







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



The Community Benefit Report is made available to the public via the CAMC Health System website at www.camc.org and is available upon request from the hospital facility.

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

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

Table of Contents

Executive Summary	2
Community Benefit Summary	3
2016 Implementation Strategy Report	4
Kanawha Coalition for Community Health Improvement Progress Report Workgroup Accomplishments for 2016	5
Charleston Area Medical Center Community Needs Planning	17
2014 - 2016 CAMC Community Benefit Plan and 2016 Progress on Implementation Strategies	20
CAMC Joint Implementation Strategies	
Reduce Over-Utilization of the Emergency Room	20
Provide Physician Drug Diversion Training	23
Provide Medical Homes/Neighborhood	24
Provide Access to Specialty Health Care for the Service Area Through Medical Staff Recruitm	ent 25
Provide HIV Primary Care and Decrease New HIV Infections	
Build the Base of Local Growers Providing Fresh Herbs, Fruits and	
Vegetables to CAMC	28
CAMC General Hospital	
Support Reduction of Obesity through Provision of a Bariatric Surgery Program	30
CAMC Memorial Hospital	
Grow the Cancer Patient Navigation and Survivorship Program	31
CAMC Women and Children's Hospital	
Reduce Childhood Obesity, Treat Co-Morbidities and Prevent DiabetesPrevent Childhood Obesity	
Improve Access to Mental Health Services for Vulnerable Pediatric and Adolescent Populatio	ns 35
Provide Tobacco Cessation to Pregnant Women	37
Appendix	
Additional 2016 Community Benefit Programs	39

Charleston Area Medical Center

CAMC General Hospital, CAMC Memorial Hospital and CAMC Women and Children's Hospital Charleston, West Virginia

2016 Community Benefit 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 2016, Charleston Area Medical Center provided \$164,624,727 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







2016 COMMUNITY BENEFIT SUMMARY for CAMC MEMORIAL, CAMC GENERAL, CAMC WOMEN and CHILDREN'S, and CAMC TEAYS VALLEY HOSPITALS*

FINANCIAL ASSISTANCE AT COST (FORMERLY CHARITY CARE)

\$18,895,221

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. Financial Assistance is reported in terms of costs, not charges. Financial Assistance does not include: (1) bad debt, (2) prompt pay or self-pay discounts, (3) information reported elsewhere, such as losses form means-tested programs, or (4) contractual allowances.

MEDICAID AND OTHER MEANS-TESTED GOVERNMENT PROGRAMS

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

\$105,525,763

Other Public Unreimbursed Costs

\$651.040

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

SUBSIDIZED HEALTH SERVICES

\$1,172,182

Clinical services that are provided because of a community need despite a financial loss to the organization. The financial loss is measured after removing losses, measured by cost, associated with bad debt, charity care/financial assistance, Medicaid and other means-tested government programs. Subsidized health services at CAMC include Family Resource Center support at \$317,957, the Lactation Support Program at \$200,196 and the Palliative Care Program at \$654,029.

COMMUNITY HEALTH IMPROVEMENT PROGRAMS

\$38.380.521

(CAMC Memorial, CAMC General, CAMC Women and Children's and CAMC Teays Valley Hospitals)

Activities or programs carried out or supported for the express purpose of improving community health that are subsidized by the health care organization. Such services do not generate inpatient or outpatient bills, although there may be nominal patient fee or sliding scale for these programs.

See details beginning on page 39 of this report and on page 10 of the CAMC Teays Valley 2016 Community Benefit Report.

	CAMC Memorial, General and WCH	CAMC Teays	Total
Community Health Improvement Services	2,132,478	103,849	2,236,327
Health Professions Education **	35,283,371	0	35,283,371
Cash and In-Kind Contributions	380,068	49,042	429,110
Community Building Activities	282,504	31,568	314,072
Community Benefit Operations	114,316	3,325	117,641

TOTAL

\$164,624,727

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

\$143,786,276

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

BAD DEBT AT CHARGE

\$30.595.784

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

NOTE: Financial Assistance, 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 for Financial Assistance at Cost, Medicaid and Other Means-Tested Government Programs and Subsidized Health Services. CAMC Teays Valley Hospital Community Health Improvement Program totals are included in the numbers above as noted

^{**}Includes offset for Medicaid Reimbursement for Direct GME of \$434,962 to benefit reported on page 58 of this report.

Charleston Area Medical Center Charleston, West Virginia

CAMC General Hospital, CAMC Memorial Hospital and CAMC Women and Children's Hospital

2016 Community Benefit and Implementation Strategy Report

The Kanawha Coalition for Community Health Improvement was founded in 1994 by Charleston Area Medical Center and other Kanawha County hospitals working in partnership with 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. The Implementation Strategies in this report are based on the 2014 Community Health Needs Assessment. The community forum prioritizes the top health issues and the Kanawha Coalition forms work groups to address the top three issues. CAMC supports the work of these groups but also addresses the remaining health issues through a systematic process described on page 18.

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.



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.

KANAWHA COALITION FOR COMMUNITY HEALTH IMPROVEMENT PROGRESS REPORT WORKGROUP ACCOMPLISHMENTS FOR 2016

WORKGROUPS 1 and 2

Kanawha Coalition for Community Health Improvement Joint Worksite Strategy Team –2016

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

Capital Resource Agency Corporation

Charleston Area Alliance Wellness Council of WV

Charleston Area Medical Center West Virginia Bureau for Public Health
City of Charleston, Parks and Recreation West Virginia School-based Health Assembly

Highland Hospital West Virginia State University

Kanawha County Schools West Virginia University Extension
Kanawha Valley Senior Services West Virginia University Health Science Center

Kanawha-Charleston Health Department WV Power Baseball

RESA 3

2016 Goal: Decrease the percentage of adults over the age of 18 with inadequate fruit and vegetable

consumption from 80% to 75%.

2016 Objectives:

- 1. Evaluate success of *Healthy Choices at Work* program and develop a plan to sustain the program beyond KCCHI workgroup involvement. (By December 2016)
- 2. Evaluate success of *Take the Stairs!* Campaign and develop a plan to sustain the initiative beyond KCCHI workgroup involvement. (By December 2016)

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

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) Output/ Measure Implementation Strategy Progress (through December 2016) Action Plan Development of a *Healthy Choices At Work* worksite Work plan **Completed: September 2014** challenge program, measures of improvements, • Finalized Healthy Choices at Work Challenge survey and scoring recognition and associated awards. Pre and post surveys process. • Reviewed and finalized recruitment materials. Scoring process • Began recruitment of small businesses (50 employees or less). **Completed: October 2014** • Pre-tested *Healthy Choices at Work* small worksite challenge preand post-survey. • Presented KCCHI's Healthy Choices at Work Online Guide at the 2014 Mid-Atlantic Conference on Worksite Wellness. Recruitment of 10 small businesses. 10 participating Completed: May 2015 companies • Identified list of 14 businesses as potential pilot sites • Successfully recruited 8 businesses to participate in pilot Coalition workgroup members review resources and tools 10 coaches trained available for worksites in the *Healthy Choices at Work* Completed: December 2014 resource guide and toolkit. Coalition workgroup assigns individual members to serve 10 companies assigned Completed: May 2015 as coaches to recruited worksites. coaches 8 volunteer coaches assigned (one company each) Coaches meet with worksite leadership to complete pre-Pre-surveys completed **Completed: May 2015** survey and review toolkit recommendations. Coaches met with 8 pilot sites and assisted in completion of presurveys Coaches meet with worksite leadership to assist in goal Worksite goals **Completed July 2015** setting based on pre-survey results. Worksite implements plan and measures progress towards Policies and goals. Coaches provide technical assistance as needed. environmental changes Completed: June - November 2015 Coaches meet with worksite leadership to complete post Post surveys completed Completed: November 28, 2015 survey.

Final scores	Completed: November 28, 2015
	Top three companies with improvements in their scores were
	identified. Total possible score was 1,000 points.
	1 st Place: Pre-Score 428.92 Post-Score 631.46 Improvement: 184.54
	2 nd Place: Pre-Score 471.00 Post-Score 650.18 Improvement: 179.18
	3 rd Place: Pre-Score 358.05 Post-Score 509.84 Improvement: 151.79
Awards and recognition	Completed: December 2015
event	Held Recognition Breakfast December 11, 2015
Media coverage	Prizes awarded to top performing companies
	Shared by Social Media
	Awards and recognition event

Year Two; Objective 1: Evaluate *Healthy Choices at Work* program and develop a plan to sustain the program beyond KCCHI workgroup involvement. (By December 2016)

Action Plan	Output/ Measure	Implementation Strategy Progress (through December 2016)
Evaluate pilot project: conduct exit interviews with pilot sites	Completed exit interviews and surveys	 Completed: April 2016 Evaluation Results: Helped participating businesses identify areas for improvement around healthy eating and physical activity Gave businesses a "coach" to help guide/encourage them in their efforts Resulted in changes that would not have occurred without the project Little funding required Project should be continued
Develop sustainability plan: Find new home agency/partner to carry on the work of Healthy Choices at Work Support the startup of new agency initiative	Program start-up under new agency	 Completed: December 2016 WV Bureau for Public Health, Division of Health Promotion and Chronic Disease instituted <i>Well at Work</i> program, incorporating KCCHI best practices KCCHI agreed to award scholarships for 8 companies to attend the session on Worksite Wellness at the Try This Conference in 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.

Action Plan	Output/ Measure	Implementation Strategy Progress (through December 2016)
Development of stair usage campaign, including branding, media messages, signage, and implementation and evaluation strategies.	Work plan Evaluation plan	 Completed: September 2014 Met with University of Charleston's Senior Nursing Class to recruit students to assist with campaign, September 2, 2014.
Media buys and production of media components. Kick-off event, signage placement.	Media buys/ production Kick-off event Signage placement	 Completed: March 2015 Contracted with WV Radio Corporation, produced 30: second spots to recruit companies to participate in stairwell usage campaign WV Metro News ran story on the Campaign. Kicked Off Campaign with <i>Take the Stairs</i> Kanawha County Facebook Page. Signs developed by University Nursing students were provided to participating companies in downloadable format and printed and posted at their worksites.
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	 Completed: April 2015 The campaign reached over 7,400 employees at 16 worksites. Media coverage of check presentation to Highland Hospital who won the drawing among all participating companies. (Completed May 7, 2015)

Action Plan	Output/ Measure	Implementation Strategy Progress (through December 2016)
Develop sustainability plan: Find new home agency/partner to carry on Stairway Campaign. Support the startup of new agency initiative	Program start-up under new agency	 Completed: December 2016 WV Bureau for Public Health, Division of Health Promotion and Chronic Disease instituted <i>Well at Work</i> program, incorporating KCCHI best practices KCCHI agreed to award scholarships for 8 companies to attend the session on Worksite Wellness at the Try This Conference in 2017
Year Two, Objective 3: Conduct Every Body Walk! Campaign by June	e 2016	
Year Two, Objective 3: Conduct <i>Every Body Walk!</i> Campaign by June Action Plan	e 2016 Output/ Measure	Implementation Strategy Progress (through December 2016)
Action Plan Develop Every Body Walk materials (flyers, power point, social narketing, action planning document) Recruit business/organizational participants and hold kick-off event in collaboration with American Heart Association, Kanawha-Charleston Health Department, Wellness Council, City of Charleston,	Output/ Measure Promotion and	(through December 2016)
Action Plan Develop Every Body Walk materials (flyers, power point, social narketing, action planning document) Recruit business/organizational participants and hold kick-off event n collaboration with American Heart Association, Kanawha-	Output/ Measure Promotion and Recruitment materials	(through December 2016) Completed May 2016

Collect completed action plans from participants	Completed action plans	Completed May 24, 2016
	by participant	Organizations completing entire program with action
	organizations	plans to carry on their walking efforts:
		Blessed Sacrament Church
		United Way
		WVU Extension
		 WV Division of Rehabilitation Services
		The Greater Kanawha Valley Foundation
W. 11.1		WV Equal Employment Opportunity Office
Hold drawing for three \$125 awards towards completed action plans	A records massants d	
	Awards presented	Winning participants were:
		Blessed Sacrament
		United Way
		The Greater Kanawha Valley Foundation

Workgroup #3 Kanawha Coalition for Community Health Improvement Drug Abuse Workgroup

Drug Abuse Workgroup Members

Cabin Creek Health System

National Association of Social Workers, WV

Charleston Area Alliance Chapter

Charleston Area Medical Center Prestera Center

Charleston Police Department RESA 3

First Choice Services (WV Rx Abuse Quitline)

Saint Francis Hospital

Highland Hospital University of Charleston School of Pharmacy

Kanawha Communities That Care West Virginia Coalition Against Domestic

Kanawha County Library System Violence

Kanawha County Schools West Virginia School-Based Health Assembly Kanawha Valley Senior Services West Virginia State University Extension

Kanawha-Charleston Health Department West Virginia University Extension

Goals:

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.

2016 Objectives:

- 1. Expand *Too Good For Drugs and Violence* training for youth at four additional sites. (By December 2016)
- 2. Partner with Kanawha Communities That Care to implement environmental strategies to collect unused/expired medications from community members. (By December 2016)
- 3. Expand Community Outreach and Education by holding 4 additional Community-based Substance Abuse Prevention Meetings. (By December 2016)
- 4. Advocate for legislation that will reduce the number of meth labs in West Virginia. (By March 2016)

GOAL 1: Decrease drug abuse among Kanawha County youth by increasing their resiliency during early childhood.

Year One, Objective 1: Expand <i>Too Good For Drugs and Violence</i> training for youth at four additional community-based sites. (By December 2015)		
Action Plan	Output/ Measure	Implementation Strategy Progress (Updated through December 2016)
Plan, promote and conduct <i>Too Good For Drugs and Violence</i> training for youth service organizations.	# attending training Post survey results	Completed: April 2014 Held TGFD training with 15 in attendance, representative of 7 youth service organizations/schools.
Recruit 4 additional community-based sites to conduct <i>Too Good For Drugs</i> training.	Memorandum of Understanding with sites Pre and post youth survey results # of children impacted	Completed December 2015: Five community-based <i>Too Good For Drugs</i> 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.
Year Two, Objective 1: Expand <i>Too Good For Drugs and Violence</i> training for youth at four additional sites. (By December 2016)		
Action Plan Output/ Measure Implementation Strategy Progress (Updated through December 2016)		
Recruit 4 additional community-based sites to conduct <i>Too Good For Drugs</i> training.	Memorandum of Understanding with sites Pre and post youth survey results # of children impacted	Completed December 2016: <i>Too Good For Drugs</i> implemented at Belle Elementary, Pinch Elementary, Dupont Middle Schools (all 5 th grade students), and Switzer Center After-School Program. Reached 300 students.

GOAL 2: Decrease drug abuse in Kanawha County through evidence-based strategies.

	Year Two, Objective 1: Partner with Kanawha Communities That Care to implement environmental strategies to collect unused/expired medications from community members. (By December 2016)			
Action Plan	Output/ Measure	Implementation Strategy Progress (Updated through December 2016)		
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	 July 2014 Held a strategic planning session July 16th. August 2014 Held second strategic planning session August 27th. Selected strategies to limit access to unused/expired prescription medication: Placement of additional permanent Rx drop boxes in the county Public education about proper disposal of Rx medications 		
Develop an implementation plan for both strategies.	Implementation plans	Completed: April 2015		
Implement plan, with periodic assessments for any needed revisions.	Strategies implemented	 Completed: December 2015 Purchased newspaper advertisement of permanent drop box locations (September 2015 and November 2015) Partnered with Kanawha Communities That Care for 4 memorandum of understandings with law enforcement detachments for the purchase of 4 new permanent Rx drop boxes. (Nitro, South Charleston, Dunbar, and Marmet) 		
Evaluate and measure results. Prepare final report.	Evaluations completed Final report	December 2015: 1,200 pounds of unused/expired medications were collected in Kanawha County in 2015.		

Year Two, Objective 1: Partner with Kanawha Communities That Care to implement environmental strategies to collect unused/expired medications from community members. (By December 2016)			
Action Plan	Output/ Measure	Implementation Strategy Progress (Updated through December 2016)	
Continue implementing plan to collect unused/expired medications.	Strategies implemented	 Completed: December 2016 Kanawha County now has 7 permanent Rx drop boxes. Partnered with law enforcement during bi-annual National Rx Take-Back Days. Partnered with Kanawha Communities That Care in conversations with local pharmacy chain to explore permanent drop box at one of its pharmacy locations. Partnered with Kanawha Communities That Care to disseminate over 500 Rx disposal pouches provided through U.S. Senator Joe Manchin's Office. December 2016: 1,600 pounds of unused/expired medications collected in Kanawha County 	

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.			
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	Completed 2015: 3 additional Parent Rx360 meetings Total Attendance: 141 parents and guardians	

Year Two, Objective 2: Expand Community Outreach and Education by holding 4 additional Community-based Substance Abuse Prevention Meetings. (By December 2016)

Action Plan	Output/ Measure	Implementation Strategy Progress
Plan and promote community-based meetings/forums to educate residents about prescription drug abuse and heroin addiction and how to keep medications safe, recognize signs of abuse, and available local resources/services.	# forum attendees	 Completed December 2016: 5 additional community-based meetings Total Attendance: 142 residents Partnered with Kanawha Communities That Care and local law enforcement to conduct 3 meetings at Charleston Housing Authority sites on ways to "safeguard medications". Over 100 medication lock boxes were distributed. Held Community Meeting on Heroin and Rx Painkiller Abuse at Marmet, WV. (May 2016) Held a Parent Rx Meeting at South Park Village. (September 2016) Served on WV Council of Churches Substance Abuse Steering Committee to plan and implement community "Listening Sessions" to learn how the faith community could help better address the substance abuse problem in communities. 9 Sessions were held in Kanawha County. (Fall 2016) Facilitated conversation with University of Charleston and Kanawha County Schools to pilot the Generation Rx Program in 6 elementary schools. 80 UC Pharmacy Students received training to deliver program to 5th grade students.

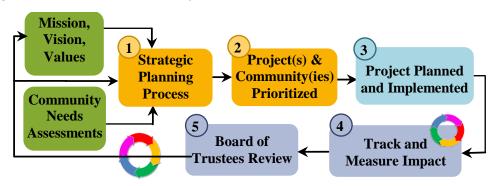
GOAL 4: Decrease the number of meth labs in West Virginia.

Year Two, Objective 1: Advocate for legislation that will reduce the number of meth labs in West Virginia. (By March 2016)			
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	 May through August 2015 Held 3 Stop Meth Labs Team meetings/conference calls Revised Policy Recommendation and One Pager for policy makers Developed session agenda for Our Children Our Future Policy Symposium. September 2015 Presented policy issue at September 14, 2015 Policy Symposium. 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) Revised Meth Lab Progression Map (with projection through 2015) One television news story and two newspaper article covered pharmacy recognition event and Stop Meth Labs policy recommendation October - November 2015 Scheduled policy team members to present on Stop Meth Labs policy at statewide Our Children, Our Future Community and Candidate Forums. (5 Forums) 	
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	March 2016 - Bill was not introduced during 2016 Legislative Session	

CHARLESTON AREA MEDICAL CENTER COMMUNITY NEEDS PLANNING

Charleston Area Medical Center is licensed for 886 beds on three of its four campuses: General Hospital (268 beds), Memorial Hospital (472 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, 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	 KCCHI Workgroup participation Keys for Healthy Kids 5-2-1-0 Program Bariatric Surgery Center of Excellence Medical Weight Loss Program
2	Drugs/ Prescription and Illicit			x	33.265	 KCCHI Workgroup participation Drug Addicted Mother/Baby Program Contribution to Rea of Hope Fellowship Home Project Graduation funding support for each Kanawha County High School
3	Lack of Physical Activity	x	X	x	32.853	 KCCHI Workgroup Think First for Kids ATV and Bicycle Safety Bicycle Safety Challenged Sports Program Heart Fit Teddy Bear Fair Mall Walkers Program
4	Heart Disease/ High Blood Pressure (Also identified in our Primary Service Area)	x	x		31.618	 Basic Life Support Training Ornish Program
5	Tobacco Use/ Second Hand Smoke Exposure	x	x	х	31.206	Smoke free campus

7	Unemployment Jobs/ Poverty (Children Living in Poverty also identified in our Secondary Service Area)	X	X	X	28.838	 CAMC is the third largest non-government employer in WV Charity care and bad debt Civic Affairs contributions to Union Mission, Salvation Army, Charleston Daily Mail's Neediest Cases, Gabriel Project, Daymark, Habitat for Humanity, Children's Therapy Clinic, WV Health Right, Faith in Action, United Way of Central WV, Dreams Community Development Corporation Nursing Pathways Program United Way Day of Caring Health Occupations Students of America Ronald McDonald House Housekeeping Local Wealth Creation Enrollment Assistance for Patients for Health Care Coverage HealthFest Outpatient Mental Health Services Partners in Health Network Teddy Bear Fair WV HealthRight support Charity Care Patient Nourishment Program Contribution to Read Aloud WV
8	Cancer (Lung Cancer also identified in our Secondary Service Area)	x	x	x	28.765	 Relay for Life Breast Cancer Awareness Activities Look Good/Feel Better Civic Affairs contribution to the American Cancer Society State and national Tumor Registries Cancer Patient Support Group Breast Cancer Survivorship Group Run for Your Life Healthy Steps Exercise Program
9	Lung Disease/ Asthma/ COPD	х			28.750	Asthma Awareness activities ALA Bike Trek and Great Smoke Out

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

	NEED NOT ADDRESSED	RANKING SCORE	REASON NOT ADDRESSED
6	High School Drop-Out (Also identified in our Primary Service Area)	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 2016 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	Charleston Area Children's Hospi		ter General, Memorial	, Women a	nd
COMMUNITY HEALTH NEED	Preventable Hospitalizations, PCP Ratio				
IDENTIFIED HEALTH ISSUE	Over-Utilization	Over-Utilization of the Emergency Room			
COMMUNITY SERVED	Kanawha, Raleig	Kanawha, Raleigh, Jackson, Fayette, Roane, Putnam Counties			
PROGRAM DESCRIPTION AND RATIONALE	Charleston Area Maye initiated the Virginia (HELP Witelehealth equipm of West Virginia, the Asignificant numbers symptoms escalated To address these Virginians in two constitutions.) Better health in heart disease, or our seniors have illnesses.	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 th 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: • Better health in general, leading to the prevention of the high incidence of heart disease, obesity, diabetes, and other common diseases • Effective, economical management of healthcare for the abundance of our seniors having persistent or critical, often long-term to end-of-life illnesses			
	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 Ansted, WV 25812	Fayette	1,404

			C- 141- Cl D-1		
	Hilltop Center	End-User	Saddle Shop Rd. Oak Hill, WV 25901	Fayette	7,730
	Hidden Valley		438 23rd St	.,	,
	Center	End-User	0ak Hill, WV 25901	Fayette	7,730
	Miles C. A	F 111	825 Summit St	D	2 222
	Miletree Center	End-User	Spencer, WV 25276 501 Caldwell Dr	Roane	2,322
	Dunbar Center	End-User	Dunbar, WV 25064	Kanawha	7,907
	Cedar Ridge	Ena osci	300 Cedar Ridge Rd.	Turiuwiiu	7,507
	Center	End-User	Sissonville, WV 25320	Kanawha	4,028
			1 Sutphin Drive		
	Marmet Center	End-User	Marmet, WV 25315	Kanawha	1,503
	Teays Valley Center	End-User	590 N Poplar Fork Rd Hurricane, WV 25526	Putnam	6,284
	Center	Enu-osei	300 Seville Rd	rutiiaiii	0,204
	Putnam Center	End-User	Hurricane, WV 25526	Putnam	6,284
STRATEGIC OBJECTIVE	REDUCE OVER	RUTILIZATI	ON OF THE EMERG	ENCY RO	OM
00410704000500715	4 Decide cont		-101- #- f (1		
GOALS TO ADDRESS THE HEALTH NEED			ealth "after-hours" – whe		
HEALITINGED	status" of a pa		for an admission or if the	icic is a Cl	ialiye III
			m at a Genesis site for f	ollow-up ca	re for
			had a procedure – need		
	psychiatric co				,
MEASURE TO EVALUATE THE	Expected outcom				
IMPACT	 Immediate ac 	cess via tele-	health to a terminal pati	ient's care p	oreferences
			n delivering life-sustaini		
	immediately r	especting one	e's preference.		
			ls will have efficient, cor		
			nnology, saving \$1.055		
	meals, and lodging each year (115 physicians * \$800/yr) + (438 mid-level providers * \$250/year) * 3 years). Our HELP WV program for RUS DLT consists of one hub site and 11				38 mid-
			Fayette, Jackson, Kanav	wna, Putnar	n, Raleign
	and Roane co			م طفام م ما در م	
			ntable and non-emerge nt flyers, will be reduced		
			equent flyers being educed		
			eos, which are on-topic		
			aiting room or during th		
			the reduction to be 20%		
	and 65% by t	he end of the	third year.	•	·
			nt flyer visits will translat		
			\$740,000 billed to Medic		
			o approximately \$260,0		
			00 in unpaid care, the a		
			lized in proportion to the	e tirst, secoi	na and
	third-year est			wookly oom	vorantions
			eniors will participate in value in val		
			s treatment and mainter		
			pointments with the PCF		
			are referenced, update		
			leads to prevention of re		
	minutes per p	hone call to 4	I patients a day (per site	e, average o	of 11 end-
	user sites) is	expected to g	enerate a payoff in prev	vention. Sec	condary
	to physicians minutes per p	This activity hone call to 4	leads to prevention of re patients a day (per site	eadmission e, average o	s. Three of 11 end-

TIMELINE	 calls to a PCP or pharmacy will also be included if necessary. 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. 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. 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). 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).
RESOURCES	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. RUS grant can only be expended on equipment for rural sites; Benedum Grant Award of \$150,000 requested for training/coordination.
PARTNERS/COLLABORATORS	CAMC Health Education and Research Institute, Inc., [CHERI] and Genesis HealthCare (GHC) 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.
2016 Progress Report	Genesis Healthcare was unable to continue as the partnering organization for this project. CHERI requested a change in partner through the USDA, but the request was denied. CHERI has informed the USDA that due to the withdrawal of Genesis and denial of change of partner request we were rescinding our acceptance of the award. A new grant application was just released by the USDA and we plan to resubmit this project with the new partner organization, Stonerise Healthcare, for funding consideration.

#2	Charleston Area Medical Center General, Memorial, Women and
COMMUNITY HEALTH NEED	Children's Hospitals
	Drugs/ Prescription and Illicit
IDENTIFIED HEALTH ISSUE COMMUNITY SERVED	Prescription Drug Abuse
	The state of West Virginia and border states
PROGRAM DESCRIPTION AND RATIONALE	Physician Drug Diversion Training - 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 Best Practice Prescribing of Controlled Substances and Drug Diversion Training. 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	PROVIDE PHYSICIAN DRUG DIVERSION TRAINING
MEASURE TO EVALUATE THE	 Provide the Physician Drug Diversion Training. Meet the following compliance requirements under West Virginia's controlled substances laws and regulations: Follow the steps necessary to register, log-on and use West Virginia's controlled substance monitoring program. Recognize the epidemiology of chronic pain and distinguish the proper use and misuse of opiods through patient evaluations and risk assessment tools. Follow the proper protocol when using opiods in the treatment of chronic pain including an understanding of toxicities and drug interactions. Discuss West Virginia statistics on prescription drug diversion and abuse. Identify drug seeking tactics and behaviors and understand the 'best practice' methods to work with patients suspected of inappropriate behavior. Follow case studies of an evidence-based protocol for starting patients on opiod analgesic therapy, including issues specific to safely initiating and titrating opiods including treatment objectives, monitoring, referral, informed consent, agreements, urine screens, pill counts, patient education, and medical record documentation. CME course evaluation and participant post test scores
IMPACT	Civil 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
2016 Progress Report	Total Participants in 2016: 151 (includes Physicians and mid- level providers) Note: This 3 year Program was active July 3, 2013 – July 31, 2016. Participant evaluation average: 4.4 (Likert Scale 1-5) Participants post-test passing score: 80%

#3	Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children's Hospital
COMMUNITY HEALTH NEED	PCP Ratio, Preventable Hospitalizations, Heart Disease, Poor Physical Health
IDENTIFIED HEALTH ISSUE	Coordination of Patient Care Across the Continuum
COMMUNITY SERVED	Patients in the primary and secondary service area
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	PROVIDE MEDICAL HOMES/NEIGHBORHOOD
GOALS	 Achieve NCQA Patient Centered Medical Home (PCMH) Level 2 Recognition in 2014. Increase preventive health screenings of Family Medicine Center (FMC) patients by 25% Increase flu vaccinations for FMC patients by 30%. Spread PCMH-N practice methodology to other facilities. Decrease hospital readmissions through TCM. Decrease unnecessary Emergency Room (ER) use through enhanced patient management and more open access.
MEASURE TO EVALUATE THE	NCQA PCMH Level 2 Recognition
IMPACT	 Measure number and type of preventive health screenings for FMC patients Measure percentage of FMC patients with flu vaccine documented each fall/winter PCMH Level 2 Recognition for CAMC Outpatient Care Center (OPCC) and for two of the Roane General Rural Health Centers Measure hospital readmissions in <30 days for improvement Measure ER Multiple Visit Patient (MVP) reports
TIMELINE	2014 - 2017
RESOURCES	CMMI 3 year project funding; now internal operations funding
PARTNERS/COLLABORATORS	CAMC Physician Group WVU/Charleston Partner hospitals
2016 Progress Report We Celebrate	 NCQA PCMH Level 2 Recognition – ACHIEVED 8/5/16 and will apply for renewal in 2019 Measure number and type of preventive health screenings for FMC patients – ACHIEVED the following increases: Breast Cancer Screenings – 46% July 2015 to 75% May 2017 Colorectal Cancer Screenings – 31% July 2015 to 94% Cervical Cancer Screenings – 49% July 2015 to 85% Measure percentage of FMC patients with flu vaccine documented each fall/winter – 81% of FMC patients received flu vaccine PCMH Level 2 Recognition for CAMC Outpatient Care Center – Cerner implementation complete and OPCC set for conference regarding PCMH standards and application process

 Measure Emergency Room Multiple Visit Patients (MVP).
• 2014: 17 FMC ER MVPs
• 2015: 13 FMC ER MVPs (average)
 2016: Struggled with affecting change in this area – have shifted focus to mainly work with our high risk patients in our risk stratification processes for patients with uncontrolled diabetes (A1c>9) and frequent inpatient admissions through TCM and CCM processes. Also incorporating new project with the American Heart Association for "Target BP" for our patients with uncontrolled hypertension. Results are not available at this time.

#4	Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children's Hospital
COMMUNITY HEALTH NEED	Heart Disease, Lung Cancer, Poor Physical Health, Preventable Hospitalizations, Teen Birth Rate, Children Living in Poverty, PCP Ratio
IDENTIFIED HEALTH ISSUE	Access to specialty health care
COMMUNITY SERVED	Patients in the primary and secondary service area
PROGRAM DESCRIPTION AND RATIONALE	CAMC's service area includes critical access and small rural hospitals in need of access to specialist services.
STRATEGIC OBJECTIVE	PROVIDE ACCESS TO SPECIALTY HEALTH CARE FOR THE SERVICE AREA THROUGH MEDICAL STAFF RECRUITMENT
GOALS TO ADDRESS THE HEALTH NEED	Recruit medical staff for high priority community needs Ensure access to needed specialists
MEASURE TO EVALUATE THE IMPACT	 Medical Staff recruited to service specialty needs based on the Medical Staff Development Plan Number of medical staff specialty offerings
TIMELINE	Ongoing
RESOURCES	Medical Staff recruitment and loan expenses; income guarantees
PARTNERS/COLLABORATORS	CAMC Physician Group, WVU/Charleston
2016 Progress Report	High Priority Physicians Recruited in 2016 Anesthesiology - 2
	Cardiology Interventional – 1 Cardiothoracic Surgery – 1
	Dentist – 1
	Electrophysiology Cardiology – 1
	Emergency Medicine – 5
	Family Medicine – 1 Gastroenterology - 1
	Hematology/Oncology – 2
	Hospitalists – 12
	Neurology – 4
	Otolaryngology – 1
	Pediatric Hematology/Oncology – 1
	Plastic Surgery (Wound Care) - 1
	Psychiatry – 2
	Pulmonary Critical Care – 4

Additional Medical Staff in 2016
Gynecology/Oncology – 1
Nephrology – 1
Obstetrics & Gynecology – 1
Pain Management – 1
Podiatry – 1
Public Health & General Preventive Medicine – 1
Radiation Oncology - 1

#5	Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children's Hospital
COMMUNITY HEALTH NEED	Preventable Hospitalizations, Poor Physical Health, PCP Ratio
IDENTIFIED HEALTH ISSUE	HIV in West Virginia
COMMUNITY SERVED	Part C 19 county service area (3 new counties added in 2013) in southern West Virginia
PROGRAM DESCRIPTION AND RATIONALE NFORMATION CENTER OF THE PROGRAM DESCRIPTION AND RATIONALE	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).
STRATEGIC OBJECTIVE	PROVIDE HIV PRIMARY CARE AND DECREASE NEW HIV INFECTIONS
GOALS TO ADDRESS THE HEALTH NEED	Quality Initiatives: 1. Framingham Heart Study QI Project 2. Tobacco Cessation Partnership with Covenant House 3. Syphilis QI Project 4. Tri-state Regional Group – Viral Load Suppression/HAART Project 5. Partnership for Health 6 Oral Care PI Project
	Outreach: • Free rapid HIV testing in clinics • Media • Youth education in grades 7-10 in Kanawha County • Presentations
	Prevention: • Hepatitis B vaccines • Condom distribution

MEASURE TO EVALUATE THE IMPACT TIMELINE RESOURCES	 Number of participants program Number of new contacts Number of participants in quality initiatives Outreach programs and participants Prevention programs and participants 2014-2016 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
PARTNERS/COLLABORATORS	Rainbow Run Fundraiser - \$800 CAMC Health Education and Research Institute, WVU School of Medicine/Charleston Division
2016 Progress Report	 MAJOR PROGRAM ACCOMPLISHMENT HIGHLIGHTS: Increased access to care to the most vulnerable and increasing populations New Linkage and Retention program Provision of around-the-clock primary care Provision of mental and dental health care services Screening for high-risk sexual behavior of all enrolled RW clients corresponding risk-reduction strategies for HIV transmission Comprehensive use of the CAREWare and Cerner data systems for generating reports and required HRSA submissions Established a free home HIV test kit program for partners of RW enrolled clients and other interested individuals. Free kits are given Monday through Thursday at the outpatient clinic with pre- and post-test instructions to anyone who asks. These are also distributed at home visits and all presentations Provision of education about HIV screening and testing to other health care providers and to the community in general Establishment of an effective referral network to and from other medical care and/or case management and/or social service agencies/organizations Establishment of effective partnerships with other Ryan White funded entities in West Virginia and surrounding states Established a partnership with a Beckley dental provider in southern West Virginia Established a telemedicine clinic for southern clients Established a fund for emergency life-saving needs through two grant awards INCREASING AWARENESS AMONG PROVIDERS AND THE PUBLIC:

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. COLLABORATION: 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. Coordination between all RW Part programs in WV also occurs each year for a statewide All-Titles meeting every spring. CAMC also participates in a regional tristate 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 now have a dental provider in the southern part of the state for

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.

clients with transportation difficulties. We are in our second year of Elton John AIDS Foundation funding with a commitment of 3-5 years for our programs. #6 Charleston Area Medical Center – General Hospital, Memorial Hospital and Women and Children's Hospital **COMMUNITY HEALTH NEED** 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. Unemployment/Jobs/Poverty and Obesity/Overweight/Poor Eating **IDENTIFIED HEALTH ISSUE** Habits **COMMUNITY SERVED** Growers in our Primary Service Area and patients and families in our **Primary and Secondary Service Areas** CAMC is working with The Greater Kanawha Valley Foundation as part of PROGRAM DESCRIPTION AND their wealth/ value chain creation approach. This approach bridges **RATIONALE** 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

STRATEGIC OBJECTIVE	BUILD THE BASE OF LOCAL GROWERS PROVIDING FRESH HERBS, FRUITS AND VEGETABLES TO CAMC
GOALS TO ADDRESS THE HEALTH NEED	 Address obstacles that stand in the way of an effective value chain (such as policy barriers, consumer education, and access to resources). Implement the locally grown food value chain. Grow jobs for people in the community.
MEASURE TO EVALUATE THE IMPACT	 Number of growers providing fresh food to CAMC Amount of produce purchased by CAMC Cost to CAMC for the value chain
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
2016 Progress Report	WV now has 14 GAP certified growers. Local efforts include working with state Department of Agriculture to increase the number of training classes and timeliness of the certification process. Met with growers and interest has increased. Supported growers with developing their Farm Safety Plans. Using a consultant to assist growers with training and mock audits. One grower provided CSA boxes to 100 CAMC employees and medical staff for the 2016 season. For the 2016 growing season (6/15/16 – 10/31/16), West Virginia, Ohio and Kentucky sourced product was \$42,477 which is 20.2% of net purchases. This includes 2,346 of the 10,752 pieces or 21.8% of total pieces were local. We continue to promote CAMC interest with the following flyer.
	Become a Grower for the CAMC Value Chain Benefits of Selling to CAMC
	Stable purchase price on product, including eligible seconds
	Guarantee on quantity to be purchased Eligibility
	▶ GAP Certified or in the process of becoming certified
	Meet the insurance requirements from Corey Brothers
	Be able to transport your product to Charleston
	Steve Perry Associate Administrator, Supply Chain Management 304-88-4173 steve,perry@camc.org
	Carleston Area Medical Center GK

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	CAMC General Hospital
COMMUNITY HEALTH NEED	Obesity/Overweight/Poor Eating Habits
IDENTIFIED HEALTH ISSUE	Obesity
COMMUNITY SERVED	Patients in the primary and secondary service area
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	SUPPORT REDUCTION OF OBESITY TO IMPROVE HEALTH THROUGH PROVIDING A BARIATRIC SURGERY PROGRAM
GOALS TO ADDRESS THE HEALTH NEED	Maintain Bariatric Surgery Center of Excellence designation Provide educational and exercise component for adult weight loss
MEASURE TO EVALUATE THE IMPACT	Patients following protocol for surgery Adherence to Center of Excellence standards
TIMELINE	Ongoing
RESOURCES	CAMC

2016 Progress Report





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.

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.

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	CAMC Memorial Hospital
COMMUNITY HEALTH NEED	Cancer, Lung Cancer
IDENTIFIED HEALTH ISSUE	Continuum of care support for cancer patients and cancer survivors
COMMUNITY SERVED	Patients in the primary and secondary service area
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	GROW THE CANCER PATIENT NAVIGATION AND SURVIVORSHIP PROGRAM
GOALS TO ADDRESS THE HEALTH NEED	Utilize the oncology patient navigation program. Grow the cancer survivorship program
MEASURE TO EVALUATE THE IMPACT	Number patients supported in patient navigation system Number of patients supported in survivorship program Patient satisfaction with the programs
TIMELINE	2014-2016
RESOURCES	Staff education; information system; program development
PARTNERS/COLLABORATORS	Benedum Foundation
2016 Progress Report	The Breast Navigator saw 1,102 patients in 2016. The navigator position has been instrumental in assisting the physicians with the OncotypeDX testing to expedite the time to treatment process and to assist with the Breast Multi-disciplinary clinic. The Breast Cancer Support Group meets every Thursday, with attendance of up to 23 survivors. This group will be participating in the filming of a video to be presented at Mountains of Hope Cancer Coalition, the CAMC website and YouTube, as well as an upcoming communication workshop in Spring 2017. Lung/Head and Neck Navigator saw 1,120 patients in 2016. The navigator has screened 344 patients with 30 LRad 4s and assists LRad 4 patients through a multi- disciplinary team that meets monthly to review all cases and offer their expertise. All navigators are active participants in the Mountains of Hope Cancer Coalition and multiple cancer education/screening and outreach opportunities. They are assisting in the first upcoming fashion show for patients and family members with the various cranial prosthetics, mastectomy/prosthetic garments, compression garments and ostomy cover ups. Navigators supported the first Cancer Screening & Prevention Day held at

the CAMC Cancer Center in March 2016 to provide cancer screenings and education on the prevention of cancers. Other community events included: Run for Your Life Run/Walk, ALA Bike Trek, ALA Lung Expo, Housing Development screenings, Health Fest and other community health fairs as invited. The Colon/GI Navigator saw 948 patients in 2016. The Colon/GI Navigator monitors and trains staff on the importance of proper distress screening in oncology patients and represented CAMC Cancer Center at the American Psychosocial Oncology Society (APOS) Conference poster presentation on Distress Screening practices in March 2016. Represented CAMC Cancer Center at the Academy of Oncology Nurse & Patient Navigators (AONN) Conference in November 2016, where work on Distress Screening was submitted as an abstract for Best Practice. The Colon/GI Navigator sat for national certification testing and was successful!

Financial Navigators had 1,157 patient encounters. Survivorship Care - Our goal for 2016 was 25% of all patients diagnosed and/or treated with a curative intent have a survivorship visit. Achieved 26%. 75 total care plans given in 2016. 189 appointments scheduled.

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	CAMC Women and Children's Hospital
COMMUNITY HEALTH NEED	Obesity, Children Living in Poverty
IDENTIFIED HEALTH ISSUE	Obesity/Nutrition
COMMUNITY SERVED	Children and their families in the primary and secondary service area.
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	REDUCE CHILDHOOD OBESITY, TREAT CO-MORBIDITIES AND PREVENT DIABETES
GOALS TO ADDRESS THE HEALTH NEED	Provide childhood obesity program Increase awareness of the program Increase access to care
MEASURE TO EVALUATE THE IMPACT	Participation Weight loss and improved metabolic parameters in participants Assess and address impact on the child's family
TIMELINE	2014- 2016 and ongoing
RESOURCES	Internal funding
Plannal Lost 19 pounds Lost 19 pounds Lost 60 pounds Remarks participated in the Mealthylids program of Colled — a finish yeards Arranch participated in the Mealthylids program of Colled — a finish yeards Lost 60 pounds Lost 60 pou	HealthyKids Wellness & Weight Management (HealthyKids) began 12 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. Group session occurs each Tuesday evening with group nutrition education and group 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. The access has also improved with decreasing 3 rd appointment time out for a new patient from 39 days in 2013 to 14 days in 2016. We no longer have a waiting list and can schedule patients when they call. Total patient visits volumes have also increased from 227 encounters to 320 encounters (2015 stats) which does not include the evening group visits. The 3 rd appointment out for existing patients is 9 days.



HealthyKids celebrated with outstanding clinical outcomes in 2014 with 96% of patients lowering their BMI from their first to last documented office visit. A retrospective study was recently completed to look at initial success and long-term weight management. Results showed 91% of patients decreased their BMI z-score (a standard deviation score to directly compare BMI's). At an average of 8 years later, 69.2% of these patients kept their weight off successfully. The aforementioned research study won first place in original research in April, 2017 at the CAMC Research Day.

Increasing exposure for HealthyKids services for all children was facilitated by a new website and brochure and hosting displays at various conferences.

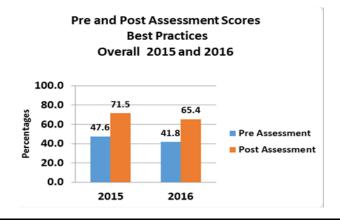
#10	
#10	CAMC Women and Children's Hospital
COMMUNITY HEALTH NEED	Obesity, Children Living in Poverty
IDENTIFIED HEALTH ISSUE	Obesity/Nutrition
COMMUNITY SERVED	The Keys 4 Healthy Kids initiative focused on low resource, at-risk youth and their families in the East End and the West Side of Charleston. 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.
PROGRAM DESCRIPTION AND RATIONALE LEVS 4 Healthykids Unlocking the Doors to a Better Tomorrow	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.

STRATEGIC OBJECTIVE	PREVENT CHILDHOOD OBESITY
GOALS TO ADDRESS THE HEALTH NEED	Establish a Community Action Toolkit and Peer Learning Network. Establish a School and Youth Garden Network. Provide Natural Learning Environments and edible gardens at childcare and after school facilities. Provide NAP SACC in Charleston and across West Virginia. Imagine Charleston policy development. Establish KEYS Youth Council. Expand the Try This Initiative across West Virginia.
MEASURE TO EVALUATE THE IMPACT	Toolkit and Learning Network operational with goals and outcome measures established and tracked. School and Youth Garden Network operational. Number of gardens at childcare and after school facilities. NAP SACC statistics. Imagine Charleston policies developed and shared. KEYS Youth Council membership and number of meetings held. Try This Initiative outcomes.
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
2016 DDOGDESS DEDODT	KEVS 4 HealthyKids continues to be active with increased reach

2016 PROGRESS REPORT



KEYS 4 HealthyKids continues to be active with increased reach in the public school setting, with youth gardens, and childcare center nutrition and physical activity improvements. In 2016, KEYS primary support was provided through a Benedum grant and subcontract with WVU Extension Family Nutrition Services. From 2014-2016, KEYS worked with 61 child care centers in 24 counties across the state. In 2016, KEYS worked with 9 schools impacting 4,837 WV students. KEYS also worked with the WV Bureau for Public Health and the Harvard Prevention Research Center to complete a return on investment cost analysis for Key 2 a Healthy Start as a primary obesity prevention initiative. It was estimated that 752 cases of obesity would be prevented.



#11	CAMC Women ar	nd Children'	s Hospital			
COMMUNITY HEALTH NEED	Children Living in	n Poverty				
IDENTIFIED HEALTH ISSUE		Mental Health Services for vulnerable pediatric and adolescent				
COMMUNITY SERVED	8 rural counties in WV (Kanawha, Boone, Webster, Jackson, Calhoun,					
	Fayette, Pocahontas, and Greenbrier)					
PROGRAM DESCRIPTION AND RATIONALE	West Virginia Kids Intervention and Developmental Services Initiative (WV KIDS) 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:					
	Site Name	Site Designation	Site Address	County	Population	
	Highland Hospital	Hub	300 56 th Street Charleston, WV 25302	Kanawha	51,400	
	Boone Memorial Hospital	End-User	701 Madison Avenue Madison, WV 25705	Boone	3,076	
	Cabin Creek Health Systems	End-User	79 Cabin Creek Road Dawes, WV 25054	Kanawha	656	
	Camden-on-Gauley Medical Center	End-User	1003 Webster Camden-on-Gauley, WV 26208	Webster	169	
	Jackson General Hospital	End-User	122 Pinnell Street Ripley, WV 25281	Jackson	3,252	
	Minnie Hamilton Health System	End-User	186 Hospital Drive Grantsville, WV 26147	Calhoun	561	
	New River Health Association	End-User	57 Sutphin Lane Scarbro, WV 25971	Fayette	486	
	Pocahontas Memorial Hospital	End-User	150 Duncan Road Buckeye, WV 24924	Pocahontas	1,054	
	Rainelle Medical Center	End-User	645 Kanawha Avenue Rainelle WV 25962	Greenbrier	1,505	
	Riverside Health Center	End-User	1 Warrior Way, Suite 103, Belle, WV 25015	Kanawha	1,260	
	Webster County Memorial Hospital	End-User	324 Miller Mt. Drive Webster Springs 26288	Webster	776	
	needs of the popul health services. The carts that offer state definition monitors other data that requamera and microtherapy. The equiporation meetings, and comments and characteristics and characteristics are serviced length of time to of appointment, whice evaluations can discrete.	lation and the his includes of the and safe to enable parties a close phones aid in the ment will ensemble that are and the safe that are and the safe that are and the province that an appoint an appoint typically tactate whethe live, allowing	r this project takes in a goals of providing a videoconferencing ed moving of equipment atient face recognition are up view of the patient providing psychiatry able multi-site views a vitem for non-video transmitted during not a make it put the patient pointment, as comparties weeks. Timely, or admitting a patient for the possibility of a re-	access to tel quipment, tel nt within the form, expression ent. A high deric diagnoses on one more related conteneetings via cossible for ment having to ent or a standard psychia.	e-behavioral emedicine facility, high- ns, and any efinition s, care and nitor for ent, such as nore mental wait a great dard office iatric tric hospital	

STRATEGIC OBJECTIVE	IMPROVE ACCESS TO MENTAL HEALTH SERVICES FOR VULNERABLE PEDIATRIC AND ADOLESCENT POPULATIONS
GOALS TO ADDRESS THE HEALTH NEED	Increase access to psychiatrists, who will be able to assess and appropriately evaluate a patient, make a diagnosis, and prescribe treatment. Provide therapy sessions with mental healthcare professionals via telemedicine
	Provide peer-to peer consults with psychiatrists for community primary care physicians and other medical professionals.
MEASURE TO EVALUATE THE IMPACT	The number of children receiving tele-behavioral health services Appointment wait time
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.
2016 PROGRESS REPORT	The WVKIDS physical build out was completed July 2016. HUB Site • Core Call Management System completed mid-May. • HUB site endpoints configured and delivered late May. • HUB Site Network Core Switching Upgrade complete, July 2016. • End User Sites • Systems where deployed and tested, May 10 - June 3, 2016. System Administration • System Administrator online training access provided June 2016. • System turned over to Highland System Administrator in August 2016.

#12	CAMC Women and Children's Hospital
COMMUNITY HEALTH NEED	Tobacco Use/Secondhand Smoke Exposure, Teen Birth Rate
IDENTIFIED HEALTH ISSUE	Tobacco use in pregnant women
COMMUNITY SERVED	23 counties in southern West Virginia

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	PROVIDE TOBACCO CESSATION FOR PREGNANT WOMEN
GOALS TO ADDRESS THE HEALTH NEED	Provide training to all staff in the Women's Medicine Center (WMC) in tobacco cessation Provide ongoing counseling to every women in the WMC regarding the harmful effects of tobacco Continue research to validate the benefits of cessation Identify if Cotinine testing improves cessation rates and secondarily to compare fetal outcomes with reduction of tobacco use Increase the quit rate among pregnant women in WV
MEASURE TO EVALUATE THE IMPACT	Monthly statistics that address the number served and the validated quits. Results of Cotinine Biomarker Feedback on prenatal smoking and perinatal outcomes.
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
2016 PROGRESS REPORT	The "Tobacco Free For Baby and Me" cessation program reported an average 23% quit rate in 2016. The program's quit rate continues to be above the National Quit Rate of 13%- 18%. Quit Validation is reported at 87%. The program received 9 months of additional funding for a Certified Tobacco Treatment Specialist for individual counseling four hours per week. The Program Intake Form has been revised to compliment a research study on the usage of e-cigs in pregnant women.

APPENDIX

LISTING OF ADDITIONAL 2016 COMMUNITY BENEFIT PROGRAMS FOR CHARLESTON AREA MEDICAL CENTER

Full Program Detail For Period 1/1/16 – 12/31/16

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. The course educates our geriatric population to 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.

Partners: WV Chapter of AARP

 Persons:
 75

 Expenses:
 2,385

 Revenues:
 0

 Benefit:
 2,385

Active Cancer Patient Support Group

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

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: 60 Expenses: 480 Revenues: 0 Benefit: 480

ALA Bike Trek and Great Smoke Out

Description: Provided education materials and displays for the American Lung Association Bike Trek cycling

event in Charleston and the Great Smoke Out at the Cabin Creek Clinic which 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: 169
Expenses: 4,222
Revenues: 0
Benefit: 4,222



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: 200 Expenses: 574 Revenues: 0 Benefit: 574

Asthma Awareness

Description: Informational display at Embassy Suites in Charleston for the Lung Force Expo. Staff participated

on the COPD Coalition as well as provided presentations to the community promoting asthma

awareness at local health fairs, grade schools, and community events.

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: 305 Expenses: 800 Revenues: 0 Benefit: 800

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: 150 Expenses: 80 Revenues: 0 Benefit: 80

Basic Life Support Training for the Community

Description: Free basic life support training and basic first aid classes offered to the community and to

various groups like Girl Scouts.

Category: A1

Gender: Both Males and Females

Department: 25780 (Health Information Center)

Department Contact: Beverly Thornton (8-9989)

Community Need: Heart Disease/High Blood Pressure

Objectives: Train community members in basic life support skills.

 Persons:
 36

 Expenses:
 360

 Revenues:
 0

 Benefit:
 360

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
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: 475 Expenses: 200 Revenues: 0 Benefit: 200

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. Also provided support for the

WVU Breast Education Conference.

Category: A1
Gender: Females

Department: 46509 (Southridge Imaging Center)

Department Contact: Kelly Combs (8-7031)

Community Need: Cancer Persons: 1.200

Expenses: 1,308
Revenues: 0
Benefit: 1,308



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: 22

Expenses: 5,120
Revenues: 0
Benefit: 5,120

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 consumption and driving.

 Persons:
 150

 Expenses:
 400

 Revenues:
 0

 Benefit:
 400



Childbirth Education Program

Description: Program designed for expectant parents.

Category: A1
Gender: Females

Department: 43608 (Family Resource Center)

Department Contact: Kelly Gilbert (8-2545) **Objectives:** Improved birth outcomes.

Persons: 1,532 Expenses: 67,133

Revenues: 0 Benefit: 67,133



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 Thornton (8-9989)

Objectives: To provide consistent, current vetted medical and health information.

 Persons:
 15,000

 Expenses:
 65,600

 Revenues:
 0

 Benefit:
 65,600

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:
 108

 Expenses:
 1,200

 Revenues:
 0

 Benefit:
 1,200

Digital Signage (CAMC TV) and Video PSAs

Description: CAMC TV is broadcast throughout our three hospitals to provide 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 Thornton (8-9989)

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

 Persons:
 N/A

 Expenses:
 45,075

 Revenues:
 0

 Benefit:
 45,075



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

to the impact it can have on the individual teen, their family, friends, and communities.

Persons: 50 Expenses: 160 Revenues: 0 Benefit: 160

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 drugs.

Category: A1

Gender: Both Males and Females
Department: 41232 (Trauma Services)
Department Contact: Doug Douglas (8-7809)

Objectives: Prevent traffic accidents and fatalities.

Persons: 50 Expenses: 160 Revenues: 0 Benefit: 160

Health Information Center

Description: The Health Information Center provides up-to-date reliable on-line health information.

Category: A1

Gender: Both Males and Females

Department: 25780 (Health Information Center)

Department Contact: Beverly Thornton (8-9989)

Objectives: Promote health education in the community.

 Persons:
 31,424

 Expenses:
 54,130

 Revenues:
 0

 Benefit:
 54,130

Imagine U: A Virtual Healthcare Experience

Description: CAMC broadcast of a craniotomy 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 Development)

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: 9,869

Revenues: 0 Benefit: 9.869

Immunization Awareness

Description: Participated in Immunization Day at the WV Legislature and at Braxton County Memorial Hospital

to educate the general public on the importance of mandatory immunization.

Category: A1

Gender: Both Males and Females **Department:** 46840 (Epidemiology)

Department Contact: Sharon Winefordner (8-8846)

Objectives: Promote immunization for programs for childhood diseases.

Persons: 180 Expenses: 2,964 Revenues: 0 Benefit: 2.964

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, 940 square feet, play area for small children that includes fruit and vegetable themed play

equipment along with a family restroom.

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: Not available

Expenses: 3,122 **Revenues:** 0 **Benefit:** 3,122

Mini Medical School for the Public

Description: Programs for the community on a variety of health topics focusing on prevention, diagnosis and

treatment options. Offered on the hospital campus and to rural sites via telehealth and live on the

internet.

Category: A1

Gender: Both Males and Females

Department: 25780 (Health Information Center)

Department Contact: Beverly Thornton (8-9989)

Objectives: Educating the public on a variety of diseases and disorders and focusing on the prevention,

diagnosis, and treatment options for each.

 Persons:
 435

 Expenses:
 17,967

 Revenues:
 0

 Benefit:
 17,967



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:
 720

 Revenues:
 0

 Benefit:
 720

Red Cross Blood Drive Support

Description: Provides 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 that the Red Cross is having a blood drive and where they

can go if they wish to donate. Also to provide support for setting up and cleaning up the room

used for the blood drive.

Persons: 165 Expenses: 408 Revenues: 0 Benefit: 408

Relay for Life

Description: Staffed the Annual Relay for Life in Charleston which promotes cancer awareness and invites

cancer survivors and family members 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: 150 Expenses: 473 Revenues: 0 Benefit: 473

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: Colorectal Cancer

Persons: 430 Expenses: 1,470 Revenues: 0 Benefit: 1,470



Senior Lifestyles & Injury Prevention (SLIP)

Description: The SLIP injury prevention program is designed to address the needs of older adults. Elderly

persons are disproportionately at risk for poor outcomes following injury, and are rapidly growing

in the overall population.

Category: A1

Gender: Both Males and Females
Department: 41232 (Trauma Services)
Department Contact: Doug Douglas (8-7809)

Community Need: Balance Your Life (fall prevention), My Home Safe Home (home safety), On the Right Road

(motor vehicle safety) and Stepping Out Safely (pedestrian safety).

 Persons:
 295

 Expenses:
 200

 Revenues:
 0

 Benefit:
 200

Spinal Cord Injury/ Support Education Awareness (SCI/SEA)

Description: Resource meetings held monthly for SCI 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.

Staff Hours: 20
Persons: 147
Expenses: 492
Revenues: 0
Benefit: 492

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:
 428

 Expenses:
 15,000

 Revenues:
 0

 Benefit:
 15,000

Walk With a Doc

Description: Monthly walks with a physician that begin with an educational topic such as high blood pressure,

diabetes, or nutrition. The education is followed by a 45 minute group walk with the provider and staff. While walking participants can freely talk or ask questions of the providers. At the end of

the walk free blood pressure checks and refreshments are offered.

Category: A1

Gender: Both Males and Females
Department: 67665 (Primary Care)
Department Contact: Kristin Carfagna (8-4797)

Objectives: Provide health information and promote communication between physicians and patients as well

as promoting exercise and physical activity.

 Persons:
 180

 Expenses:
 3,510

 Revenues:
 1,250

 Benefit:
 2,260

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 Development)

Department Contact: Debby Schoolcraft (8-3376)

Community Need: Educational Attainment/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:
 250

 Revenues:
 0

 Benefit:
 250

*** Community Health Education (A1)

Expenses Offsets Benefit Persons 305,832 1,250 304,582 54,766

Community Based Clinical Services (A2)

2016 Flood Relief Emergency Shelter and Field Hospital

Description: CAMC provided critical prescriptions at the Capitol High School emergency shelter and

staffed a field hospital in Clendenin, Kanawha County in collaboration with the Kanawha County Emergency Ambulance Authority and the WV National Guard. The field hospital was operational

from June 28 through July 10, 2016 during which time 322 patients were treated, 903 prescriptions were distributed, and 2,332 doses of Tetanus vaccine were administered.

Category: A2

Gender: Both Males and Females

Department: 46874 (Safety)

Department Contact: Lillian Morris (8-8208)

Objectives: To meet the urgent healthcare needs of the people affected by the June flood and provide

prescription medications for area residents who lost them in the disaster. The field hospital provided assessments, prescriptions, minor suturing, and treated heat related illnesses and snake

bites.

 Persons:
 3,859

 Expenses:
 92,617

 Revenues:
 0

 Benefit:
 92,617

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: 329 Expenses: 347,905 Revenues: 195,209 Benefit: 152,696

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.

Category: A2

Gender: Both Males and Females

Department: 43602 (Children's Medicine Center)

Department Contact: Debbie Carte (8-2536)

 Persons:
 476

 Expenses:
 27,408

 Revenues:
 0

 Benefit:
 27,408

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:
 550

 Expenses:
 3,696

 Revenues:
 0

 Benefit:
 3,696

Housing Authority Cancer Screening

Description: The CAMC Cancer Center provided cancer screening, smoking cessation programs and breast

cancer awareness presentations to the residents of Lippert Terrace, Lee Terrace, Carol Terrace,

Jarrett Terrace and Washington Manor.

Category: A2

Gender: Both Males and Females **Department:** 49642 (CAMC Cancer Center)

Department Contact: Bev Farmer (8-8399)

Community Need: Cancer

Objectives: Provide cancer screening and health information to Housing Authority low income residences.

Persons: 63 Expenses: 560 Revenues: 0 Benefit: 560

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: 114 Expenses: 1,216





Revenues: 0 Benefit: 1,216

Orthopedic Physician Coverage for Area High School Sporting Events

Description: Provided onsite orthopedic physician coverage for athletes, cheerleaders and band members

during the 2016 school year at 16 local high schools.

Category: A2

Gender: Both Males and Females
Department: 67644 (CAMC Orthopedics)
Department Contact: Gail Huffman (8-5870)

Objectives: On site health care coverage for area athletes.

 Persons:
 1,040

 Expenses:
 34,272

 Revenues:
 0

 Benefit:
 34,272

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)

Objectives: This program helps to fill the gap in mental health services for the uninsured or underinsured. It

serves individuals who have health insurance that does not cover behavioral health services or

individuals without health insurance.

 Persons:
 131

 Expenses:
 14,285

 Revenues:
 0

 Benefit:
 14,285

West Virginia Health Right Support

Description: A low income 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 clinic.

Category: A2

Gender: Both Males and Females

Department: 46579 (Pharmacy Administration)

Department Contact: David Jarrett (8-7854)
Community Need: Unemployment/Jobs/Poverty

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

 Persons:
 N/A

 Expenses:
 247,498

 Revenues:
 0

 Benefit:
 247,498

Expenses Offsets Benefit Persons
*** Community Based Clinical Services (A2) 769,457 195,209 574,248 6,562

Health Care Support Services (A3)

2016 Bridge Day Medical Command Center

Description: Provided personnel to staff the Medical Command Center during the 2016 Bridge Day at the New

River Gorge Bridge in Fayette County. Bridge Day Activities on the closed 4-lane bridge include base jumping and rappelling from the bridge. The Medical Command Center is responsible for

coordinating the recovery and transport of injured participants.

Category: A3

Gender: Both Males and Females

Department: 41232 (Trauma Services) **Department Contact:** Doug Douglas (8-7809)

Objectives: Coordinate the safe recovery and evacuation of

injured participants at Bridge Day.

Persons: Not available.

Expenses: 577 Revenues: 0 Benefit: 577

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:

Gender: Both Males and Females 41346 (Medical Rehab) Department: **Department Contact:** Jeremiah Gagnon (8-7608) **Community Need:** Lack of Physical Activity

> To provide challenged sports such as wheelchair basketball leagues, marksmanship and other Objectives:

events. The program helps challenged athletes develop the skills necessary to participate.

Persons: 27 Expenses: 114 Revenues: 0 Benefit: 114

Enrollment Assistance for Patients and Families for Health Coverage

Description: Patient Accounts assists patients to 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:

Gender: Both Males and Females

Department: 31706 (Finance)

Department Contact: Jay Richmond (8-6250) Community Need: Unemployment/Jobs/Poverty

25,098 Persons: Expenses: 1,249,518

Revenues: Ω

> Benefit: 1,249,518

Follow-Up After Perinatal Loss

Description: Labor and Delivery nurses provide outpatient referral and resources for perinatal loss and

Bereavement services.

Category: АЗ Gender: **Females**

43110 (Labor & Delivery) Department: **Department Contact:** Celena King (8-2177)

Objectives: Follow-up after experiencing perinatal loss.

Provide outpatient referral services/programs to support the patient after the loss.

Persons: 30 Expenses: 1,200 Revenues: 0 Benefit: 1,200

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

others with chronic illnesses or medical conditions.

Category: А3

Gender: Both Males and Females **Department:** 49642 (CAMC Cancer Center)

Department Contact: Bev Farmer (8-8399)

Community Need: Cancer Persons: 10



Expenses: 156 Revenues: 0 Benefit: 156



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: 8 Expenses: 736 Revenues: 0 Benefit: 736

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: 5 Expenses: 75 Revenues: 0 Benefit: 75



*** Health Care Support Services (A3) 1,252,376 0 1,252,376 25,178

Social and Environmental Improvement Activities (A4)

CAMC Mall Walkers Program

Description: The Mall Walkers Program is provided at the Charleston Town Center and participants meet one

day per month in the center court to discuss health topics such as stroke awareness, holiday meal planning, and infection prevention. Participants are provided a parking pass to use between

7 a.m. and 10 a.m. Monday through Saturday so they can walk at their own pace.

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:
 227

 Expenses:
 1,272

 Revenues:
 0

 Benefit:
 1,272



	Expenses	Offset	Benefit	Persons
*** Social & Environmental Improvement (A4)	1,272	0	1,272	227
**** Community Health Improvement Services (A)	2,328,937	196,459	2,132,478	86,733

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

CAMC Graduate Medical Education

Description: CAMC provides 17 residency and fellowship programs (allopathic and osteopathic including 3

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: 171

Expenses: 40,221,388 Revenues: 6,334,756 Benefit: 33,886,632

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: Provide a forum for medical professionals to discuss ethics issues.

Persons: 280 Expenses: 434 Revenues: 0 Benefit: 434

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: 376 Expenses: 558 Revenues: 0 Benefit: 558

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 on CAMC's campus.

Persons: 82 Expenses: 186 Revenues: 0 Benefit: 186

	Expenses	Offsets	Benefit	Persons
*** Physicians/Medical Students (B1)	40,222,566	6,334,756	33,887,810	909

Nurses/Nursing Students (B2)

CAMC Nursing Education

Description: CAMC provides a clinical setting and staff instruction/supervision for students enrolled in nursing

programs affiliated with CAMC. CRNA, RN and BSN nursing students enrolled in educational instruction and supervision while on patient care floors, in the operating room or other patient

care areas.

Category: B2
Gender: Both Males and Females
Department: 46872 (Planning)

Department Contact: David Jarrett (8-7854)

Objectives: To provide clinical experiences for students.

Persons: 127
Expenses: 1,046,364
Revenues: 0

Benefit: 1,046,364

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: 46872 (Planning)
Pepartment Contact: Ron Moore (8-5486)

Objectives: To work with the statewide committee as it addresses the 2010 Institute of Medicine's

recommendations for the future of nursing.

Persons: Unknown Expenses: 7,820 Revenues: 0 Benefit: 7,820

Nursing Pathways Program

Description: CAMC and WV State Community and Technical College 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) a mid-year ADN program; 2) a Paramedic to Registered Nurse Fast Track Program; and 3) a Licensed Practical Nurse to Registered Nurse Fast Track

Program.

Category: B2

Gender: Both Males and Females

Department: 21926 (Human Resources Workforce Development)

Department Contact: Debby Schoolcraft (8-3376)
Community Need: Unemployment/Jobs/Poverty

Objectives: To increase the number of licensed registered nurses.

 Persons:
 66

 Expenses:
 466,493

 Revenues:
 418,693

 Benefit:
 47,800

West Virginia State Trauma Audit Review (WV STAR)

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 to their trauma center.

Persons: 100 Expenses: 600 Revenues: 0 Benefit: 600

WV State Trauma Symposium

Description: This conference is a collaborative effort between experts in various trauma disciplines from

around West Virginia and is designed for trauma surgeons, general surgeons, emergency room physicians, nurses, mid-level providers and prehospital health care, coding specialists and health information professionals. Includes an eight hour trauma nursing workshop 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

Expenses Offsets Benefit Persons
*** Nursing/Nursing Students (B2) 1,522,237 418,693 1,103,544 418

Other 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: 360

Expenses: 407,344 **Revenues:** 0 **Benefit:** 407,344

Medical Explorers

Description: A program designed to introduce youth in Kanawha and Putnam counties to the health care

environment. Participants must be at least 14 years of age and completed the 8th grade, or are

ages 15 to 20 and have designated health care as their health cluster.

Category: B3

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: Increase health career awareness by educating middle and high school students about health

professions and careers.

 Persons:
 90

 Expenses:
 2,611

 Revenues:
 136

 Benefit:
 2,475





Permissive Hypotension in Trauma

Description: Community trauma outreach to area EMS personnel on the benefits of permissive hypotension

resuscitation in trauma patients. The goal blood pressure for these patients is a mean arterial pressure of 40-50mmHg or a systolic blood pressure less than or equal to 80. The key is to avoid normalizing blood pressure in a context where blood loss may be enhanced.

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:
 12

 Expenses:
 1,280

 Revenues:
 0

 Benefit:
 1,280

Physician Assistant Student Rotations

Description: The hospitalist program had 25 physician assistant students from Mountain State University and

Alderson Broaddus University during a six week rotation at CAMC.

Category: B3

Gender: Both Males and Females **Department:** 42005 (Hospitalist Program)

Department Contact: (8-5848)

 Persons:
 25

 Expenses:
 28,000

 Revenues:
 0

 Benefit:
 28,000

Rural Trauma Team Development Course

Description: This 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 and to educate the audience regarding the state's regional and local

trauma system. The course outlines the various stages of trauma assessment and the

components of the primary survey, decision to transfer, secondary survey, and demonstrates the

concepts of the primary survey.

Persons: 60

Expenses: 2,880 **Revenues:** 0 **Enefit:** 2,880

Expenses Offsets Benefit Persons
*** Allied Health Professional Education (B3) 442,115 136 441,979 547

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 Development)

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: Not available
Expenses: 285,000
Revenues: 0
Benefit: 285,000

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

Expenses Offsets Benefit Persons
**** Health Professions Education (B) 42,471,918 6,753,585 35,718,333 1,874

Financial and In-Kind Contributions (E) Cash Donations (E1)

2016 WV Flood Donation

Description: Cash donation to the American Red Cross for victims of the June 2016 WV Flood.

Category: E1

Gender: Both Males and Females

Department: 46874 (Safety)

Department Contact: Lillian Morris (8-8208)

Objectives: Flood Relief
Persons: Not available
Expenses: 25,000
Revenues: 0
Benefit: 25,000

Civic Affairs Council

Description: The Civic Affairs Council is comprised of employees who review the applications for charitable

donations and make awards based on specific community benefit criteria. Funding was provided to area high schools for Project Graduation, Daymark, Salvation Army, WV Health Right, American Cancer Society, Girl Scouts, Boy Scouts, REA of Hope, Children's Therapy Clinic,

Charleston Daily Mail's Neediest Cases, Union Mission, The Gabriel Project of WV, National Muscular Dystrophy Association, Faith in Action of Kanawha Valley, Tri-County YMCA, Try This, Habitat of Humanity, Childhood Language Center, United Way of Central WV, Prestera, Dreams Community Development Corporation, Alzheimer's Association, WV Senior Sports

Classic, YMCA of Kanawha Valley, and Read Aloud WV.

Category: E1

Gender: Both Males and Females
Department: 10000 (Civic Affairs)
Department Contact: Liz Tate (8-7619)

Community Need: Unemployment/Jobs/Poverty

Objectives: Provide financial support to programs and services in our service area to support health,

educational, social services, civic and economic development requests that address community

needs.

Persons: Not available.
Expenses: 36,660
Revenues: 0
Benefit: 36,660

	Expenses	Offsets	Benefit	Persons
Cash Donations (E1)	61,660	0	61,660	0

In-kind Donations (E3)

Community Board Participation by CAMC Personnel

Description: Community board participation by CAMC personnel for 2016.

David Ramsey, President and CEO, participated on the HealthNet Aeromedical Board of Directors, WV Hospital Association, WV Chamber of Commerce Board of Directors, WV Medical School of Osteopathic Medicine, and as a speaker at various Baldrige events.

Glenn Crotty, Jr. M.D., COO, participated as a board member for the Partnership for Excellence, Alumni Examiner for the Baldrige Performance Excellence Program, served 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 Whitler, Vice President, Government and Community Affairs served on the boards for WV Health Right, Center for Rural Health Development, the WV Board of Osteopathic Medicine, West Virginia Rural Health Association, Logan Healthcare Foundation and the finance committee of FamilyCare Health Centers.

Brenda Grant, Chief Strategy Officer, serves as Chair of the United Way of Central WV Board of Directors and Chairs the Executive Committee, Kanawha Coalition for Community Health Improvement Steering Committee, CHI Learning Collaborative, The Partnership for Excellence Examiner Training and Judge, Greater Kanawha Valley Foundation Value Chain Initiative, Civic Affairs Committee, NQF Community Health Field Test Group and Communities of Excellence.

Mike Williams, Vice President/Administrator, CAMC General Hospital, served as Secretary on the State Trauma Advisory Committee and Vice Chair of the East End Advisory Board.

Andrew Weber, Vice President/Administrator, CAMC Women and Children's Hospital, served as the President of the Kids Count board, board member for the Fund for the Arts, board member of the WV Hospital Association and as a Malcolm Baldrige National Quality Award Examiner.

Elizabeth Pellegrin, Chief Marketing Officer, served as a board member of the Glotfelty Foundation.

Melanie Ward, M.D., served as the keynote speaker for the Charleston Chapter of the National MS Society.

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.

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

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 Bridge Valley Community & Technical College Nursing Advisory Committee.

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, participated on the Bridge Valley Community & Technical College Foundation Board of Directors.

Tammy Young and Lauren Lane, Employment Associates, 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.

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

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

Carrie Morris, Nurse Manager, participated as a Partnership for Excellence (Ohio, Indiana and West Virginia) state Baldrige program examiner.

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

Christina Shaffer, Nurse Manager, participated as a Partnership for Excellence (Ohio, Indiana and West Virginia) state Baldrige program examiner,

Lisa Songer, Critical Care Director, participated as a Partnership for Excellence (Ohio, Indiana and West Virginia) state Baldrige program 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

region.

Persons: Not available Expenses: 302,407 Revenues: 0 Benefit: 302,407

Kanawha-Charleston Health Department Harm Reduction

Description: CAMC provided cash donations to support the Kanawha-Charleston Health Department's Harm

Reduction Program. The needle exchange program serves over 2,228 area addicts and

the needle exchange is open one day a week.

Category: E3

Gender: Both Males and Females
Department: 46872 (Planning)
Department Contact: Brenda Grant (8-7885)

Community Need: Drug Addiction

Objectives: Prevent the spread of blood borne diseases via the shared use of needles.

 Persons:
 2,228

 Expenses:
 4,000

 Revenues:
 0

 Benefit:
 4,000

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: N/A **Expenses:** 12,001 Revenues: 0 **Benefit:** 12,001



	Expenses	Offsets	Benefit	Persons
*** In-Kind Donations (E3)	318,408	0	318,408	2,228

**** Financial and In-Kind Contributions

380,068 0 380,068 2.228

Community Building Activities (F) Economic Development (F2)

Local Wealth Creation - Farm to Hospital

Description: Growth of the 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:

Gender: **Both Males and Females** 1 (Dietary Services) Department:

Department Contact: Mike Marinaro (8-6551) and Steve Perry **Community Need:** Obesity/Overweight/Poor Eating Habits

> 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.

Not available Persons:

1,100 Expenses: Revenues: 0 Benefit: 1,100



	Expenses	Offsets	Benefit	Persons
*** Economic Development (F2)	1,100	0	1,100	101

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:

Gender: Both Males and Females 46876 (Partners In Health) Department: **Department Contact:** Tom Kuhn (8-7386)

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

Persons: Unknown

Expenses: 165,922 **Revenues:** 0 **Benefit:** 165,922

Expenses Offsets Benefit Persons
*** Community Support (F3) 165,922 0 165,922 0

Environmental Improvements (F4)

United Way Day of Caring

Description: CAMC employees volunteered to participate in the United Way's Day of Caring performing

community service projects for the community.

Category: F4

Gender: Both Males and Females

Department: 46872 (Planning)

Department Contact: David Jarrett (8-7854)

Community Need: Unemployment/Jobs/Poverty

Persons: Not applicable Expenses: 7,360 Revenues: 0

Benefit: 7,360

Expenses Offsets Benefit Persons
*** Environmental Improvements (F4) 7,360 0 7,360 0

Workforce Development (F8)

Health Care Career Showcase

Description: An event to showcase hospital career opportunities to high school students in eight

surrounding counties. Colleges, universities, career and technical centers from WV provided information on degree programs, certificates, and training available as well as entrance

requirements and financial assistance.

Category: F8

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: Increase awareness of health care occupations by bringing students, schools and professionals

together to showcase today's trends in health care.

 Persons:
 200

 Expenses:
 34,244

 Revenues:
 0

 Benefit:
 34,244

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: Educational Attainment/High School Dropout

 Persons:
 90

 Expenses:
 4,664

 Revenues:
 0

 Benefit:
 4,664



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: Not available

Expenses: 1,179 Revenues: 0 Benefit: 1,179

	Expenses	Offsets	Benefit	Persons
*** Workforce Development (F8)	40,087	0	40,087	290

Other - Health Fair (F9)

Healthfest

Description: Health fair offering over 25 free/reduced price 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: Lack of Physical Activity, 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: 98,696 Revenues: 37,380 Benefit: 61,316

Teddy Bear Fair

Description: Children's health fair

Category: F9

Gender: Both Males and Females **Department:** 43120 (Pediatrics)

Department: 43120 (Pediatrics)

Department Contact: Susan Russell (8-2885)

Community Need: Lack of Physical Activity, 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 tour the hospital, play games, receive car seat education, and

health education materials.

 Persons:
 1,243

 Expenses:
 19,208

 Revenues:
 12,489

 Benefit:
 6,719



	Expenses	Offsets	Benefit	Persons
*** Other – Health Fair (F9)	117,904	49,869	68,035	2,843

**** Community Building Activities (F) 332,373 49,869

282,504

3,234

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: Preparation and implementation for community health needs assessment, community forum, identification of top health issues. Establishment of CAMC implementation strategies to address community health needs. Reporting on prior year implementation strategies. Compilation and reporting on CAMC's community benefit by surveying the individual departments, administrators,

and other staff at our three hospitals. Participating in ongoing community benefit education

programs. Not applicable Persons: Expenses: 20,551 Revenues: Benefit: 20,551

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:

Both Males and Females Gender: 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: Not available 93,765 Expenses: Revenues: Ω **Benefit:** 93,765



*** Dedicated Staff (G1)	Expenses	Offsets	Benefit	Persons
	114,316	0	114,316	0
**** Community Benefit Operations (G)	114,316	0	114,316	0

Total Community Benefit 45,658,093 6,999,913 38,658,180 94,069

Totals:

Number of Programs: 78

> Persons: 94,069 Expenses: \$45,627,612 Revenues: \$6,999,913 \$38,627,699 Benefit:





