

TASKFORCE:

Rural Access to Care for Improving Maternal and Infant Health

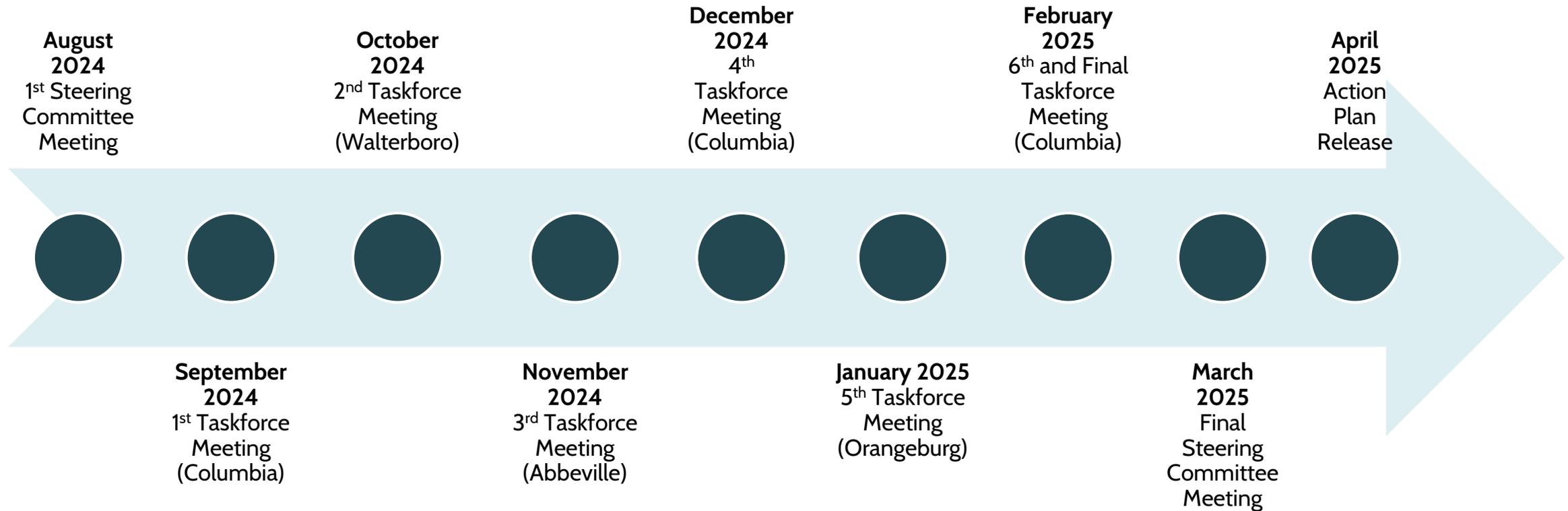
Taskforce Meeting
October 17th, 2024



South Carolina Institute of
Medicine & Public Health



Welcome



Obstetric Services in Walterboro, SC

Riddick Ackerman, MD



From Surviving to Thriving: Keeping the Doors of a Rural Maternity Care Center Open

Kelly Pieh Holder, DO, FACOG, FASAM, MA, IBCLC
Medical Director, UNC Chatham Hospital Maternity Care Center



Recommendation Development

Justina Siuba, MPH
Project Director, IMPH



Recommendation Development

Please keep the following criteria in mind when developing recommendations for the 10-yr Action Plan.

- **Specific:** Who is responsible, and for what? Name a lead entity if possible.
- **Measurable:** How will we know if we have achieved success?
- **Achievable:** There needs to be a chance it can happen.
- **Results-oriented:** What does the outcome look like?
- **Time-Bound:** When should/will the activities and actions occur?
- **Clearly written:** Easy to understand.

Include an estimate of resources that will be required, when possible.

Recommendation Development Cont.

- I. What ideas/recommendations do you have to improve access to care in rural South Carolina to address maternal and infant health outcomes?
- II. How will this recommendation impact health outcomes for mothers and infants in rural South Carolina?
- III. What is a realistic timeline to implement this?
- IV. Who are the key players or champions to support this idea and recommendation?

Recommendation Examples

SC1: Develop funding models to support increased programming to foster social connectedness.

SC1a: To support increased programming to foster social connectedness, the South Carolina Department on Aging (SCDOA) should:

- Request a modification to Proviso 40.5 to include “programs to promote social connection” in the list of allowable expenditures for Home and Community Based Services.
- Update its policies and procedures manual to define and allow reimbursement for programs to promote social connection.
- Launch a limited program at the beginning of the state fiscal year, subsequent to the passing of the modification to Proviso 40.5, in order to gather data on how many clients may take advantage of the program statewide.
- Request additional state Home and Community Based Services (HCBS) funding based on the estimates and analysis of the gathered data, including the number of participants, type of activity and pre/post social isolation assessment results.
- Encourage local community senior centers to continue to apply for grants and other funding opportunities to expand and grow programs to promote social connection.
- Promote cost sharing principles, where clients pay a portion of the program cost if they are able, to be applied to social connectedness programming options to assist with expanding the service.

SC1b: Funders, at various levels, should prioritize efforts focused on social connection in older adults to reduce the negative health outcomes associated with social isolation.

CHAMPIONS

Area Agencies on Aging, foundations, philanthropies, SC Legislature, South Carolina Department on Aging

TIMELINE

6 months – ongoing

Recommendation Examples Cont.

SC3: The South Carolina Department on Aging should incorporate language about social isolation and related resources into the GetCareSC website *Guide to Services* page to assist older adults and their caregivers with finding resources to promote social connection.

SC3a: Establish a social connectedness category on the GetCareSC website *Guide to Services* page containing information related to the programs and services available through the Aging Network to promote social connectedness.

The Aging Network includes, but is not limited to, the Administration on Aging within the Administration for Community Living (ACL), the South Carolina Department on Aging, Area Agencies on Aging (AAAs) and Local Aging Service Providers and Direct Services.

SC3b: Develop a communications/outreach campaign to promote the newly established social

SC3c: Include learning in retirement programs (including, but not limited to, state-supported programs offering classes to persons 60 years and older without payment of tuition and Lifelong Learning Programs) in the GetCareSC resource database to promote additional opportunities for social connectedness.

CHAMPIONS

Area Agencies on Aging, South Carolina Department on Aging

TIMELINE

6 months - 1 year

Recommendation Examples Cont.



Social Connection

We are social beings and have a natural drive to connect with others. When you feel lonely, your brain is saying you need social connection, and just like the signs of thirst or hunger, the feeling of loneliness should never be dismissed. Being socially connected meets a basic human need and improves mental and physical wellbeing. To learn more about the causes and impacts of social isolation and loneliness and what the South Carolina Department on Aging is doing to combat it, read our [article](#) and the full report, [Addressing Social Isolation in Older Adults as a Determinant of Health](#), a publication of the Institute of Medicine and Public Health in collaboration with the South Carolina Department on Aging.



Call GetCareSC Toll Free:

1-800-868-9095

The South Carolina Department on Aging maintains this website to help citizens of South Carolina connect to local resources in their communities.



Recommendation Examples Cont.

DIS1: The Office for the Study of Aging at the Arnold School of Public Health at the University of South Carolina should form an inclusive, ongoing coalition focused on social isolation in older adults to continue the efforts of the South Carolina Institute of Medicine and Public Health and South Carolina Department on Aging Social Isolation in Older Adults Taskforce. This coalition will continue to build partnerships and foster intervention strategies across sectors. The coalition will meet quarterly.

CHAMPIONS

AARP, Able South Carolina, Aging Service Providers, Area Agencies on Aging, Center for Community Health Alignment, Clemson University, Disability Rights of South Carolina, interfaith organizations, Legislative Study Committee on Aging, Lifelong Learning Institutes, local United Ways of South Carolina, older adults and older adult caregivers, Palmetto Care Connections, SC Thrive, South Carolina Department of Disabilities and Special Needs, South Carolina Department of Health and Environmental Control, South Carolina Department of Health and Human Services, South Carolina Department of Mental Health, South Carolina Department of Social Services, South Carolina Department of Veteran's Affairs, South Carolina Department on Aging, South Carolina Educational Television, South Carolina Hospital Association, South Carolina Medical Association, South Carolina Office of Rural Health, South Carolina Silver Hair Legislature, United Way of South Carolina, University of South Carolina

TIMELINE

Establish within 6 months
- ongoing

Recommendation Examples Cont.



Office for the Study of Aging
Arnold School of Public Health
UNIVERSITY OF SOUTH CAROLINA

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SOCIAL Aging

Overview

South Carolina's Operation to Confront Social Isolation and Loneliness (SOCIAL Aging), is a state-wide coalition dedicated to reducing social isolation in older adults. This coalition is responsible for tracking the progress of the guiding framework from state-specific recommendations to reduce social isolation in older adults. These recommendations were developed by the Social Isolation in Older Adults Taskforce led by the South Carolina Institute of Medicine and Public Health and the South Carolina Department on Aging. The recommendations and full report can be found in [Addressing Social Isolation in Older Adults as a Determinant of Health](#).



SOCIAL Aging

SC'S OPERATION TO CONFRONT
SOCIAL ISOLATION AND LONELINESS

Recommendation Examples Cont.

TS1: The state of South Carolina should develop a policy to ensure volunteer protections for volunteer drivers, including reducing insurance obstacles for volunteer drivers.

CHAMPIONS

AARP, Neighbor to Neighbor, organizations utilizing volunteers, South Carolina Department on Aging, South Carolina Legislature

TIMELINE

1-3 years

Recommendation Examples Cont.



MARCH 2024

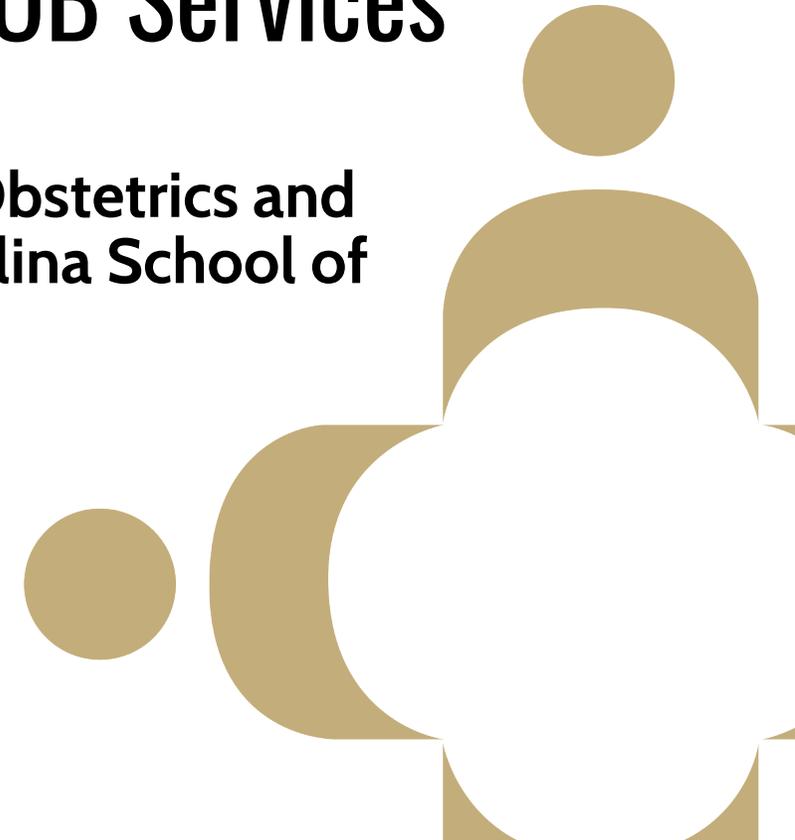
**Volunteer Drivers:
An Essential Lifeline**

Recommendation Development Discussion



Role of Health Systems in Providing OB Services

Kacey Eichelberger, MD, Chair, Department of Obstetrics and Gynecology, Professor, University of South Carolina School of Medicine Greenville



Next Steps

Abigail Hubbard, MPH
Health Policy Analyst, IMPH



Next Steps

Next Meeting

Venue 119 in Abbeville, SC

November 14th, 11 a.m. – 2 p.m.

Orangeburg, SC

Tentative – January 22nd, 2025

Please complete the evaluation.

We will send out minutes and the recommendation development link in a week.