Central West Virginia  
Wellness Council of WV  
West Virginia Breast Feeding Alliance  
West Virginia Medical Institute  
West Virginia State University  
West Virginia State University Extension  
West Virginia University Extension  
WV Power Baseball

**2017 Goal:** Decrease the percentage of people living in Kanawha County with low food access from 28% to 23% by September 29, 2017.

### Year One Objectives (detailed workplan follows):

1. Recruit at least 5 Kanawha County businesses, organizations or schools to support *Health on the Shelf* evidence-based strategies. (By September 2015)
2. Partner with the Kanawha Charleston Health Department to support its healthy restaurant strategies with 10 Kanawha County restaurants. (By September 2015)

**2015 Implementation Strategy Progress:** Partnered with the Kanawha-Charleston Health Department on a grant application to the Center for Disease Control Partnership for the Improve Community Health Grant in July 2014. Funding was not received. Submitted application for APA Plan4Health grant July 2015. Plan4Health grant was not received. This Goal and its objectives have been replaced with a new 2015-2017 goal (see below).

**2017 Goal (new):** Decrease the percentage of adults over the age of 18 with inadequate fruit and vegetable consumption from 80% to 75%. See following.

# **Kanawha Coalition for Community Health Improvement**

## **Joint Worksite Strategy Team – New for 2015**

### **Obesity/Overweight/Poor Eating Habits Workgroup Membership**

American Heart Association	Thomas Health System
April's Kitchen	United Way of Central West Virginia
Cabin Creek Health System	Wellness Council of WV
Charleston Area Alliance	West Virginia Breast Feeding Alliance
Charleston Area Medical Center	West Virginia Medical Institute
Highland Hospital	West Virginia State University
Kanawha County Schools	West Virginia State University Extension
Kanawha-Charleston Health Department	West Virginia University Extension
KEYS 4 HealthyKids	WV Power Baseball
RESA 3	

### **Physical Activity Workgroup Membership**

American Heart Association	Thomas Health System
Cabin Creek Health System	West Side Community and Family Development Corporation
Capital Resource Agency	Wellness Council of WV
Charleston Area Alliance	West Virginia Bureau for Public Health
Charleston Area Medical Center	West Virginia School-based Health Assembly
City of Charleston, Parks and Recreation	West Virginia State University
Highland Hospital	West Virginia University Extension
Kanawha County Schools	West Virginia University Health Science Center
Kanawha Valley Senior Services	WV Power Baseball
Kanawha-Charleston Health Department	
RESA 3	

**2017 Goal:** Decrease the percentage of Kanawha County adults aged 20 and over, who report having no leisure time physical activity from 32% to 22%.

2017 Goal (new): Decrease the percentage of adults over the age of 18 with inadequate fruit and vegetable consumption from 80% to 75%.

### **Year One Objectives:**

1. Pilot Healthy Choices at Work worksite challenge in at least 10 small businesses in Kanawha County to increase supportive policies, practices and environmental conditions for physical activity and healthy eating. (By December 2015)
2. Conduct a large scale, highly visible physical activity campaign that targets Kanawha County adults, age 20 and older, promoting stair usage through media, point-of-decision prompts, and community events. (By November 2015)

**GOAL:** Decrease the percentage of Kanawha County adults aged 20 and over, who report having no leisure time physical activity from 32% to 22%. (By September 29, 2017)

Year One, Objective 1: Pilot Healthy Choices at Work worksite challenge in at least 10 small businesses in Kanawha County to increase supportive policies, practices and environmental conditions for physical activity and healthy eating. (By December 2015)		
Action Plan	Output/ Measure	Implementation Strategy Progress (through December 2015)
Development of a <i>Healthy Choices At Work</i> worksite challenge program, measures of improvements, recognition and associated awards.	Work plan Pre and post surveys Scoring process	<b>Completed: September 2014</b> <ul style="list-style-type: none"> <li>Finalized Healthy Choices at Work Challenge survey and scoring process.</li> <li>Reviewed and finalized recruitment materials.</li> <li>Began recruitment of small businesses (50 employees or less).</li> </ul> <b>Completed: October 2014</b> <ul style="list-style-type: none"> <li>Pre-tested Healthy Choices at Work small worksite challenge pre- and post-survey.</li> <li>Presented KCCHI's <i>Healthy Choices at Work Online Guide</i> at the 2014 Mid-Atlantic Conference on Worksite Wellness.</li> </ul>
Recruitment of 10 small businesses.	10 participating companies	<b>Completed: May 2015</b> <ul style="list-style-type: none"> <li>Identified list of 14 businesses as potential pilot sites</li> </ul> Successfully recruited 8 businesses to participate in pilot
Coalition workgroup members meet to review resources and tools available for worksites in the "Healthy Choices at Work" resource guide and toolkit.	10 coaches trained	<b>Completed: December 2014</b>
Coalition workgroup meets to assign individual members to serve as coaches to recruited worksites.	10 companies assigned coaches	<b>Completed: May 2015</b> 8 volunteer coaches assigned (one company each)
Coaches meet with worksite leadership to complete pre-survey and review toolkit recommendations.	Pre-surveys completed	<b>Completed: May 2015</b> Coaches met with 8 pilot sites and assisted in completion of pre-surveys
Coaches meet with worksite leadership to assist in goal setting based on pre-survey results.	Worksite goals	<b>Completed July 2015</b>
Worksite implements plan and measures progress towards goals. Coaches provide technical assistance as needed.	Policies and environmental changes	<b>Completed: June - November 2015</b>



Coaches meet with worksite leadership to complete post survey.	Post surveys completed	<b>Completed: November 28, 2015</b>
Coalition workgroup convenes to assess improvements in company pre-post surveys.	Final scores	<b>Completed: November 28, 2015</b> <ul style="list-style-type: none"> <li>• Top three companies with improvements in their scores were identified. Total possible score was 1,000 points.</li> <li>1<sup>st</sup> Place: Pre-Score 428.92 Post-Score 631.46 Improvement: 184.54</li> <li>2<sup>nd</sup> Place: Pre-Score 471.00 Post-Score 650.18 Improvement: 179.18</li> <li>3<sup>rd</sup> Place: Pre-Score 358.05 Post-Score 509.84 Improvement: 151.79</li> </ul>
Coalition publicly recognizes all participating worksites and makes awards to those with biggest improvement.	Awards and recognition event Media coverage	<b>Completed: December 2015</b> <ul style="list-style-type: none"> <li>• Held Recognition Breakfast December 11, 2015</li> <li>• Prizes awarded to top performing companies Shared by Social Media</li> </ul>
Evaluate pilot project: conduct exit interviews with pilot sites	Worksite feedback # of worksite policy & environment changes for healthy eating and physical activity Improvements to online resource guide	<b>Target Completion Date: April 2016</b>

**GOAL:** Decrease the percentage of Kanawha County adults aged 20 and over, who report having no leisure time physical activity from 32% to 22%. (By September 29, 2017)

Year One, Objective 2: Conduct a large scale, highly visible physical activity campaign that targets Kanawha County adults, age 20 and older, promoting stair usage through media, point-of-decision prompts, and community events. (By December 2015)		
Action Plan	Output/ Measure	Implementation Strategy Progress (through December 2015)
Development of stair usage campaign, including branding, media messages, signage, and implementation and evaluation strategies.	Work plan Evaluation plan	<b>Completed: September 2014</b> <ul style="list-style-type: none"> <li>• Met with University of Charleston’s Senior Nursing Class to recruit students to assist with campaign, September 2, 2014.</li> </ul>
Media buys and production of media components.  Kick-off event, signage placement.	Media buys/ production  Kick-off event  Signage placement	<b>Completed: March 2015</b> <ul style="list-style-type: none"> <li>• Contracted with WV Radio Corporation, produced 30: second spots to recruit companies to participate in stairwell usage campaign</li> <li>• WV Metro News ran story on the Campaign.</li> <li>• Kicked Off Campaign with Take the Stairs Kanawha County Facebook Page.</li> </ul> <p>Signs developed by University Nursing students were provided to participating companies in downloadable format and printed and posted at their worksites.</p>
Coalition members and University of Charleston senior nursing students conduct observational surveys at key stairwell locations throughout county.  Coalition tracks participation in community “stair-climbing” events.  Coalition workgroup monitors and evaluate reach of media messages.	Observational surveys completed  Events held  Media reach	<b>Completed: April 2015</b> <ul style="list-style-type: none"> <li>• The campaign reached over 7,400 employees at 16 worksites.</li> </ul> <p>Media coverage of check presentation to Highland Hospital who won the drawing among all participating companies. (completed May 7, 2015)</p>

# Kanawha Coalition for Community Health Improvement Drug Abuse Workgroup

## Drug Abuse Workgroup Members

Cabin Creek Health System	National Association of Social Workers, WV Chapter
Charleston Area Alliance	Prestera Center
Charleston Area Medical Center	RESA 3
Charleston Police Department	Saint Francis Hospital
First Choice Services (WV Rx Abuse Quitline)	University of Charleston School of Pharmacy
Highland Hospital	West Virginia Coalition Against Domestic Violence
Kanawha Communities That Care	West Virginia School-Based Health Assembly
Kanawha County Library System	West Virginia State University Extension
Kanawha County Schools	West Virginia University Extension
Kanawha Valley Senior Services	
Kanawha-Charleston Health Department	

## 2017 Goal(s):

1. Decrease drug abuse among youth by increasing their resiliency during early childhood.
2. Decrease drug abuse in Kanawha County through evidence-based strategies.
3. Decrease prescription drug abuse in Kanawha County.
4. Decrease the number of meth labs in West Virginia.

## Year One Objectives:

1. Expand Too Good For Drugs and Violence training for youth at four additional community-based sites. (By December 2015)
2. Expand Parent Rx360 program to four additional Kanawha County communities. (By December 2015)
3. Partner with Kanawha Communities That Care to select and implement 2 additional evidence-based strategies to address drug abuse in Kanawha County. (By December 2015)
4. Advocate for legislation that will reduce the number of meth labs in West Virginia. (By March 2015)

GOAL 1: Decrease drug abuse among Kanawha County youth by increasing their resiliency during early childhood. (By September 29, 2017)

Year One, Objective 1: Expand Too Good For Drugs and Violence training for youth at four additional community-based sites. (By December 2015)		
Action Plan	Output/ Measure	Implementation Strategy Progress (as of June 26, 2015)
Plan, promote and conduct Too Good For Drugs and Violence training for youth service organizations.	# attending training Post survey results	<b>Completed: April 2014</b> Held TGFDF training with 15 in attendance, representative of 7 youth service organizations/schools.
Recruit 4 additional community-based sites to conduct Too Good For Drugs training.	Memos of Understanding with sites Pre and post youth survey results # of children impacted	<b>Completed December 2015:</b> Five community-based Too Good For Drugs programs were implemented during first and second school semesters reaching a total of 500 youth. Sites: YMCA, East End Family Resource Center, KISRA, Pinch, Belle.

GOAL 2: Decrease drug abuse in Kanawha County through evidence-based strategies. (By September 29, 2017)

Year One, Objective 1: Partner with Kanawha Communities That Care to select and implement 2 additional evidence-based strategies to address drug abuse in Kanawha County. (By December 2015)		
Action Plan	Output/ Measure	Implementation Strategy Progress
Conduct joint strategic planning sessions to identify and select 2 additional evidence-based strategies to address prescription drug abuse.	2 evidence-based strategies identified and selected	<b>July 2014</b> <ul style="list-style-type: none"> <li>Held a strategic planning session July 16<sup>th</sup>.</li> </ul> <b>August 2014</b> <ul style="list-style-type: none"> <li>Held second strategic planning session August 27<sup>th</sup>. Selected strategies to limit access to unused/expired prescription medication:               <ul style="list-style-type: none"> <li>Placement of additional permanent Rx drop boxes in county</li> <li>Public education about proper disposal of Rx medications</li> </ul> </li> </ul>

Develop an implementation plan for both strategies.	Implementation plans	<b>Completed: April 2015</b>
Implement plan, with periodic assessments for any needed revisions.	Strategies implemented	<b>Completed: December 2015</b> <ul style="list-style-type: none"> <li>Purchased newspaper advertisement of permanent drop box locations (Sept. 2015 &amp; Nov. 2015)</li> </ul> Partnered with Kanawha Communities That Care for 4 memos of understanding with law enforcement detachments for the purchase of 4 new permanent Rx drop boxes. (Nitro, South Charleston, Dunbar, and Marmet)
Evaluate, measure results and prepare final report.	Evaluations completed Final report	<b>Target date: December 2015</b> 1,200 pounds of unused/expired medications were collected in Kanawha County in 2015.

GOAL 3: Decrease prescription drug abuse among in Kanawha County. (By September 29, 2017)

Year One, Objective 2: Expand Parent Rx360 program to 4 more Kanawha County communities. (By December 2015)		
Action Plan	Output/ Measure	Implementation Strategy Progress
Plan and promote Parent Rx360 community-based forums to educate parents about prescription drug abuse and actions they can take to keep their children safe.	# forum attendees	<b>Completed: 3 additional Parent Rx360 meetings</b> <b>Total Attendance: 141 parents and guardians</b> <u>March 2015</u> East End Family Resource Center <u>September 2015</u> KISRA Strengthening Families Conference <u>October 2015</u> Kanawha County Schools -Edison Staff Development Center/Parent Resource Center
Recruit 4 additional Kanawha County communities to host Parent Rx360 forums.	Media reach	
	Post survey results	41% of attendees said they found the Rx360 meeting very helpful.  Before the meeting 25% said they felt they were extremely knowledgeable about prescription drug abuse issue, after the meeting 36% reported they were extremely knowledgeable.

			Percent Before Meeting	Percent After Meeting
		Extremely knowledgeable	25%	36%
		Very knowledgeable	29%	54%
		Somewhat knowledgeable	44%	10%
		Slightly knowledgeable	3%	0%
		Not at all knowledgeable	0%	0%

GOAL 4: Decrease the number of meth labs in West Virginia. (By September 29, 2017)

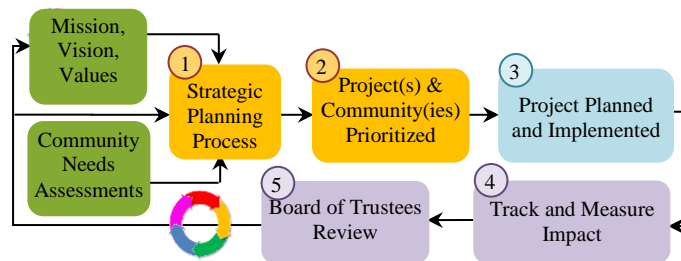
Year One, Objective 1: Advocate for legislation that will reduce the number of meth labs in West Virginia. (By March 2015)		
Action Plan	Output/Measure	Implementation Strategy Progress
Educate public about meth labs and importance of a prescription-only policy for pseudoephedrine products that can be easily converted to make meth through traditional and social media sources, community presentations and dissemination of print materials.	# of presentations  # materials disseminated  Media reach	<p><b>May through August 2015</b></p> <ul style="list-style-type: none"> <li>Held 3 Stop Meth Labs Team meetings/conference calls</li> <li>Revised Policy Recommendation and One Pager for policy makers</li> <li>Developed session agenda for Our Children Our Future Policy Symposium.</li> </ul> <p><b>September 2015</b></p> <ul style="list-style-type: none"> <li>Presented policy issue at September 14, 2015 Policy Symposium.</li> <li>Held public recognition event for pharmacies that had already stopped selling single-ingredient pseudoephedrine products (attending: Fruth, Rite-Aid, CVS; unable to attend: K-Mart and Walgreens)</li> <li>Revised Meth Lab Progression Map (with projection through 2015)</li> <li>One television news story and two newspaper article covered pharmacy recognition event and Stop Meth Labs policy recommendation</li> </ul> <p><b>October - November 2015</b></p> <p>Scheduled policy team members to present on Stop Meth Labs policy at statewide <i>Our Children, Our Future</i> Community and Candidate Forums. (5 Forums)</p>
Educate legislators about how a prescription-only policy will decrease meth labs in WV, through presentations to Legislative Committees and dissemination of information.	# of Legislators in support of policy Passage of legislation	<b>Target date: March 2016</b>



# CHARLESTON AREA MEDICAL CENTER COMMUNITY NEEDS PLANNING

Charleston Area Medical Center is licensed for 838 beds on three of its four campuses: General Hospital (268 beds), Memorial Hospital (424 beds) and Women and Children’s Hospital (146 beds). General Hospital focuses primarily on the neurological, orthopedic, trauma and rehabilitation service lines. Memorial Hospital supports the cardiac, peripheral vascular and oncology services lines and Women and Children’s Hospital focuses on mother, baby, pediatric and gynecology service lines. Medicine and general surgery cross both Memorial and General Hospitals. Although the hospitals are licensed separately, the hospitals jointly plan, implement goals and report into one governance structure. The CAMC Board of Trustees governs the CAMC hospitals. Community benefit services are aligned by service versus hospital, thus at times are clearly aligned by hospital, but not in the case of many of the activities and services that span all hospitals. Additionally, many of our reports that are used for benchmarking and comparisons are for CAMC versus the individual hospitals.

The following outlines CAMC’s community support process:



CAMC supports and strengthens its key communities through a systematic approach that begins with our mission, vision and values. Annually during our strategic planning process ① we review the community health needs assessment findings and priorities to develop our community strategy. This strategy is based on issues identified through the needs assessment process and supplemented with findings from our internal Environmental Analysis. Communities are identified ②, strategies are identified and plans are funded, implemented ③, tracked and measured ④. Our Board approves the plan and reviews plan progress annually ⑤. Because of the size and scope of our services, the approach we use to identify our key communities ② is based on the strategy, key stakeholder needs, and our capacity. Our community for the KCCHI work groups is Kanawha County as determined by the KCCHI mission. For our CAMC community strategy, community is based on the need identified and population to be addressed. We develop Health Indicator Data Sheets for each of our service area counties and identify key issues to address for all or part of our service area. For example, our Perinatal Telemedicine Project includes 14 rural counties and our Child Advocacy Center and HIV program serve our entire service area. Each strategy is deployed through a planning process that addresses key stakeholder needs and is evaluated based on predetermined criteria for expected outcomes. Cycles of learning have ensured the Civic Affairs Council monetary contributions support community organizations in the service area that are clearly aligned with our community strategy. In addition to addressing community needs and contributing financially, our leadership team serves in key leadership roles for community activities, programs and organizations as well as supports the workforce in participating in many community benefit activities such as Day of Caring and HealthFest.

In addition, CAMC staff serves on the community workgroups of the Kanawha Coalition for Community Health Improvement and along with Steering Committee members are involved in development of a community-wide community benefit plan addressing the top three health issues identified during the Community Forum. They also support plan implementation and outcome measurement. The Steering Committee provides ongoing oversight to the work groups' plans. Once the KCCHI plans are developed, as part of the strategic planning process, CAMC determines if there are additional areas of support that can be provided by CAMC to address the identified issues. The following table lists programs provided by CAMC that address these community priorities, and are identified and funded as part of operational planning by the CAMC Board of Trustees.

	ADDRESSED BY CAMC	CAMC General	CAMC Memorial	CAMC WCH	RANKING SCORE	How Addressed by CAMC in Addition to KCCHI Workgroup Activity (program descriptions found in Appendix)
1	Obesity	X		X	34.309	<ul style="list-style-type: none"> <li>• KCCHI Workgroup participation</li> <li>• Keys for Healthy Kids 5-2-1-0 Program</li> <li>• Bariatric Surgery Center of Excellence</li> <li>• Medical Weight Loss Program</li> </ul>
2	Drugs/ Prescription and Illicit			X	33.265	<ul style="list-style-type: none"> <li>• KCCHI Workgroup participation</li> <li>• Drug Addicted Mother/Baby Program</li> <li>• Contribution to Rea of Hope Fellowship Home</li> </ul>
3	Lack of Physical Activity	X	X	X	32.853	<ul style="list-style-type: none"> <li>• KCCHI Workgroup</li> <li>• Think First for Kids</li> <li>• ATV and Bicycle Safety</li> <li>• Challenged Sports Program</li> <li>• Heart Fit</li> <li>• Teddy Bear Fair</li> <li>• Playground Safety</li> <li>• Mall Walkers</li> <li>• Alzheimer's Walk</li> </ul>
4	Heart Disease/ High Blood Pressure (Also identified in our Primary Service Area)	X	X		31.618	<ul style="list-style-type: none"> <li>• Cardiac Kids</li> <li>• Basic Life Support Training</li> <li>• Heart Failure Readmission</li> <li>• Ornish Program</li> </ul>
5	Tobacco Use/ Second Hand Smoke Exposure	X	X	X	31.206	<ul style="list-style-type: none"> <li>• Tobacco Free for Baby and Me</li> <li>• Smoke free campus</li> </ul>

7	<b>Unemployment Jobs/ Poverty</b> <i>(Children Living in Poverty also identified in our Secondary Service Area)</i>	X	X	X	28.838	<ul style="list-style-type: none"> <li>• CAMC is the third largest non-government employer in WV</li> <li>• Charity care and bad debt</li> <li>• Civic Affairs contributions to Union Mission, Salvation Army, Gazette Charities, Gabriel Project, Daymark, Habitat for Humanity, Ronald McDonald House, Children's Therapy Clinic, WV Health Right, Faith in Action, ProKids, Summer Food Bank</li> <li>• Nursing Pathways Program</li> <li>• United Way Day of Caring</li> <li>• Health Occupations Students of America</li> <li>• Ronald McDonald House Housekeeping</li> <li>• Local Wealth Creation</li> <li>• Enrollment Assistance for Patients for Health Care Coverage</li> <li>• HealthFest</li> <li>• Outpatient Mental Health Services</li> <li>• Partners in Health Network</li> <li>• Teddy Bear Fair</li> <li>• Health Information Center</li> <li>• WV HealthRight support</li> <li>• Charity Care</li> <li>• Patient Nourishment Program</li> </ul>
8	<b>Cancer</b> <i>(Lung Cancer also identified in our Secondary Service Area)</i>	X	X	X	28.765	<ul style="list-style-type: none"> <li>• Relay for Life</li> <li>• Breast Cancer Awareness Activities</li> <li>• Look Good/Feel Better</li> <li>• Civic Affairs contributions to the American Cancer Society</li> <li>• State and national Tumor Registries</li> <li>• Cancer Patient Support Group</li> <li>• Breast Cancer Survivorship Group</li> <li>• Run for Your Life</li> <li>• Healthy Steps Exercise Program</li> </ul>
9	<b>Lung Disease/ Asthma/ COPD</b>	X			28.750	<ul style="list-style-type: none"> <li>• Asthma Awareness activities</li> <li>• American Lung Association contribution</li> <li>• Fight for Air Ride</li> </ul>

The following community priority need is not addressed by CAMC and the rationale is provided.

	NEED NOT ADDRESSED	RANKING SCORE	REASON NOT ADDRESSED
6	<b>High School Drop-Out</b> <i>(Also identified in our Primary Service Area)</i>	30.029	Issue being addressed by United Way of Central WV, Kanawha County Schools and State Department of Education

# 2014 - 2016 CAMC Community Benefit Plan 2015 Progress on Implementation Strategies

**JOINT IMPLEMENTATION STRATEGIES:** The following community benefit implementation strategies are inclusive of CAMC General, CAMC Memorial and CAMC Women and Children’s hospitals. Due to our corporate structure, corporate support for planning, quality, safety, finance and other functions, we address these issues for all hospitals from a system perspective as Charleston Area Medical Center.

1. Reduce Over-Utilization of the Emergency Room
2. Provide Physician Drug Diversion Training
3. Provide Medical Homes/Neighborhood
4. Provide Access to Specialty Health Care for the Service Area through Medical Staff Recruitment
5. Provide HIV Primary Care and Decrease New HIV Infections
6. Build the Base of Local Growers Providing Fresh Herbs, Fruits and Vegetables to CAMC

#1	<b>Charleston Area Medical Center General, Memorial, Women and Children’s Hospitals</b>																												
COMMUNITY HEALTH NEED	<b>Preventable Hospitalizations, PCP Ratio</b>																												
IDENTIFIED HEALTH ISSUE	<b>Over-Utilization of the Emergency Room</b>																												
COMMUNITY SERVED	<b>Kanawha, Raleigh, Jackson, Fayette, Roane, Putnam Counties</b>																												
PROGRAM DESCRIPTION AND RATIONALE	<p>The CAMC Health Education and Research Institute, Inc., [CHERI], Charleston Area Medical Center, Inc. (CAMC), and Genesis HealthCare have initiated the Healthcare for Elderly and Long-Term Patients in West Virginia (HELP WV) program. This program is seeking RUS grant funding for telehealth equipment to be installed in 12 medical facilities in rural counties of West Virginia, the 7<sup>th</sup> most rural state in the nation. [Census 2010] A significant number of seniors in these counties utilize the ER when their symptoms escalate to critical status and have become “ER frequent flyers.” To address these issues, we must educate our impoverished rural West Virginians in two critical areas, which will impact a third area:</p> <ul style="list-style-type: none"> <li>• Better health in general, leading to the prevention of the high incidence of heart disease, obesity, diabetes, and other common diseases</li> <li>• Effective, economical management of healthcare for the abundance of our seniors having persistent or critical, often long-term to end-of-life illnesses</li> <li>• Reduction in healthcare costs to payors.</li> </ul> <p>Sites:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #f2f2f2;">Site Name</th> <th style="background-color: #f2f2f2;">Site Designation</th> <th style="background-color: #f2f2f2;">Site Address</th> <th style="background-color: #f2f2f2;">County</th> <th style="background-color: #f2f2f2;">Population</th> </tr> </thead> <tbody> <tr> <td>CAMC Memorial Hospital (CAMC)</td> <td>Hub</td> <td>3200 MacCorkle Ave SE Charleston, WV 25304</td> <td>Kanawha</td> <td>8,922</td> </tr> <tr> <td>Ravenswood Village</td> <td>End-User</td> <td>200 South Ritchie Ave Ravenswood, WV 26164</td> <td>Jackson</td> <td>3,876</td> </tr> <tr> <td>Raleigh Center</td> <td>End-User</td> <td>1631 Ritter Drive Daniels, WV 25832</td> <td>Raleigh</td> <td>1,881</td> </tr> <tr> <td>Ansted Center</td> <td>End-User</td> <td>106 Tyree Street</td> <td>Fayette</td> <td>1,404</td> </tr> </tbody> </table>				Site Name	Site Designation	Site Address	County	Population	CAMC Memorial Hospital (CAMC)	Hub	3200 MacCorkle Ave SE Charleston, WV 25304	Kanawha	8,922	Ravenswood Village	End-User	200 South Ritchie Ave Ravenswood, WV 26164	Jackson	3,876	Raleigh Center	End-User	1631 Ritter Drive Daniels, WV 25832	Raleigh	1,881	Ansted Center	End-User	106 Tyree Street	Fayette	1,404
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		Ansted, WV 25812		
Hilltop Center	End-User	Saddle Shop Rd. Oak Hill, WV 25901	Fayette	7,730
Hidden Valley Center	End-User	438 23rd St Oak Hill, WV 25901	Fayette	7,730
Miletree Center	End-User	825 Summit St Spencer, WV 25276	Roane	2,322
Dunbar Center	End-User	501 Caldwell Dr Dunbar, WV 25064	Kanawha	7,907
Cedar Ridge Center	End-User	300 Cedar Ridge Rd. Sissonville, WV 25320	Kanawha	4,028
Marmet Center	End-User	1 Sutphin Drive Marmet, WV 25315	Kanawha	1,503
Teays Valley Center	End-User	590 N Poplar Fork Rd Hurricane, WV 25526	Putnam	6,284
Putnam Center	End-User	300 Seville Rd Hurricane, WV 25526	Putnam	6,284

STRATEGIC OBJECTIVE	<b>REDUCE OVER UTILIZATION OF THE EMERGENCY ROOM</b>
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GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Provide services via telehealth “after-hours” – when a physician is not available at a Genesis site for an admission or if there is a “change in status” of a patient.</li> <li>2. Utilize the telehealth system at a Genesis site for follow-up care for patients that have recently had a procedure – need a wound examined, psychiatric consult, etc.</li> </ol>
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MEASURE TO EVALUATE THE IMPACT	<p>Expected outcomes include:</p> <ul style="list-style-type: none"> <li>• Immediate access via tele-health to a terminal patient’s care preferences and directives saves time in delivering life-sustaining treatment or immediately respecting one’s preference.</li> <li>• 1,153 medical professionals will have efficient, convenient access to required CME via DLT technology, saving \$1.055 million on travel, meals, and lodging each year (115 physicians * \$800/yr) + (438 mid-level providers * \$250/year) * 3 years).</li> <li>• Our <b>HELP WV</b> program for RUS DLT consists of one hub site and 11 end-user sites, located in Fayette, Jackson, Kanawha, Putnam, Raleigh and Roane counties.</li> <li>• Emergency visits for preventable and non-emergency healthcare issues, especially those by frequent flyers, will be reduced by 65%. This will be the result of all identified frequent flyers being educated on health matters via tele-health videos, which are on-topic and available for immediate viewing in the waiting room or during the emergency visit. The first year, we estimate the reduction to be 20%, second year 45%, and 65% by the end of the third year.</li> <li>• A 65% reduction in frequent flyer visits will translate into healthcare cost savings. Instead of nearly \$740,000 billed to Medicare/Medicaid in 6 months, it will be reduced to approximately \$260,000, nearly a \$480,000 savings. Instead of \$500,000 in unpaid care, the amount will be closer to \$175,000. Savings are realized in proportion to the first, second and third-year established timeframes.</li> <li>• Our recently discharged seniors will participate in weekly conversations with a medical assistant, who calls for the purpose of medical surveillance of the patient’s treatment and maintenance plan, including reminders for follow-up appointments with the PCP. Through the DLT equipment, patient records are referenced, updated and made available to physicians. This activity leads to prevention of readmissions. Three minutes per phone call to 4 patients a day (per site, average of 11 end-</li> </ul>
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	<p>user sites) is expected to generate a payoff in prevention. Secondary calls to a PCP or pharmacy will also be included if necessary.</p> <ul style="list-style-type: none"> <li>• Peer-to-peer consults via tele-medicine equipment allows for real-time identification of symptoms and permits treatment protocols to commence sooner with greater accuracy.</li> <li>• Transcription errors are expected to be reduced by 98%. Electronic records allow for immediate retrieval, dramatically faster search capabilities, and crisp, legible standardized data entry. Estimated reduction in numbers of retrievals and filings of paper patient records - during shift changes only - is 10,617,120 incidents. [Based on 2,424 total admissions in 2012 at our 11 facilities: (1 out + 1 in per shift * 2 shifts/day) * (2,424 patients * 365 days/year) * 3 years] Only a minimal amount of paper patient records will be necessary.</li> <li>• Direct admitting via telehealth will result in a 90% reduction in paper patient records that must change hands. Phone calls to search for available beds and appropriate care will be decreased from approximately 10 calls to 3 per patient, resulting in a 65% reduction. Faxing records and all associated activity will be nearly eliminated, saving 1,212 person hours, translating to \$38,178 saved over 3 years (.5 hours/admission * 2,424 patients/year) * \$10.50/hour wage * 3 years).</li> <li>• Money will not be spent for transport to a hospital, where no medical procedure can change the outcome for a terminal patient. Estimated savings is \$97,200 over three years (\$1,000/1-way transport + \$1,250/ER admission) * (10% of 144 average total of unnecessary admissions in 11 facilities 2012) * 3 years).</li> </ul>
TIMELINE	<b>2014 - 2016</b>
RESOURCES	<p>USDA RUS (Rural Utilities Services) Grant Award of \$254,904 expected Winter, 2014 with a CAMC match of \$224,000 for equipment expenditure regardless of the grant availability.</p> <p>RUS grant can only be expended on equipment for rural sites; Benedum Grant Award of \$150,000 requested for training/coordination.</p>
PARTNERS/COLLABORATORS	<p>CAMC Health Education and Research Institute, Inc., [CHERI] and Genesis HealthCare (GHC)</p> <p><i>Genesis HealthCare (GHC) is one of the nation's largest skilled nursing and rehabilitation therapy providers. GHC is dedicated to delivery of high-quality, personalized healthcare to their patients and residents in nursing centers and assisted/senior living communities. All End-User sites in this application are GHC facilities.</i></p>
<b>2015 Progress Report</b>	<b>Site assessment continued. Equipment evaluations were conducted to select appropriate set-up based on needs of sites. Equipment installation and training is estimated to begin taking place in Fall 2016.</b>

<b>#2</b>	<b>Charleston Area Medical Center General, Memorial, Women and Children's Hospitals</b>
COMMUNITY HEALTH NEED	<b>Drugs/ Prescription and Illicit</b>
IDENTIFIED HEALTH ISSUE	<b>Prescription Drug Abuse</b>
COMMUNITY SERVED	<b>The state of West Virginia and border states</b>




PROGRAM DESCRIPTION AND RATIONALE	<b>Physician Drug Diversion Training</b> - This program was developed and presented in cooperation with the West Virginia Board of Medicine and West Virginia Board of Osteopathic Medicine to meet the mandatory 3.0 hour CME requirement on <i>Best Practice Prescribing of Controlled Substances and Drug Diversion Training</i> . This material is designed to provide the primary care physician or specialty physician with an overview of topics related to proper prescribing of controlled substances and drug diversion training
STRATEGIC OBJECTIVE	<b>PROVIDE PHYSICIAN DRUG DIVERSION TRAINING</b>
GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Provide the Physician Drug Diversion Training.</li> <li>2. Meet the following compliance requirements under West Virginia's controlled substances laws and regulations: <ul style="list-style-type: none"> <li>• Follow the steps necessary to register, log-on and use West Virginia's controlled substance monitoring program.</li> <li>• Recognize the epidemiology of chronic pain and distinguish the proper use and misuse of opioids through patient evaluations and risk assessment tools.</li> <li>• Follow the proper protocol when using opioids in the treatment of chronic pain including an understanding of toxicities and drug interactions.</li> <li>• Discuss West Virginia statistics on prescription drug diversion and abuse.</li> <li>• Identify drug seeking tactics and behaviors and understand the 'best practice' methods to work with patients suspected of inappropriate behavior.</li> <li>• Follow case studies of an evidence-based protocol for starting patients on opioid analgesic therapy, including issues specific to safely initiating and titrating opioids including treatment objectives, monitoring, referral, informed consent, agreements, urine screens, pill counts, patient education, and medical record documentation.</li> </ul> </li> </ol>
MEASURE TO EVALUATE THE IMPACT	CME course evaluation and participant post test scores
TIMELINE	July 2013- 2016
RESOURCES	WV State Medical Association WV Osteopathic Medical Association WV Board of Medicine WV Board of Osteopathic Medicine CAMC Health Education and Research Institute
<b>2015 Progress Report</b>	<b>Total Participants in 2015:</b> <b>1,458 (includes Physicians and mid-level providers)</b> <b>Participant evaluation average: 4.4 (Likert Scale 1-5)</b> <b>Participants post-test passing score: 80%</b>

<b>#3</b>	<b>Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children’s Hospital</b>
COMMUNITY HEALTH NEED	<b>PCP Ratio, Preventable Hospitalizations, Heart Disease, Poor Physical Health</b>
IDENTIFIED HEALTH ISSUE	<b>Coordination of Patient Care Across the Continuum</b>
COMMUNITY SERVED	<b>Patients in the primary and secondary service area</b>
PROGRAM DESCRIPTION AND RATIONALE	The Family Medicine Center CMMI Demonstration Project is a collaborative project designed to connect hospitals and other health care “neighbors” with primary care practices with the overall goals of improving patient experience and driving better quality at a more affordable cost. Coordination of patient care across the continuum will reduce potentially avoidable admissions and improve health by providing access to primary and preventative care through these medical homes.
	

STRATEGIC OBJECTIVE	<b>PROVIDE MEDICAL HOMES/NEIGHBORHOOD</b>
GOALS	<ol style="list-style-type: none"> <li>1. Achieve NCQA Patient Centered Medical Home (PCMH) Level 2 Recognition in 2014.</li> <li>2. Increase preventive health screenings of Family Medicine Center (FMC) patients by 25%</li> <li>3. Increase flu vaccinations for FMC patients by 30%.</li> <li>4. Spread PCMH-N practice methodology to other facilities.</li> <li>5. Decrease hospital readmissions through TCM.</li> <li>6. Decrease unnecessary Emergency Room (ER) use through enhanced patient management and more open access.</li> </ol>
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• NCQA PCMH Level 2 Recognition</li> <li>• Measure number and type of preventive health screenings for FMC patients</li> <li>• Measure percentage of FMC patients with flu vaccine documented each fall/winter</li> <li>• PCMH Level 2 Recognition for CAMC Outpatient Care Center and for two of the Roane General Rural Health Centers</li> <li>• Measure hospital readmissions in &lt;30 days for improvement</li> <li>• Measure ER Multiple Visit Patient (MVP) reports</li> </ul>
TIMELINE	2014 - 2017
RESOURCES	CMMI 3 year project funding
PARTNERS/COLLABORATORS	CAMC Physician Group WVU/Charleston Partner hospitals
<b>2015 Progress Report</b>	<ul style="list-style-type: none"> <li>• <b>NCQA PCMH Level 2 Recognition – ACHIEVED 4/24/2014 and will apply for renewal in 2016</b></li> <li>• <b>Measure number and type of preventive health screenings for FMC patients – ACHIEVED between January 2014 through July 2015 with the following increases:</b> <ul style="list-style-type: none"> <li>• <b>Breast Cancer Screenings – 42% 2014 to 46% July 2015</b></li> <li>• <b>Colorectal Cancer Screenings - 4% 2014 to 31% July 2015</b></li> <li>• <b>Cervical Cancer Screenings – 32% 2014 to 49% July 2015</b></li> </ul> </li> <li>• <b>Measure percentage of FMC patients with flu vaccine documented each fall/winter- Reporting difficulties with NextGen- on hold for Cerner implementation</b></li> <li>• <b>PCMH Level 2 Recognition for CAMC Outpatient Care Center and for two of the Roane General Rural Health Centers – OPCC not yet achieved – on hold for clinic radical redesign and Cerner implementation; Roane General – Level 2 Recognition to be achieved 2/2016</b></li> <li>• <b>Measure hospital readmissions in &lt;30 days for improvement- TCM implemented 2014. New report from CAMC – baseline for YE 2015 is O/E 1.17.</b></li> <li>• <b>Measure Emergency Room Multiple Visit Patients.</b> <ul style="list-style-type: none"> <li>• <b>YE 2014: 17 FMC ER MVPs</b></li> <li>• <b>YE 2015: 13 FMC ER MVPs (average)</b></li> </ul> </li> </ul>


<b>#4</b>	<b>Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children’s Hospital</b>
COMMUNITY HEALTH NEED	<b>Heart Disease, Lung Cancer, Poor Physical Health, Preventable Hospitalizations, Teen Birth Rate, Children Living in Poverty, PCP Ratio</b>
IDENTIFIED HEALTH ISSUE	<b>Access to specialty health care</b>
COMMUNITY SERVED	<b>Patients in the primary and secondary service area</b>
PROGRAM DESCRIPTION AND RATIONALE	CAMC’s service area includes critical access and small rural hospitals in need of access to specialist services.
STRATEGIC OBJECTIVE	<b>PROVIDE ACCESS TO SPECIALTY HEALTH CARE FOR THE SERVICE AREA THROUGH MEDICAL STAFF RECRUITMENT</b>
GOALS TO ADDRESS THE HEALTH NEED	1. Recruit medical staff for high priority community needs 2. Ensure access to needed specialists
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• Medical Staff recruited to service specialty needs based on the Medical Staff Development Plan</li> <li>• Number of medical staff specialty offerings</li> </ul>
TIMELINE	Ongoing
RESOURCES	Medical Staff recruitment and loan expenses; income guarantees
PARTNERS/COLLABORATORS	CAMC Physician Group, WVU/Charleston
<b>2015 Progress Report</b>	<b>High Priority Physicians Recruited in 2015</b> <b>Cardiology – 4</b> <b>Critical Care Medicine – 1</b> <b>Hematology/Oncology – 2</b> <b>Hospitalists – 14</b> <b>Infectious Disease – 1</b> <b>Internal Medicine – 2</b> <b>Nephrology – 1</b> <b>Neurology – 2</b> <b>Oral Maxillofacial Surgeon - 2</b> <b>Orthopedic Surgery and Trauma – 2</b> <b>Pediatric Cardiology – 1</b> <b>Pediatric Neurology – 1</b> <b>Plastic Surgery – 1</b> <b>Psychiatry – 1</b> <b>Pulmonary Critical Care – 2</b> <b>Surgery – 1</b> <b>Transplant Surgery – 1</b> <b>Urgent Care – 1</b>

<b>#5</b>	<b>Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children’s Hospital</b>
COMMUNITY HEALTH NEED	<b>Preventable Hospitalizations, Poor Physical Health, PCP Ratio</b>
IDENTIFIED HEALTH ISSUE	<b>HIV in West Virginia</b>
COMMUNITY SERVED	<b>Part C 19 county service area (3 new counties added in 2013) in southern West Virginia</b>

<p><b>PROGRAM DESCRIPTION AND RATIONALE</b></p> 	<p>The CAMC/WVU Charleston Division Ryan White (RW) Program's mission is to increase access to services for individuals at-risk for, or infected with HIV disease and to provide culturally sensitive, quality, comprehensive HIV-related primary care, regardless of a patient's ability to pay. The program is currently the only fully funded Part C site in southern West Virginia and provides HIV primary care to approximately 333 individuals. 58 new patients were served in 2013. Services include primary, pregnancy/pediatric care and HIV specialty care; mental health; case management and social services; pharmacist counseling; peer advocacy and dental care. The program serves primarily the rural, underserved and impoverished counties of this area. Although funding has been level over the last ten years, our patient load has tripled. There are an estimated 1,000 individuals living with HIV/AIDS in our service area (1 in 5 are unaware of their diagnosis).</p>
<p><b>STRATEGIC OBJECTIVE</b></p>	<p><b>PROVIDE HIV PRIMARY CARE AND DECREASE NEW HIV INFECTIONS</b></p>
<p><b>GOALS TO ADDRESS THE HEALTH NEED</b></p>	<p>Quality Initiatives:</p> <ol style="list-style-type: none"> <li>1. Framingham Heart Study QI Project</li> <li>2. Tobacco Cessation Partnership with Covenant House</li> <li>3. Syphilis QI Project</li> <li>4. Tri-state Regional Group – Viral Load Suppression/HAART Project</li> <li>5. Partnership for Health</li> <li>6. Oral Care PI Project</li> </ol> <p>Outreach:</p> <ul style="list-style-type: none"> <li>• Free rapid HIV testing in clinics</li> <li>• Media</li> <li>• Youth education in grades 7-10 in Kanawha County</li> <li>• Presentations</li> </ul> <p>Prevention:</p> <ul style="list-style-type: none"> <li>• Hepatitis B vaccines</li> <li>• Condom distribution</li> </ul>
<p><b>MEASURE TO EVALUATE THE IMPACT</b></p>	<ul style="list-style-type: none"> <li>• Number of participants program</li> <li>• Number of new contacts</li> <li>• Number of participants in quality initiatives</li> <li>• Outreach programs and participants</li> <li>• Prevention programs and participants</li> </ul>
<p><b>TIMELINE</b></p>	<p>2014-2016</p>
<p><b>RESOURCES</b></p>	<p>CAMC Charity Care - \$512,061  CAMC Outpatient Care Center - \$14,000  CHERI - \$73,545  WVU - \$15,000 non-HIV specific outpatient clinics  HRSA - \$453,303  CDC - \$27,500  Presidential AIDS Initiative Supplemental Grant - \$40,000  CAMC Foundation - \$40,000  Program Income - \$18,000  Rainbow Run Fundraiser - \$800</p>
<p><b>PARTNERS/COLLABORATORS</b></p>	<p>CAMC Health Education and Research Institute, WVU School of Medicine/Charleston Division</p>

<p><b>2014 Progress Report</b></p>	<p><b>Major Program Accomplishment Highlights:</b></p> <ul style="list-style-type: none"> <li>• Increased access to care to the most vulnerable and increasing populations;</li> <li>• New Linkage and Retention program;</li> <li>• Provision of around-the-clock primary care;</li> <li>• Provision of mental and dental health care services;</li> <li>• Screening for high-risk sexual behavior of all enrolled RW clients corresponding risk-reduction strategies for HIV transmission;</li> <li>• Comprehensive use of the CAREWare, Soarian, and NextGen data systems for generating reports and required HRSA submissions;</li> <li>• Have established a free Home HIV test kit program for partners of RW enrolled clients and other interested individuals. Free kits are given Monday through Friday at the outpatient clinic with pre- and post-test instructions to anyone who asks. These are also distributed at home visits and all presentations.</li> <li>• Provision of education about HIV screening and testing to other health care providers and to the community in general;</li> <li>• Establishment of an effective referral network to and from other medical care and/or case management and/or social service agencies/organizations;</li> <li>• Establishment of effective partnerships with other Ryan White funded entities in West Virginia and surrounding states.</li> <li>• Found dental provider in southern West Virginia who will accept our patients</li> <li>• Closer to establishing telemetry medicine for Beckley</li> </ul> <p><b>Provision of Mental and Oral Health:</b></p> <p>Areas of HIV primary care that did not exist prior to this program include mental health care and dental care. Nearly 50% of all enrolled patients have been identified as having a mental health problem and have been referred/seen by either a psychologist and/or psychiatrist. We are now collaborating with Prestera Center for additional mental health counseling sessions for patients. A patient's mental health affects all aspects of his/her overall health status, and has particular impact on adherence to medications and to medical care in general. The program also provides dental/oral care services for this population. The Elton John Foundation grant has provided an extra \$21,000 for dental care along with free oral care kits and oral health brochures for every client.</p> <p><b>Increasing Awareness among Providers and the Public:</b></p> <p>Because of effective marketing and outreach of the program, the medical community and public recognize CAMC as a leader of HIV care in the state. The program staff participates in continuing medical education throughout the 19-county service area for health care providers and community members. We are working to dispel myths and minimize stigma. The program's brochures, posters, newsletter and website are a successful part of these efforts. Staff provides presentations and exhibits throughout the service area.</p>
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	<p><b>Collaboration:</b>  Successful linkages with other Ryan White funded entities in four border states have been created. In West Virginia, the CAMCRWP has an effective working relationship with the WVU Part C program in Morgantown as well as the Part B coordinator and Part B case managers assigned to the CAMCRWP service area. Part B case managers and Part C program staff worked tirelessly and thoroughly in 2015 to assist clients in navigating changes that occurred due to the ACA. Now, all but one client is insured due to expanded WV Medicaid and the Insurance Marketplace. Coordination between all RW Part programs in WV also occurs each year for a statewide All-Titles meeting every spring. Outside of WV, the CAMCRWP has had substantial contact with the Part C programs at the University of Kentucky and the University of Pittsburgh. CAMC also participates in a regional tri-state quality group with at least nine other Part C sites throughout WV, Ohio and western Pennsylvania. Through our linkage coordinator, we have established closer connections with local organizations to help care for clients' needs such as housing and retention. We have also found a dental provider in the southern part of the state for clients with transportation difficulties.</p>
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#6	<b>Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children’s Hospital</b>
COMMUNITY HEALTH NEED	<b>The wealth creation approach intends to improve the livelihoods of poor people by creating wealth that is owned, controlled, and reinvested in places, so that they become valued partners.</b>
IDENTIFIED HEALTH ISSUE	<b>Unemployment/Jobs/Poverty and Obesity/Overweight/Poor Eating Habits</b>
COMMUNITY SERVED	<b>Growers in our Primary Service Area and patients and families in our Primary and Secondary Service Areas</b>
PROGRAM DESCRIPTION AND RATIONALE 	CAMC is working with The Greater Kanawha Valley Foundation as part of their wealth/ value chain creation approach. This approach bridges conventional approaches to community and economic development by using a systems framework, working with wealth creation value chains. CAMC’s 5 county primary service area is comprised of 356,000 people with small increases in the size of the working population since 1990. 18% of people and 25% of children live in poverty with little improvement over of the past 10 years. The health connection is that improvements in health care are associated with higher productivity in the workforce and for the economy overall. The Ford Foundation’s value chain premises are that we need to be intentionally inclusive of poor people and places as economic contributors to have a positive impact on wealth in our communities.
STRATEGIC OBJECTIVE	<b>BUILD THE BASE OF LOCAL GROWERS PROVIDING FRESH HERBS, FRUITS AND VEGETABLES TO CAMC</b>



GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Address obstacles that stand in the way of an effective value chain (such as policy barriers, consumer education, and access to resources).</li> <li>2. Implement the locally grown food value chain.</li> <li>3. Grow jobs for people in the community.</li> </ol>															
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• Number of growers providing fresh food to CAMC</li> <li>• Amount of produce purchased by CAMC</li> <li>• Cost to CAMC for the value chain</li> </ul>															
TIMELINE	2014 – 2017															
RESOURCES	Greater Kanawha Valley Foundation for facilitation and meeting support; Ford Foundation expertise and facilitation; CAMC budget															
PARTNERS/COLLABORATORS	Greater Kanawha Valley Foundation Morrison’s Food Services Corey Brothers WV Department of Agriculture Local Growers WV State University Extension Appalachian Regional Fellowship Program															
<b>2015 Progress Report</b>	<div data-bbox="609 808 1437 1018" data-label="Figure"> <p><b>Figure 7.4-22 Local Fresh Produce Purchases</b></p> <table border="1"> <caption>Data for Figure 7.4-22: Local Fresh Produce Purchases</caption> <thead> <tr> <th>Period</th> <th>Fresh Produce (Cases)</th> <th>Purchase Price (Dollars)</th> </tr> </thead> <tbody> <tr> <td>Jun-Aug 2014</td> <td>200</td> <td>\$10,000</td> </tr> <tr> <td>Aug-Sep 2014</td> <td>400</td> <td>\$10,000</td> </tr> <tr> <td>2015 Proj</td> <td>100</td> <td>\$20,000</td> </tr> <tr> <td>2016 Proj</td> <td>350</td> <td>\$35,000</td> </tr> </tbody> </table> </div> <p><b>One local grower has completed GAP certification. Worked with state Department of Agriculture to increase the number of training classes and timeliness of certification process. Met with growers and interest has increased. Supported growers with developing their Farm Safety Plans. Figure above shows number of cases purchased by CAMC during the 2014 growing season and projected increase in volumes. Due to a wet growing season and flooding in the Spring of 2015, the produce available for purchase decreased. One grower provided CSA boxes to 100 CAMC employees and medical staff for the 2015 season. CAMC is also purchasing now from the following WV businesses:</b></p> <ul style="list-style-type: none"> <li>• Brunetti Bakery / McConnell Farms and Mill - Grows wheat for flour</li> <li>• Earthgrains Bakery Group</li> <li>• Lone Star Western Beef</li> <li>• Mr. Bee Potato Chips</li> <li>• United Dairy</li> </ul>	Period	Fresh Produce (Cases)	Purchase Price (Dollars)	Jun-Aug 2014	200	\$10,000	Aug-Sep 2014	400	\$10,000	2015 Proj	100	\$20,000	2016 Proj	350	\$35,000
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## CAMC GENERAL HOSPITAL COMMUNITY BENEFIT PLAN IMPLEMENTATION STRATEGY

CAMC General Hospital (268 beds) focuses primarily on the neurological, orthopedic, trauma and rehabilitation service lines. Medicine and general surgery cross both Memorial and General Hospitals.

#7	<b>CAMC General Hospital</b>
COMMUNITY HEALTH NEED	<b>Obesity/Overweight/Poor Eating Habits</b>
IDENTIFIED HEALTH ISSUE	<b>Obesity</b>
COMMUNITY SERVED	<b>Patients in the primary and secondary service area</b>
PROGRAM DESCRIPTION AND RATIONALE	In 2010, West Virginia's obesity rate was 33%. Bariatric surgery has been found to address obesity and resolve diabetes in the obese population.
STRATEGIC OBJECTIVE	<b>SUPPORT REDUCTION OF OBESITY TO IMPROVE HEALTH THROUGH PROVIDING A BARIATRIC SURGERY PROGRAM</b>
GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Maintain Bariatric Surgery Center of Excellence designation</li> <li>2. Provide educational and exercise component for adult weight loss</li> </ol>
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• Patients following protocol for surgery</li> <li>• Adherence to Center of Excellence standards</li> </ul>
TIMELINE	Ongoing
RESOURCES	CAMC
<b>2015 Progress Report</b>  	<p>The CAMC Weight Loss Center is recognized as a Bariatric MBSAQIP Accreditation Facility by the American Society for Metabolic and Bariatric Surgery and the American College of Surgeons. In addition, it is a recipient of the Blue Distinction Centers designation for Bariatric Surgery by the Blue Cross and Blue Shield Association for meeting quality-focused criteria that emphasize patient safety and outcomes.</p> <p>The Weight Loss Center is designed to meet the criteria of the joint ASMBS and ACOS (MBSAQIP). All patient data is submitted to the benchmark database and outcomes and comparisons are made against 809 sites across the country. The benchmark data is used to measure outcomes and the success of our patients. All patients must complete the criteria of a minimum of 3 office visits, dietary counseling, and a psychological evaluation, plus show behavioral changes of diet and exercise before a surgical procedure. No patients go to surgery without following the criteria for the MBSAQIP and the minimum standard of care. All patients have access to support groups with continued educational monthly meeting with licensed providers at no additional charge. This helps promote behavioral changes for life that lead to long term success and to maintain their weight loss for life.</p>

## CAMC MEMORIAL HOSPITAL COMMUNITY BENEFIT PLAN IMPLEMENTATION STRATEGY



CAMC Memorial Hospital (424 beds) supports the cardiac, peripheral vascular and oncology services lines with admissions and outpatient visits. Medicine and general surgery cross both Memorial and General Hospitals.

#8	<b>CAMC Memorial Hospital</b>
COMMUNITY HEALTH NEED	<b>Cancer, Lung Cancer</b>
IDENTIFIED HEALTH ISSUE	<b>Continuum of care support for cancer patients and cancer survivors</b>
COMMUNITY SERVED	<b>Patients in the primary and secondary service area</b>
PROGRAM DESCRIPTION AND RATIONALE	Cancer is the second most common cause of death in West Virginia and Kanawha County has one of highest cancer mortality rates in WV. CAMC's cancer center volumes increase annually and our mission is "striving to provide the best health care to every patient, every day." Support services for our cancer patients are critical in meeting our mission.
STRATEGIC OBJECTIVE	<b>GROW THE CANCER PATIENT NAVIGATION AND SURVIVORSHIP PROGRAM</b>
GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Utilize the oncology patient navigation program.</li> <li>2. Grow the cancer survivorship program</li> </ol>
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• Number patients supported in patient navigation system</li> <li>• Number of patients supported in survivorship program</li> <li>• Patient satisfaction with the programs</li> </ul>
TIMELINE	2014-2016
RESOURCES	Staff education; information system; program development
PARTNERS/COLLABORATORS	Benedum Foundation
<b>2015 Progress Report</b>  	<p><b>The CAMC Cancer Center now has four nurse navigators, two financial navigators, and a survivorship coordinator. This is an expansion of the navigation program that began with one nurse navigator and one financial navigator. The Benedum grant allowed the nurse navigators to attend specialized oncology nurse navigation education events to allow them to serve our community with the most up-to-date, evidenced-based practice. The number of patients seen increased significantly. The nurse navigators have accomplished over 7,600 patient encounters this year.</b></p> <p><b>Additionally, the grant provided salary support for the navigators. The overall patient satisfaction at the Cancer Center is 94%.</b></p> <p><b>The survivorship program has provided care plans for approximately 30 patients and will begin to see 15-20 patients per week. The initial goal was 200 patients; however the</b></p>

	<p><b>Commission on Cancer decreased the number of required care plans for 2016 to 10% of patients that were treated with a curative intent. This changed the Cancer Center's goal to a minimum of 138 patients for this year. This goal will be met and exceeded by the conclusion of 2016.</b></p> <p><b>CAMC also started an accredited low dose CT lung screening program. All patients with positive findings are reviewed by the lung navigator and offered assistance.</b></p>
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## CAMC WOMEN AND CHILDREN'S HOSPITAL COMMUNITY BENEFIT PLAN IMPLEMENTATION STRATEGY

CAMC Women and Children's Hospital (146 beds) focuses on mother, baby, pediatric and gynecology service lines.

#9	<b>CAMC Women and Children's Hospital</b>
COMMUNITY HEALTH NEED	<b>Obesity, Children Living in Poverty</b>
IDENTIFIED HEALTH ISSUE	<b>Obesity/Nutrition</b>
COMMUNITY SERVED	<b>Children and their families in the primary and secondary service area.</b>
PROGRAM DESCRIPTION AND RATIONALE 	The 2013 "F as in Fat" report, ranked WV as #1 in diabetes and #2 in physical inactivity. High school students have reached an overweight and obesity rate of 30.3% and younger children age 2-4 years already have obesity rates of 14%. The CAMC Weight Loss Center provides comprehensive and multidisciplinary weight management offerings across the lifespan. The children's component is under the direction of Dr. Jamie Jeffrey, Medical Director of HealthyKids Pediatric Weight Management Program.
STRATEGIC OBJECTIVE	<b>REDUCE CHILDHOOD OBESITY, TREAT CO-MORBIDITIES AND PREVENT DIABETES</b>
GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Provide childhood obesity program</li> <li>2. Increase awareness of the program</li> <li>3. Increase access to care</li> </ol>
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• Participation</li> <li>• Weight loss and improved metabolic parameters in participants</li> <li>• Assess and address impact on the child's family</li> </ul>
TIMELINE	2014- 2016 and ongoing
RESOURCES	Internal funding
<b>2015 Progress Report</b> 	<p><b>HealthyKids Wellness &amp; Weight Management (HealthyKids) began 11 years ago offering group visits only one evening a week. In 2013 clinical time was increased to 3 clinics per week and 1 evening group. The new patient volume has nearly doubled with 33, 61 and 74 new patients in years 2014 to 2016, respectively.</b></p> <p><b>The access has also improved with decreasing 3<sup>rd</sup> appointment time out for a new patient from 39 days in 2013 to 17 days in 2015. Total patient visits volumes have also increased from 227 encounters to 320 encounters (this does not include the evening group visits). The 3<sup>rd</sup> appointment out for existing patients is 7 days.</b></p> <p><b>HealthyKids celebrated with outstanding clinical outcomes in 2014 with 96% of patients lowering their BMI from their first to last documented office visit. Group session occur each Tuesday evening with group nutrition education and group</b></p>

	<p><b>exercise. The kid’s gym has been expanded to include more age appropriate portable physical activity equipment and a new A-frame Iron Range Training system. We also increased services to our patients and families including guest speakers, grocery store tours, menu planning and monthly cooking classes which contributed to their success.</b></p>
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#10	<b>CAMC Women and Children’s Hospital</b>
COMMUNITY HEALTH NEED	<b>Obesity, Children Living in Poverty</b>
IDENTIFIED HEALTH ISSUE	<b>Obesity/Nutrition</b>
COMMUNITY SERVED	<b>The Keys 4 Healthy Kids initiative focused on low resource, at-risk youth and their families in the East End and the West Side of Charleston. These neighborhoods all shared similar disparities in terms of lack of access to safe venues for physical activity and healthy, affordable foods; however all had strong neighborhood associations. The program expanded to cover all of Kanawha County and 9 surrounding counties over a 4 year period. During this next phase, some components will become statewide.</b>
PROGRAM DESCRIPTION AND RATIONALE	<p>In December 2009, CAMC and CHERI along with the Kanawha Coalition established a KEYS 4 HealthyKids (KEYS) partnership that received a four-year, \$360,000 grant from the Robert Wood Johnson Foundation’s <i>Healthy Kids, Healthy Communities</i> grant program. The partnership focused on increasing access to fresh and affordable foods and increasing physical activity opportunities within Charleston’s East End and West Side neighborhoods. The partnership’s reach expanded throughout Kanawha County and the surrounding nine counties over the course of the grant and leveraged an additional \$1.6 million in matching funds and in-kind resources. KEYS 4 HealthyKids impacted the community through policy and environmental change to increase access to healthy affordable food and physical activity opportunities. Through the assessment phase, KEYS learned that residents had an interest in community gardens and pocket parks within their neighborhoods to increase access to healthy affordable food and physical activity opportunities. KEYS also learned that area childcare facilities needed technical assistance to create policies within their facility that improved access to healthy, affordable food and physical activity for the children they served. Through community partnerships, KEYS offered a training program to childcare centers, sparked interest in community gardens and formed a community gardens committee, and identified two vacant properties for pocket parks. Over the course of the project, partnership leadership worked to sustain each individual project and the partnership as a whole. In the last year of funding, KEYS created a sustainability plan to ensure the work continued into the future that focused its future direction on high priority strategies.</p>
STRATEGIC OBJECTIVE	<b>PREVENT CHILDHOOD OBESITY</b>
GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Establish a Community Action Toolkit and Peer Learning Network.</li> <li>2. Establish a School and Youth Garden Network.</li> <li>3. Provide Natural Learning Environments and edible gardens at childcare and after school facilities.</li> <li>4. Provide NAP SACC in Charleston and across West Virginia.</li> <li>5. Imagine Charleston policy development.</li> </ol>





	6. Establish KEYS Youth Council. 7. Expand the Try This Initiative across West Virginia. 8.
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• Toolkit and Learning Network operational with goals and outcome measures established and tracked.</li> <li>• School and Youth Garden Network operational.</li> <li>• Number of gardens at childcare and after school facilities.</li> <li>• NAP SACC statistics.</li> <li>• Imagine Charleston policies developed and shared.</li> <li>• KEYS Youth Council membership and number of meetings held.</li> <li>• Try This Initiative outcomes.</li> </ul>
TIMELINE	2014-2016.
RESOURCES	CAMC Foundation - \$45,000 CAMC - \$20,000 (office space and equipment) The Greater Kanawha Valley Foundation - \$20,000 WV SANP-Ed Program - \$150,000 WV Bureau of Public Health - \$19,600 Coventry Cares - \$13,150 AmeriCorps VISTA
2015 PROGRESS REPORT	<b>KEYS 4 HealthyKids continues to be active with increased reach with youth gardens, childcare center nutrition and physical activity improvements. In 2015, KEYS support was provided through a Benedum grant and subcontract with Family Nutrition Services.</b>

#11	<b>CAMC Women and Children's Hospital</b>																								
COMMUNITY HEALTH NEED	<b>Children Living in Poverty</b>																								
IDENTIFIED HEALTH ISSUE	<b>Mental Health Services for vulnerable pediatric and adolescent populations</b>																								
COMMUNITY SERVED	<b>8 rural counties in WV (Kanawha, Boone, Webster, Jackson, Calhoun, Fayette, Pocahontas, and Greenbrier)</b>																								
PROGRAM DESCRIPTION AND RATIONALE	<p><b>West Virginia Kids Intervention and Developmental Services Initiative (WV KIDS)</b> will increase access to mental health services for the most vulnerable pediatric and adolescent populations. This project will impact more than 20,000 children and adolescents and allow them access to state-of-the-art telemedicine services using distance telemedicine equipment in fixed locations. The hub site is located at Highland Hospital in Charleston, WV and the end-user sites, all members of the Partners in Health Network, are located in eight rural counties: Kanawha, Boone, Webster, Jackson, Calhoun, Fayette, Pocahontas, and Greenbrier. The site list for the project is listed below:</p> <table border="1"> <thead> <tr> <th>Site Name</th> <th>Site Designation</th> <th>Site Address</th> <th>County</th> <th>Population</th> </tr> </thead> <tbody> <tr> <td>Highland Hospital</td> <td>Hub</td> <td>300 56<sup>th</sup> Street Charleston, WV 25302</td> <td>Kanawha</td> <td>51,400</td> </tr> <tr> <td>Boone Memorial Hospital</td> <td>End-User</td> <td>701 Madison Avenue Madison, WV 25705</td> <td>Boone</td> <td>3,076</td> </tr> <tr> <td>Cabin Creek Health</td> <td>End-User</td> <td>79 Cabin Creek Road</td> <td>Kanawha</td> <td>656</td> </tr> </tbody> </table>					Site Name	Site Designation	Site Address	County	Population	Highland Hospital	Hub	300 56 <sup>th</sup> Street Charleston, WV 25302	Kanawha	51,400	Boone Memorial Hospital	End-User	701 Madison Avenue Madison, WV 25705	Boone	3,076	Cabin Creek Health	End-User	79 Cabin Creek Road	Kanawha	656
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	<p>The telemedicine equipment for this project takes into account the specific needs of the population and the goals of providing access to tele-behavioral health services. This includes videoconferencing equipment, telemedicine carts that offer stable and safe moving of equipment within the facility, high-definition monitors to enable patient face recognition, expressions, and any other data that requires a close up view of the patient. A high definition camera and microphones aid in providing psychiatric diagnoses, care and therapy. The equipment will enable multi-site views on one monitor for group meetings, as well as a system for non-video related content, such as documents and charts that are transmitted during meetings via videoconferencing. All of this equipment makes it possible for more mental healthcare services to be provided without the patient having to wait a great length of time to obtain an appointment, as compared to a standard office appointment, which typically takes weeks. Timely, expert psychiatric evaluations can dictate whether admitting a patient to a psychiatric hospital is the only alternative, allowing for the possibility of alternative, less expensive and higher quality care.</p>																																													
STRATEGIC OBJECTIVE	<b>IMPROVE ACCESS TO MENTAL HEALTH SERVICES FOR VULNERABLE PEDIATRIC AND ADOLESCENT POPULATIONS</b>																																													
GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Increase access to psychiatrists, who will be able to assess and appropriately evaluate a patient, make a diagnosis, and prescribe treatment.</li> <li>2. Provide therapy sessions with mental healthcare professionals via telemedicine</li> <li>3. Provide peer-to-peer consults with psychiatrists for community primary care physicians and other medical professionals.</li> </ol>																																													
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• The number of children receiving tele-behavioral health services</li> <li>• Appointment wait time</li> </ul>																																													
TIMELINE	2014- 2016																																													
RESOURCES	USDA – RUS Grant – submitted 7/2014 \$468,197 \$238,829 match for planned equipment expenditures																																													

PARTNERS/COLLABORATORS	CAMC Health Education and Research Institute, Inc Highland Hospital Partners in Health Network Participating sites include: Highland Hospital in Charleston, WV; Boone Memorial Hospital in Madison, WV; Cabin Creek Health Systems in Dawes, WV; Camden-on-Gauley Medical Center in Camden on Gauley, WV; Jackson General Hospital in Ripley, WV; Minnie Hamilton Health System in Grantsville, WV; New River Health Association in Scarbro, WV; Pocahontas Memorial Hospital in Buckeye, WV; Rainelle Medical Center in Rainelle, WV; Riverside Health Center in Belle, WV; and Webster County Memorial Hospital in Webster Springs, WV.
2014 PROGRESS REPORT	<b>Assessments of end-user sites completed. Equipment selected and ordered. Equipment installation and training estimated to take place in Spring 2016.</b>

#12	<b>CAMC Women and Children's Hospital</b>
COMMUNITY HEALTH NEED	<b>Tobacco Use/Secondhand Smoke Exposure, Teen Birth Rate</b>
IDENTIFIED HEALTH ISSUE	<b>Tobacco use in pregnant women</b>
COMMUNITY SERVED	<b>23 counties in southern West Virginia</b>
PROGRAM DESCRIPTION AND RATIONALE	West Virginia is number one in the nation for tobacco use among pregnant women (28.7%). Research has well established that tobacco dependence during pregnancy causes the risk of poor fetal outcomes. In an effort to ameliorate tobacco dependence among smoking pregnant women, smoking cessation programs have been tailored to this specific population. The tobacco cessation program for pregnant women (Tobacco Free for Baby and Me) was developed at CAMC's Women and Children's Hospital in the obstetric clinic in conjunction with the WV Bureau for Public Health's Division of Tobacco. The program addresses the needs of pregnant tobacco users through a comprehensive approach to training providers in the best practices for tobacco cessation and provides a standardized training program. Part of this program involves asking women about their tobacco usage during each perinatal visit. In conjunction with substance abuse testing, a Cotinine test was added to the initial prenatal screening. The purpose of this study is to determine if using Cotinine Biomarker Feedback will reduce prenatal smoking and improve perinatal outcomes.
STRATEGIC OBJECTIVE	<b>PROVIDE TOBACCO CESSATION FOR PREGNANT WOMEN</b>
GOALS TO ADDRESS THE HEALTH NEED	<ol style="list-style-type: none"> <li>1. Provide training to all staff in the Women's Medicine Center (WMC) in tobacco cessation</li> <li>2. Provide ongoing counseling to every women in the WMC regarding the harmful effects of tobacco</li> <li>3. Continue research to validate the benefits of cessation</li> <li>4. Identify if Cotinine testing improves cessation rates and secondarily to compare fetal outcomes with reduction of tobacco use</li> <li>5. Increase the quit rate among pregnant women in WV</li> </ol>
MEASURE TO EVALUATE THE IMPACT	<ul style="list-style-type: none"> <li>• Monthly statistics that address the number served and the validated quits.</li> <li>• Results of Cotinine Biomarker Feedback on prenatal smoking and perinatal outcomes.</li> </ul>
TIMELINE	2014-2016

RESOURCES	CAMC Foundation CAMC Women and Children's Medicine Center CAMC Health Education and Research Institute WVU Medical Division of Tobacco Prevention WV Quit line
<b>2015 Progress Report</b>	<b>326 pregnant women were identified as smokers in the CAMC Women's Medicine Center in 2015. The "Tobacco Free For Baby and Me" cessation program reported a 20% quit rate this year. The program's quit rate continues to be above the National Quit Rate of 13%. Quit Validation is reported at 79%.</b>



## APPENDIX LISTING OF ADDITIONAL 2015 COMMUNITY BENEFIT PROGRAMS FOR CHARLESTON AREA MEDICAL CENTER



Full Program Detail  
For Period 1/1/15 – 12/31/15

## Community Health Improvement Services (A) Community Health Education (A1)

### AARP Driving Safety Courses

**Description:** Educational program designed to demonstrate how age related changes may affect seniors' driving safety, promote safety, educate our geriatric population and reduce motor vehicle accidents.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 25780 (Health Information Center)

**Department Contact:** Beverly Thornton (8-9989)

**Objectives:** Participants will understand age-related changes that may affect their driving and improve their safety on the road.

**Persons:** 75

**Expenses:** 2,085

**Revenues:** 0

**Benefit:** 2,085

### Active Cancer Patient Support Group

**Description:** A support group for patients undergoing treatment for cancer.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 49642 (CAMC Cancer Center)

**Department Contact:** Bev Farmer (8-8399)

**Community Need:** Cancer

**Objectives:** Provide support for cancer patients.

**Persons:** 6

**Expenses:** 281

**Revenues:** 0

**Benefit:** 281

### Alzheimer's Walk

**Description:** Walk to promote awareness and raise funds for Alzheimer's Research.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 46509 (Southridge Imaging Center)

**Department Contact:** Kelly Combs (8-7031)

**Objectives:** Raise awareness and funds to support Alzheimer's Research.

**Persons:** 90

**Expenses:** 350

**Revenues:** 0

**Benefit:** 350

### Asthma Awareness

**Description:** Informational displays at the Capitol Market on World Asthma Day and at the State Capitol to promote asthma awareness. Staff participated in the Kid Strong Conference by providing an Asthma 101 presentation to school nurses/teachers/coaches, participated in the Asthma Education Institute and the Respiratory Rally Hall-O-Wheeze, and provided presentations to the community promoting asthma awareness.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 42500 (Respiratory Care)

**Department Contact:** Chuck Menders (8-9401)

**Community Need:** Lung Disease/Asthma/COPD

**Objectives:** Promote awareness of asthma to support early diagnosis and treatment.

**Persons:** 485



**Expenses:** 3,360  
**Revenues:** 0  
**Benefit:** 3,360

**ATV & Bicycle Safety Program**

**Description:** A program designed to teach ATV and bicycle safety at local elementary schools.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 41232 (Trauma Services)  
**Department Contact:** Doug Douglas (8-7809)  
**Community Need:** Lack of Physical Activity  
**Objectives:** To educate elementary school children regarding ATV, bicycle, and playground safety. Six bicycle Helmets were donated to students who did not have helmets.  
**Persons:** 175  
**Expenses:** 400  
**Revenues:** 0  
**Benefit:** 400

**Basic Life Support Training for the Community**

**Description:** Free basic life support training classes offered to the community.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 25780 (Health Information Center)  
**Department Contact:** Beverly Withrow-Thornton (8-9989)  
**Community Need:** Heart Disease/High Blood Pressure  
**Objectives:** Train community members in basic life support skills.  
**Persons:** 20  
**Expenses:** 250  
**Revenues:** 0  
**Benefit:** 250

**Bicycle Safety**

**Description:** A safety presentation that provides facts on bicycle related injuries, helmet effectiveness, safety tips, hand signals and the rules of the road to area elementary school students.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 41232 (Trauma Services)  
**Department Contact:** Doug Douglas (8-7809)  
**Community Need:** Lack of Physical Activity  
**Objectives:** Prevent bicycle injuries and promote the use of helmets.  
**Persons:** 115  
**Expenses:** 435  
**Revenues:** 0  
**Benefit:** 435



**Brain Injury Resource Awareness Group**

**Description:** Bi-monthly meetings for brain injury survivors, family, friends or anyone else interested in the care, rehabilitation, and welfare of individuals who sustained and live with brain injury.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 41346 (Medical Rehab)  
**Department Contact:** Jeremiah Gagnon (8-7608)  
**Objectives:** To promote awareness of the many resources available to brain injury survivors and their friends and family.  
**Persons:** 65  
**Expenses:** 432  
**Revenues:** 0  
**Benefit:** 432



**Breast Cancer Awareness Activities**

**Description:** Promoted breast cancer awareness at the Komen Race for the Cure and Holiday in Pink events in our community by providing literature and one-on-one education.

**Category:** A1

**Gender:** Females

**Department:** 46509 (Southridge Imaging Center)

**Department Contact:** Kelly Combs (8-7031)

**Community Need:** Cancer

**Persons:** 710

**Expenses:** 630

**Revenues:** 0

**Benefit:** 630

**Breast Cancer Survivorship Group**

**Description:** A support group for breast cancer survivors to meet and discuss prior treatments and experiences. Breast cancer survivors, family members and staff are all encouraged to participate.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 49642 (CAMC Cancer Center)

**Department Contact:** Bev Farmer (8-8399)

**Community Need:** Cancer

**Persons:** 12

**Expenses:** 4,106

**Revenues:** 0

**Benefit:** 4,106

**Broken Promises**

**Description:** A demonstration of scenarios involving students in motor vehicle accidents on prom night starting from the scene of the accident to the funeral. Speakers provide information about the loss of a loved one.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 41232 (Trauma Services)

**Department Contact:** Doug Douglas (8-7809)

**Objectives:** To increase awareness for outcomes of alcohol/drug use and driving.

**Persons:** 100

**Expenses:** 320

**Revenues:** 0

**Benefit:** 320

**Cardiac Kids**

**Description:** A program designed to go into Kanawha County Elementary Schools and perform blood work on the students and educate them about the risks for cardiac disease that is identified from the findings.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 43540 (WCH Lab)

**Department Contact:** Nassar Larijani (8-2386)

**Community Need:** Heart Disease/High Blood Pressure

**Persons:** 75

**Expenses:** 432

**Revenues:** 0

**Benefit:** 432

**Childbirth Education Program**

**Description:** Program designed for newly expectant parents.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 43608 (Family Resource Center)

**Department Contact:** Kelly Gilbert (8-2545)

**Objectives:** Improved birth outcomes.

**Persons:** 1,635



**Expenses:** 53,000  
**Revenues:** 0  
**Benefit:** 53,000

**Closed Circuit TV network system**

**Description:** An on demand TV system offering over 100 educational videos for access to patients and their families. The system also includes a relaxation channel and the ability to access videos based on patient availability by making selections on their telephone keypad.

**Category:** A1  
**Gender:** Both Males and Females

**Department:** 25780 (Health Information Center)

**Department Contact:** Beverly Withrow-Thornton (8-9989)

**Objectives:** To provide consistent patient education for our patients and their families.

**Persons:** Unknown  
**Expenses:** 40,300  
**Revenues:** 0  
**Benefit:** 40,300

**Community Health and Outreach**

**Description:** Health education resources provided for area health fairs on healthy eating, exercise and how to access the many resources available at the Health Information Center. The HIC offers health information on diseases and conditions, tests, and procedures and other health topics

**Category:** A1  
**Gender:** Both Males and Females

**Department:** 49642 (CAMC Cancer Center)

**Department Contact:** Bev Farmer (8-8399)

**Objectives:** Promote healthy lifestyles, health awareness, and the programs and services offered by the Health Information Center.

**Persons:** 100  
**Expenses:** 360  
**Revenues:** 0  
**Benefit:** 360



**Compassionate Friends Support Group**

**Description:** Support group for bereaved parents.

**Category:** A1  
**Gender:** Both Males and Females

**Department:** 43608 (Family Resource Center)

**Department Contact:** Kelly Gilbert (8-2545)

**Objectives:** Nationally recognized support group for any bereaved parent.

**Persons:** 98  
**Expenses:** 1,200  
**Revenues:** 0  
**Benefit:** 1,200

**Digital Signage (CAMC TV) and Video PSAs**

**Description:** CAMC TV provides educational topics ranging from stroke identification to proper hand washing techniques and precautions to prevent the spread of influenza.

**Category:** A1  
**Gender:** Both Males and Females

**Department:** 25780 (Health Information Center)

**Department Contact:** Beverly Withrow-Thornton (8-9989)

**Objectives:** Engaging and educating patients, family, and community on health education topics.

**Persons:** Unknown  
**Expenses:** 42,360  
**Revenues:** 0  
**Benefit:** 42,360

**Distracted Driving/Driving Safety for Teens**

**Description:** Presentation about distracted driving statistics and habits. Review of safe driving practices and teen driving safety followed by a question and answer session.

**Category:** A1

**Gender:** Both Males and Females  
**Department:** 41232 (Trauma Services)  
**Department Contact:** Doug Douglas (8-7809)  
**Objectives:** Create a greater awareness of the dangers associated with distracted driving by discussing the common causes, the potential outcomes and traffic accident statistics. This is then translated into the impact it can have on the individual teen, their family, friends, and community.  
**Persons:** 100  
**Expenses:** 276  
**Revenues:** 0  
**Benefit:** 276

#### Driving Safety Community Events

**Description:** Presentations at various community events that include the use of a Virtual Driver Interactive Simulator to demonstrate the effects of distracted driving, drunk driving, and driving under the influence of medications.

**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 41232 (Trauma Services)  
**Department Contact:** Doug Douglas (8-7809)  
**Objectives:** Prevent traffic accidents and fatalities.  
**Persons:** 295  
**Expenses:** 960  
**Revenues:** 0  
**Benefit:** 960



#### Fight for Air Ride

**Description:** Fight for Air Ride cycling event in Charleston promotes smoking cessation and raises money for the American Lung Association.

**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 49642 (CAMC Cancer Center)  
**Department Contact:** Bev Farmer (8-8399)  
**Community Need:** Lung Disease/Asthma/COPD  
**Persons:** 104  
**Expenses:** 1,487  
**Revenues:** 0  
**Benefit:** 1,487

#### Health Information Center

**Description:** The Health Information Center provides up-to-date reliable health information via the website. The HIC provides responses to specific health questions submitted by the public via email. The HIC also provides an 1-800 telephone number where members of the community can request answers to health information questions.

**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 25780 (Health Information Center)  
**Department Contact:** Beverly Withrow-Thornton (8-9989)  
**Objectives:** Promote health education in the community.  
**Persons:** 250  
**Expenses:** 150  
**Revenues:** 0  
**Benefit:** 150

#### Imagine U: A Virtual Healthcare Experience

**Description:** CAMC broadcast of a cataract surgery narrated by a local physician via web cast to introduce students to careers in healthcare using technology that links health science classrooms to the real world of health care and hospitals. Students from Boone, Clay, Roane, Jackson, Kanawha and Putnam Counties participated.

**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 21926 (Human Resources Workforce Dev)  
**Department Contact:** Debby Schoolcraft (8-3376)

**Community Need:** Educational Attainment/High School Dropout  
**Objectives:** Expose the students at eleven high schools in Kanawha and Boone Counties, four vocational and technical centers to health care careers.  
**Persons:** 800  
**Expenses:** 9,710  
**Revenues:** 0  
**Benefit:** 9,710

**Keys for Healthy Kids 5-2-1-0 Program**

**Description:** The 5-2-1-0 Program is designed to modify childcare behavior and encourage children to live a healthier lifestyle. CAMC partners with the Charleston Town Center Mall to provide the Play Patch play area for small children that includes fruit and vegetable themed play equipment.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 21942 (Marketing)  
**Department Contact:** Elizabeth Pellegrin (8-5757)  
**Community Need:** Obesity/Overweight/Poor Eating Habits  
**Objectives:** The vegetable theme of the play area supports the national 5-2-1-0 campaign, which encourages children to, daily, eat five fruits and vegetables, watch TV or play video and computer games for less than two hours, get one hour of exercise and skip sugary beverages.  
**Persons:** Unknown  
**Expenses:** 3,122  
**Revenues:** 0  
**Benefit:** 3,122



**Organ Donation Awareness**

**Description:** The renal transplant program at General Hospital staffs a booth during the Charleston Festival to educate the public on the importance of organ donation and to register individuals for organ donation.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 41452 (Transplant Center)  
**Department Contact:** Glenn Martin (8-6525)  
**Objectives:** To heighten awareness of the importance of organ donation.  
**Persons:** 250  
**Expenses:** 810  
**Revenues:** 0  
**Benefit:** 810



**Playground Safety**

**Description:** Presentation with handouts given at area elementary schools to provide an overview of safety precautions on the playground. The presenters review ways to prevent injuries and the students provide feedback on injury prevention.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 41232 (Trauma Services)  
**Department Contact:** Doug Douglas (8-7809)  
**Community Need:** Lack of Physical Activity  
**Objectives:** To prevent accidents on the playground.  
**Persons:** 235  
**Expenses:** 200  
**Revenues:** 0  
**Benefit:** 200

**Red Cross Blood Drive Support**

**Description:** Provide support, signage, and set-up/clean-up for Red Cross Blood drives held at CAMC facilities.  
**Category:** A1  
**Gender:** Both Males and Females  
**Department:** 42562 (Transfusion Services)  
**Department Contact:** Shari Griffith (8-4236)  
**Objectives:** Making employees and visitors aware of the Red Cross blood drive and donation locations. Provide support for setting up and cleaning up the room used for the blood drive.

**Persons:** 120  
**Expenses:** 840  
**Revenues:** 0  
**Benefit:** 840

#### Relay for Life

**Description:** Staffed the Annual Relay for Life in Charleston which promotes cancer awareness and invites cancer survivors and family to participate in the walk. The event raises money for the American Cancer Society.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 47441 (Chemotherapy)

**Department Contact:** Bev Farmer (8-8399)

**Community Need:** Cancer

**Persons:** 430

**Expenses:** 1,470

**Revenues:** 0

**Benefit:** 1,470



#### Run For Your Life

**Description:** Staffed the Run For Your Life race and walk held in Charleston as part of Festival. The event promotes colorectal cancer screening and education.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 49642 (CAMC Cancer Center)

**Department Contact:** Bev Farmer (8-8399)

**Community Need:** Cancer

**Persons:** 430

**Expenses:** 1,470

**Revenues:** 0

**Benefit:** 1,470

#### Spinal Cord Injury/Support Education Awareness

**Description:** Resource meetings held monthly for spinal cord injury survivors, family, new patients or anyone interested in the care and rehabilitation and welfare of individuals who have sustained spinal cord injury.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 41346 (Medical Rehab)

**Department Contact:** Jeremiah Gagnon (8-7608)

**Objectives:** Expose new patients and community members to peers surviving with SCI. Education and updates on research, new techniques, and enhance accessible options and community awareness.

**Persons:** 56

**Expenses:** 622

**Revenues:** 0

**Benefit:** 622

#### Think First For Kids

**Description:** Program provided in Kanawha County elementary schools that focuses on the prevention of head and spinal injuries.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 41158 (Neuro ICU General)

**Department Contact:** Debbie Toney (8-3783)

**Community Need:** Lack of Physical Activity

**Objectives:** Educate children to help prevent head and spinal injuries on the playground, riding bicycles, car safety, and water safety.

**Persons:** 525

**Expenses:** 15,000

**Revenues:** 0

**Benefit:** 15,000



**WV Health Occupations Students of America (HOSA)**

**Description:** Provided two \$250 academic scholarships for post-secondary education to 1st place winners in two categories to student who compete in the annual WV HOSA State Leadership Conference.

**Category:** A1

**Gender:** Both Males and Females

**Department:** 21926 (Human Resources Workforce Dev)

**Department Contact:** Debby Schoolcraft (8-3376)

**Community Need:** High School Dropout

**Objectives:** Provide support to WV HOSA who works with area students interested in healthcare professions to develop leadership and academic skills.

**Persons:** 300

**Expenses:** 500

**Revenues:** 0

**Benefit:** 500

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Community Health Education (A1)</b>	<b>186,918</b>	<b>0</b>	<b>186,918</b>	<b>7,656</b>

**Community Based Clinical Services (A2)**

**CAMC Ryan White Program**

**Description:** Primary outpatient care, education, and information for individuals in southern WV (service area is 16 counties in Public Health Districts 1, 3, and 4) who are at-risk or infected with HIV, regardless of ability to pay.

**Category:** A2

**Gender:** Both Males and Females

**Department:** 46579 (Pharmacy Administration)

**Department Contact:** Christine Teague (8-8106)

**Objectives:** Primary care to at-risk and HIV infected persons in the service area.

**Persons:** 326

**Expenses:** 52,547

**Revenues:** 3,734

**Benefit:** 48,813



**Child Advocacy Center**

**Description:** Program designed to provide a safe, child friendly place for children with alleged sexual or physical abuse or neglect. Provides a complete medical and psychosocial evaluation and may include a forensic interview. Provide training and education for prosecutors, Child Protective Services, law enforcement, physicians and health care providers. Also, testify and serve as expert witnesses and consultants. In 2015, provided child abuse prevention materials to over 3,000 children, daycare providers and at pediatricians' offices.

**Category:** A2

**Gender:** Both Males and Females

**Department:** 43602 (Children's Medicine Center)

**Department Contact:** Debbie Carte (8-2536)

**Persons:** 3,477

**Expenses:** 119,414

**Revenues:** 0

**Benefit:** 119,414



**Drug Addicted Mother Baby Program**

**Description:** Program for pregnant women who have been identified as drug users during the early stages of their pregnancy.

**Category:** A2

**Gender:** Females



**Department:** 43608 (Family Resource Center)  
**Department Contact:** Kelly Gilbert (8-2545)  
**Community Need:** Drugs/Prescription and Illicit  
**Persons:** 660  
**Expenses:** 3,736  
**Revenues:** 0  
**Benefit:** 3,736



#### Medical Rehabilitation Recreational Therapy Program

**Description:** Medical Rehabilitation provides a Recreational Therapy Program both during a rehabilitation patient's stay and as an aftercare option for patients needing the service. Services are provided at no charge and include functional activity, aquatic therapy, kinetic activity, activity daily living, family conferences, and patient evaluations.

**Category:** A2  
**Gender:** Both Males and Females

**Department:** 41346 (Medical Rehab)  
**Department Contact:** Jeremiah Gagnon (8-7608)

**Objectives:** The return of patients to the highest level of functionality that they can attain.

**Persons:** 56  
**Expenses:** 1,708  
**Revenues:** 0  
**Benefit:** 1,708

#### Outpatient Mental Health Services

**Description:** Outpatient mental health services for the uninsured or underinsured.

**Category:** A2  
**Gender:** Both Males and Females

**Department:** 43608 (Family Resource Center)  
**Department Contact:** Kelly Gilbert (8-2545)

**Community Need:** Unemployment/Jobs/Poverty

**Objectives:** Filling the gap in mental health services for the uninsured or underinsured. This program serves individuals who have health insurance that does not cover behavioral health services or individuals without health insurance.

**Persons:** 258  
**Expenses:** 61,802  
**Revenues:** 0  
**Benefit:** 61,802

#### West Virginia Health Right Support

**Description:** A free clinic located in CAMC's service area that provides primary health care and adult dental care to the uninsured and underinsured population. CAMC provides pharmacy support, maintenance and housekeeping services to the free clinic.

**Category:** A2  
**Gender:** Both Males and Females

**Department:** 46579 (Pharmacy Administration)  
**Department Contact:** Bryan Sayre (8-8917)

**Community Need:** Unemployment/Jobs/Poverty

**Objectives:** To support health care delivery to those unable to obtain services elsewhere.

**Persons:** Unknown  
**Expenses:** 136,036  
**Revenues:** 0  
**Benefit:** 136,036

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
*** Community Based Clinical Services (A2)	<b>667,429</b>	<b>293,214</b>	<b>374,215</b>	<b>4,777</b>



## Health Care Support Services (A3)

### Challenged Sports Program

**Description:** Organize and coordinate a challenged sports program, games, leagues, and exhibitions to offer new patients and individuals in the community an opportunity to participate in challenged sports.

**Category:** A3

**Gender:** Both Males and Females

**Department:** 41346 (Medical Rehab)

**Department Contact:** Jeremiah Gagnon (8-7608)

**Community Need:** Lack of Physical Activity

**Objectives:** To expose the community to challenged sports such as wheelchair basketball leagues, marksmanship and other events and exhibitions. The program helps individuals develop the skills necessary to participate in a recreation activity. It offers an outlet and an opportunity to pursue these sports at a level in which they wish to compete.

**Persons:** 285

**Expenses:** 3,515

**Revenues:** 0

**Benefit:** 3,515



### Enrollment Assistance for Patients & Families for Health Coverage

**Description:** Patient Accounts provides support to patients for enrollment in government programs or in obtaining charity care. Financial Counselors address the charity process for CAMC patients. Over 37,000 charity and government enrollment applications were provided.

**Category:** A3

**Gender:** Both Males and Females

**Department:** 31706 (Finance)

**Department Contact:** Jay Richmond (8-6250)

**Community Need:** Unemployment/Jobs/Poverty

**Persons:** 33,507

**Expenses:** 1,269,662

**Revenues:** 0

**Benefit:** 1,269,662

### Follow-Up After Perinatal Loss

**Description:** Labor and Delivery RNs provide outpatient referral and resources for perinatal loss and bereavement.

**Category:** A3

**Gender:** Females

**Department:** 43110 (Labor & Delivery)

**Department Contact:** Denise Burgess (8-2158)

**Objectives:** Provide outpatient referral services/programs to support the patient after experiencing perinatal loss.

**Persons:** 30

**Expenses:** 1,250

**Revenues:** 0

**Benefit:** 1,250

### Healthy Steps Exercise Program

**Description:** Healthy Steps is a therapy, exercise and movement program designed to improve the overall wellness, range-of-motion, balance, strength, emotional well-being for cancer survivors and those with other chronic illnesses or medical conditions.

**Category:** A3

**Gender:** Both Males and Females

**Department:** 49642 (CAMC Cancer Center)

**Department Contact:** Bev Farmer (8-8399)

**Community Need:** Cancer

**Persons:** 20

**Expenses:** 1,328

**Revenues:** 0

**Benefit:** 1,328

**Look Good/Feel Better**

**Description:** Professional cosmetologist provides makeovers for cancer patients.  
**Category:** A3  
**Gender:** Females  
**Department:** 47441 (Chemotherapy)  
**Department Contact:** Bev Farmer (8-8399)  
**Community Need:** Cancer  
**Objectives:** Improving self-esteem and overall well-being of the cancer patient.  
**Persons:** 10  
**Expenses:** 200  
**Revenues:** 0  
**Benefit:** 200



**Patient Nourishment Program**

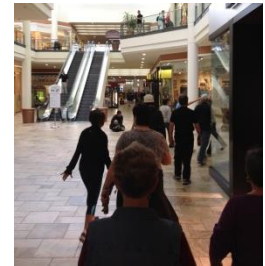
**Description:** Nutrition Services provides nutrition products to patients upon discharge until they can obtain the product themselves through an outside source.  
**Category:** A3  
**Gender:** Both Males and Females  
**Department:** 41802 (Nutrition Services)  
**Department Contact:** Peg Andrews (8-3416)  
**Objectives:** To provide appropriate and sufficient nutrition to discharged patients until an outside source is obtained.  
**Persons:** 7  
**Expenses:** 38  
**Revenues:** 0  
**Benefit:** 38

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Health Care Support Services (A3)</b>	<b>1,275,993</b>	<b>0</b>	<b>1,275,993</b>	<b>33,859</b>

**Social & Environmental Improvement (A4)**

**CAMC Mall Walkers Program**

**Description:** The Mall Walkers Program is provided at the Charleston Town Center and participants meet to discuss health topics such as stroke awareness, holiday meal planning, and infection prevention. Participants are provided a parking pass to use to walk on their own.  
**Category:** A4  
**Gender:** Both Males and Females  
**Department:** 25780 (Health Information Center)  
**Department Contact:** Beverly Thornton (8-9989)  
**Community Need:** Lack of Physical Activity  
**Objectives:** Promote health education and exercise.  
**Persons:** 275  
**Expenses:** 3,100  
**Revenues:** 0  
**Benefit:** 3,100



	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Social &amp; Environmental Improvement (A4)</b>	<b>3,100</b>	<b>0</b>	<b>3,100</b>	<b>275</b>
<b>**** Community Health Improvement Services</b>	<b>2,133,440</b>	<b>293,214</b>	<b>1,840,226</b>	<b>46,567</b>

## Health Professions Education (B) Physicians/Medical Students (B1)

### CAMC Graduate Medical Education

**Description:** CAMC provides 17 residency and fellowship programs (allopathic and osteopathic including three dual tracks). CAMC has medical school affiliations with West Virginia University School of Medicine and the West Virginia School of Osteopathic Medicine. There are 171 medical residents enrolled on campus.

**Category:** B1

**Gender:** Both Males and Females

**Department:** 31720 (Accounting)

**Department Contact:** Debbie McClure (8-3380)

**Persons:** 172

**Expenses:** 41,282,867

**Revenues:** 6,522,203

**Benefit:** 34,760,664



### Ethics in the Round

**Description:** Monthly presentations designed to provide education to medical professionals on current ethics topics.

**Category:** B1

**Gender:** Both Males and Females

**Department:** 25768 (Continuing Education)

**Department Contact:** Jay Ripley (8-9964)

**Objectives:** Provides a forum for medical professionals to discuss ethics issues.

**Persons:** 386

**Expenses:** 20,210

**Revenues:** 0

**Benefit:** 20,210

### Geriatric Lunch Time Learning

**Description:** One hour educational lectures on various topics in geriatric medicine.

**Category:** B1

**Gender:** Both Males and Females

**Department:** 25768 (Continuing Education)

**Department Contact:** Jay Ripley (8-9964)

**Objectives:** To provide professional education to the medical community on geriatric topics and issues.

**Persons:** 296

**Expenses:** 11,850

**Revenues:** 0

**Benefit:** 11,850

### Physician Guest Lecture Program

**Description:** Professional education lectures for physicians and healthcare professionals covering topics such as Traditional Approaches to Pain Management, Resolving Shoulder Impairments, and the Dilemma of Surgery in Extreme Old Age.

**Category:** B1

**Gender:** Both Males and Females

**Department:** 25768 (Continuing Education)

**Department Contact:** Jay Ripley (8-9964)

**Objectives:** Provide physician education to medical staff and medical students.

**Persons:** 87

**Expenses:** 155

**Revenues:** 0

**Benefit:** 155

### Rural Outreach Physician Education

**Description:** Outreach education provides professional education to physicians and health care providers in outlying areas. In 2015, nine outreach programs were held.

**Category:** B1

**Gender:** Both Males and Females

**Department:** 25768 (Continuing Education)  
**Department Contact:** Jay Ripley (8-9964)  
**Objectives:** To further the education of health care professionals in rural West Virginia.  
**Persons:** 142  
**Expenses:** 11,318  
**Revenues:** 0  
**Benefit:** 11,318

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Physicians/Medical Students (B1)</b>	<b>41,326,400</b>	<b>6,522,203</b>	<b>34,804,197</b>	<b>1,083</b>

## **Nursing/Nursing Students (B2)**

### **CAMC Nursing Education**

**Description:** CAMC provides a clinical setting and staff instruction/supervision for CRNA, RN and BSN nursing students enrolled in nursing programs who have affiliation agreements with CAMC.  
**Category:** B2  
**Gender:** Both Males and Females  
**Department:** 46872 (Planning)  
**Department Contact:** David Jarrett (8-7854)  
**Objectives:** To provide clinical experiences for students.  
**Persons:** 148  
**Expenses:** 2,155,208  
**Revenues:** 0  
**Benefit:** 2,155,208

### **Future of Nursing WV**

**Description:** A coalition of statewide and national providers that addresses the 2010 Institute of Medicine's recommendations for the future of nursing. The recommendations suggest new ways for nurses to practice and enhance access to care. The directives contained in The Future of Nursing: Leading Change, Advancing Health aim for an American health care system that centers on the patient, relies on evidence-based practices, and leads to the improved health of people in all categories and locations. Nurses and nursing leaders are central to that vision.  
**Category:** B2  
**Gender:** Both Males and Females  
**Department:** 46860 (Corporate Nursing)  
**Department Contact:** Ron Moore (8-5486)  
**Objectives:** To work with the statewide committee as it address the 2010 Institute of Medicine's recommendations for the future of nursing.  
**Persons:** Unknown  
**Expenses:** 13,847  
**Revenues:** 0  
**Benefit:** 13,847

### **Nursing Pathways Program**

**Description:** CAMC and WV State Community and Technical College have formed a partnership to provide a two-year nursing program. The Nursing Pathways Program includes three distinct entries to earning a two-year associate degree. 1) mid-year ADN program 2) Paramedic to Registered Nurse Fast Track Program, and 3) Licensed Practical Nurse to Registered Nurse Fast Track Program.  
**Category:** B2  
**Gender:** Both Males and Females  
**Department:** 21926 (Human Resources Workforce Dev)  
**Department Contact:** Debby Schoolcraft (8-3376)  
**Community Need:** Unemployment/Jobs/Poverty  
**Objectives:** To increase the number of registered nurses.  
**Persons:** 117  
**Expenses:** 575,150  
**Revenues:** 340,800  
**Benefit:** 234,350

**West Virginia State Trauma Audit Review****Description:** Annual gathering of trauma professionals from the state's Trauma Centers to conduct peer review discussion of trauma cases from the previous year at each facility.**Category:** B2**Gender:** Both Males and Females**Department:** 41232 (Trauma Services)**Department Contact:** Doug Douglas (8-7809)**Objectives:** Peer review discussions to educate trauma providers and better prepare them for cases that may come through their trauma center.**Persons:** 80**Expenses:** 480**Revenues:** 0**Benefit:** 480**WV State Trauma Symposium****Description:** Conference is designed for trauma surgeons, general surgeons, emergency room physicians, nurses, mid-level providers and prehospital health care, coding specialists and health information professionals. This conference is a collaborative effort between experts in various trauma disciplines around West Virginia. An eight hour trauma nursing workshop is held on the opening day of the conference featuring topics on surgical trauma, pediatric trauma and complications. The speakers present progressive and challenging issues in the field of trauma care. A poster session highlights trauma research throughout the state.**Category:** B2**Gender:** Both Males and Females**Department:** 41232 (Trauma Services)**Department Contact:** Doug Douglas (8-7809)**Objectives:** Facilitate the event and make sure each day of the conference runs smoothly. CAMC provided personnel for registration and support at the event.**Persons:** 125**Expenses:** 960**Revenues:** 0**Benefit:** 960

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Nursing/Nursing Students (B2)</b>	<b>2,745,645</b>	<b>340,800</b>	<b>2,404,845</b>	<b>470</b>

**Allied Health Professional Education (B3)****CAMC Allied Health Professional Education****Description:** CAMC provides a clinical setting and staff instruction/supervision for students enrolled in local allied health professional education programs. CAMC provides the clinical setting and supervision to students for Imaging, Nuclear Medicine, Respiratory Therapy, Physical Therapy and other allied health professionals enrolled in educational programs for which we have an educational affiliation agreement.**Category:** B3**Gender:** Both Males and Females**Department:** 46872 (Planning)**Department Contact:** David Jarrett (8-7854)**Objectives:** To provide a clinical setting for student learning.**Persons:** 361**Expenses:** 484,605**Revenues:** 0**Benefit:** 484,605**Medical Explorers****Description:** A program designed to introduce youth in Kanawha and Putnam counties who are 14 years of age and have completed the 8th grade or are ages 15 to 20 and have designated health care as their health cluster to the health care environment.

**Category:** B3  
**Gender:** Both Males and Females  
**Department:** 21926 (Human Resources Workforce Dev)  
**Department Contact:** Debby Schoolcraft (8-3376)  
**Community Need:** High School Dropout  
**Objectives:** Increase health career awareness by educating middle and high school students about health professions and careers.  
**Persons:** 130  
**Expenses:** 2,757  
**Revenues:** 0  
**Benefit:** 2,757

**Permissive Hypotension in Trauma**

**Description:** Community trauma outreach to area EMS personnel on the benefits of permissive hypotension resuscitation in trauma patients.  
**Category:** B3  
**Gender:** Both Males and Females  
**Department:** 41232 (Trauma Services)  
**Department Contact:** Doug Douglas (8-7809)  
**Objectives:** Better survival outcomes for trauma patients.  
**Persons:** 15  
**Expenses:** 160  
**Revenues:** 0  
**Benefit:** 160

**Physician Assistant Student Rotations**

**Description:** The hospitalist program had 11 physician assistant students from Mountain State University and Alderson Broaddus during a six week rotation in the hospital. CAMC's hospitalists spent 25% of the student's six-week rotation directly instructing/interacting with the students.  
**Category:** B3  
**Gender:** Both Males and Females  
**Department:** 42005 (Hospitalist Program)  
**Department Contact:** (8-5848)  
**Persons:** 11  
**Expenses:** 28,380  
**Revenues:** 0  
**Benefit:** 28,380

**Rural Trauma Team Development Course**

**Description:** The course is designed by the American College of Surgeons Committee on Trauma to help rural hospitals with the development of their trauma teams. CAMC is the tertiary hub hospital for central and southern West Virginia and operates the only Level 1 Trauma Center in the region. The program standardizes care of trauma patients in the rural setting to improve outcomes.  
**Category:** B3  
**Gender:** Both Males and Females  
**Department:** 41232 (Trauma Services)  
**Department Contact:** Doug Douglas (8-7809)  
**Objectives:** The purpose of the course is to increase efficiency of resource utilization and improve the level of care provided to the patient regarding the state's regional, and local trauma system. It outlines components of the various stages of trauma assessment, primary survey, decision to transfer, secondary survey, and demonstrates the concepts of the primary survey.  
**Persons:** 31  
**Expenses:** 720  
**Revenues:** 0  
**Benefit:** 720

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Allied Health Professional Education (B3)</b>	<b>516,622</b>	<b>0</b>	<b>516,622</b>	<b>548</b>

**Scholarships/Funding for Professional Education (B4)**

**University of Charleston Health Program Support**

**Description:** Financial support for faculty for the nursing and pharmacy programs at the University of Charleston.  
**Category:** B4  
**Gender:** Both Males and Females  
**Department:** 21926 (Human Resources Workforce Dev)  
**Department Contact:** Debby Schoolcraft (8-3376)  
**Objectives:** To maintain an adequate number of health professionals in the community to fill existing and future health care profession needs.  
**Persons:** Unknown  
**Expenses:** 285,000  
**Revenues:** 0  
**Benefit:** 285,000

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Scholarships/Funding for Professional Education (B4)</b>	<b>285,000</b>	<b>0</b>	<b>285,000</b>	<b>Unknown</b>

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>**** Health Professions Education (B)</b>	<b>44,873,667</b>	<b>6,863,003</b>	<b>38,010,664</b>	<b>2,101</b>

**Financial and In-Kind Contributions (E)**

**Cash Donations (E1)**

**Civic Affairs Council**

**Description:** The Civic Affairs Council is comprised of employees who review applications for charitable donations and make awards based on specific community benefit criteria. Funding was provided to area high schools for Project Graduation, Daymark, Inc., Salvation Army, WV Health Right, American Lung Association, Girl Scouts, Boy Scouts, REA of Hope, Children's Therapy Clinic, Gazette Charities, Union Mission, The Gabriel Project of WV, National Muscular Dystrophy Association, Ronald McDonald House, Faith in Action of Kanawha Valley, American Cancer Society, Highland Hospital, Pro KIDS, Inc. Habitat for Humanity, Childhood Language Center, Prestera Foundation, and the Summer Food Bank at Cross Lanes United Methodist Church.  
**Category:** E1  
**Gender:** Both Males and Females  
**Department:** 10000 (Civic Affairs)  
**Department Contact:** Tom Kuhn (8-7386)  
**Community Need:** Unemployment/Jobs/Poverty  
**Objectives:** Provide financial support to programs and services in our service area to support health, education, social services, civic and economic development requests.  
**Persons:** Unknown  
**Expenses:** 32,410  
**Revenues:** 0  
**Benefit:** 32,410

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Cash Donations (E1)</b>	<b>32,410</b>	<b>0</b>	<b>32,410</b>	<b>Unknown</b>



## In-Kind Donations (E3)

### Community Board Participation By CAMC Personnel

**Description:** CAMC personnel participated on the following community boards and organizations:

David L. Ramsey, President and CEO, participated on the HealthNet Aeromedical Board of Directors, WV Hospital Association, VHA Central Atlantic Board of Directors, University of Charleston Board of Directors and Vitality Committee, Clay Center for the Arts & Sciences - WV Advisory Board, WV Chamber of Commerce Board of Directors, WV Medical School of Osteopathic Medicine, Health Insight Board, American Hospital Association Regional Policy Board, CAMC Housing Corporation Board, and CAMC Foundation Board.

Glenn Crotty, Jr. M.D., COO, participated as a board member for the Partnership for Excellence, Senior Examiner for the Baldrige Performance Excellence Program, serves on the Regional Board of the American Red Cross, Physician Volunteer for WV Health Right, a board member of the Charleston Area Alliance, and University of Charleston Graduate School of Business Advisory Board.

Robert D. Whitler, Vice President, Government and Community Affairs served on the boards for WV Health Right, WomenCare, Center for Rural Health Development, the WV Board of Osteopathic Medicine, West Virginia Rural Health Association and Logan Healthcare Foundation.

Sharon Hall, President, CAMC Health Education and Research Institute, participated on the governing boards of the WV School of Osteopathic Medicine, WV School of Osteopathic Medicine Executive Committee, WVU Physicians of Charleston, AAMC Group of Resident Affairs Leadership Task Force, ASHP Commission on Credentialing, and Greater Kanawha Valley Foundation.

Brenda Grant, Chief Strategy Officer, participated on the United Way Board as Vice-Chair and Chair of the Governance Committee; Kanawha Coalition for Community Health Improvement Steering Committee, CDC Learning Collaborative for Community Health Improvement, The Partnership for Excellence Examiner Training and Judge, Greater Kanawha Valley Foundation Wealth Creation and Value Chain, Civic Affairs Committee, and NQF Community Health Field Test Group.

Mike Williams, Administrator, General Hospital, participated as Secretary on the State Trauma Advisory Committee and the East End Association.

Andrew Weber, Administrator, Women and Children's Hospital, served as the Vice President of the board for Kids Count and as a board member for the Fund for the Arts.

Beverly Kitchen, RN, Regional Care Coordinator, Right From the Start, participated on the boards and committees of the March of Dimes and Chair of the March of Dimes Program Services, and Upper Kanawha Valley Starting Points, the Newborn Hearing Screening Advisory Board, and Perinatal Partnership Maternal Drug Committee.

Dawn Duffield, Associate Administrator, Women and Children's Hospital, participated on the board of Ronald McDonald House.

Ronald Moore, Chief Nursing Officer participated as a team leader on the Future of Nursing WV Committee of the West Virginia Hospital Association, WVONE Board of Directors, Bridge Valley Nursing Advisory Board and the University of Charleston Advisory Board.

Ken Wilson, Maintenance Director, participated in monthly meetings in Hurricane, WV to review issues pertaining to client rights, grievances to persons under the care of Prestera and ResCare in group homes or other community settings.

Bev Thornton, Education Division Director, participated in the Multidisciplinary Patient Education Council, the Diabetes Education Program Advisory Board and Healthiest Planning Committee.

Jerry Handley, Media Production Specialist, participated in the WV Broadcasting Hall of Fame Program Committee.

Jay Ripley, Lead Education Specialist, participated as a member of the WV State Medical Association's CME Committee.

Tuanya Layton, Imaging Quality Manager, participated as chair of the West Virginia State Medical Imaging Board of Examiners, an executive board member of the Appalachian Association of Nuclear Medicine Technologists, Bridge Valley Community and Technical College Nuclear Medicine Technology Advisory Committee, Southern WV Community & Technical College Advisory Committee, and the University of Charleston Radiological Health Sciences Joint Advisory Committee.

Kim Lowe, Pharm. D., BCNP, participated on the Bridge Valley Community and Technical College Nuclear Medicine Technology Advisory Committee.

Kathy Newsome, Imaging Manager, participated as an executive board member of the Appalachian Association of Nuclear Medicine Technologists and the Bridge Valley Community and Technical College Nuclear Medicine Technology Advisory Committee.

Chuck Menders, Director Respiratory Care, participated on the West Virginia Society for Respiratory Care as a State Delegate, the American Association for Respiratory Care PACT and on the board of the West Virginia COPD Coalition.

Tracy Matthews, Coordinator, participated as President on the West Virginia Board of Respiratory Care, the West Virginia COPD Coalition, and the WV Society for Respiratory Care.

Len Picha, Respiratory Therapist, participated on the board of the West Virginia COPD Coalition and the West Virginia Board of Respiratory Care.

Brad Young, Enterprise Infrastructure Architect, participated on the West Virginia InfraGard Members Alliance, an FBI affiliated not-for-profit organization, for education around the protection of critical health care infrastructure.

Dianna Branham, Nurse Manager, participated on the University of Charleston Advisory Board for the BSN Program and Kanawha Valley Community and Tech Center RN Advisory Board.

Becky Oakley, Nurse Manager, participated on the Metro 911 Board of Directors, West Virginia Office of EMS Technical Services Network Board of Directors, EMSOR (EMS Office of the Region Board of Directors, West Virginia OEMS Medical Command Committee and the HealthNet Aeromedical Services Communication Leadership Team.

Anita Ferguson, Manager Workforce Development, worked with the Workforce Investment Board of Kanawha County.

Lisa Skidmore, Employment Associate, participated on the boards of Garnet Career Center, Boone Career & Technical Center, Bridge Valley Community & Technical College, WV Junior College, Southern WV Community & Technical College and the Ross Medical Education Center.

Jessie Baldwin, Nurse Recruiter, participated on the Community Nursing Program Advisory Committee.

Anne Matics, Education Specialist, participated on the WV Tobacco Coalition.

Glen Martin, Associate Administrator, participated as a Partnership for Excellence examiner.

John Snyder, Nurse Manager, participated as a Partnership for Excellence examiner.

Maricris Miller, Director of Patient Experience, participated as a Baldrige National Quality Award examiner, The Partnership for Excellence judge, and trainer.

Heidi Edwards, Associate Administrator, participated as a Partnership for Excellence (Ohio, Indiana and West Virginia state Baldrige program examiner.

Cynthia Coleman, Critical Care Director, participated as a Partnership for Excellence examiner.

Lisa Songer, Critical Care Director, participated as a Partnership for Excellence examiner.

**Category:** E3  
**Gender:** Both Males and Females  
**Department:** 21900 (CAMC Administration)  
**Department Contact:** David Ramsey (8-7627)  
**Objectives:** To share CAMC's leadership, knowledge and experience in the fields of healthcare, management, and education with community boards and associations to enhance the community.  
**Persons:** Unknown  
**Expenses:** 252,907  
**Revenues:** 0  
**Benefit:** 252,907

**Ronald McDonald House Housekeeping Support**

**Description:** Provide housekeeping services for Ronald McDonald House at no cost.  
**Category:** E3  
**Gender:** Both Males and Females  
**Department:** 41804 (Housekeeping)  
**Department Contact:** Joe Tucker (8-6241)  
**Community Need:** Unemployment/Jobs/Poverty  
**Persons:** Unknown  
**Expenses:** 9,137  
**Revenues:** 0  
**Benefit:** 9,137

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** In-Kind Donations (E3)</b>	<b>262,044</b>	<b>0</b>	<b>262,044</b>	<b>Unknown</b>
<b>**** Financial and In-Kind Contributions</b>	<b>294,454</b>	<b>0</b>	<b>294,454</b>	<b>Unknown</b>

**Community Building Activities (F)  
Economic Development (F2)**

**Local Wealth Creation - Farm to Hospital**

**Description:** Value-Chain food system incorporating local growers to replace imports from the outside economy with herbs and vegetables that can be grown locally for the same or lower cost with the same or higher quality.  
**Category:** F2  
**Gender:** Both Males and Females  
**Department:** 1 (Dietary Services)  
**Department Contact:** Mike Marinaro (8-6551)  
**Community Need:** Unemployment/Jobs/Poverty  
**Objectives:** To decrease sodium and fat in foods prepared in CAMC hospitals through the use of fresh herbs and vegetables. To open new avenues for existing and new growers with a guaranteed market for their produce.  
**Persons:** Unknown  
**Expenses:** 1,564  
**Revenues:** 0  
**Benefit:** 1,564



	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Economic Development (F2)</b>	<b>1,564</b>	<b>0</b>	<b>1,564</b>	<b>Unknown</b>

## Community Support (F3)

### Partners In Health Network

**Description:** The network serves to improve the delivery of health care in the region by providing a network administrative center, physician liaison, patient surveys, outreach activities, networking, credentialing, purchasing program, critical access hospital support, educational activities, workshops and presentations designed for small rural hospitals and health clinics in the region.

**Category:** F3

**Gender:** Both Males and Females

**Department:** 46876 (Partners In Health)

**Department Contact:** Tom Kuhn (8-7386)

**Objectives:** Assist small rural hospitals and health clinics to remain viable.

**Persons:** Unknown

**Expenses:** 101,500

**Revenues:** 0

**Benefit:** 101,500

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
*** Community Support (F3)	<b>101,500</b>	<b>0</b>	<b>101,500</b>	<b>Unknown</b>

## Environmental Improvements (F4)

### United Way Day of Caring

**Description:** CAMC employees participate in the United Way's Day of Caring and completed community service projects at the Salvation Army Boys and Girls Club and the Pro Kids after school program.

**Category:** F4

**Gender:** Both Males and Females

**Department:** 46872 (Planning)

**Department Contact:** David Jarrett (8-7854)

**Community Need:** Unemployment/Jobs/Poverty

**Persons:** Unknown

**Expenses:** 5,520

**Revenues:** 0

**Benefit:** 5,520



	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
*** Environmental Improvements (F4)	<b>5,520</b>	<b>0</b>	<b>5,520</b>	<b>200</b>

## Workforce Development (F8)

### Health Career Awareness Days at CAMC

**Description:** Summer and fall presentations and tours by healthcare providers at CAMC hospitals for area high school students, instructors, and Charleston Alliance Leaders to educate instructors and area youth about healthcare careers available to them.

**Category:** F8

**Gender:** Both Males and Females

**Department:** 21926 (Human Resources Workforce Dev)

**Department Contact:** Debby Schoolcraft (8-3376)

**Community Need:** High School Dropout

**Persons:** 90

**Expenses:** 4,818

**Revenues:** 0

**Benefit:** 4,818

### Workforce Innovation and Opportunities Act

**Description:** Working with the Local Elected Board of Kanawha County to consolidate, coordinate and improve workforce investment programs pursuant to the provisions of the Workforce Innovation and

Opportunity Act of 2014.  
**Category:** F8  
**Gender:** Both Males and Females  
**Department:** 21926 (Human Resources Workforce Dev)  
**Department Contact:** Debby Schoolcraft (8-3376)  
**Community Need:** Unemployment/Jobs/Poverty  
**Objectives:** Increase the business community's involvement in the workforce investment programs and address workforce investment needs of job seekers, workers and businesses within the Kanawha County workforce investment area represented by the Local Elected Board.  
**Persons:** Unknown  
**Expenses:** 1,271  
**Revenues:** 0  
**Benefit:** 1,271

	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Workforce Development (F8)</b>	<b>6,089</b>	<b>0</b>	<b>6,089</b>	<b>90</b>

## Other – Health Fair (F9)

### Healthfest

**Description:** Health Fair offering over 25 screenings and health information to the public as well as free athletic physicals for area youth.  
**Category:** F9  
**Gender:** Both Males and Females  
**Department:** 21942 (Marketing)  
**Department Contact:** Elizabeth Pellegrin (8-5757)  
**Community Need:** Unemployment/Jobs/Poverty  
**Objectives:** To serve the Kanawha Valley with free screenings to improve health, enhance preventive care and provide educational materials.  
**Persons:** 1,600  
**Expenses:** 131,203  
**Revenues:** 38,540  
**Benefit:** 92,663



### Teddy Bear Fair

**Description:** Children's Health Fair.  
**Category:** F9  
**Gender:** Both Males and Females  
**Department:** 43120 (Pediatrics)  
**Department Contact:** Susan Russel (8-2885)  
**Community Need:** Unemployment, Jobs, Poverty  
**Objectives:** Allow children to visit the hospital in a non-threatening way, complete with playing with medical equipment and trying on surgical masks. They receive tours of the hospital, play games, receive car seat education, and health education materials.  
**Partners:** Carelink/CAMC Foundation and Kohl's  
**Persons:** 633  
**Expenses:** 20,316  
**Revenues:** 13,122  
**Benefit:** 7,194

<b>*** Other – Health Fair (F9)</b>	<b>Expenses</b> <b>151,519</b>	<b>Offsets</b> <b>51,662</b>	<b>Benefit</b> <b>99,857</b>	<b>Persons</b> <b>2,233</b>
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<b>**** Community Building Activities</b>	<b>266,192</b>	<b>51,662</b>	<b>214,530</b>	<b>2,433</b>
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**Community Benefit Operations (G)  
Dedicated Staff (G1)**

**Community Benefit Operations**

**Description:** Planning Department staff dedicated to Community Benefit reporting.  
**Category:** G1  
**Gender:** Both Males and Females  
**Department:** 46872 (Planning)  
**Department Contact:** David Jarrett (8-7854)  
**Objectives:** To compile and report the organization's community benefit by surveying the individual departments, administrators, and other staff at our three hospitals and compiling the community benefit report.  
**Persons:** Unknown  
**Expenses:** 23,703  
**Revenues:** 0  
**Benefit:** 23,703

**Kanawha Coalition for Community Health Improvement**

**Description:** A community partnership of volunteers from all the local hospitals, Kanawha-Charleston Health Department, United Way, Kanawha County Schools, Wellness Council of WV, and local businesses with a mission to identify and evaluate health risks and coordinate resources to measurably improve the health of the people of Kanawha County.  
**Category:** G1  
**Gender:** Both Males and Females  
**Department:** 46832 (Community Health)  
**Department Contact:** Judy Crabtree (8-7557)  
**Objectives:** Mobilize community groups to address the community focus areas of obesity, lack of physical activity and tobacco use.  
**Persons:** Unknown  
**Expenses:** 83,190  
**Revenues:** 0  
**Benefit:** 83,190



	<b>Expenses</b>	<b>Offsets</b>	<b>Benefit</b>	<b>Persons</b>
<b>*** Dedicated Staff (G1)</b>	<b>106,893</b>	<b>0</b>	<b>106,893</b>	<b>0</b>
<b>**** Community Benefit Operations</b>	<b>106,893</b>	<b>0</b>	<b>106,893</b>	<b>0</b>
<b>Totals:</b>	<b>Expenses 47,674,646</b>	<b>Offsets 7,207,879</b>	<b>Benefit 40,466,767</b>	<b>Persons 51,191</b>

**Number of Programs: 72**  
**Persons: 51,191**  
**Expenses: 47,674,646**  
**Revenues: 7,207,879**  
**Benefit: 40,466,767**