

- Good morning, Virgin Islands. This is Archie Jennings for the Disability Right Center bringing you Ability Radio, You and Your Health. We are a health literacy program and we're being sponsored by the Lottery Commission, Making a Difference Program. We certainly appreciate their sponsorship. And this is a call-in radio show as well and we request that no use of names or other, no personal text, no unfounded allegations, no product pitches, no profanity, and we don't give medical advice, so we won't respond to those type of questions. And today, we have a very good resource for health issues in Virgin Islands being part of our program today. It's the East End Medical Health Center and we have before us for our morning audience, Moleto A. Smith, Jr. He's the executive director and along with, Ms. Monife Stout who's a public relations director. Good morning.

- Good morning.

- Good morning to you, Archie, and good morning to the listening audience on this beautiful bright Saturday morning here in St. Thomas.

- Yes, it's great. It's great.

- And I'm sure it's wonderful on St. Croix too, St. Croix, St. John.

- All of the Virgin Islands.

- Yes, all over...

- That's true.

- Yes.

- And one of the things that I like for the listening audience to understand is that you are a Federally Qualified Health Center?

- That's correct.

- And can you explain to the listening audience what that entails?

- Okay. Well, what I, what I'll do just to give a quick background and then fold into that background presentation, what it means to be a Federally Qualified Health Center, if that's okay.

- That's fine.

- Okay. The St. Thomas East End Medical Center Corporation has been in the Virgin Islands since 1978. It was previously known as the East End, East End Family Health Center located right above where O'Henry's Laundry is for those of us who are familiar with St. Thomas. We're the long-term, we're the current long-term care facility is on the Schulterbrandt Clinic. The East End Family Health Center was a rural designated, designated rural health clinic and a federally qualified clinic. If we can recall what the landscape looked like in 1978, most of the East End was very sparsely developed. We had new housing communities going in that area being the Tutu areas, the high-rise housing projects, and it was very, the transportation system as we know now was not as robust. So, the Department of Health, because the East End Family Health Center, Clinic at that time was under the auspice of the Department of Health. And the Department of Health applied for federal resources, other resources to bring health closer to those communities which were designated as rural.

- Okay.

- In 1999 or there about after the Affordable Care Act, the location of the facility was very unaccessible for individuals with disabilities and it was required to relocate. So we, it relocated to the mall where the Tutu Park Mall is. And then around 2000, there was a requirement that the governing boards of these

Federally Qualified Health Centers must be 51% consumer driven. So, at that time the health centers, both the St. Thomas East End Medical as it's known now, and the Frederiksted Health Care split from the Department of Health, became private non-profits and have operated as private non-private entity since then. The federally qualified designation, what that means is that there are certain performance requirements that the federal government through the Health and Human Services, Health Resources Services Administration requires that we operate under. And in regard to that, it provides for a certain types of reimbursements through CMS and otherwise, but it also means that we are designated to serve, what we call, under, underserved populations, underserved, uninsured, underinsured populations which we have a very broad population that falls under that category in the Virgin Islands.

- So, it fills a definite gap in services.

- It definitely does and if you think about it, most of, if we took the Federally Qualified Health Centers out of the healthcare system, it would leave a significant void in primary care. So, we focus primarily on primary care services. We offer a wide scope of primary care services including referrals, pediatrics, women's health, OBG, dental services, oral health, internal medicine. We are ramping up our behavioral health and we're also expanding dentistry care, and we provide a lot of linkages as required for care continuation in the primary care space.

- So, do you take all type of, or we couldn't say private as well as public sponsored insurance such as Medicaid, Medicare?

- We are not a free clinic and, but we do, as part of being a federally designated location, federally, part of our federal designation, we have what we call a discount program. It's also known as the sliding fee scale and what that does is, based on eligibility, it provides a very nominal self-pay payment for those individuals. We accept Medicare, Medicaid, VA, and every form of private insurance that is offered in the Virgin Islands. But we are not a free clinic. We have to keep our doors open but we, but we're not profit driven either.

- Right. Okay. So, you're a private, non-profit, non-governmental agency?

- Private, non-profit, non-governmental agency. We collaborate closely with various government entities for the delivery of care however.

- Oh, okay. And this is the type of clinic, how long are you open on a daily basis?

- We normally begin to see patients at about 8:00. Door, our doors open at 7:30. We try to accommodate registration and so forth, so our doors open at about, at 7:30 as it is currently, and we operate until 5:00. If, we are appointment driven, although we have some same-day slots and walk-in slots available, but we are primarily appointment driven.

- Okay. So...

- And, I'm sorry. And we also have periodic, at least once a month, we have Saturday clinics as well.

- Are, is that walk-in or is that by appointment?

- It's primarily by appointment. We are in the process of doing a number of things to include [inaudible] into a expanded hours model which would basically offer services on Saturdays, more services continuously on Saturdays, as well as longer hours during the days, most likely until 6:00 instead of the 5:00 hour. We are somewhat limited by the time that the mall opens also.

- Oh, I see. I see.

- Yeah.

- One of the things you mentioned eligibility.

- Yes.

- Is it based upon what the federal government calls the Federal Poverty Guidelines and therefore, it sits in a certain amount in the Virgin Islands which must be the threshold in order to...

- Well, it is, well, we know for Medicaid, because we don't particularly issue or establish eligibility for Medicaid. Although we have eligibility workers who support the Medicaid program, but the Medicaid program itself establishes eligibility and most, for Medicaid, and for most of the, those may fall under whatever the requirements of the Medicaid program may be, and I believe that those do speak to some type of Federal Poverty Guideline. For self-pay, we have a little more latitude in establishing what some of those criteria are.

- Okay. Well, again, this is Ability Radio with Mr. Moleto Smith and Ms. Stout, and we'll get right back to you. Good morning. Back to Ability Radio and we have a very good resource through East End Medical Health Center and Mr. Moleto Smith is giving us a lot of information this morning.

- Good morning again.

- And one of the things I wanted to talk about was, you mentioned primary care.

- Yes.

- And could you explain to the listening audience what's the difference between primary care and perhaps urgent care?

- Yes, I will. Primary care, well, there's a few categories within the healthcare continuum. You have primary care which is primarily prevention, wellness, the family, the type of service that are aimed at keeping you in good shape, keeping you healthy. You know, your routine checkups. If you may be in the pregnancy phase, to make sure that you and your expectant child are, or child or children if you have, you're having twins or more, that you maintain good health. Then you have what we call urgent care which is it's not as acute, your physician is not as acute as an emergency, but it's not really a wellness type of encounter. So it falls in between that gap. Then you have what we call the acute care. And acute care will be those things that require you to be in the hospital. The, you know, if there are, if you, if you're presenting with some type of, some type of incident that requires you to be hospitalized because hospitals do very specific, a specific type of things aimed at resolving whatever that immediate or acute issue is, and then sending you up. And then we have emergencies which, you know, you really don't anticipate when that is and that's where you end up in an emergency room. So we are primary care, we are focused primarily on prevention, on keeping you healthy, on supporting your long-term health, and encouraging you to empower yourself and maintain some control over your long-term health. We always encourage, not even encourage, we always direct if you're having an emergency type event, in other words, if you're experiencing acute chest pains. If there's something presenting that you, would be an emergency that we always refer you to the emergency room. If perhaps you encounter an emergency type situation when you are visiting us, we would stabilize you and then transfer you to the emergency room because we are not an emergency room type place. What is, somewhat between the, between the lines is that there's not many or if, or at all any urgent, really urgent care facilities on St. Thomas that could handle high numbers. So many of the people, many of us I should say who go to the emergency room may not necessarily have an emergency situation. That's, in that case that's why you hear stories that individual may wait hours to get seen because when emergencies come in they take those emergencies over individuals who may have less urgency.

- Correct. Right.

- Yeah.

- And actually I've been there, so...

- Yeah.

- And I spend hours at times.

- Yeah.

- But through the years I think the services have changed somewhat when I, as far as when I had children or growing up. If you get anxious about them, you go to the emergency room.

- Yeah.

- But now you're telling me there's another outlet if you have anxious you can go to the East End Medical Health Center, have a pediatrician, probably, check them out and see.

- I think that would be a preference. We have just completed, when I say, "Just," this is December of last year, on December 2015, a Comprehensive Needs Assessment through the efforts of the University of Virgin Islands, the Caribbean Exploratory Research Center, and the Eastern Caribbean Center in concert, we just completed the Comprehensive Needs Assessment of the Eastern End of the Island which is primarily our service area, but the results could really be extended throughout most of the ZIP codes in St. Thomas. What we find is that there are a, there is a high number of individuals who really seek more in the, in the, that continuum that I had just mentioned, particularly regarding urgent care, and there are some public education that's also required to educate and make individuals aware that, the differences between primary care, and urgent care, and acute, and we're really to direct your focus if you need certain types of services.

- Okay. And I noticed you just, Ms. Stout, you just handed me a brochure. Could you explain...

- Yes.

- ...what you have?

- Well, on that brochure it gives you a basic overview of a list of services that we provide at the health center as well as the sliding fee scale option and other insurance that we accept. Also it gives you a brief overview of our staff who we, without them of course we would be nothing, but it allows you to see who we are working with to help ensure that your health is optimal. We have one of the, we have the best physicians on island, if we say so ourselves, who work cohesively to provide patient care. So these are people who the community has trusted over the course of the years, and who have invested their time and their profession in the Virgin Islands for a long time, and they've decided to work with us to continue to provide that kind of service. So, it's a really comprehensive brochure and we normally equip our patients with it whether they'd been a long time patient or not, and especially our new patients and also to you who reach the public on a wider scale to be able to give them a synopsis of what we have to offer.

- Okay. You also have down here screening which is blood pressure, breast cancer, cervical cancer, cholesterol, glucose testing.

- Uh-hmm.

- I know at one point, I'm part of the Cigna, Government Health Insurance Plan.

- Uh-hmm.

- We have to do a yearly screening.

- Uh-hmm.

- Can we come to you at East End and get that screening done?

- I would encourage you to.

- Yes.

- Okay.

- The short answer is yes and the long answer is yes.

- And the long, immunizations as well. We prepare students to resume the school year with the necessary immunization.

-Uh-hmm. Yes.

- And it's important for parents to know that they have another outlet to do that.

- And I'm at that age where the doctor, my primary doctor is telling me, "You got to go get this flu shot."

- Yes. And that's also something that most debate, but if you, it's...

- Well, I'm, I listen sometimes.

- Yes.

- I'm getting there. I'm getting there. And you have covered here men's health and women's OBG, you mentioned that, and family planning. What's in the area of family planning that you offer?

- Well the, we have a very, we work in, first of all, we work in concert with the MCH Program, the Maternal Child Health Program under the Department of Health, and we have a high proportion of prenatal and pregnancy, pregnant women that we serve through our OBG program. And it, it's basically to, basically to support planning how your family should go, should go ensuring that you have a well-baby visit, that you have the prenatal services that are required, that you stick to a schedule both around nutrition and so forth.

- Okay. And as far as also your screenings do you have, I know, we had the American Cancer Society rep on about a week ago or two weeks ago and one of the things was talked about is early detection.

- Uh-hmm.

- Do you have the facility at the East End Medical Center to help someone with early detect?

- We have a partnership agreement, well not, an affiliate/partnership agreement with St. Thomas Radiology. And we also provide through that some, if, you know, if one qualifies a discounted cost scale, you know, if one qualifies, where depending on the exam that we do in terms of primary care, we'll refer to St. Thomas Radiology which has the equipment and the specialist in that, in that area. So through that affiliate/partnership, we provide those services on a referral.

- Okay. And who makes up your board? You mentioned 51% must be consumers and I was wondering who makes up the other 49%.

- The, we, there's something very unique about Federally Qualified Health Centers and it's, it, when, in its, in their inception way back, this is the, last year was the 55th year of Federally Qualified Health Centers existing in the nation. And in the legislation that established Federally Qualified Health Center, there is a requirement that you must have a consumer driven board. So as, what's unique to us is that your, majority of your, of our, of the boards must also receive services from your facility. Now that, what, the other, the mix of folks include subject specialist in, you know, finance, accounting, all the, all the governance areas that make for good governance of the board. And many of those with those, with these expertise, these areas of expertise, also are consumers of the services. So you could, yeah, so you could actually capture two birds at the same stone, two birds with the same stone, yeah, I think, I think that's the right thing.

- Okay.

- Yes.

- And with regard to, you also mentioned some of your services, what are your areas that you're expanding upon?

- We are, and I'm happy to say, we are expanding our oral health. At this juncture the two Federally Qualified Health Centers which is Frederiksted Health on St. Croix and the East End Medical Center on St. Thomas are the only providers of public health dentistry. There are no other providers. So as one could imagine there is a tremendous demand for oral health, oral health and we're in the process of expanding from the two dental operators that we have to five. We are expanding services for dental hygiene in terms of bringing on hygienist, bringing on additional dentist. We are concluding some negotiations now and we're in, and we're building up space. We've actually locked in about 37,000 square feet in the mall with the expressed purpose of providing that service to the public.

- Okay. And also you mentioned something about behavioral health, one of my, you know, my little projects.

- Well, we are not the Division of Mental Health, but we know that behavioral services are in high demand and crucial to overall health in the territory. So we are in the process of refining and introducing more robustly our behavioral health component. We have brought somebody on to help design that out, you know, and we have applied for a number of grounds that we've been successful in to accommodate that expansion, and we always invite anyone in the community that ones that support that effort to collaborate and partner with us.

- All right. We've got a short break and get right back to the East End Medical Health Center. Good morning. Welcome back to Ability Radio, You and Your Health. Again, I'm Archie Jennings with the Disability Right Center of the Virgin Islands and again, we'd like to thank the Lottery Commission for allowing us to bring this vital program to you that explains the resources available in the Virgin Islands for your healthcare. We have with us this morning Mr. Moletto Smith and Ms. Monife Stout from the East End Medical Center, and we'd like to continue the conversation with regard to available services and what you can get achieved at the East End Medical Center. Mr. Smith, one of the things, you were just, sort of, wrapping up regarding behavioral health and I was wondering is there any additional things you see in the future that East End Medical Center may get involved in.

- Well, one thing is we very much understand that once behavioral/mental condition speaks significantly to overall wellness. So we, in the prevention primary care arena, we are, we focus on the overall wellness and health of a, of a person. So we will continue to coordinate with whatever coordinating partners are out there to support that aspect of a person's health. In that, and so along that vein, we have, we are building out a program, we are, we're actively doing so. We've, we are also establishing what I call the preceptorship type of apparatus so that we could also assist in building capacity as [inaudible] and provides more opportunity for individuals who want to come back to the Virgin Islands or maybe studying the area of behavioral health and you could, you know, part of licensing that, licensure that you have to do certain amount of hours in order to, in particular types of setting under licensed individuals to...

- Okay. Like clinical hours?

- Like, yeah, clinical hours. So in that vein, we also are exploring, establishing a program such as that.

- Okay. Let's say I have a stomach pain and I come in to the East End Medical Health Center, one of the things that my primary doctor always says, he go write out a prescription and send me to go get some lab work or some medical, some blood work. How does that work at the East End Medical Center?

- Usually the standard of care is pretty consistent across various institutions that do primary care. One thing that's very helpful at our setting is that we have a lab so we can do the blood draws depending on the type of lab work required. We can do some of the analysis on-site. Others would take about 24 to 48 hours to have the labs return because we send them off to a, you know, a lab, you know, a national laboratory known as Quest. But we can do the blood draw. You don't really have to leave the facility to go, to find another setting to do the work. We have some excellent phlebotomists and that's actually a very high demand services.

- Oh, yes, yes. Yeah, I can see that.

- Yes. So, it's really about comprehensive care. So it's like, and if we make the, and if you make the experience as one stop as possible, it takes away from, you know, additional stress and additional activity for the patient and the potential patients such that you don't have to drive all over the island looking to get stuff done.

- Oh, correct. That's one of my points is that you go to your doctor, then he's gonna send you to a lab, you got to go back in your car, drive over to get the lab work done, go back and get the lab results, and go back to your doctor.

- Yeah. Well, we have a Lean laboratory on-site.

- Okay.

- A CMS certified lab. We, many may have heard in the press over the last two months or so that we received a very generous donation from the Bennie and Martha Benjamin Foundation of a CBC machine.

- Oh, okay.

- Yeah. And so it enables us now to do certain types of testing or analysis that you don't have to send off island to get those results for. So it's quite convenient for those of our patients who require lab work that they don't have to leave the facility, making, you know, find a lab, get the blood drawn, wait for that lab to get the results back, and so forth. So when the labs come back, they, I mean they actually goes directly to the physician who recommended the lab.

- Okay. So if, say, I have a granddaughter, if I wanted to go there and take my granddaughter, get screening for myself and for my granddaughter, all that can be done at your, East End Medical Center?

- Each of those can be done. Each of you will be coming to individual patients of course and we will, we will treat each of you as, you know, based on HIPAA Compliance and everything else...

- But just to...

- ...yeah, if necessary. Yeah.

- Right. Thank you. Just to take an opportunity though to make the public aware, there is an authorization form for instances like that. If you are not the guardian of your granddaughter in the instance you propose, there is a form that we require you complete giving your granddaughter's father and mother permission to have you act on your granddaughter's behalf to visit the vet, the health center and...

- That's good to know because many times, the parent is working, so...

- Right. And we understand that.

- ...it's a, and the grandparent is the one bringing the child to the center, so I was wondering if [inaudible] down there.

- Right. Yeah. We do accommodate you, but we would like to ensure that the proper authorization is in place.

- Okay.

- Uh-hmm.

- Fine. One of the things under the Affordable Health Care Act was this issue regarding medical records.

- Uh-hmm.

- Can you, are you dovetailed into the Affordable Health Care Act and how are the records now being generated for the patients?

- Well, the, regarding medical health records, there is actually two sets of statute, two sets of requirements. One that, you know, many don't know but there's a local law, there's, there are no penalties associated, but there is a local law requiring that providers of medical services and healthcare services have electronic health records, and there is the Affordable Care Act requirement for electronic health records. We are very proud to say that at this time we are transitioning from our current electronic health system to a brand new system and we are anticipating that in about six weeks, if all goes well, we will have transitioned to a very robust and very accessible new health record, electronic health record system which would include not only the medical record but also dentistry records for our patients and would have the capacity or the ability to interface with other healthcare providers for those purposes. We, there's already a, basically, a version of electronic prescribing that's done in the Virgin Islands depending on the capacity of the pharmacy and the, and the physician, but, and also electronic interfacing for labs and lab results and so forth with laboratories. So, we will have a very compatible, very expandable, scalable, and very user friendly electronic health record system in place, a new one. We have one in place now.

- Okay.

- But a, but a new one in place by April, in mid to end of April.

- And are those more, I wanna say, health records walkable, can, like, a patient who may need to go for further, you give a referral to go to another physician or a specialist, was, does the records go from your facility to the specialist or can the patient walk with the records?

- Well, the patient's records are actually their records. I mean, that's one thing to start with there, you know, the records or your records, we are a custodian of your records for varying reasons. Once a request is made, we will make any patient's record available within a certain period of time.

- Okay.

- And then they could [inaudible] you know, travel with their records or use them for whatever purposes they deem appropriate to maintain their health.

- Right. And as you, as you've mentioned before, your physicians are primary physicians.

- Yes.

- So, they may make referrals to specialists?

- Yes. Well, anything requiring specialty care, we would make the referral with the exception of the Medicaid program because the way the Medicaid program is, I'm sorry. The way the Medicaid program is set up, we have to refer specialties back to the Medicaid program and it then refers, you know, the patient to a provider within their specialty pool, but we would make the referrals. And one thing that we'd also need to mention, I think that was, kind of [inaudible] comment is we have, we also provide allergy and asthma services. We have, what I understand is, the only allergy center and asthma specialist on the island in the-in the form of Dr. Audria Thomas who's with our staff full-time. So, there's a high pool of folks who come for those. And so, those are primary, that's like in between primary and specialty type of services when you're looking at allergies and asthmatic services, services for asthmatic.

- Is that a huge area in the Virgin Islands?

- It is a very high demand area especially when we look, especially in the summers, any time but we could really see a pronouncement in the summer when we have all the Sahara dust and everything else circulating. And even more so, the research has begun to show a correlation between the warming of the Earth, you know, what we call climate change or global warming and such, and the kind of respiratory conditions that come particularly in Caribbean-Mediterranean areas regarding dust, and the various type of dusting.

- Well, the other high incident area, I hate to mention it because it's in my family line, is diabetes. It's, what does East End Health Center have in regard to diabetes?

- We have a very, well, I consider her the best because she's my doctor too, is Dr. Barbara Douglas who is an internal medicine specialist, and she provides extremely high quality and excellent services for diabetics. We had in the middle of last year around June, between June and August or so, a diabetic challenge. It's called Three Down in Three A1C Challenge and I'll let Monife expound on that a little bit.

- All righty. Thank you.

- Thank you. That was actually a lot of fun. We started that challenge with our own patients about a handful of about ten or more, ten to twelve of our own patients whose A1C levels were nine or above, and the challenge of course was to reduce those numbers by three digits within three months hence the name Three Down in Three A1C Challenge. And to our surprise and our appreciation really, we, the patients

took the challenge to heart, they took it seriously, and they actually succeeded at reducing their A1C levels by some, one who won the challenge was by more than three digits. It was quite considerable. And they saw through that that they were able to control their diabetes. It's actually possible.

- What did the challenge consist of?

- It consisted of them, first of all, taking ownership of their health, encouraging their friends to do the same because they needed support among, besides support from one another but support from their other friends, taking nutritional courses that the health center provided throughout the course of the week, diet and exercise, and being consistent about reporting or testing their A1C levels. So, its model, it was modeled after The Biggest Loser Challenge, that's one that's very popular on a...

- That's a reality show?

- Sort of, but more of a challenge show. I don't, I personally don't consider it a reality show. But it was fun and they enjoyed it, but most importantly, they lowered their A1C levels. They were split up into three teams by color, blue, yellow and red, and Dr. Douglas's team, the red team won.

- Okay.

- But the most important thing is that the participants realized that it's actually possible to control your diabetes.

- And what I'm hearing then, it's basic, it was a good educational program...

- Yes, it was.

- ...with a lot of support and giving them direction.

- Yes.

- I assume like what foods to eat, what time of day to...

- Right. A lot of the nutritional course work involved that, a lot of interaction as well, and conversation about diet and health and what the challenges are.

- And some of our clinical staff who are assigned to each of the teams even assisted some of the participants in shopping. You know, they would...

- Okay. Yeah.

- Now, one thing that we find is that we have to, you know, use some innovative and creative ways to approach health particularly around hypertension, diabetes, and the like because once an individual leaves the health center, a lot of the issues around maintaining their sugar levels and their blood pressure and so forth leave when they leave us. Okay. So, it's important then that, you know, we really approach this phenomena in, this phenomena in our community with some innovation and some creativity. And so, programs like this are the things that we are, you know, we will be into, continuing to introduce.

- Okay. But in the meantime, just get back to you in a few minutes, but we're gonna take a short break here. Okay. Back to Ability Radio with our guests this morning from the East End Medical Center, Moleto Smith and Ms. Monife Stout. We were talking about diet and nutrition, and your challenge program. Ms. Stout, wanna give an announcement about what may be happening soon?

- Well, the, with the success of the A1C Three Down in Three Challenge last year, we are considering continuing that this year so that we can, of course, have more participants and essentially affect more people in terms of educating them about how to control diabetes and some preventive measures to avoid

for friends and family who may have that prevalence in their, in their family history, how to better engage in preventive ways to develop diabetes in the first place. So it's a far-reaching effort and last year was our initiation. I mean, we tried it out, we saw that it worked, and wanna start it again this year, and make it bigger. So we just have reconvene and look at what we're gonna do in terms of how to take the next step in doing more than what we did last year and affecting more people.

- Okay. Well, I know at one point in time, the personnel department had a program for all government employees.

- Yes.

- They were doing a walking program.

- Uh-hmm.

- And perhaps the two of you can get together and make an overall, the exercise part plus the nutrition part.

- Uh-hmm. The nutrition, right.

- Bring it all together for the Virgin Islands and get, be healthier.

- That's an excellent idea and...

- Great idea.

- ...that's something that we strongly encourage and will pursue.

- All right. All right. We're gonna have a healthy Virgin Islands.

- Exactly.

- Be ready for a carnival each time it comes up in a healthier way. You were mentioning one of the things about children, it was some sort of study going on regarding what's happening...

- Yeah, the, as I mentioned earlier, we just completed the Comprehensive Needs Study, Needs Assessment for UVI and it was very comprehensive. We received a \$200,000 technical assistant grant through the Department of Interior to perform this study. So we looked at approximately 11,000 subjects, we did computer-aided telephone call, focus groups, town halls, in-school questionnaires using the behavioral risk assessment protocols. And one area of results that came through was, if, was that about 70% of adults and 62% of children, school-aged children, were overweight or obese. And what that speaks to is that if not intervened and must, much of this is lifestyle issues, we will continue to have high number of our children who go into adulthood and or adults who become older with diabetes, and the end stage of diabetes, as we know, is dialysis and that's something that's preventable, and it speaks to the kind of interventions that we need to do. Another area that we, will, was revealed in the study is that about 52% of adults have at least one teeth missing, one tooth missing. So we know that once oral health [inaudible] that has a lot to do with self-esteem, has a lot to do with how you can, the type of foods you eat, and the kind of nutrition that's necessary. So those things taken in combination indicate that there's things that we can, must do as a community to preserve the health of our community and to sustain a high quality of life for our residents.

- Well, especially a time for parents, when you go into the grocery stores, I think I used to go in there and you would see non-sugar food. I think Cheerios is the last cereal on the shelf now that has sugar in it, so then that's what the kids get, you know, basically if you're feeding them those type of things, and most of the other foods have sugars as well. So that nutrition part is very helpful and...

- That nutrition part is extremely important, but a lot of it is public education, so...
- Right. Right. We talked about that.
- ...to make the right choices, right balanced choices in terms of what we decide to bring into our homes and where we decide to make in terms of our mainstay of meals. The study also indicated that there was a high proportion, percentage of folks who eat primarily fried foods. So we know that diabetes, hypertension, and so forth are chronic that if consisted over long period of time, then you will have cholesterol issues, and cholesterol issues lead to heart issues, and heart issues may lead to, you know, both diabetes, as well as your hypertension issues. Yeah.
- Okay.
- So everything over a period of time. So we're not saying that folks should go cold turkey.
- Okay.
- But what we are saying is that, you know, there has to be some specific attention played, paid to taking some ownership and, more ownership and then probably [inaudible] ourselves to really look at the quality of our health.
- Right. One of the other issues that we also deal with is traumatic brain injury. I was wondering out of the study that the, we got through the UVI, University of Virgin Islands, was there any indication about the incidents of traumatic brain injury in the Virgin Islands?
- Well, the scope of the study, the assessments weren't really, didn't focus on, I mean, actually, it didn't touch on those areas at all.
- Okay.
- Yeah. I did focus primarily on primary care, gaps in healthcare delivery, and with the aim of enabling us to look at what we need to do as an institution, but also what we need to do in collaboration with others in the healthcare space to kind of fill those gaps.
- Another aspect of going to seeing your prior, primary care physician is prescriptions. Is there any type of assistance given to prescription drugs where a patient may not, kind of, afford a certain pill? Because we were talking about with the American Cancer Society, how they're able to tap into some of the manufacturers of pharmaceuticals with these programs that help out patients who can't afford them.
- We have an internal program that we kind of look at it case by case to assist with drug purchasing. But we are, there's something called a 340B program, it's called the 340B simply because that's the part of the statute that speaks to the discount prescription offering through HRSA, which is, you know, the Health Resource Services Administration. We're in the process of reapplying and, because we find that it is extremely important that folks are able to have a sustainable, affordable stream of medication to maintain their health. And there's some other things around medication management but, typically, for our older populations that are important to provide education around. So we will be, this time, this is gonna be a very exciting year for us because we will be looking at that whole medication management piece, bringing us some resources to support that, as well as getting our 340B program back up.
- And also, I always go back to my mother, telling people to take the drugs as prescribed, not as they feel they should take them.
- And take a, well, a lot of this has to do with the cost of prescriptions too.
- Right.

- When we have individuals who, particularly our older persons in the community who are on, you know, fixed income, and with the cost of living in, and their particular cost of living circumstances, when they have to choose between, you know, paying their lights or buy their prescription...

- Yeah, that's [inaudible]

- ...you tend find that they tend not to, instead of taking the whole dose once a day, they may take half a dose every other day and that's not really helping them.

- Right.

- So if we can do things like re-establish our 340B program which would provide substantial subsidies to the patient and the cost of medication, it would go a long way in supporting folks being able to maintain their, you know, their prescription medication, prescription medication.

- Okay. Well, Ms. Stout, is there any final information that you like to get out to the general public about the East End...

- Well...

- ...Medical Center?

- Well, first, I'd like to thank you because outlets like this allow us to reach a wider audience and our message has been, since the beginning, your best health is up to you, and we're here as an entity to support you in making sure or ensuring that your health is of the utmost, but taking personal responsibility for that is something that we leave up to the patient. And we encourage any kind of inquiries, we encourage visits, of course.

- Right.

- But the kind of results and success that we hope our patient see will come from the efforts that they make on their own and that's the message that we really want to send to everyone. If you have a family member who is struggling with maintaining their health, come to us and we'll help, and we'll give you advice, we'll give the directives, we'll give the support. And that's why, that's why we're here. So our doors are open, but we do empower our patients to continue to practice the kind of preventive care that we're offering.

- Well, you certainly are what they're looking for as far as patient-centered approach and patients-centered services, and that's all part of the Affordable Healthcare Act, and it's all part of how people taking control and working with their physician.

- Yes.

- Uh-hmm.

- And getting the best healthcare and getting yourself healthy, basically, and enjoying life.

- Exactly.

- So again, and Mr. Smith, any final words?

- First of all, thank you and I thank the station for the opportunity to really reach out to the community. I, I'll be [inaudible] if it don't say good morning to my staff who may be still asleep on a Saturday and those who may be up. We have, we are very committed to keeping our community healthy. It requires that all of us work together in the healthcare space, coordinate, collaborate, but most of all, it requires that each of

us to take some individual ownership of our health. So with that said, I thank you again for the opportunity and we look forward to other opportunities like this, and thank you to Da Vybe for the program.

- Thank you for coming. And...

- Thank you.

- ...again, remember this is Ability Radio. We'll be back next week. And thanks Da Vybe, and thank Lottery, and the best of the rest of the weekend to you, Virgin Islands.