2018-2022 William F. Thiel Trust Grant Funding Priorities

The William F. Thiel Trust was established in 1993 by William F. Thiel to benefit the health needs of the residents of Wyoming County. Under the stewardship of the Community Foundation for Greater Buffalo, the fund continues to grow and supported a variety of projects over the past two decades.

In 2006, the Community Foundation implemented its first strategic plan. As a part of the plan, the foundation made the decision to put a concerted effort behind the Thiel Trust commissioning the first Wyoming County Health Needs Assessment. The assessment surveyed local healthcare experts, governmental agencies, providers, and the general public along with a view of the general trends in national rural healthcare to determine what the highest needs of the county were. The Health Needs Assessment was refreshed in 2012. Through this focused effort, one-third of all Wyoming County residents have benefited from Thiel-funded programs and services with almost $3M disbursed over the last ten years.

With ten years of funding history guided by prior Health Needs Assessments, the Community Foundation recast the Wyoming County Health Needs Assessment in 2017. The 2018-2022 Thiel funding priorities were determined utilizing both qualitative and quantitative input with reports commissioned to guide the process:

- Human-Centered Design for Health in Wyoming County Discovery Phase Report
- Wyoming County Trends and Impact Report

The foundation also solicited input from the Thiel Roundtable which is comprised of Wyoming County health providers and experts who reviewed the Thiel reporting and have extensive knowledge of the current healthcare landscape.

2018-2022 Grant Funding Model

For the five year time period starting 2018, the William F. Thiel Trust will consider requests that address the following priorities. In accordance to the wishes of the donor, all applications submitted to the Thiel Trust must focus exclusively on Wyoming County residents. The priorities are ranked in importance from 1 being the highest need, to 4 being the lowest.

<table>
<thead>
<tr>
<th><strong>INFRASTRUCTURE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category</strong></td>
</tr>
<tr>
<td>Equipment</td>
</tr>
<tr>
<td>Personnel</td>
</tr>
<tr>
<td>Public Health</td>
</tr>
</tbody>
</table>
HEALTH SERVICES

<table>
<thead>
<tr>
<th>Category</th>
<th>Focus</th>
<th>Priority Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health/Substance Use Disorder</td>
<td>General population</td>
<td>1</td>
</tr>
<tr>
<td>Chronic Disease</td>
<td>General population</td>
<td>1</td>
</tr>
<tr>
<td>Access and Navigation</td>
<td>General population</td>
<td>2</td>
</tr>
<tr>
<td>Emergency Assistance</td>
<td>Low income residents</td>
<td>2</td>
</tr>
<tr>
<td>Transportation</td>
<td>General population</td>
<td>3</td>
</tr>
<tr>
<td>Dental Health</td>
<td>General population</td>
<td>4</td>
</tr>
<tr>
<td>Reproductive Health</td>
<td>General population</td>
<td>4</td>
</tr>
</tbody>
</table>

INFRASTRUCTURE

Equipment  
Priority Ranking 1
Advances in medical technology have led to improved diagnostic capabilities and also to increased productivity and efficiency in health care organizations. Past Health Needs Assessment indicate that hospital utilization and emergency-department utilization are well within average levels and arguments that are often made in opposition to hospital expenditures do not appear to be supported here by any overuse of unneeded services. Specific projects related to equipment needs need to be further identified and become aspects of the facility strategic plans of the Wyoming County Community Health System or other not-for-profit health care service providers.

Personnel  
Priority Ranking 2
Several community leaders commented on the need to maintain and increase levels of physicians and health related personnel in Wyoming County. The importance of homegrown programs through which local students become familiar with health care careers and potentially practice in their home county, and programs that relate to overall education of primary care specialists and the retraining of health-related personnel were cited. Personnel are at the cusp of access to health care services and efforts should be made to maintain and expand such services to promote an adequate supply of health care personnel in the county.
Public Health
Priority Ranking 4
Public health is the practice of preventing disease and promoting good health within groups of people, from small communities to entire countries. Accordingly, public health services have far-ranging impacts that affect the general population—such as food safety, immunizations, and control of the spread of infectious disease—and as such are high-priority programs.

HEALTH SERVICES

Mental Health/Substance Use Disorder
Priority Ranking 1
In past Health Needs Assessments, the high need for mental health services and personnel was noted. Both 2017 Thiel reports reinforce the need for mental health services is still present with many qualitative responses focusing on this issue. Further, New York State reports that Wyoming County places fourth in the state for suicides with a mortality rate of 17.7 suicides per 100,000 people. [https://www.health.ny.gov/statistics/chac/mortality/pdf/d24.pdf](https://www.health.ny.gov/statistics/chac/mortality/pdf/d24.pdf)

Qualitative and quantitative data from the Thiel commissioned reports also indicates that the opioid abuse rate is increasing in the county. While data shows pain medication prescriptions rates are decreasing, likely an indication that physicians are aware of the issue, street drugs, such as heroin, are cheap and readily available. Many of the respondents to the Human-Centered Design report speak of how drugs have adversely affected their lives. County health care experts also relay stories on drug abuse cases and the wide ranging effects of the problem.

Chronic Disease
Priority Ranking 1
Past history, health expert input, and both 2017 Thiel commissioned reports indicate a high need for education, programs, and treatment for chronic disease including, but not limited to hyperlipidemia, hypertension, arthritis, diabetes, obesity, ischemic heart disease, chronic obstructive pulmonary disease, chronic kidney disease, and heart failure.

Access and Navigation
Priority Ranking 2
Past Health Needs Assessments showed a high degree of support for programs that facilitate access to effective health care. Access services include person-to-practitioner language translation, transportation and health literacy through which health terminology and practices are explained and thereby better understood and followed by residents and recent immigrants. There are an estimated 900 migrant farmworkers in Wyoming County who are the major source of labor for the dairy industry. The health of this population is important in itself, and an additional consideration is that many dairy farms would face serious problems if these workers were not able to perform their jobs.

Emergency Assistance
Priority Ranking 2
Although significant safety-net programs exist in the county, there are many cracks in those nets for low-income people with sporadic immediate needs regarding medication, medical equipment, medical transportation and social-support-group programming. This is not a medical necessity or reimbursable program, but is a medically responsible one. Peer-to-peer support is a major
characteristic of such programming. Any applications submitted for consideration under this priority must focus entirely on low-income people.

Transportation
Priority Ranking 3
Both 2017 Thiel reports indicate a need for transportation services that enable health care services. The Thiel Trust would be open to receiving requests that focus completely on medical transportation that can either target a particular portion of the population, such as seniors, or be broader in whom they serve.

Dental Health
Priority Ranking 4
Prior Health Needs Assessments noted the need for expanded access to dental health services. Dental health needs for children, the underserved, and uninsured populations are very high. Health expert feedback has reinforced the data. https://www.health.ny.gov/statistics/chac/chai/docs/ora_56.htm

Past numbers showed that in comparison to other populations in the county, these populations significantly overutilized emergency departments for dental problems. In 2008, Medicaid and self-pay patients accounted for 54 percent of ER visits for dental problems whereas they accounted for only 25 percent of all ER visits.

Reproductive Health
Ranking 4
As outlined in the Wyoming County Trends and Impact Report, many of the reproductive health indicators are positive for Wyoming County. Birth rates are decreasing, the teen pregnancy rate has declined significantly, and midwives are now available to address prenatal care. However, health care personnel have advocated that reproductive health education and programs continue to be supported for females and also males.

2017 Thiel Roundtable Members
• Andrea Aldinger, Wyoming County Office for Aging and Youth Bureau
• Dr. Greg Collins, Wyoming County Health Department
• Mike Corcimiglia, Wyoming County Community Health System
• Jim Cummings, Oak Orchard Health
• Kelly Dryja, Wyoming County Mental Health Department
• Scott Gardner, Wyoming Foundation and Wyoming County Chamber of Commerce
• Cathy Huff, WNY Rural Area Health Education Center
• Rhiannon McDevitt, Oak Orchard Health
• Jean McKeown, Community Foundation for Greater Buffalo
• Bill Namestnik, Oak Orchard Health
• Laura Paolucci, Wyoming County Health Department
• Darren Penoyer, Community Foundation for Greater Buffalo
• Pat Standish, Community Action for Wyoming County