



## Action for a Better Community's

MOW (Monroe, Ontario, Wayne) Health Project

**Grant Results Report – 2008**

## **BACKGROUND INFORMATION**

Action for a Better Community

550 Main Street

Rochester, NY 1464

Phone: 585-325-5116

Fax: 585-325-2266

**Contact:** Aaron Wicks

585-325-5116 X4511

awicks@abcinfo.org

**Grant Title:** MOW (Monroe, Ontario, Wayne) Health Project

**Grant Amount:** \$135,976

Grant ID#: 1599797

**Period Covered by the Grant:** February 2007 – February 2008

**Foundation Program Officer:** Kelly Hunt

## **ABOUT THE GRANTEE**

For more than 40 years, Action for a Better Community has worked to identify and address the needs of minority and low-income individuals within Monroe and Ontario Counties. Its Community Services Division promotes outreach and community education on a variety of issues.

## **MOW Health Project**

### **THE PROBLEM ADDRESSED**

Monroe, Ontario, and Wayne counties are considered part of metropolitan Rochester, NY. Beyond the city and the wealthier suburbs of these counties are poorer rural areas with unmet health care needs—low rates of child immunizations, high rates of breast cancer, alcoholism, and inadequate dental services. Many of the area's low-income residents do not have health insurance and lack access to preventive care. Any acute health crisis brings them to a hospital emergency department.

### **PURPOSE OF THE PROJECT**

The MOW Health Project was intended to build on the area's existing human service outreach network to provide health service outreach and education and to facilitate insurance enrollment in public programs. By creating and piloting a collaborative database, the project would maintain and track referrals for health services that are identified through outreach efforts by various agencies. The database also was intended to become a resource of rural health data that community agencies could analyze for more efficient targeting of transportation and health services.

### **UNDER THE GRANT:**

#### **Among the planning and training activities conducted during the grant period:**

- The Project Coordinator met with outreach provider agencies that currently provide a significant amount of services in the three-county area. These partners included Finger Lakes Health Systems Agency (FLHSA), the Center for Community Health (CCH) at the University of Rochester Medical Center, Lifespan (providing services to older adults and their caregivers, as well as health insurance education), and Wayne County Community Action Program, offering supportive services for low-income people. Together they developed a plan to collaborate on shared health outreach goals.

- Finger Lakes Health Systems Agency designed standards for a database constructed by PeerPlace Networks. The database used a Web-based application to track referrals. The agency identified chronic barriers to preventive care and suggested ways the collaborating provider agencies could solve these issues.
- The Project Coordinator recruited and, when appropriate, trained local outreach workers to provide targeted health education and insurance enrollment assistance. Information was entered into the database and assigned to the appropriate collaborating agency for follow-up.

## **BARRIERS TO ACHIEVEMENT AND CHANGES TO ORIGINAL WORK PLAN**

**The project staff encountered a number of obstacles that prevented them from achieving their anticipated results, including:**

- Smaller trainings were required due to scheduling conflicts. Training required substantially more effort than anticipated.
- Database development was delayed as was monthly reporting to project partners.
- The licensing and training associated with the database were offered without cost to community organizations. Free access, however, also meant these agencies had no ownership in the outcome of the project.

## **PROGRAM RESULTS**

Active implementation of the project's outreach activities could not occur within the one-year project timeframe. "It was evident that implementing such a broad community initiative requires significantly more commitment by participants than was anticipated," says Project Director Aaron Wicks.

The project also was to collect and make available data that would inform community planning of health resources. That could not be accomplished, because insufficient data were collected. "Because of the timing of the establishment of the database and the

difficulty getting database users trained and engaged in using it regularly, we couldn't begin tracking these particular data during the project period," says Wicks.

### **DISSEMINATION OF FINDINGS**

Project staff engaged in discussions with CLIC-on-Health—a Web site resource for health-related information developed by the National Library of Medicine and adopted by the Rochester Regional Library Council, a consortium of libraries serving the five-county area—to see whether the two initiatives could be merged, combining the informational resources of CLIC-on-Health with the outreach and referral infrastructure developed by the MOW Health Project. As of August 2008, CLIC-on-Health has begun working with a national online medical-reference entity that will provide them with funding to continue their efforts. At present, it is unlikely CLIC-on-Health will build on the MOW Health Project absent funding.

### **THE FUTURE**

The project, as originally conceived, will not continue due to lack of ongoing funding.