

Building A Healthy Community




**Rockbridge Area
Health Center**

What is a Community Health Center?

For over 50 years, Community Health Centers (CHC), also known as Federally Qualified Health Centers, have provided primary and preventative care, dental care, behavioral care, pharmacy services, and a variety of support services to communities across the country. CHCs serve their community with emphasis on underserved populations, offer a sliding fee scale, provide comprehensive services, have an ongoing quality assurance program, and are governed by a community board of directors.

The health center model emerged in 1965 as part of President Lyndon Johnson's "War on Poverty" by combining the resources of local communities with federal funds to establish neighborhood clinics in both rural and urban areas around America. It was a formula that not only empowered communities to establish and direct health services at the local level via consumer-majority governing boards, but also generated compelling proof that affordable and accessible health care produced compounding benefits.

Health centers enjoy strong, longstanding bipartisan support by Administrations and policymakers at all levels, as well as in both the private and public sectors. President George W. Bush committed to double the number of patients seen by these centers during his presidency and succeeded. President Barack Obama committed an additional \$2 billion in the American Recovery and Reinvestment Act of 2009 to help these important Community Health Centers expand their operations and build new centers. President Donald Trump committed funds focused on helping health centers tackle substance abuse and mental health issues, with a particular focus on the opioid crisis.

Community Health Centers serve as the primary medical home for more than 27 million people in 10,400 rural and urban communities across America. The more than 1,400 Community Health Centers across America provide care to more than 25 million Americans every year. That's 1 in 10 American kids, 1 in 6 Americans living in rural areas, and 1 in 3 Americans living in poverty.

These hardworking and dedicated health care providers improve the nation's and their community's health by focusing on access, quality and cost. Health centers exceed national averages for:

- Patients with good control of their diabetes,
- Hypertensive patients with well controlled blood pressures,
- Pediatric patients who receive weight assessment and counseling for healthy weight, and

- Patients screened for depression.

As a result of this comprehensive, quality care, health centers also reduce costs to health systems by decreasing the use of costlier providers of care, such as emergency departments and hospitals. Additionally, these centers provide a significant economic impact, including thousands of jobs across the state and billions of dollars in revenue.

In 2014 the Rockbridge area was fortunate to become one of the communities that received a federal grant to establish a community health

center. As a Community Health Center we have the mandate and challenge to educate, to treat and prevent illness, and to serve underserved communities while remaining a financial sustainable nonprofit organization. The Rockbridge Area Health Center is a multi-discipline organization providing medical care, behavioral health services, dental care and health education under one roof.

The success of the Rockbridge Area Health Center (RAHC) is directly attributed to the strong public and private support it receives from the community. RAHC currently serves over 5000 Rockbridge area residents with a wide range of services. The staff of the health center are devoted professionals who enjoy working in a comprehensive health care environment and making a difference in their patients' lives. As a Community Health Center it is important to recognize the relationships that exist with other organizations and nonprofits that contribute to the health and well-being of individuals and the community as a whole.

A Community Health Center is for everybody. Even though our main responsibility is to ensure an access point for someone who has limited insurance or no insurance, we have broadened our base to serve all. We believe our approach to care and the quality of our staff is a benefit to the community.



Suzanne Sheridan, RAHC Executive Director and CEO.

RAHC: A Caring Journey

Health care for the uninsured and working poor in the Rockbridge area became a bit easier to get on a winter Thursday in December, 1992. The Rockbridge Area Free Clinic opened its doors on Dec. 17, and from that day on, the clinic, now the Rockbridge Area Health Center, has been in a race to meet the demands created by more patients, more areas of need and lack of space.

On that December afternoon, the clinic opened a half hour early at 4:30 pm, anticipating a larger turnout than originally expected. After registering, patients were seen by volunteer doctors on a first come-first served basis. The clinic also began dispensing free or low cost medicines by volunteer pharmacists. At the time, anyone with an annual income under 150% of the federal poverty level was eligible for free clinic Services.



The Free Clinic started in this building on North Main Street. It's now the location for Rockbridge Area Transportation Service (RATS).

The location of the Free Clinic for its first ten years was on North Main Street near the Rt. 11 bypass in a small building that is now the office for the Rockbridge Area Transportation Service. A team of volunteer workers had converted the space from its former use as the Lexington Boy's Club. Block walls had to come down, and interior framing and drywall, heating and air conditioning, plumbing and wiring installed. Several hundred hours of work was done by local volunteer builders and materials were donated by local businesses.

The building was small - about 700 square feet - with the necessary exam rooms, pharmacy and administrative space and small waiting room. Often patients had to wait outside or in their cars in the parking lot.

Don Miller was the first president of the Rockbridge Area Free Clinic, and one of the prime movers getting the project up and running. Dr. David Ellington was also a key player. He organized the volunteer physicians, nurses and pharmacists who worked at the clinic every Thursday evening. Dot Fogo was a volunteer nurse and a charter board

member. Jeannie Jeffer was a volunteer pharmacist and also a charter board member.

The clinic was busy from the very beginning. The News-Gazette reported that not even a month after it opened, the Free Clinic had seen 26 patients and filled 55 prescriptions on a Thursday in early January. It reported in April, 1993, that 28 doctors, 43 nurses and 15 pharmacists were volunteering time on a rotating basis to staff the clinic's Thursday evening hours.

Fundraising was important from the beginning. Former NASCAR driver Rick Mast, along with a dedicated committee headed by Ward Huffman, got involved by putting on a golf tournament in 1994 which raised \$28,000 the first year. The following year, they added a concert at the Virginia Horse Center, and invited a number of Rick's fellow NASCAR drivers to sign autographs and donated NASCAR memorabilia for a silent auction. These two annual events raised tens of thousands of dollars for the Free Clinic for a number of years. An annual direct fundraising campaign to local residents was started, and continues to be today an important source of operating funds.



Rick Mast signs autographs at a Rick Mast Classic event at the Virginia Horse Center in 1994. This event raised thousands of dollars for the Rockbridge Area Free Clinic over a period of years



Gathered in 1993 is the charter board of directors of the Rockbridge Area Free Clinic. Front row from the left: Sue Ann Mead, Margaret Walker, Don Miller, Sharon Leech and Jeanne Jeffer. Back row from left: Fred Kirchner, Larry Broomall, David Dugan, David Ellington, Dot Fogo, Art Roper and Frank Correll. (Patrick Hinely photo)



A grant from the AmeriGroup Foundation helped fund the RxPartnership, which provided payment assistance for medication to Free Clinic patients. Clinic Director Suzanne Sheridan (left) and State Senator Creigh Deeds (right) were joined by representatives of the foundation.

In 1995, the Free Clinic hired its first executive director. Suzanne Simpson, now Suzanne Sheridan, was brought in to oversee the management of the clinic, assist doctors with referrals, manage pharmacy operations, volunteer recruitment and training, fund raising and public relations. Twenty-three years later, Sheridan remains the only executive director that the Free Clinic, now the Rockbridge Area Health Center has ever had.

Also that year, The Lexington-Rockbridge United Way made a \$15,000 grant to the Free Clinic. This grant, the largest the United Way had made to date, funded the salary of a part-time daytime pharmacist, allowing the Free Clinic to begin filling prescriptions one morning a week by volunteer pharmacists. That first part-time pharmacist, Phyllis Miller, was the Free Clinic's pharmacist until she retired in 2012.

The Free Clinic became a United Way agency in 1996, which provided money to fund operations from the annual community campaign.

Another grant from the Virginia Health Care Foundation funded a nurse-practitioner to work with diabetic and high blood pressure patients, freeing the volunteer doctors to see more patients. That nurse-practitioner split her time among the Rockbridge Area Free Clinic and clinics in Augusta and Highland Counties.

In 1996, the Free Clinic was able to begin filling prescriptions for eligible low-income Medicare recipients. The clinic also added a quarterly women's health clinic, and with a grant from the Gadsden Endowment at R.E. Lee Episcopal Church, started a patient education program.

The same year, the Free Clinic embarked on a successful fund drive to raise \$50,000 locally. The growth in the number of patients, from 200 in its first year to 1,200 by 1995, added to operating costs,

the largest of which was prescription drugs. While the Free Clinic was seeing more patients, it was estimated at the time that there were thousands more people in the Rockbridge area that qualified them for Free Clinic services.

By 1998, the Free Clinic was serving even more people. Over 1750 patient visits were recorded and over 8,000 prescriptions filled. Thirty-five doctors, 30 nurses, a nurse-practitioner, a dentist and 30 non-professional volunteers provided the clinical and much of the clerical and administrative services. It was clear that the Free Clinic's facilities were increasingly inadequate. Suzanne Sheridan said, "... it is frustrating to be limited in the services we can provide...by the size of the building." The clinic's board of directors was beginning a search for a larger facility.

1998 also saw the Free Clinic add a paid nurse-practitioner through a grant from the Virginia Health Care Foundation. At first the nurse-practitioner saw patients three days a week, two of which were mainly for treating patients with chronic conditions such as diabetes, hypertension, asthma and bronchitis. The other day was devoted to health education and support groups. By the next year, the paid nurse-practitioner was taking appointments five days a week, in addition to the regular Thursday evening hours by volunteer physicians. An outreach program where the nurse-practitioner had office hours in Goshen, Natural Bridge Station and Vesuvius one Tuesday a month was started.

By the year 2000, the Rick Mast Golf Tournament and Concert, a two-day event in September, was raising \$60,000 a year for the Free Clinic, contributing to an almost \$300,000 annual budget. That year, the board of directors completed a strategic plan for the clinic's future, that included a larger facility. The board had established a building fund the previous year and created a facility steering committee.



The Free Clinic moved to the Northridge Lane site in 2003.

A year later, in November the Free Clinic announced that it had purchased the former Williams Funeral Home building at 25 Northridge Lane, next to Woody Chevrolet, after a three-year search. The clinic planned to renovate the building; use about half the space for the clinic and lease out the remaining space. The clinic space would

contain a waiting and reception area, five exam rooms, a regulation-sized pharmacy, six office spaces, meeting room and kitchen. There was also provision for two dental operatories to be added at a future time. The clinic's board also announced that a capital campaign would begin soon.

At the same time as the announcement of the building purchase, the clinic announced that it was beginning to offer dental services. The weekly clinics were held at the Lexington-Rockbridge Health Department until facilities could be built in the new building.

In July, 2003, the Free Clinic moved into its new building. By that time, the clinic was serving approximately 2,000 patients a year, but the number of people eligible for its services had grown to between 9,000 and 10,000. The Free Clinic had office hours five days a week with two evening sessions.

By March of 2004, the "Hope for a Healthy Tomorrow" capital campaign had raised almost \$700,000 toward a \$1.1 million goal, and topped \$1 million in August. The \$1.1 million goal was reached in February, 2005.

Managing the clinic's prescription drug program was an ongoing issue. For much of its existence, the Free Clinic dispensed prescriptions directly from its own inventory of donated, low cost and purchased medications, by a licensed pharmacist. At first, the pharmacists were volunteers but eventually as the demand grew, a part-time paid position was created. Volunteers spent hours filling out request forms to be sent to drug manufacturers for medicines provided under free and low-cost programs. In 2004, a public/private partnership between drug companies and 31 community clinics in Virginia was created to distribute medicines for the uninsured through the member free clinics.

2007 saw the first Bull and Oyster Fest fundraiser, which was held at Lime Kiln. Successive Bull and Oyster Fests took place at the Free Clinic itself and then moved to the Devils Backbone brewery. For the past two years, the Virginia Horse Center has hosted the event.

Providing dental care had always been a goal of the clinic's board and management. Beginning with the program at the health department, the Free Clinic had sought to increase access to dental care to its patients. There wasn't enough money in the budget initially to build and equip dental spaces at the clinic's new facility, but through grants from local foundations, contributions from Lexington's two Rotary Clubs and other gifts, the clinic was able to equip a four-chair dental clinic. The new facility opened in January, 2008. The clinic was staffed by local volunteer dentists and dental assistants, along with one paid part-time assistant. In June, 2009, the dental clinic began providing dental services to children, financed in part by a grant from the Annie E. Casey Foundation.

Basic mental health services was another area where there was an identified need. A 2010 grant from the Virginia Health Care Foundation to provide these services to uninsured in the state brought together four area organizations including the Free Clinic to provide a counselor to be shared by the Rockbridge Area Free Clinic, the Alleghany Highlands Free Clinic, and the Rockbridge and Alleghany Community Services Boards. This was an effort to address depression and anxiety,

among the top diagnoses along with diabetes and hypertension at Virginia's free clinics.

Since the time the Free Clinic opened in the new location in 2003, it needed more and more of the space in the building previously leased to outside tenants. Several renovations converted space to clinic use, until less than a decade after it moved to Northridge Lane, the Free Clinic occupied the entire building.

In January, 2012, funded by a federal grant to help develop a sustainable care system in medically underserved areas, the Free Clinic spearheaded a community visioning session, with sponsorship from Carilion Stonewall Jackson Hospital. This event brought together over 200 people at VMI's Center for Leadership and Ethics, representing a broad spectrum of community organizations. This was the beginning of a 12-month project to assess the health of the community, develop a strategic plan and create a model of health service delivery for all area residents. Out of this came the MAPP project – Mobilizing for Action through Planning and Partnerships.

The participants identified four priority areas for health improvement in Rockbridge: access to health services, mental health, nutrition, and oral health.

At the time the MAPP project was underway and into 2013, Free Clinic Executive Director Suzanne Sheridan and the clinic's board were aware that changes in health insurance brought about by the Affordable Care Act of 2010, or Obamacare, were changing the landscape for delivering health care to low-income patients. The Free Clinic model was becoming unsustainable. The growing Free Clinic needed more than volunteer doctors and dentists were able to provide. Health insurance changes were expected to allow many more low-income families to obtain health insurance, but there would still be a need to assist those with high deductibles and co-pays. Medicaid expansion could result in many people who were not eligible for ACA-subsidized insurance to access the health care system.

Sheridan and the board began to consider changing from the free clinic model to a new entity called the Federally Qualified Health Center. An FQHC could accept Medicaid and Medicare payments, it could take patients with health insurance, and it could offer sliding scales of payments for those who were uninsured or underinsured. There were federal grants available to help fund FQHCs, particularly those in medically underserved areas like Rockbridge. Becoming an FQHC would mean hiring medical and support staff, but it would position the organization to help a much broader segment of those needing health services in the area. And, it would remain a private, non-profit, locally-controlled entity.

The Free Clinic officially became the Rockbridge Area Health Center on January 1, 2013, but the transition to the FQHC model would take a bit longer. A \$775,000 federal grant in the fall of 2013 helped prepare the center for the transition. In February, 2014, the Health Center closed for two weeks for extensive renovations to the building, adding more exam rooms, an on-site medical lab and a dental lab, and to improving flow through the building. On February 24, it reopened as a Federally Qualified Health Center.

A sliding fee scale was introduced so that the center could start charging patients according to their ability to pay, which opened the center up to many more people with needs other than just the uninsured. “We’re open to anyone, regardless of their ability to pay or not pay,” said Sheridan. “We offer medical, mental health and dental services. Anyone at 200 percent or below of the poverty level can apply for financial assistance.”

Since becoming the Rockbridge Area Health Center in early 2014 through the end of 2017, the center has seen the number of patients almost double, and the number of patient visits increase by more than 400%. It has gone from a staff of 13 to over 50 professionals and support staff. New programs in women’s health and substance abuse treatment, among others, have been added.

By 2015, it was apparent that the center had outgrown its building, and that projected patient growth would make the situation more critical. The center applied for and received a \$1 million federal grant for an expansion. Realistically looking at present and future needs suggested that the center would need a building much larger than the current 9,000 sq. ft. structure. Much deliberation and planning over two years led the board and staff to decide that adding an almost 14,000 two-story addition to the front and north sides of the current building and gutting and renovating the existing structure made the most sense. The center’s location just north of Lexington is accessible and in the center of the county. The center would not have to locate and purchase land, and then be saddled with selling the Northridge Lane property. It could operate in the existing building while the new section was built, and then move operations into the new part while the old building was being worked on.

Architectural Partners, of Lynchburg, was chosen to design the building, and Thor Construction was engaged as the general contractor. Official groundbreaking was held on May 4, 2018, though work



Groundbreaking for the Rockbridge Area Health Center’s building expansion occurred on May 4, 2018. From the left: Matt Paxton, Steve Grist, Dr. Jane Horton, Dr. David Ellington, Suzanne Sheridan, Frank Friedman, Debbie Garrett, Dr. John Sheridan, and XXXX XXXXXXXX.

had already started several weeks prior. The building is expected to be completed in late spring of 2019.

Throughout its 26-year history, the board and management of the Free Clinic and the Health Center have shown a remarkable capacity to adapt to changes in health care and health care finance, to grow the organization in capacity and services, and to keep the center patient-focused. The current expansion, and the capital campaign to help fund it, will position the center to meet expected growth probably for the next decade. But if history is any indicator, the center’s needs and the health care system, will look a lot different in 2030. The center’s focus on patient-centered health and wellness, though, will be unchanged.



Dr. David Ellington examines a patient at the Free Clinic in 2004. Dr. Ellington was a charter board member, board president and medical director of the Free Clinic.



Dot Fogo served on the Free Clinic board of directors and as a volunteer nurse for many years.

Medical Patients at RAHC Benefit From A Comprehensive Care Model

From a very modest beginning some 26 years ago, with volunteer physicians, nurses, pharmacists and administrators, the Rockbridge Area Free Clinic evolved into today's Rockbridge Area Health Center, which offers a broad spectrum of health care services, and employs a staff of over 50 providers and support staff.

While the center provides dental, behavioral health, health education and a wide range of support services to the community, let's look closer at the medical side of the Health Center.

Patients come to the Health Center for the same reasons that patients go to any other general medical practice. They come because they are ill or for well-visit check-ups or for DOT, CDL and school bus driver physicals. They bring their children for immunizations. They come for ongoing monitoring and treatment of chronic diseases like diabetes and high blood pressure. They come for referrals for imaging and to area specialists affiliated with Carilion and Augusta Health, or other health systems. They come for women's health exams, family planning and for pre-natal care.

The Health Center sees patients of all ages and all income groups. While many of the center's patients have health insurance, or Medicare or Medicaid, the center offers a sliding scale of discounts for those uninsured or under-insured.

Last year, the Health Center received certification as a Patient Centered Medical Home (PCMH). That designation required the center to meet the requirements of five functions and attributes.

It has to offer comprehensive care, meaning that it is accountable for meeting the large majority of each patient's physical and mental health care needs, including prevention and wellness, acute care, and chronic care.

Being a PCMH requires that care be patient-centered, with an orientation toward the whole person. Partnering with patients and their families requires understanding and respecting each patient's unique needs, culture, values, and preferences. The medical home practice actively supports patients in learning to manage and organize their own care at the level the patient chooses.

As a Patient Centered Medical Home, the Health Center coordinates care across all elements of the broader health care system, including specialty care, hospitals, home health care, and community services and supports. Such coordination is particularly critical during transitions between sites of care, such as when patients are being discharged from the hospital.

The Health Center's services must be accessible, with shorter waiting times for urgent needs, enhanced in-person hours, around-the-clock telephone or electronic access to a member of the care team, and alternative methods of communication such as email and telephone care.

Finally, the Health Center had to demonstrate a commitment to quality care and to continuous quality improvement using measure-

ments of such things as outcomes and patient satisfaction.

The medical staff is organized into teams of three, each team with a physician or family nurse practitioner, a nurse and a medical assistant. Currently, there are four such teams in the family medicine area, two in pediatrics and a women's health team. Another physician will be joining the Health Center's staff this fall in the family practice area.

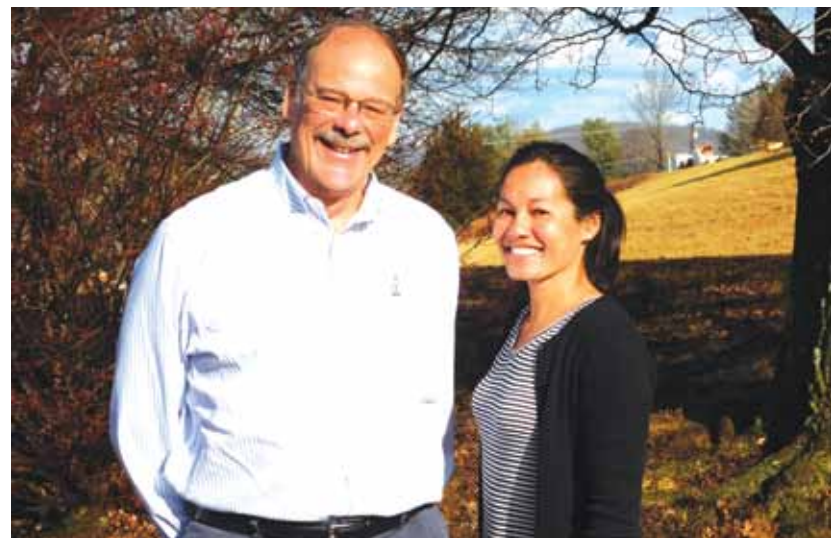
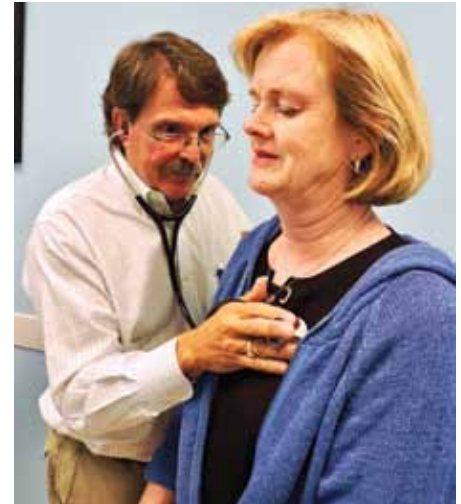
Having these teams helps to keep the operation on schedule. Rarely do patients have to wait more than 10 minutes if they arrive on time for an appointment.

If you look at the biographies of the doctors and nurse practitioners on staff, you will see a common thread, that of wanting to serve in a rural, medically underserved area like Rockbridge County. You will also see that many have local ties, having grown up in the area.

Dr. John Sheridan, the center's Medical Director, is a Lexington native, and has worked in private practice and as an emergency room physician at Augusta Health, and emergency room director at Carilion Stonewall Jackson Hospital and Alleghany Regional Hospital.

Dr. Marcia Harris is a family practice physician who completed her residency at East Tennessee State University in 1998 and spent her career serving communities in southwest Virginia before landing in Rockbridge County.

Dr. James Kennedy, one of the center's pediatricians, lived in the county as a child but left when his family moved away. He practiced in Texas for much of his medical career in the Parkland Hospital system.



His parents moved back to the Natural Bridge area in the 1980s, and he relocated here later to be near them. He said he has always preferred rural settings, both to live and to practice medicine. He said of pediatrics, “With kids, you have a chance to make a difference in their health for the rest of their lives. We can give them a good start.”

Dr. Kim Escudero, also a pediatrician, moved to the area with her husband and three children to be closer to family. She believes that “It takes a village to raise a child.” She goes on to say, “Nothing could be truer. Here at RAHC, we do our best to maintain regular communication with other organizations such as RAISE, CSB, Head Start and the various school counselors, to name just a few. By reaching out to the community, we can ensure that our patients are getting the services they need. By combining our efforts, our patients will be afforded/provided all the opportunities available in order to help maintain healthy growth and development.”

Elizabeth Berry was born and raised in Rockbridge County, and is a board-certified Family Nurse Practitioner. She has a strong background in public health and community outreach from her work with the local health department.

Christine Shoaf is a Family Nurse Practitioner with a Masters of Science in Nursing from Vanderbilt University. While at Vanderbilt, her training was in an inter-professional setting. She was on a team with a medical student, a pharmacy student and a social work student. That approach, in which a patient's needs are seen and addressed by professionals looking at the whole person, is similar to the Health Center's approach, and is a big reason why she and her husband decided to move to the area. “We fell in love with the town,” she said of Lexington.



Heather Morrow, the Health Center's Patient Care Coordinator, grew up in Rockbridge County and has been a nurse for over 20 years. She said that the center delivers excellent care because the staff has a great sense of teamwork. That sense of working together can mean that a doctor seeing a sick child may notice that dental work is needed, and can get the child seen by one of the center's dentists. “People enjoy what they do here, and it's reflected in the care they provide.”

The holistic approach to health care – looking at the whole person's physical, mental and social welfare – is relatively new. By offering a broad spectrum of care under one roof, with professionals trained and enthusiastic about practicing in this new way, the Rockbridge Area Health Center is in the forefront of health care today.

Medical Providers



**CHRISTINE SHOAF, MSN, RN,
FNP-BC**

Christine Shoaf is a Family Nurse Practitioner and moved to Rockbridge County in 2016 with her husband who is part of the Washington and Lee University community. She received a Bachelor of Arts in Environmental Science from New York University and a Master of Science in Nursing from Vanderbilt University. There, she was an active member of the Sigma Theta Tau International Honor Society of Nursing. A practitioner of family medicine, her special interests at RAHC include developing care plans for patients and their caregivers that are personalized and integrated within the healthcare team. During her free time, Christine enjoys spending time with family, as well as hiking, camping, and trail running around the beautiful Shenandoah Valley. She completed the San Francisco marathon in the Fall of 2017. She has also immersed herself in the community through her volunteerism with the Lexington-Rockbridge Jaycees.



MARCIA HARRIS, MD-PHD

Dr. Marcia Harris has lived in the Blue Ridge Mountains for over a decade and moved to Rockbridge County in early 2018. She earned a Bachelors of Art in Zoology from The University of South Florida, a Doctor of Philosophy in Molecular Biophysics from Florida State University, and a Doctor of Medicine from the University of South Alabama College of Medicine. Through her past work, Dr. Harris was awarded as a National Institute of Health (NIH) Diabetes Institute Honoree and a Ledet Scholarship for Outstanding Character. With over 20 years of clinical experience in Family Medicine with a special interest in diabetes education and rural healthcare, she joined RAHC in early 2018. When not providing care to patients, Dr. Harris enjoys spending time with family and friends, gardening, reading, hiking, and kayaking. She is looking forward to her next kayak trip on the New River.

Medical Providers

JAMES KENNEDY, JR., MD

Dr. James Kennedy, originally from Southwest Virginia, returned to the Commonwealth to practice pediatrics at RAHC. He earned a Bachelor of Science in Forest Resources and a Master of Science in Application of Forestry from the University of Georgia, a Doctor of Medicine from the Medical College of Georgia, and completed his residency in the Department of Pediatrics at the University of New Mexico Hospital in Albuquerque. A Board Certified Pediatrician, Dr. Kennedy joined RAHC's team in 2016 with over 20 years of experience, including leading a team of physicians at Parkland Health and Hospital System in Dallas, Texas. Dr. Kennedy is an advocate of preventive medicine and helping children and adolescents adopt healthy lifestyles early in life and is an active member of the American Academy of Pediatrics. In his free time, Dr. Kennedy is a cycling enthusiast and enjoys hiking, camping, and being outdoors. He enjoys bicycling on the Blue Ridge Parkway.



JOHN SHERIDAN, DO

Dr. John Sheridan was born and raised in Rockbridge County and earned a Bachelor of Science in Biology from Washington and Lee University and a Doctor of Osteopathic Medicine from the West Virginia School of Osteopathic Medicine. His extensive clinical experience includes serving as Emergency Room Director at Alleghany Regional Hospital and in the same role at Carilion Stone-wall Jackson Hospital, as well as Emergency Department physician at Augusta Health, Helene Fuld Medical Center and in private practice. Dr. Sheridan services as RAHC's Medical Director and joined the team in 2015. Outside of his work at the Health Center, he is the Operational Medical Director for Rockbridge County and serves as the Chair of the Rockbridge County Fire and EMS Commission. Dr. Sheridan enjoys hunting, fishing, working on his family farm and working in his flower garden. He also enjoys music from the late 60's and early 70's and saw Eric Clapton play in Hyde Park the summer of 2018.



ELIZABETH BERRY, MSN, RN, FNP-BC

Elizabeth Berry was born and raised in Rockbridge County and earned a Bachelor of Science in Nursing from Liberty University and a Master of Science in Nursing from Simmons College. Elizabeth is a board certified Family Nurse Practitioner and has a strong background in public health and community outreach from her previous work at the local Health Department. Elizabeth has practiced family medicine at RAHC since 2016 as a Family Nurse Practitioner and has had a passion for serving the community in which she was raised. In her spare time, Elizabeth enjoys spending time with her family and traveling. She looks forward to vacationing in Myrtle Beach every year.



KIM ESCUDERO, MD

Kim Escudero, M.D. moved to the Shenandoah Valley in June 2015. She earned a Bachelor of Arts in Biology from Siena College, a Doctor of Medicine from Albany Medical College and completed her residency in Pediatrics at the University of California at Irvine. Dr. Escudero was actively involved with Mammoth Medical Missions, a volunteer non-profit group dedicated to providing medical care to underserved and disaster affected communities around the world. Additionally, she was a commissioner with First Five of California, a group which promotes health and development in children aged 0-5. Dr. Escudero joined RAHC in 2017 as a Board Certified Pediatrician, caring for children from birth to age 18. She brings with her 20 years of pediatric experience. Her special interests include nutrition and asthma.

Dr. Escudero enjoys her free time with her husband, an orthopedic surgeon, and 3 children, raising animals on their farm, mountain biking and exploring the beautiful Blue Ridge mountains.



RAHC Dental Program

Traditional Office Practices and School Outreach Program Reaching Adults and Children

By Sheila Colón

When it comes to the Rockbridge Area Health Center's Dental Program, here is something that might surprise you: this past year, during both the spring and fall terms, the RAHC dentists and staff took two portable dental chairs, two dental compressors, two suction machines and one portable dental x-ray machine to elementary schools in the county where they examined the teeth of 966 county students.

The students had x-rays taken, fluoride treatments and sealants applied and instructions given on how to correctly brush their teeth. As a parting gift, each student was given a new (and for some, their very first) toothbrush.

"Education is so important," said Dr. Stuart Fargiano, Director of Dental Services at RAHC. Many of the kids did not know how to brush their teeth and even some of the parents did not have toothbrushes. We, hope, by 2022, to serve all middle and high school students who would like to receive the free cleaning and examination."

According to Fargiano, if a student needs additional dental work, they can make an appointment to see a dentist at the Health Center or with a dentist at one of the other practices in town. Otherwise, all preventive dental work is done on site so students don't miss school and parents don't have to miss work.

In addition to Fargiano the RAHC Dental Program includes three dentists, two hygienists and seven dental assistants, all full-time. In the past three years, the dental program has grown from 1,838 patients in 2015 to 3,079 in 2017. Patient visits nearly doubled in the same time span with 6,961 patient visits in 2017 as compared to 3,583 in 2017.

There are now two RAHC dental offices in the county with the addition, earlier this year, of the Mountain View Family Dentistry in

Buena Vista, a satellite of the Lexington practice. Fargiano said that this new site decreases barriers to care by offering easier access to many patients in the southern portion of Rockbridge County.

"We're a family type practice open to everyone, regardless of income or ability to pay," said Fargiano. "This is a regular, family dental practice."

The dental program is fairly evenly divided with a third of the patients using private insurance, a third who are on a sliding scale to help offset the lack of insurance or an insurance shortfall and a third who are on Medicaid.

The RAHC program is also a full-service dental practice providing access to affordable stainless steel crowns for children, crowns and root canal services for children and adults as well as extractions for all age levels. Fargiano noted that 1,661 teeth were extracted in 2017. Nitrous oxide, commonly known as laughing gas, is also available to those who experience anxiety at the dentist office.

"We offer all these services as well as a way to reduce barriers and increase access to high quality dental care," said Fargiano. "Families can get their dental needs met locally and avoid having to miss a day of work to travel outside the county for a root canal or a crown."

"When it comes to those who haven't seen a dentist, Rockbridge County is much higher than the national average," Fargiano said. "Over half our county residents have not seen a dentist in the past two years. Not only do we treat the dental needs of our patients but we also spend time talking to them about how to take care of their teeth. Poor dental hygiene can have a negative impact on our heart and overall health."

According to Fargiano, dental disorders have become such a problem in the county that they now represent a top medical issue at both Stonewall Hospital and the Augusta Health Hospital emergency rooms.

The RAHC Dental staff is eagerly anticipating the completion of the building remodel. By increasing the size of the facility, the dental program will double in the number of examining rooms it will have access to from four to eight. Fargiano hopes to hire two additional dentists once the building is completed and an additional goal of 2019 is to add basic dental implant services to both dental clinics.

"Many of our patients have loose dentures, which are not very functional or aesthetic," he said. "Implants can stabilize the dentures, which helps them eat much better and improves the quality of their lives." Additionally, the new building will offer a designated waiting area for dental patients.

The expansion of the Rockbridge Area Health Center, and its dental operations, means more people receiving health and dental care that otherwise might remain elusive. "It's going to address the bottle neck. Our current facility holds people back because we can't see all of them due to space constraints," Fargiano said. "We need additional space in order to help more people receive the care."



Ribbon cutting for the Mountain View Family Dentistry practice in Buena Vista. Mountain View is a branch of the Health Center's dental program.



Dr. Jamie Clark is one of two dentists working at the Rockbridge Area Health Center's Northridge Lane location.



Dr. Steven Woodard provides dental care at the Mountain View Family Dentistry practice in Buena Vista.

Dental Providers



STEVEN WOODARD, DMD

Dr. Steven Woodard moved to Rockbridge County in 2017 with his wife, who is part of the Southern Virginia University community, and joined RAHC as a Family Dentist - working primarily out of Mountain View Family Dentistry, RAHC's second dental site in Buena Vista. Dr. Woodard earned a Bachelor of Science in biology from Brigham Young University and a Doctor of Dental Medicine from the University of Louisville School of Dentistry. Dr. Woodard is a member of the American Dental Association, Virginia Dental Association, and Shenandoah Valley Dental Association. He is passionate about making the dental experience comfortable and meaningful for patients - he's even been known to break out into song. Dr. Woodard, his wife, and two small children enjoy taking outdoor family trips exploring Cave Mountain Lake, Natural Bridge State Park, and all of the hidden gems of Rockbridge County.



JAMIE CLARK, DDS

Born and raised in Virginia, Dr. Jamie Clark earned a Bachelor of Science in biochemistry from Virginia Tech and a Doctor of Dental Surgery from the Virginia Commonwealth University. Prior to joining the RAHC team in 2015 as a Family Dentist, Dr. Clark provided comprehensive child and adult dental care to Native Americans and Native Alaskan patients in Seattle, WA. She is an active member of the American Dental Association. Dr. Clark loves living in the Lexington area because of the outdoor recreation. After work and on the weekends, she can be found kayaking on the Maury River. She recently went to the Ottawa Kayaking School in Canada where she learned additional tips and tricks about kayak play-boating.

Dental Providers



ELLEN RADICK, RN, RDH

Ellen Radick was born and raised in Rockbridge County and she joined RAHC in 2018 as a Registered Dental Hygienist. After getting inspiration from her father, a local, retired dentist, Ellen earned an Associate of Applied Science in Dental Hygiene from Virginia Western Community College and completed the Registered Nursing Program. She earned a Bachelor of Science in Health Science from Lynchburg College. With over 20 years of dental experience, Ellen's passion in life is working with people to improve their oral hygiene, and to make them laugh from time to time. During her free time, she likes to read, garden, and cook. Her favorite thing to make is a fresh Greek salad from her vegetable garden.



PAM DYE, RDH

A long-time resident of Rockbridge County, Pam Dye joined RAHC as a Registered Dental Hygienist in 2015. Pam earned an Applied Science degree majoring in Dental Hygiene from Wytheville Community College. She has been practicing for over 16 years as a Registered Dental Hygienist. Pam primarily works at Mountain View Family Dentistry, RAHC's second dental site in Buena Vista. Her passion for dental care prompts her involvement with teaching and helping patients understand the importance of good dental hygiene and its effects on overall health. She enjoys her family, reading, exercising, and spending time unwinding at the beach - especially at Destin Florida beach.



HAMZEH AL QUBLAN, DDS

Dr. Al Qublan moved from Central Virginia to Rockbridge County in the summer of 2018 with his wife and small child to be closer to extended family and friends. He joins RAHC as a Family Dentist. Dr. Al Qublan earned a Bachelor of Science in Biology, a PhD in Biomedical Sciences from Virginia Tech and a Doctorate of Dental Science from the University of Maryland. Throughout college, Dr. Al Qublan was a member of the American Student Dental Association and the Student Research Group at the University of Maryland. He has experience providing dental care to underserved communities as a result of his past work at Community Health Centers in both Maryland and Virginia. In his free time, Dr. Al Qublan enjoys spending time with family, hiking, and soccer. His next big adventure will be walking the Blue Ridge Mountain trails and enjoying the fall foliage.

Behavioral Health Services Expanding at RAHC

In 2010, shortly after adding dental services and in support of its mission to provide high quality, comprehensive and affordable health care, the Rockbridge Area Health Center (RAHC), together with Rockbridge Area Community Services, received a collaborative Virginia Health Care Foundation grant to provide mental health services. That year, they hired their first counselor. Eight years later, Behavioral Health serves as an integral part of RAHC's services and continues to expand to meet the growing needs of the community.

With one psychiatrist and three counselors now on staff, RAHC offers a full range of behavioral health services, including psychiatric medication evaluation and management; individual counseling and psychotherapy for children 5 and older, teens, families, and adults; group and couples counseling; and Governor's Access Plan (GAP) assessments.

In addition to treating mental health and emotional conditions, RAHC's counselors are helping to improve their patients' lives and reduce stress that can cause or worsen symptoms of medical illnesses such as headaches, sleep problems, high blood pressure, diabetes, obesity, chronic pain, irritable bowel syndrome (IBS), and more. RAHC also employs a substance abuse counselor, who treats alcohol addiction, opioid and other substance use disorders, and the center has plans to expand their substance abuse services in the coming year.

"Our counselors are seeing patients with a variety of mood and mental health conditions such as anxiety, depression, post-traumatic stress and more," said Zachary Taylor, RAHC's director of behavioral health. "However, we also focus on helping patients with a variety of behavioral changes, such as helping them learn to overcome insomnia, quit smoking, reduce stress and improve their relationships, all to improve their overall health."

Expanded Services

Mental health services are desperately needed in Rockbridge County, where, like the country as a whole, providers are in short supply. "People tell me all the time that if we weren't here, they wouldn't know where to go, at least not within an hour's drive of here," said Taylor.

In September 2018 RAHC received a grant to expand substance use disorder, including opioid use, as part of the nationwide outreach to combat the opioid crisis. RAHC plans to add a new behavioral health case manager and increase the hours of psychiatric care available. The case manager will help identify patients with mental health concerns who need additional support outside the clinic and will be able to go into the community and into homes to help people where they live.

Currently this type of home visit is only available on a limited basis in the area, and typically only to people with Medicaid. This expanded service could be offered to any patient with a mental health need who might benefit from community-based support.

Integrated Care

Integrated primary and behavioral health care is a central tenet of RAHC's mission. Counselors work alongside doctors and dentists to support each patient as a whole person.

"One of the really unique things about our counselors here is that we often do joint visits with the medical providers," said Taylor. "If someone comes in for a sleep issue, or chronic pain, or headaches, for example, they'll see their medical provider who might prescribe a medication, and then we come into that same room and provide ways they can help themselves that will improve their condition better than the medication could alone."

Smoking cessation is a perfect example of how successful integrated care can be. "In most primary care clinics if you go in and you want to quit smoking, you'll be given a nicotine patch and perhaps an educational guide," Taylor said. "We know that quitting smoking is one of the hardest habits to break because nicotine is so addictive, and that simply giving people a nicotine replacement patch is in many cases not enough."

"We're able to not only provide nicotine replacement therapy through our medical services, but in that same visit we can spend 20 or 30 minutes with a patient right there, that day, and give them the cutting-edge tools that we know help people actually break that habit. And we know the combination of medication and counseling is the most effective treatment available. One without the other just isn't as effective."

RAHC is the only clinic in Rockbridge County that offers integrated medical and behavioral health services, and it is making an impact on outcomes. Whole person care creates better outcomes, said Taylor. "There's almost no medical diagnosis that can't benefit from changing your lifestyle or changing your mood or improving your outlook about your condition," he said. "Physical health and mental health go hand in hand. It's a two-way street."

Normalizing Mental Health Care

Taylor believes behavioral health is often misunderstood. "I think the best part of what we do here is to normalize mental health care. We let people know that your mood, your stress level, your mental health is just as important as your physical health. And if you're not happy with your life—if you're too stressed, if your relationships are not well—it doesn't matter how healthy your body is. If those things aren't working you're not well."

"We are removing the barriers and stigma to mental health care and showing people that mental health care is just as important as physical health care, and we're proving that by putting both services not only next to each other, but by addressing them at the same exact time, under one roof and in a single visit."

So what do the behavioral health providers at RAHC most want the community to know? "Don't wait. Don't feel like your problem isn't big enough yet. Don't feel like you have to try to handle it on your own," Taylor said. "You can come in for a wide range of changes you want to make in your life, whether that's a career change, or to have better relationships or to change your diet or lifestyle, or just not be so angry...literally any behavior that's affecting your life, we can help you make real, concrete changes."

RAHC's Behavioral Health team provides treatment for a wide range of mental, emotional, and behavioral health concerns including:

- Anxiety, worry, and panic disorders
- Depression
- Insomnia
- Grief and loss
- Post-traumatic stress
- Substance Abuse
- Alcohol abuse
- Smoking cessation
- Obsessive-compulsive disorder (OCD)
- Specific phobias
- Relationship problems
- Creating healthy lifestyle habits (diet, sleep, and exercise routines)
- Personal growth and well-being
- Support for making life and career decisions

Behavior Health Providers



CLAIRE CAPRON, LCSW BCD

Claire Capron is a Licensed Clinical Social Worker that sees children, adults and families. She moved to Rockbridge County in 2018 with her husband who has ties to the Washington and Lee University community and is enjoying being settled after years of moving through her work with military families. Claire earned a Bachelor of Arts in Psychology from Rutgers University and a Masters of Social Work degree from the University of Albany. She has extensive experience in both in-patient and out-patient facilities and her most recent work was with military personnel and families near Washington, D.C. She specializes in the treatment of trauma, depression, and anxiety using innovative approaches such as Mindfulness, and EMDR together with traditional therapies. Claire is trained in ART (Accelerated Resolution Therapy), which helps to alleviate flashbacks and nightmares by working with patients to keep the memory but to lose the images of trauma that haunt many people suffering from Post Traumatic Stress Disorder. ART also helps people with severe anxiety by helping them imagine more positive outcomes. In her free time, she enjoys horseback riding and painting on various mediums.



**MOLLY PALLAVICINI, MS,
RESIDENT-IN-COUNSELING**

A native of the Shenandoah Valley, Molly Pallavicini is a counselor that specializes in substance abuse. She earned a Bachelor of Arts in Psychology from Mary Baldwin College and a Masters of Science in Mental Health Counseling from Capella University. Molly is an active member of the Virginia Counselors Association (VCA), and the American Counseling Association (ACA). She has extensive experience working with youth, families, and adults since 1995, in diverse environments from the Community Service Boards to public and private child welfare agencies providing foster care support services to young and their families. Molly joined RAHC in 2017 and her special interests include working with individuals who have substance use disorders, working with women who have experienced trauma, anxiety, depression, anger and grief. She believes in helping people tap into their own resources and strengths. She is passionate about providing a safe, non-judgemental space for individuals to look at underlying patterns, and find better functioning as well as greater well-being. During her free time, Molly enjoys spending time outdoors, running and hiking and has served as a Board Member of the YMCA and has been involved with the Ride With Pride Therapeutic Horsemanship Program. She has a special love for the beach and hopes to "live by the sea" one day.



PAUL VANCE, MD, MPH

Dr. Paul Vance joins RAHC as the telehealth Psychiatrist. He earned a Bachelor of Science in Biology and Chemistry from the University Alaska Anchorage, his Masters of Public Health and Doctor of Medicine from the West Virginia University School of Medicine, and he completed his residency with the West Virginia University School of Medicine and the Charleston Area Medical Center. He is board certified with the American Board of Psychiatry and Neurology, American Board of Preventive Medicine, American Board of Addictive Medicine, National Board of Public Health Examiners, and National Commission for Health Education. Previously, he has worked in an inpatient facility with individuals with Autistic Spectrum Disorder and Trisomy 21 (Down's Syndrome). He has also worked with the United States Air Force and as a Chief Resident in a large medical center helping teens and adults in crisis. With RAHC, he will be working with teens and adults. In his free time, Dr. Vance enjoys hiking, weight training, yoga, reading, cooking, and gardening. He also does long distance cycling including the Trans-Alaska, Trans-American, Coastal, and Southern USA rides.



ZACHARY TAYLOR, MA, LPC

Zachary Taylor is a Board Certified, Licensed Professional Counselor who transitioned to RAHC in 2016 from a private practice in Charlottesville, Virginia. In addition to seeing patients, he also serves as the RAHC Director of Behavioral Health. Zachary earned a Master of Arts in Counseling studying clinical mental health at Eastern Mennonite University. He has worked in a variety of healthcare settings including in family practice, an HIV/AIDS clinic, and behavioral health agencies. Mr. Taylor specializes in counseling and psychotherapies for anxiety, worry, and panic disorders, insomnia, grief and bereavement, chronic pain, smoking cessation, and Obsessive Compulsive Disorder (OCD). He works with children, teens, and adults and has published and spoken at various conferences and seminars on treatments for anxiety and on the role of nutrition in mental health. During his free time, Zachary enjoys taking pictures of plants and nature, taking day hikes around Virginia, and downhill skiing, botany, going to amateur stand-up comedy shows, writing, and spending time with family.

RAHC's Women's Health Programs Provide Care Closer To Home



In 2016 the Rockbridge Area Health Center (RAHC) added a specialty area of care by a dedicated team of practitioners to provide convenient, accessible and comprehensive prenatal and women's health care services for women in all stages of life.

The RAHC women's health practitioners are experienced in providing a full spectrum of health care to teens and adult women. In addition to routine preventive exams and Pap smears and problem/acute visit care, the women's health team offers breast exams with referrals for mammograms, family planning and birth control information, treatment for sexually transmitted infections, preconception planning, pregnancy testing and counseling, and comprehensive prenatal, postnatal, postpartum and menopausal care. All services are available to insured, uninsured, Medicaid and Medicare patients, as well as discounted through an income-based sliding scale program.

Kimary Schatten, CNM, MPH is a Certified Nurse Midwife at RAHC specializing in women's health care in the various stages of women's lives. "Improving access to care has been a passion for me my entire life," said Ms. Schatten.

Throughout her career, Ms. Schatten has provided health care services to a large number of women, as well as delivered over 500 babies, and is certified to provide both obstetric and gynecological care.

In early 2018, RAHC expanded the women's health program and partnered with the University of Virginia in Charlottesville to bring comprehensive Prenatal Care to the Rockbridge area with planned deliveries at UVA.

"SUCH PERSONALIZED, COMPETENT WOMEN'S CARE."

~ Beth

The Prenatal Care includes medical check-ups, lab work, and screenings for women to ensure their babies remain healthy during pregnancy. Also included is education about how to handle and manage the different aspects of pregnancy, such as healthy eating and physical exercise, and what to expect during labor and delivery.

"I'm thrilled to be able to provide women's health services, as well as now offer a local option for Prenatal Care here in the Rockbridge community by partnering with UVA," said Ms. Schatten.

During a RAHC prenatal visit, a baby's development is monitored and routine testing is administered to help find and prevent possible complications. With regular check-ups at RAHC, expecting mothers can also learn how to ease any discomfort they may be experiencing and have the opportunity to ask questions about their pregnancy and the birth of their baby.

Bethany Overstreet, a Rockbridge area resident, became an RAHC prenatal patient for her third pregnancy.

"Kimary took time to listen to my concerns," said Ms. Overstreet. "She and RAHC's women's health team provided me with very personalized and great care."

Prenatal ultrasounds are administered at UVA and patients have the opportunity to choose a Nurse Midwife or an Obstetrician to attend at their baby's birth.

Delivering a baby at UVA gives newborns access to the neonatal intensive care unit (NICU), if necessary. UVA's advanced NICU provides expert care for babies born premature, with low birth weight, or who have a medical condition that requires specialized treatment.

"Without accessible prenatal care, low-income women, in particular, are more unlikely to seek it, as they are often limited by additional factors such as job schedules and lack of transportation," said Suzanne Sheridan, RAHC CEO. "We are happy that we can now provide this care locally which helps to meet this need."

After a baby's birth, patients can continue to benefit from breastfeeding support and postpartum education provided at RAHC. The RAHC on-staff pediatricians are available to provide babies with their follow-up appointments and continued care through childhood.

"After the birth of my baby, I have continued to utilize RAHC's women's services for my well-woman care, as well as the pediatric team for my children," Ms. Overstreet added.

"FRIENDLY, YET PROFESSIONAL. THE PERFECT BALANCE!"

~ Bethany

Rockbridge area resident, Beth Goodberger, was a RAHC prenatal patient and through the partnership with UVA, delivered her baby at UVA Medical Center.

"Kimary's and the RAHC's team's competence, thoroughness and very personalized approach made the entire experience and partnership between RAHC and UVA work seamlessly. Everyone was always on the same page," said Mrs. Goodberger.



"During a prenatal visit, Kimary Schatten, CNM, MPH provides a patient a fetal non-stress test (NST). An NST is a non-invasive prenatal test, which monitors the baby's heart rate and is used to check the baby's health."

“After my baby was born, I went to an RAHC pediatrician for my baby’s one-week and follow-up check-ups,” Mrs. Goodberger added. “It was so convenient, as well as reassuring to also have Kimary in the same building. If questions arose, she was available to join us during the baby’s exam.”

In keeping with its commitment to providing comprehensive care, RAHC offers a four-week series of Prenatal Classes to anyone in the community. Topics include pregnancy, delivery, postpartum, newborn care and breastfeeding.



Every Woman's Life

For Your Breast and Cervical Health

RAHC is able to also offer women’s health services through the Every Woman’s Life (EWL) program. EWL is a public health program that assists uninsured, low-income women gain access to free breast and cervical cancer screening services. Screening and early detection reduces death rates,

improves treatment options and greatly increases survival. To be eligible, women must be a Virginia resident between the ages of 50-64, meet federal income guidelines and be uninsured. A limited number of screenings can also be provided to women age 40-49 and in 2006 the VA General Assembly approved funding to provide diagnostic testing to eligible women between the ages of 18-39 who have symptoms of breast or cervical cancer. Services provided by this program include a clinical breast exam, mammogram, pelvic exam and Pap test. Most importantly, if additional diagnostic tests and/or cancer treatments be required, the Every Woman’s Life program will cover the costs of the treatments.

Additionally, RAHC participates in the Title X program. Established in 1970, Title X provides access to affordable birth control and reproductive health care, and is critical for those who otherwise cannot afford these services on their own.

Title X is the only federal grant program dedicated solely to providing individuals, both men and woman and regardless of age, confidential and comprehensive family planning and related preventive health services. More than four million people rely on the services funded by this program. Many others are unaware that this program exists. Covered services include wellness exams, lifesaving cervical and breast cancer screenings, birth control and contraception education, testing and treatment for sexually transmitted infections (STD’s) and HIV testing.

“RAHC is able to provide patients with family planning counseling and methods in one visit,” said Ms. Schatten. “This is critical, especially for those patients with transportation and financial barriers.”

In the past, the Title X program was administered by the local health department. In 2017 the program was transitioned to RAHC where patients can now receive these services.

As a certified Patient Centered Medical Home (PCMH) RAHC’s women’s health team is able to refer patients to the on-site pediatric, family, dental and/or behavioral health professionals, when necessary. Utilizing the model of the PCMH, a medical home provides health care that is relationship-based with an orientation towards that whole person. Overall patient care outcomes have been shown to be positive when multiple, separate service lines are integrated and co-located within the same facility.

“I feel so honored to have this privilege of helping women and their families through the exciting journey of medical care, pregnancy and delivery,” added Ms. Schatten.



Kimary Schatten, CNM, MPH

Kimary Schatten is a Certified Nurse Midwife who joined the RAHC medical staff in 2016. Together with the Women’s Health Services team, she provides well-women and problem visit care, family planning services, and prenatal care in partnership with the University of Virginia.

Ms. Schatten earned a BA in Biology from Queens College, followed by a MA in Public Health from the University of North Carolina at Chapel Hill, and a Masters in Nursing with a Midwifery Specialty from Oregon Health and Science College.

While spending two years in the Peace Corp in Senegal, West Africa, Ms. Schatten was exposed to the staggering high rates of infant and maternal mortality. This experience was the catalyst for inspiring her to pursue working in public health care.

Ms. Schatten brings an added bonus to RAHC by being fluent in both Spanish and French. She is an active member of the American College of Nurse Midwives and certified by the American Midwifery Certification Board. Throughout her career, Ms. Schatten has delivered over 500 babies and provided women’s health services a large number of women.

“When Kimary joined the medical staff at RAHC, she brought with her the experience of providing health services to many women throughout their lifespan,” said Suzanne Sheridan, RAHC CEO. “She, together with the entire women’s health team, provide such a high-level of personalized and professional care.”

Outside of RAHC, Ms. Schatten enjoys traveling and spending time with her husband, a Washington and Lee University professor, and their two children. Together as a family they enjoy swimming, hiking, camping, picnicking and being anywhere in the outdoors.

RAHC Diabetes Education Program Addresses Growing Chronic Illness Issues

By Sheila Colón

People suffering from diabetes face the possibility of failing kidneys, amputations, and adult blindness, according to the Virginia Department of Health. The Rockbridge Area Health Center is combatting this fate with its early detection and comprehensive diabetes education program.

Linda McGwire is a registered nurse and certified diabetes educator. She works as a member of the medical care teams, supporting the doctors and nurses in their treatment of patients with diabetes. She is a vital resource who helps patients understand and manage their disease by setting goals that are achievable to them.

McGwire meets with 325 patients who take advantage of RAHC's diabetes outreach program. Those who are newly diagnosed, as well as those who have had diabetes for some time, are welcome to participate in the program with McGwire. She spends time explaining the role of exercise, nutrition and medication in helping overcome the symptoms associated with diabetes.

"Advertising has trained us to eat high sugar, high salt. People are eating on the go, or perhaps they are on a limited budget so they buy the least expensive foods. But most of those foods tend to be processed and loaded with sugar, salt and other ingredients that are not good for diabetics – particularly those foods that come in boxes and cans."

"Many of the people I work with have never had any prior diabetes education," McGwire pointed out. "I met with someone recently who was diagnosed with diabetes over 20 years ago and yet had never talked with a health educator." McGwire added that children are at particular risk of obesity and diabetes. "If they (children) are not offered healthy foods that focus on vegetables, fruits, lean meats and nutritious carbs and fats, they are not going to know how to eat and maintain a healthy body," she said.

Much of McGwire's support involves calling and meeting with patients. She clocks in regularly as a support person. Continual education with regard to diabetes becomes an important part of her routine. She says she also helps them with diabetes management and coaching. "I help them get back on the wagon when they've forgotten to take their meds or they've started making unhealthy food choices."

The center plays an important role in helping patients obtain prescriptions and supplies. Newer, better medicines exist for those who are not insured, and she noted that the newer meds make an amazing difference in blood sugar and how those with diabetes feel.

McGwire likes many of the elements of the Mediterranean Diet, which health care advocates note, emphasizes fruits, vegetables, whole grains, legumes and nuts. She also favors the Plate Method.

This diet recommends that individuals fill one half of their plates with non-starchy vegetables, one quarter with lean protein and the remaining quarter with complex grains.

"A big thing for those with diabetes is to be mindful of the drinks," McGwire said. "Recently, I worked with someone who was drinking two liters of soda a day. The soda is cheap and easy to get while healthier options tend to be more expensive."

McGwire pointed out that issues related to poverty and low incomes play a role in diabetes. She noted that steps have been taken to help support the consumption of healthy foods in the area. "Rockbridge Area Relief Association (RARA) makes a big and positive difference in this community. Also, the Supplemental Nutrition Assistance Program (SNAP) can be used at the Lexington Farmer's Market to buy local fresh produce and meats."

Currently, McGwire leads classes at Lexington Prescription Center. October classes will meet from 5-6:30 p.m. on Wednesday, October 10, 17 and 24. The cost for all three classes is \$10.

"They've been great about letting us meet there. I'm looking forward to the completion of the remodel because included in the plans is a large education/conference room. Having an office as well as an education room will be wonderful for me and the patients."

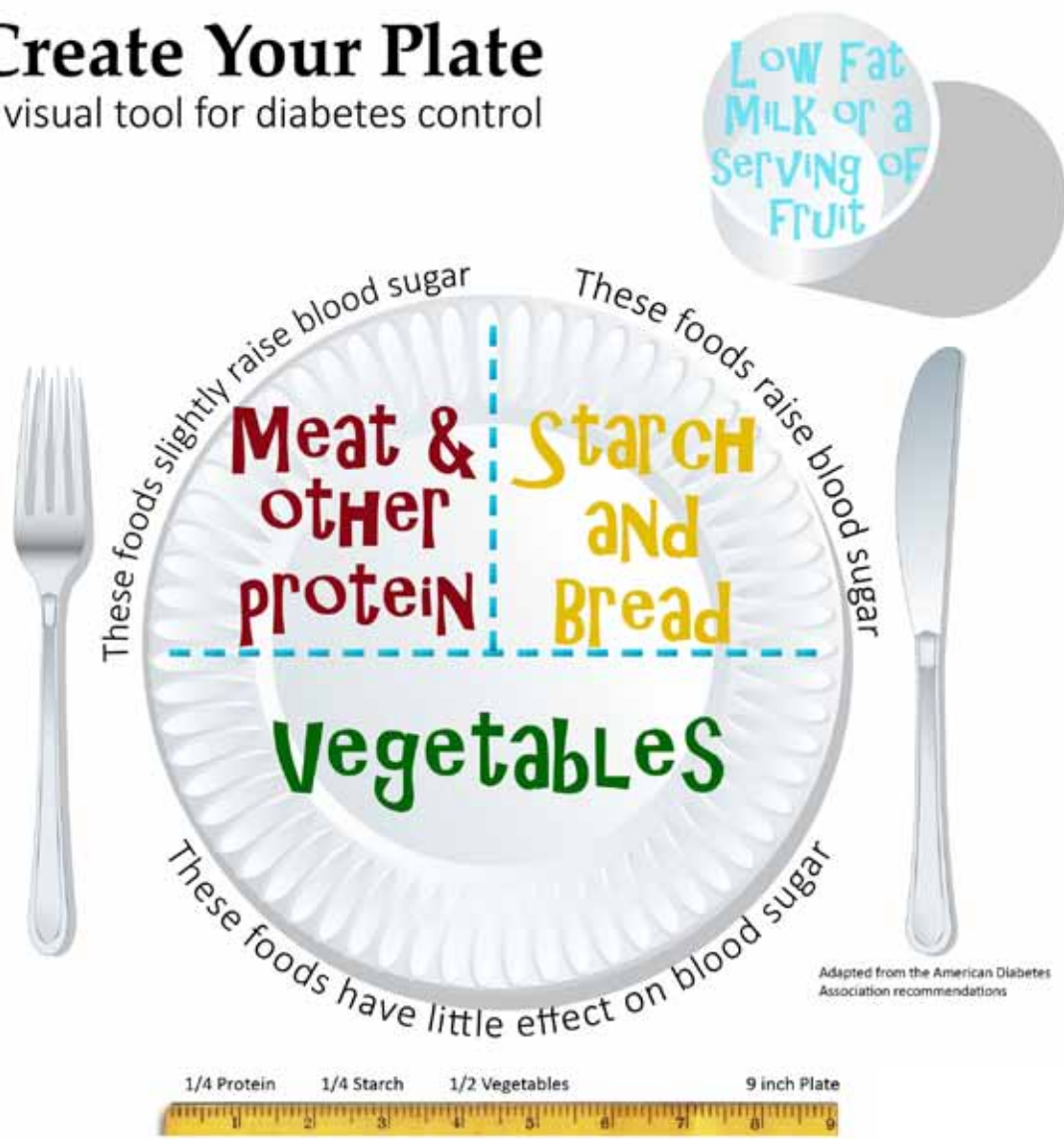
McGwire mentioned that she plans to offer a variety of classes in the new space on topics including prediabetes, diabetes, obesity and nutrition for children.

"It's rewarding to help people and see their lives changed," she said. "I know we're making a difference."



Create Your Plate

A visual tool for diabetes control



1. Imagine drawing a line across the middle of a 9-inch plate. Then draw another line from the top to the middle. You will have three sections on your plate.

2. Fill the largest section with non-starchy vegetables.

3. In one of the smaller sections, put starchy foods, such as noodles, rice, corn, beans and potatoes.

4. The other small section is for protein foods, such as fish, chicken, eggs, tofu, and lean meat.

5. Fruit, fat-free or low-fat milk or yogurt can be included as your meal plan allows.

6. Choose healthy fats in small amounts. For cooking, use oils. For salads, nuts, seeds, avocados and vinaigrettes are healthy choices.

7. To complete your meal, add a low-calorie drink like water, unsweetened tea or coffee.

Non-starchy Vegetables

Fresh, frozen or canned

- | | |
|-------------|---------------|
| artichokes | peppers |
| asparagus | radishes |
| beets | salsa |
| bok choy | sauerkraut |
| broccoli | spinach |
| cabbage | summer squash |
| carrots | swiss chard |
| cauliflower | tomatoes |
| cucumber | turnips |
| eggplant | zucchini |
| green beans | |
| kale | |
| leeks | |
| lettuce | |
| mushrooms | |
| okra | |
| onion | |
| parsley | |

Grains and Starchy Vegetables

- Whole grain breads, where “whole” is the first ingredient such as whole wheat, whole oats, etc.
- Whole grain, high fiber cereal
- Cooked cereal such as oatmeal, grits, hominy or cream of wheat
- Brown rice, whole grain pasta, barley, whole grain tortillas, and whole grain naan
- Cooked beans and peas, such as pinto beans or black-eyed peas
- Potatoes, green peas, corn, lima beans, sweet potatoes, winter squash
- Whole grain crackers and fat-free popcorn

Protein

- Chicken or turkey (without skin)
- Fish, such as tuna, salmon, cod or catfish
- Other seafood, such as shrimp, clams, oysters, crab or mussels
- Lean beef and pork, such as loin cuts
- Tofu, eggs, lower-fat cheese

Fruit

Fresh, frozen or canned in juice or light syrup

- Peaches, pineapple, bananas, apples, pears, mangos, grapes, berries, melon, papaya, apricots, oranges, grapefruit.

Patient Growth and Expanded Services Drive The Need For New, Larger Facility

Driving north on Route 11 as you pass Lowe's and Walmart, you may have noticed a construction project on the right, between Magic City Ford and Spencer Home Center. The Rockbridge Area Health Center is expanding the building it has occupied since 2003; increasing the building's space by two and a half times.

What is driving this rapid growth by this local non-profit health care provider? Who are the patients at RAHC? Is the Health Center competing with other medical practices and Carilion Stonewall Jackson Hospital?

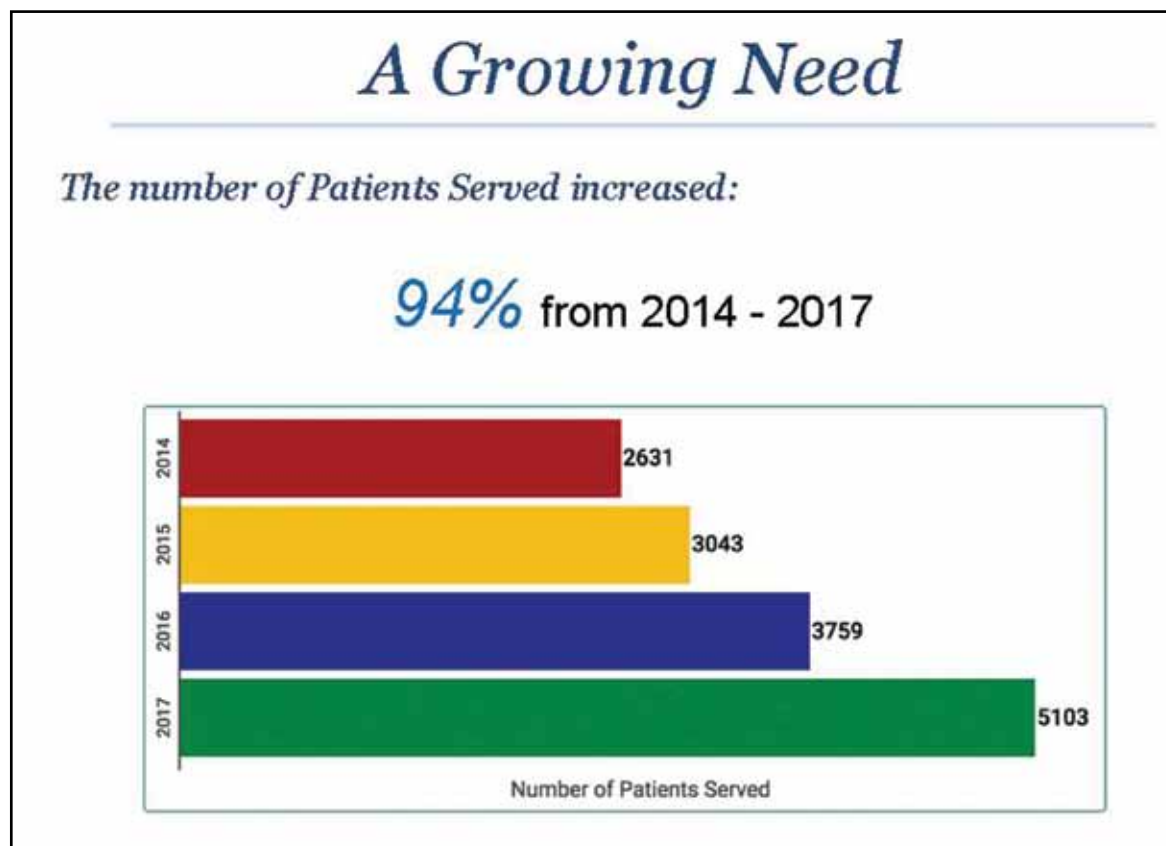
According to a recent informational presentation by the Health Center, its purpose is to promote and provide quality health care to build a healthier community. Because it is a private, local non-profit, it has the flexibility to change, evolve and grow to meet community needs, as it has demonstrated over its 26-year history.

From its beginnings in a 700 square foot building, seeing patients one night a week with volunteer medical professionals, the organization has grown and evolved, working in the present 9000 square foot facility, with over 50 full time professionals and support staff serving over 5,000 patients, the organization has consistently worked to expand the services rendered and the number of people served.

The focus of the Health Center has always been to serve the health needs of uninsured and under-insured patients in the Rockbridge area. In the beginning, the Rockbridge Area Free Clinic, with its limited resources and Thursday night clinics, was able to help primarily just low income patients with no insurance or Medicaid/Medicare eligibility. The Free Clinic did not see children, and much of its work dealt with helping patients with chronic medical conditions such as diabetes and high blood pressure. The founders of the Free Clinic knew they were just scratching the surface of medical needs in the area, but they had to start somewhere. Within four years of opening, the service hours per week had grown from five to nine hours. A quarterly women's health clinic had been started, and a part-time paid pharmacist hired.

The Free Clinic's board and management have, from the beginning, realized that bringing quality health care to the significant portion of the Rockbridge area's population that is below 200% of the Federal Poverty Guideline was the ultimate goal of the organization. Many of these people lacked health insurance or had insurance with high deductibles and co-pays.

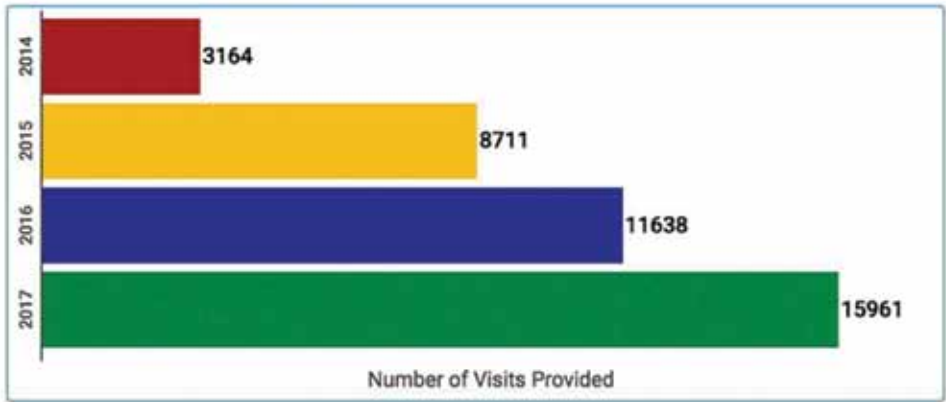
Over the years, the Free Clinic was able to offer more services – women's health, medical education, dental programs for adults and children, behavioral health – and the patient population grew. With



A Growing Need

The number of Visits Provided increased:

404% from 2014 - 2017



changes in the way health care and health insurance is financed and delivered starting in 2010, it became apparent that a new operating model for the Free Clinic was needed. Out of that realization, and much study, the Free Clinic evolved into the Rockbridge Area Health Center.

The Health Center is able to provide health care to those with or without insurance, and those with Medicaid and Medicare. Many of those patients, even with some form of coverage, are unable to find providers willing to accept those coverages. Many with insurance have high deductible and co-payment requirements, which means significant out-of-pocket expense – difficult when the patient’s income falls below 200% of the poverty level. For example, a family of four living at the 200% Federal Poverty Guideline for 2018 has a gross annual income of \$50,200, and a family of two at 200% FPG has an annual gross income of \$32,900. A family of four at 100% FPG has an annual gross income of \$25,100. The Health Center is able to offer a sliding scale of fees, starting with extremely modest amounts for the lowest incomes. The lowest fees actually approximate those requested as donations from patients under the old Free Clinic organization.

The Health Center also welcomes patients with individual or employer-based health insurance, or those who are self-pay. These pa-

tients help underwrite the care provided to those with discounted fees.

Reorganizing as a Federally Qualified Health Center allowed the Health Center to see a much larger pool of patients needing low or reduced cost care. This is reflected in the fact that between the end of 2013 and the end of 2017, the number of patients grew from 2,613 to 5,103, a 94% increase. At the same time, the number of patient visits grew over 400%, to almost 16,000 per year!

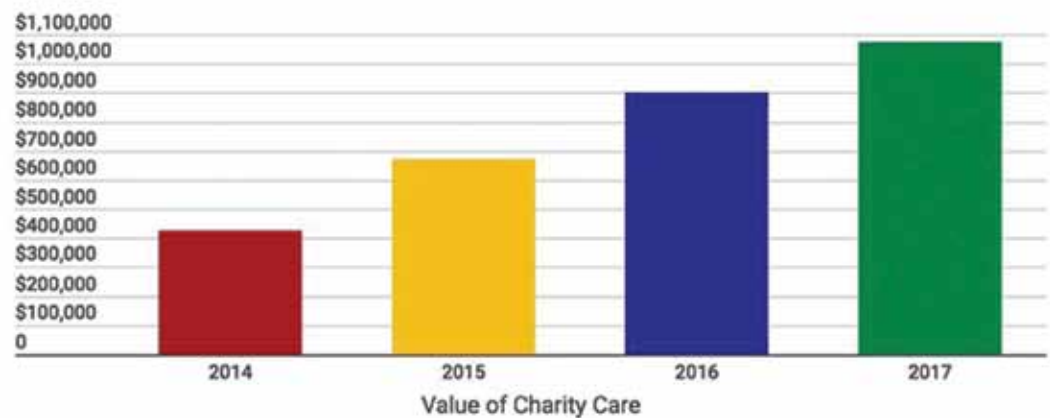
Both the Health Center’s patient population and the number of patient visits are expected to continue to grow over the next years. 38% of the Rockbridge area’s population’s income is below 200% of the federal poverty level – roughly 13,500 people. The Center currently serves 25% of that population.

The Health Center board and management plan to address those unmet needs through expanding the present building and increasing the number of medical providers. The building expansion doubles the number of exam rooms from 8 to 16, doubles the number of dental operatories from 4 to 8. Redesigned waiting areas will afford appropriate patient privacy and better accommodate patients with special needs, and there will be increased space for education programs on such topics as diabetes, parenting, and other health and wellness issues.

A Growing Need

The Value of Charity Care increased:

135% from 2014 - 2017



Over the next five years, the Center also plans to recruit two additional physicians and two additional dentists, add another behavioral health specialist, and insure that all school-age children have access to dental care through school-based services.

Ultimately, the goal of the Center is to increase the number of low-income patients it serves, raising the percentage served in Rockbridge from 25% to 45%. That represents an additional 2700 people able to get health care at costs they can afford.

The Free Clinic and now the Rockbridge Area Health Center has always, and will continue to, work cooperatively with other health care providers in the area. RAHC has a good working relationship with Augusta Health and Carilion Stonewall Jackson Hospital. The Health Center regularly refers patients to these hospitals and their specialists for diagnostic services, specialty care and other procedures that the Health Center does not provide.

Likewise, the Health Center takes referrals from the hospitals for

follow-up care following hospital discharges. By helping low income patients establish a primary care relationship, whereby health issues can be addressed before becoming serious issues, the Health Center also helps cut down on expensive emergency room visits, many of which the hospitals are forced to write off as charity care.

Adding new physicians and providers to the Health Center helps address the shortage of primary care physicians in this medically underserved area.

In addition, the Health Center also works with a locally-owned pharmacy to provide low-cost medications through a federal program for low income patients.

The Rockbridge Area Health Center has become an integral and vital part of the health care system in Rockbridge County. By providing comprehensive, affordable and accessible health care to local citizens of all income levels, the Health Center is truly improving the health of our community.

Future Impact

By 2022 the Rockbridge Area Health Center will:



Expand health care services to the uninsured and under-insured population by *45%*.



Ensure all children in K-12 have access to dental care through *school-based* services.



Recruit a *mental health* provider to support children and families.



Recruit *two new physicians* to the area.



Recruit *two new dentists* to the area.



Provide greater access to specialty care through *Telehealth* services.



**Expanded Rockbridge Area Health Center building
scheduled for completion in the spring of 2019.**



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1180 South High Street Suite 100
Harrisonburg VA 22801
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Fax 540-433-5599
info@midvalleyelectric.net



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“Thor Construction and all our partners are honored to be a part of the this exciting and amazing project,

Which will not only transform the health care for the surrounding area, but will positively impact the community for years to come.” “Thor Construction and all our partners are honored to be a part of the this exciting and amazing project,

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