



ANNUAL REPORT



Year Ending December 31, 2017



**LITTLE RIVERS
HEALTH CARE**

INTRODUCTION

Little Rivers is now in its 13th year of operation and continues to grow in many ways. As illustrated on our cover, the most visible demonstration of growth this past year is the newly renovated Bradford clinic. This was possible thanks to a \$1 million federal grant, for which we are very grateful. As a result, we now have more space for exam rooms, offices and reception, enabling us to eventually add another medical provider and provide behavioral health services 5 days a week.

Less obvious but at least as important, we have also added to the services we provide to patients and the community. Among these are school-based behavioral health services, chronic care management, and coming soon, oral health services with a dental hygienist. The school-based behavioral health services (page 7) began last spring at Blue Mountain Union School and will also include Oxbow High School the 2018-2019 school year. Our newly-launched Chronic Care Management (CCM) program described on page 5 will provide additional support for individuals with chronic conditions. And most recently, we have hired a dental hygienist who will begin providing oral health screenings, cleanings, fluoride varnish treatments and sealant applications by the end of 2018. With the addition of Michael Brandli to our behavioral health staff, we now have an in-house resource for educating staff on better approaches for helping those who have been affected by trauma. Our medication assisted treatment (MAT) program is also growing and we are now exploring the development of a pain management program.

All this growth is possible because of the very talented and dedicated staff and board of directors at Little Rivers, as well as our wonderful and willing community partners. Many thanks to all for contributing to this difficult but important work.



The mission of Little Rivers Health Care Inc. is to provide respectful, comprehensive primary care for all residents in our region regardless of their ability to pay for it. We offer quality health care services to everyone. In the spirit of community, we reach out to and welcome those who need health services but have insufficient means to access them. We commit ourselves to continually reduce the burden of illness, injury and disability, and to improve the health and functioning of the people in our service area.

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COVER PHOTO CREDIT: Little Rivers Health Care Bradford Clinic, *Lower Image, Completed Renovations*

Jericho Hills Photography John Vose is a key team member at Little Rivers Health Care serving our communities as Clinical Care Coordinator in Bradford. John is a self taught photographer. John strives to take photographs that tell a story, or depict a special moment in time. A substantial renovation project was completed between September 2017 through June 2018 providing significant internal restructuring as well as exterior finishes portrayed in this recent photo.

LETTER FROM LEADERSHIP

Greetings!

This year's Letter from Leadership is not only *from* leadership (traditionally from the Board Chair, the Chief Medical Officer, and the CEO), but also *about* leadership.

Little Rivers is fortunate to have many formal and informal leaders within our organization who go above and beyond their traditional roles to contribute to the larger effort. In particular, our medical and behavioral health staff have taken on expanded responsibilities this year, and roles and responsibilities have been re-aligned in recognition of these contributions. Changes include:

Dr. Stephen Genereaux has recently stepped back from his position as Chief Medical Officer (CMO) and has passed that baton to Dr. Lessac-Chenen. Dr. Genereaux's new role on the medical staff leadership team will be to focus on provider credentialing and recruitment. But much more than that, he continues to be the visionary that keeps us linked to our community and responsive to the needs of our patients (in many creative ways, it should be pointed out!).

Dr. Simone Lessac-Chenen, as our new CMO, is responsible for clinical operations, including oversight of informatics, clinical workflow, and productivity. She represents the medical staff at management team meetings and provides medical staff perspective in management decisions and communications. Her enthusiasm and excellent problem-solving have led to significant improvements in clinical operations and operations in general.

Dr. Fay Homan has accepted the position of Medical Staff Director. In this role, she is responsible for overall supervision of the medical and behavioral health staff, clinical education, and clinical risk management. Dr. Homan has also been a voice for provider concerns on the state level, providing articulate and heart-felt testimony before the Vermont legislature on primary care matters.

Maureen Boardman, FNP, continues in her role as Director of Clinical Quality, because quite frankly, no one does this better. Maureen's work as chair of the quality committee was cited as an area of excellence by the federal survey team who conducted our recent Operational Site Visit.

Tracy Thompson, LICSW, assumed the role of Director of Behavioral Health Services this past year. She is now leading a growing team of behavioral health professionals who not only provide individual, family and group counseling at our clinics, but now in our area schools as well. In addition, along with the Wells River medical providers, nursing staff, and clinical care coordinator, the team also provides a wide array of addiction treatment services out of the Wells River clinic.

Although an official title was not conferred with the job, we would also like to recognize Dr. Jessie Reynolds for her very effective leadership during the renovation of the Bradford clinic. She provided 2-way communication between the construction team and the clinic staff that was key to helping make this project go very smoothly and end successfully.

There are many other too-numerous-to-list examples of employees who step up when they recognize a need, leading by example, energizing others and fostering a sense of excellence and pride. This is leadership at its best. Sincere thanks to you all.



William Campbell, Board Chair



Simone Lessac-Chenen, MD, CMO



Gail Auclair, CEO

BOARD OF DIRECTORS

FQHCs are required to have a community board of directors that represents the community and governs the affairs of the organization. At least 51% of the board members must be patients of the health center. Little Rivers has been extremely fortunate to have always had active, engaged board members who generously volunteer their time and expertise.

Without them, Little Rivers would not be here.

CURRENT DIRECTORS 2017/2018

Margaret Burmeister, Topsham (2009) is the executive director of Northeast Kingdom Council on Aging. She previously was the director of case management for the Central Vermont Council on Aging.

William Campbell, Haverhill (2014) is a mental health clinician at West Central Behavior Health and a psychology professor at River Valley Community College in New Hampshire. His past experience includes four years as project manager of a Federally Qualified Health Center in New York State. Bill is the chairperson of the LRHC board.

Carole Freeman, Corinth (2003) was the assistant superintendent for curriculum at Washington Central Supervisory Union prior to her retirement. She is a founding member of the LRHC board and is its vice-chairperson.

Dale Gephart, Thetford (2013) is a retired physician and the Thetford representative to the Vermont Blueprint Community Health Team.

Hope Hutchinson, Newbury (2006) is retired after 25 years as an early childhood special educator in the Orange East Supervisory Union.

Scott Labun, Newbury (2012) is an independent financial advisor. He serves as a guardian ad litem and mediator for family court, and serves on the finance committee of the Little Rivers board of directors.

Monique Priestley, Bradford (2014) is the owner and sole proprietor of MÉPriestley: Digital and Graphic Design. She is an avid volunteer and serves on a number of local nonprofit boards and is secretary of the of the Little Rivers board of directors.

Carrie Bogie, Groton (2016), is a preschool teacher at Blue Mountain Union School who also has expertise in community affairs, fundraising, grant writing and social services

Timothy Ross, Newbury (2016), is currently employed as the Sr. Manager of Internal Audit at DHMC. He serves as treasurer and chair of the Finance Committee, and brings expertise in accounting, finance and health administration.

Pam Smith, Groton (2017), is a longtime patient of Little Rivers who currently works at the Northeast Kingdom Council on Aging. She brings expertise in business, education, human resources, social services and elder care to her work on the board. Previous to coming to Little Rivers, she served on the Blue Mountain Union Board of Directors for 3 years.

Matt Knisley, Groton (2018), is a 16-year veteran police officer with a Master's Degree in Mediation and Applied Conflict Studies. He is a School Resource Officer and Crimes Against Children investigator and has extensive experience working with social services and dealing with the opioid epidemic in Vermont.

PROVIDERS & SERVICES

PRIMARY CARE PROVIDERS



SIMONE LESSAC-CHENEN, MD
Family Medicine w/ Obstetrics, CMO



STEPHEN GENEREAUX, MD
Family Medicine w/ Obstetrics



FAY HOMAN, MD
Family Medicine, Pre/Postnatal Care



MARLENE BRISTOL, FNP
Family Medicine



MAUREEN BOARDMAN, FNP
Family Medicine, Pre/Postnatal Care



JESSIE REYNOLDS, MD
Family Medicine, Pre/Postnatal Care



KEVIN CONNOLLY, MD
Internal Medicine, Infectious Disease



ERIN LOSKUTOFF, ARNP
Adult and Geriatric Medicine



CAROLINE EVANS, FNP
Family Medicine



ALISON O'CONNOR, ARNP
Women's Health



SEAN O'BRIEN, PA-C
Family Medicine

Primary Health Care

Family Medicine - Care for people of all ages.

Obstetrics (OB) - Family planning/maternity care before, during, and after birth.

Internal Medicine and Infectious Disease - Care for adults.

Pediatrics - For birth through age 20.

Continuum of care for hospitalizations and nursing home visits.

Home visits for homebound individuals.

Migrant Farm Worker Outreach

Wellness and Disease Prevention

Medication Assistance

Financial Assistance Program

Oral Health & Dental Care

Screenings and Cleanings

Fluoride varnish

Sealants

Assessment & Referral



Lauren Harlow, RDH
Public Health Dental Hygienist

Providing oral health to our communities with treatment, education, & patient advocacy

BEHAVIORAL HEALTH PROVIDERS



TRACY THOMPSON, LICSW, LADC
Clinical Social Work, Director of Behavioral Health



TIFFANY WHITE, LICSW, LADC
Clinical Social Work, MAT Coordinator



KEN WARDEN, LICSW
Clinical Social Work



MICHAEL BRANDLI, BA, AAP
Substance Abuse, Recovery & Trauma Coordinator



SUSAN HANEWALD, LICSW
Clinical Social Work

Behavioral Health/ Social Services

On-Site counseling with Licensed Clinical Social Workers.

Care Coordination: assistance with accessing community resources and services, insurance applications, and paying bills.

Coordinating patient care with local mental health and substance abuse agencies.

Little Rivers Health Care is constantly evolving and striving to improve access to quality healthcare in the Upper Valley. During the 2017-2018 grant year, we have made strides in the initiatives selected by our community collaborative team.

The Upper Valley Community Collaborative team consists of community organizations working to improve health in our region. This committee meets once a month to discuss initiatives that are currently underway as well as programs we would like to see come to fruition. It is an opportunity for our various organizations to hear each other, support one another, and make action plans for success.

Some of the projects conducted by the team this year include:

- Tracking trauma transformation of local schools. Schools in our supervisory union have been educating teachers about how best to support students who may have experienced trauma in their life. This sub-committee is working on tracking the schools' progress through interviews and surveys.
- Offering adult dental access to the community. The adult dental access sub-committee has worked closely with LRHC to hire a public health dental hygienist (PHDH) and implement a public health dental hygiene program in our area. The PHDH will be responsible for connecting with the local agencies, making referrals, and educating our community on oral health.
- LRHC participated in Vermont Park RX for the second year. Health care providers received "prescriptions" to give to patients to encourage outdoor activity. These prescriptions are free passes to any Vermont state park and are given based on the same criteria as other recommendations to patients.

As of July 1st 2018, Mt. Ascutney Hospital and Health Center absorbed the management of the Blueprint grant for the Upper Valley area. The Upper Valley community collaborative continues to function separately from Windsor area community collaborative. Deliverable reporting to the Vermont Department of Health comes from Mt. Ascutney.

Throughout the year we offer *Healthier Living Workshops*, scientifically based self-management programs. LRHC has offered these program in partnership with local agencies. Hannaford, a grocery store in our area, has graciously donated food for these workshops. The *Healthier Living Workshops* in the Upper Valley are managed by Gifford Medical Center.

Jill Lord, Project Manager

Fran Clark, Project Administrator

Ashleen Buchanan, Program Coordinator



CHRONIC CARE MANAGEMENT PROGRAM

The Centers for Medicare & Medicaid Services (CMS) recognizes **Chronic Care Management (CCM)** as a critical component of primary care that contributes to better health and care for individuals. CMS data show that two thirds of people on Medicare have two or more chronic conditions, which means many patients may benefit from a CCM program.

Why Is CCM Important?

Patients benefit from CCM: Patients will gain a team of dedicated health care professionals who can help them plan for better health and stay on track. Services such as monthly check-ins and ready access to their care team improves their care coordination, including improved communication and management of care transitions, referrals, and follow-ups.

- *Patients will receive a comprehensive care plan.* The plan will help support their disease control and health management goals.
- *CCM will give patients the support they need between visits.* Having a regular touch point may help patients think about their health more and engage in their treatment plan, for example, becoming more conscious of taking their medications and other self-management tasks.
- *Chronic care management can help improve care coordination and health outcomes,* and now clinics will receive payment specifically in support of the provision of care using this approach.
- *CCM can improve patient satisfaction and decrease hospitalization and emergency department visits.*
- *Being a CCM provider allows LRHC to put resources in place that are needed to offer this enhanced service.* Ongoing care management work has not always been separately recognized, making it difficult for practices to sustain. Offering CCM will provide additional resources to help practices care for more patients in need.

Currently, LRHC has roughly 1,350+ patients who are eligible for Chronic Care Management as defined by CMS. Of those, we have identified 208 patients who are eligible for both Medicare and Medicaid and will not incur a co-pay. We have also analyzed our top 5 diagnosis for our patient population. Those were: Diabetes, Hypertension, Hyperlipidemia, Obesity, and Depression. Of the 208 dual eligible patients, 177 had at least one of the top five diagnosis. These are the people we have chosen to focus on first for enrollment in the CCM program but other eligible patients are welcome to participate.

Initial enrollment began August 20th, 2018. As eligible patients have scheduled provider appointments, the Chronic Care RN meets with the patient to explain the CCM program. This allows conversation and explanation of the program as well as the opportunity for the patient to meet the Chronic Care Manager in person and ask questions. Once a patient has consented to enroll, a comprehensive care plan will be created for the patient, non-face to face time will be recorded, and monthly billing can be initiated.

For more information about this program, please contact Nicole Keaty, RN at

nkeaty@littlerivers.org or 802-757-2325 ext. 324



ADDRESSING COMMUNITY NEEDS

Medication Assisted Treatment Program (MAT)

Since program inception in 2016, LRHC's MAT program has developed into a comprehensive treatment program for those with opioid use disorder. With technical assistance and support from the Vermont Opioid Care Alliance's Hub and Spoke project, and funding from the Blueprint for Health, our program has grown to approximately 40 patients at this writing with plans to further increase as we continue outreach.

This program offers an effective option that takes a whole-person approach, using individual counseling and group therapy as well as medication to provide recovery support for those with opiate use disorder. As a "spoke" provider, LRHC's MAT team partners with regional hubs to ensure seamless care and access to services in a primary care setting.



Our MAT program operates out of our Wells River clinic. The expert MAT team members include: Jessica McKean (Patient Services Representative), Dr. Stephen Genereaux, Dr. Simone Lessac-Chenen, Marlene Bristol (FNP), Michelle Hollis (RN, MAT Nurse), Michelle Austin (RN), Michael Brandli (Substance Abuse, Recovery, and Trauma Coordinator), Caitlin Wilson (Clinical Care Coordinator), Tracy Thompson (LICSW, LADC), and Tiffany White (LICSW, LADC).

Prenatal Care and Obstetrics

Families who choose Little Rivers Health Care for their obstetrics and prenatal care experience the highest level of personal attention throughout the women's pregnancy. Our family-focused environment provides a range of medical and emotional support for women during this exciting, life-changing time in their lives during pregnancy, delivery, and infancy. We also offer, through our partnership with Northeastern Vermont Regional Hospital (NVRH):

- New birth center with birthing tub in a home-like setting at NVRH.
- High quality care at one of only two Vermont hospitals designated as **Baby Friendly** by the World Health Organization.
- Team-based care model so that families will have the comfort of knowing the physician who delivers their baby.

SIMONE LESSAC-CHENEN, MD • STEPHEN GENEREAUX, MD • FAY HOMAN, MD
MAUREEN BOARDMAN, FNP • JESSIE REYNOLDS, MD

Trauma Informed Care

Trauma Informed Care is an organizational structure and treatment framework transition that involves understanding, recognizing, and responding to the effects of all types of trauma. Trauma Informed Care also emphasizes physical, psychological and emotional safety for both consumers and providers, and helps survivors rebuild a sense of control and empowerment. Through the outreach by our Substance Abuse, Trauma, and Recovery Coordinator, Michael Brandli, we are transforming our approaches through awareness, education, and implementation.



MICHAEL BRANDLI, BA, AAP
Substance Abuse, Recovery & Trauma Coordinator
mbrandli@littlerivers.org

Nonviolent Crisis Intervention Training

Little Rivers hired a certified instructor to train our staff and community partners in crisis prevention. This program educates and empowers professionals to create safe and respectful work environments.

With a focus on prevention, our core training program equips staff with proven strategies for safely de-fusing anxious, hostile, or violent behavior at the earliest possible stage. The training helps us:

- Meet regulatory/accreditation standards
- Improve staff retention
- Reduce the risk of injury
- Minimize exposure to liability
- Promote safety and security

School Behavioral Health Program

Little Rivers operates a school based program in public schools that offers prevention, early intervention and clinical services to youth and their families. The US Surgeon General reports one in five children and adolescents experience the signs and symptoms of a diagnosable behavioral disorder each year, resulting in significant disruptions of school classrooms, increased truancy, increased risk for alcohol and drug abuse and decreased graduation rates.

Behavioral health clinicians in public schools:

- **Complement services already offered to students and families.**
- **Work within existing support services in the schools to help create a safer and more supportive school climate.**
- **Provide supportive services for school teachers and staff. Such services include professional development on a variety of behavioral health topics, classroom management techniques, and case management.**

In addition, mental health program clinicians are on hand in the aftermath of traumatic events affecting the school population.

QUALITY ASSURANCE

Quality is front and center of our work at Little Rivers. Meeting all the requirements and expectations of our funders, payers and patients takes enormous effort from the entire organization. But thanks to the leadership of **Maureen Boardman, FNP**, and informatics and operational support from **Simone Lessac-Chenen, MD** and **Courtney Carter**, it never feels like a chore but instead generates much enthusiasm for continual improvement.

The Quality Assurance/Performance Improvement Committee participated in many projects this past year:

- Hunger as a vital sign screening
- Antibiotic stewardship
- Teen Speak-Out
- Colo-rectal cancer screening
- Diabetes learning collaborative
- Patient safety
- Screening for social determinants of health

There are several new projects being launched as well:

- Trauma-Informed Care
- Adolescent alcohol and drug abuse screening and prevention
- Improving control of hypertension

Operational Site Survey

As an FQHC, Little Rivers is accountable for maintaining high standards with regard to our services and operations. In addition to annual reporting and re-application for our funding, Health Resources and Services Administration (HRSA) also conducts comprehensive onsite audits of health centers every three (3) years. These audits cover every aspect of the business, from clinical services, to finance to administration and governance. Little Rivers just had our survey in June of 2018 and thanks to everyone's great work, we passed with flying colors - only one citation out of a possible 189. The survey team commended us for outstanding work and in particular, cited our Quality, Finance and Credentialing as areas of excellence. Thanks and kudos to all!

QA/PI COMMITTEE MEMBERS:

Maureen Boardman, FNP, Chair; Simone Lessac-Chenen, MD; Jamie Riley, LPN; Tracy Thompson, LICSW; Courtney Carter; Nicole Keaty, RN; Bonnie Tuttle; Justine Huntington; Jessica McKean; Dale Gephart, MD; Ashleen Buchanan; Jerry Martell; Andrew Barter; Kristen Bigelow-Talbert; Gail Auclair



Maureen Boardman, FNP, Director of Clinical Quality

mboardman@littlerivers.org

QUALITY INDICATORS

Whom we serve and how well are we serving them...

WHOM WE SERVE

Total unduplicated patients seen in 2017	5451	
Total number of in-person visits:	21,264	(3.9 visits/patient average)

PAYER MIX

26%	Medicare
26%	Medicaid
43%	Private Insurance
5%	Uninsured

SERVICE MIX

60	patients received substance use disorder treatment
51	prenatal patients / 27 deliveries
5399	received care from a medical provider
410	received mental/behavioral health services

MOST COMMON CHRONIC CONDITIONS

1153	patients with hypertension
1008	patients with anxiety or mental disorder other than depression or substance use
627	patients with clinical depression
575	patients with diabetes
372	patients with heart disease
313	patients with asthma
291	patients with COPD (chronic obstructive lung disease)

HOW WELL WE SERVE OUR PATIENTS

Preventive Care

Cervical cancer screening	64% of eligible patients	(national average = 54%)
Colorectal cancer screening	58% of eligible patients	(national average = 40%)
Depression screening	81% of adults	(national average = 60%)
Tobacco use screening and follow-up	80% of adults	(national average = 85%)
Weight assessment and counseling		
Adults	44%	(national average = 63%)
Children	29%	(national average = 63%)
Childhood immunization rate < age 2	16%	(national average = 43%)

Chronic Condition Management

Controlled diabetes	71%	YTD=79%	(national average = 68%)
Controlled hypertension	7%	YTD=71%	(national average = 62%)
Asthma management	79%	YTD=83%	(national average = 87%)
Coronary artery disease management	73%	YTD=81%	(national average = 80%)
Ischemic vascular disease management	83%	YTD=86%	(national average = 78%)

FINANCIAL AUDIT

Balance Sheet

LITTLE RIVERS HEALTH CARE, INC.

Balance Sheets

December 31, 2017 and 2016

ASSETS

	<u>2017</u>	<u>2016</u>
Current assets		
Cash and cash equivalents	\$ 989,918	\$ 975,476
Patient accounts receivable, less allowance for uncollectible accounts of \$49,136 in 2017 and \$21,926 in 2016	278,833	271,303
Grants receivable	259,499	10,296
Other receivables	87,510	93,087
Due from third party payers	43,442	40,665
Prepaid expenses	<u>82,682</u>	<u>70,864</u>
Total current assets	1,741,884	1,461,691
Property and equipment, net	<u>2,098,214</u>	<u>1,607,138</u>
Total assets	<u>\$ 3,840,098</u>	<u>\$ 3,068,829</u>

LIABILITIES AND NET ASSETS

Current liabilities		
Accounts payable and accrued expenses	\$ 287,389	\$ 87,642
Accrued payroll and related expenses	274,426	238,729
Current maturities of long-term debt	<u>290,928</u>	<u>45,560</u>
Total current liabilities	852,743	371,931
Long-term debt, less current maturities	<u>332,858</u>	<u>622,297</u>
Total liabilities	1,185,601	994,228
Net assets		
Unrestricted	2,118,319	2,074,601
Temporarily restricted	<u>536,178</u>	<u>-</u>
Total net assets	2,654,497	2,074,601
Total liabilities and net assets	<u>\$ 3,840,098</u>	<u>\$ 3,068,829</u>

FINANCIAL AUDIT

Statement of Operations

LITTLE RIVERS HEALTH CARE, INC.

Statements of Operations and Changes in Net Assets

Years Ended December 31, 2017 and 2016

	<u>2017</u>	<u>2016</u>
Operating revenue		
Patient service revenue	\$ 3,627,221	\$ 3,480,009
(Provision for) recovery of bad debts	<u>(64,404)</u>	<u>34,874</u>
Net patient service revenue	3,562,817	3,514,883
Grant revenue	1,447,076	1,494,795
Other operating revenue	<u>501,330</u>	<u>377,016</u>
Total operating revenue	<u>5,511,223</u>	<u>5,386,694</u>
Operating expenses		
Salaries and benefits	4,289,871	3,978,827
Other operating expenses	1,142,480	1,123,367
Depreciation	102,407	120,168
Interest expense	<u>26,691</u>	<u>25,014</u>
Total operating expenses	<u>5,561,449</u>	<u>5,247,376</u>
Operating (loss) income	(50,226)	139,318
Non-operating revenue		
Contributions	<u>63,861</u>	<u>19,504</u>
Excess of revenue over expenses	13,635	158,822
Grants for capital acquisition	<u>30,083</u>	<u>46,173</u>
Increase in unrestricted net assets	<u>43,718</u>	<u>204,995</u>
Temporarily restricted net assets		
Grants for capital acquisition	<u>536,178</u>	<u>-</u>
Increase in temporarily restricted net assets	<u>536,178</u>	<u>-</u>
Change in net assets	579,896	204,995
Net assets, beginning of year	<u>2,074,601</u>	<u>1,869,606</u>
Net assets, end of year	<u>\$ 2,654,497</u>	<u>\$ 2,074,601</u>

Little Rivers Health Care, Inc. is a non-profit organization with TEN years of perfect financial audits with no auditor-issued management letters. This extraordinary achievement is a result of exceptional efforts of the LRHC financial and administration team members under the leadership of Susan Monica, Chief Financial Officer.

COMMUNITY PARTNERS

Our Community Partners:

Ammonoosuc Community Health Services
Barton Street Dental
Bi-State Primary Care Association
Blue Mountain Union School District
Bradford Workforce Development Committee
Cohase Chamber of Commerce
Clara Martin Center
Cottage Hospital
Fletcher Allen Health Care
Geisel School of Medicine at Dartmouth
Gifford Medical Center
Kinney Drugs
Newbury Health Clinic
Northeastern Vermont Area Health Education Center
Northern Counties Health Care
Oxbow High School
River Bend Career and Technical Center
Ronald McDonald House Charities of Burlington
Stagecoach Transportation Services
Support and Services at Home Program
The Health Center of Plainfield
Theftford Elder Network

FUTURE PLANS

In response to the growing need nationally for mental health services, especially substance use treatment and prevention, the federal government recently awarded funding to health centers to increase access to these services.

Little Rivers is happy to announce that we are one of the grateful recipients of this funding and have been awarded a \$300,000 **Substance Use Disorder-Mental Health (SUD-MH)** grant. \$175,000 of this award is for one-time funding for infrastructure, which we will use to enclose and renovate the attached garage at the Wells River clinic. This will create much needed handicap-accessible space for group sessions for our patients who are in recovery from addiction, as well as for other educational, therapeutic and support groups.

The remaining \$125,000 is in on-going funding to support the addition of a dedicated care coordinator for the Behavioral Health program, and pay for additional hours for social worker and RN time for our Medication Assisted Treatment (MAT) program.

LRHC is an NCQA (*National Committee for Quality Assurance*) Level 3 Patient-Centered Medical Home. A central feature of our MAT program and other services is the importance of patient engagement and having primary care as a central point of care and care coordination. Integration of mental health, substance use and primary care services is already a hallmark of our program, but the additional staffing and new group meeting space will enhance that further.

DONORS & GIVING

If you would like to make a donation and would like more information, please contact us:

Little Rivers Health Care
P.O. Box 338 • Bradford, Vermont 05033
Andrew Barter, Chief Operating Officer
802-222-3023 | abarter@littlerivers.org

Outright Gifts • Financial Benefit Gifts • Estate Gifts

LITTLE RIVERS HEALTH CARE

2017 DONORS

Anonymous Donors (3)

Faith Alexandre

Russell & Elin Batten

Lyman Beecher

Walter Bone

Bradford Optical

Henry & Andrea Buermeyer

The Buhner Family

Mary & Tom Burnham

Bill & Marjory Cassidy

Dorothy Cheever

Michael & Carey Curtis

Harold Drury

Ronald Eaton

Robert Gallo

Sugar Genereaux

Allan & Claire Gurney

Mary & Kathleen Harriman
Foundation

Sam & Emily Heidenreich

Joyce Homan

Hope Hutchinson

Andrew Jones

Arthur & Vera Kidder-Merritt

Scott & Jane Labun

Richard & Betty Marquise

James Masland

James Mouser

Kerstin Nichols

Christopher & Heidi Overtree

Richard M. Partington

Connie Philleo & Claude Phipps

Peter Phipps & Odile Mattiauda

Christopher Preston

Dean & Louise Rowden

Peter & Jacqueline Sinclair

David Smith

Al & Claudette Sortino

Valley Health Center Board and
Auxiliary

Carolyn Wade

Laura Waterman

Bonnie Weiss

Lester Williams

Jane Wilson

Priscilla Witt Hood

Town of Bradford

Town of Corinth

Town of Fairlee

Town of Groton

Town of Ryegate

Town of Thetford

Town of Topsham

LRHC is a not-for-profit organization, and we exist partially through federal and state grant funding. That funding covers only a small portion of the cost of caring for individuals and families in need.

THANK YOU FOR SUPPORTING LITTLE RIVERS!

We connect you with healthy resources

Little Rivers is committed to providing an array of healthier living resources. Our services help remove the barriers that are standing in your way to your health.

When an individual is worrying about losing their housing, feeding their families, or how they will have a consistent income filtering into the house, it is easy to understand why managing diabetes or high blood pressure can often times become overlooked by our patients. Working on these issues and helping to find possible solutions to many of our patient's psychosocial worries may help to alleviate some stress from one aspect of their life in order to focus on their pressing medical concerns.

When walking into a primary care office, one might not think to ask about services that our Clinical Care Coordinators can provide. Our Care Coordinators are dedicated to helping with the psychosocial needs of the patients to better improve their overall health.

Services include:

- Computer lab for resume building, job searches, & identifying community resources
 - Seasonal winter apparel and school backpack drives
 - Consignment shop voucher system
 - Health insurance enrollment
 - Sliding fee scale
 - Housing planning & support

For more information, please reach out to our Care Coordinators:

Bradford Clinic

John Vose, 802-222-4637, Extension 218

East Corinth Clinic

Justine Huntington, 802-222-4637, Extension 408

Wells River Clinic

Caitlin Wilson, 802-222-4637, Extension 310



ADMINISTRATION & BILLING

146 Mill Street • PO Box 338
Bradford, VT 05033

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