

# COUNTRY ROADS

Highlighting Champions  
of Rural West Virginia





# On the road to a healthier West Virginia

The State Office of Rural Health works to ensure equitable healthcare access through:

- Leveraging federal funds to improve access to healthcare services
- Supporting workforce recruitment and retention including loan repayment and J-1 Visa waivers
- Promoting community engagement
- Providing technical assistance to public and non-profit groups

## Partnerships, Service and Quality



# INSIDE

## 03

Retiree recognized for work addressing health concerns and guiding initiatives.

## 07

Group ensuring the availability of affordable housing and improving well-being of residents.

## 14

Hospital expands to help serve those in rural and mountainous region.

## 17

Non-profit director follows calling of helping men through recovery.

## 22

Health system benefits from program offered through Harvard Medical Center.

STORIES BY JEAN HARDIMAN

PHOTOGRAPHY BY CHRIS GOSSES

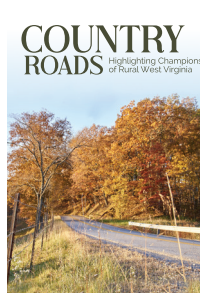


with Lisa Lewis

Interim Director, West Virginia State Office of Rural Health

During my 22-year career, I have spent many hours traveling the state meeting and talking to people from all walks of life, and the thing that strikes me most about West Virginians is that we are able to accomplish so much with very little. I grew up in a little place called Twenty Mile in Nicholas County where there was always a sense of community and neighbors became family. My father was a coal miner, and my mother was a homemaker. We didn't have a lot, but we never went without. As rural people and as advocates for rural health, we live the words of tennis great Arther Ashe, "Start where you are. Use what you have. Do what you can."

In this issue of Country Roads, you'll read about Andrew Bailes who started a recovery residence, God's Way Home, with nothing more than prayer. Today the organization consists of two sober-living homes and a resource center. You'll learn about Wild, Wonderful & Healthy Summers County, which focuses on housing, among other issues, to support the overall health of their community. We've also included a story about Community Star award-winner Sharon Lansdale whose organization launched the Wild, Wonderful & Healthy program. And we visit a new clinic at Pocahontas Memorial Hospital and a health center whose providers are getting some telementoring help from Harvard Medical School.



**ON THE COVER**

Spencer, WV

Photograph by Chris Gosses

# WELCOME



# Working community by community | Sharon Lansdale

**Lansdale honored for helping communities identify health needs and making solutions a reality**

**Story by Jean Hardiman**

Public health “is the work of generations, not a generation,” Sharon Lansdale has been known to say. It usually takes more than just a few years for a public health issue to surface, and it takes more than a few years for solutions to develop.

“The work has to be done community by community,” Lansdale said, and she should know, after spending four decades helping individuals and communities across West Virginia address health concerns of all kinds and guiding initiatives that will have a lasting impact on the Mountain State.

Lansdale, who in July 2023 retired as president and CEO of the Center for Rural Health Development Inc., was honored as a Community Star for her nearly 30 years of contributions that focus on the links between both health and healthcare and economic development.



**In recognition of her nearly 30 years of contributions that focus on the links between health and healthcare and economic development, Sharon Lansdale was honored as a Community Star.**

Community Stars is a program created by the National Organization of State Offices of Rural Health (NOSORH) to honor individuals who have made a positive impact on their local community, introduced new services, shown local leadership, demonstrated a long-term commitment to improve rural health, or championed innovation in rural communities. Each year, NOSORH releases an electronic publication of Community Stars coinciding with the observance of National Rural Health Day.

Among her many accomplishments, Lansdale helped establish the West Virginia Rural Health Infrastructure Loan Fund to fund healthcare projects and launched Wild, Wonderful & Healthy West Virginia in 2018.

## Wild and wonderful

Through Wild, Wonderful & Healthy West Virginia, the Center for Rural Health Development works to strengthen communities' capacity to not only improve their residents' health, but to create a community culture that supports entrepreneurial and small business development.

"Sixty percent of a person's health is due to the conditions in the community," said Lansdale, who is continuing to work for the Center for Rural Health Development in an advisory role.

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“Sixty percent of a person's health is due to the conditions in the community.

— Sharon Lansdale

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**Since retiring in July 2023, Sharon spends most of her time with grandchildren Caleb, Jace, Jud, Ethan, and Juliana.**



**Sharon and husband Steven Engelhardt own Engelhardt Farm in Winfield. Together they raise alpacas.**

The conditions of the community that can either help or hurt a person's health include everything from access to healthy foods and places to exercise to safe, affordable housing, job opportunities, and public transportation, Lansdale said. "In rural communities, they suffer from decades of disinvestment and generational poverty. It's going to take a lot to turn that around," she said.

Her mission has been to help each community get the tools it needs to chip away at problems — one goal, one project at a time.

Lansdale moved to the state as a young girl and grew up in Charleston, graduating from George Washington High School, prior to getting a bachelor's degree at Marshall University and a pharmacy degree at West Virginia University.

She began her pharmacy career in 1980 and chose hospital pharmacy as a manageable way to work while raising her daughters.

"My whole career has been around my girls," she said.

As the director of pharmacy at a Charleston hospital, Lansdale educated patients about how to manage their diabetes once discharged from the hospital, which led her to the West Virginia Department of Health, Bureau for Public Health (formerly a part of the West Virginia Department of Health and Human Resources), where she was instrumental in the development of the diabetes control program.

"I really fell in love with public health," she said. "People don't think about it until there is a problem, but it's about looking at conditions that will lead to keeping people out of the hospital."

After serving as a consultant at the Bureau for about 10 years, Lansdale became the director of the Division of Health Promotion and Chronic Disease Prevention. In that role, she helped develop several programs that focused on chronic disease control and community health improvement.

She became president of the Center for Rural Health Development in 1994.

## **Loan fund "fills the void"**

Looking back over the years, one success of the Center that she believes to have a true impact is the establishment of the West Virginia Rural Health Infrastructure Loan Fund, which provides affordable capital financing for healthcare providers and organizations in the state.

Since 2001, the Center has partnered with banks and other funders to leverage over \$65 million in healthcare infrastructure improvements in the Mountain State, with less than 0.01% losses. These partnerships provide access to capital financing for licensed healthcare providers so they can make the infrastructure improvements needed to give better access to much-needed healthcare services.



**Sharon holds grandson Jud's hand.**

"When we started, even physicians didn't have access to capital financing," she said. "We started the loan fund to fill that void."

The Center's mission is two-fold: to strengthen West Virginia's healthcare delivery system and to improve the health of West Virginians.

The West Virginia Rural Health Infrastructure Loan Fund and the Institute for Healthcare Governance both help on the healthcare delivery side of the center's mission. On the other side, developed to improve the health of West Virginia's residents, is the West Virginia Immunization Network and Wild, Wonderful & Healthy West Virginia, which works with communities to address the vital conditions needed for communities and people to thrive.

Being open to creative solutions has been an absolute necessity in their work, Lansdale said, but with a focus on their guiding principles, including healthy communities, public-private partnerships, quality healthcare, and health equity.

"West Virginia is one of the most rural states in our nation," she said. "To attract businesses and the jobs that come with them, we need to move West Virginia out of the bottom of the unhealthiest states in the nation. This will not happen if we don't focus on creating environments in our rural communities that not only support the health of our residents, but

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**“ The wild and wonderful parts of our state are our beautiful, rural communities.**

**— Sharon Lansdale**

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also create community environments supportive of small business and entrepreneurial development, as community health and economic prosperity are intrinsically linked. The wild and wonderful parts of our state are our beautiful, rural communities."

The Putnam County resident said she is happy she could raise her children in West Virginia and now will have more time to help raise grandchildren in the state as well.

"It's the best place to live, if you have a job," she said.

"I have been very fortunate to work for an organization with a mission about which I have become passionate," she continued. "It is very inspiring to see the reaction of community residents and leaders who we helped build a new community health center or dental practice or to work with community residents to identify and make sustainable improvements in their communities that will lead to improved opportunities for their residents to live a healthy and prosperous life."



# Solutions for better housing

Patti Crawford

Story by Jean Hardiman

## Wild, Wonderful & Healthy Summers County focuses on affordable housing, providing more greenspace, and transportation options

When it comes to living a healthy life, words like “nutrition” and “exercise” are usually the first to spring to mind. “Safe, affordable housing” doesn’t always come up, but it has been a top priority for one of the Mountain State’s thriving health-focused organizations, Wild, Wonderful & Healthy Summers County (WWHSC).

As part of the Center for Rural Health Development’s Wild, Wonderful & Healthy West Virginia initiative, the Summers County group has dedicated close to five years of service to Hinton and the surrounding area. They have made a number of meaningful strides toward their goal of ensuring the availability of safe, affordable housing, along with developing a new park in Hinton and working toward other goals that will help community members live well.





**A community needs assessment recently identified a lack of safe and affordable housing for low-income residents and abandoned and dilapidated buildings in Hinton.**

The organization's vision is to help Summers County become "a place where all residents have the opportunity to live healthy and happy lives," said Patti Crawford, retired director of Rural Outreach for the West Virginia School of Osteopathic Medicine, who is a member of the core team that makes up Wild, Wonderful & Healthy Summers County (WWHSC). And the group's priorities were established by a diverse collection of invested community members who did their research and gave issues careful consideration.

"Our work started early in 2019 with conducting a community survey to ascertain what social determinants of health conditions were important to our county members from their lived experiences," she said.

The survey was initially organized by the Summers County Huddle, the parent organization of WWHSC and its fiscal agent.

"Because we felt it was important to represent all demographics within Hinton, we collected the data by going door to door," said Shalom Tazewell, another member of the group's core team.

## **Housing: Priority No. 1**

They took the results and combined them with county statistics, information collected by various organizations, and a community health needs

assessment. WWHSC formed a Community Health Improvement Committee that identified high priority issues on which to focus for the next several years: inadequate housing, small business development, recreational opportunities for youth, and community gardens. A community dinner was hosted for those who completed the survey, and housing was identified as priority No. 1.

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**“ Working with other people in the community is not only rewarding, but it also fosters continued participation.**

**— Shalom Tazewell**

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From the beginning, WWHSC has been a collaborative effort with multiple organizations, individuals, and government entities offering support and helping to sustain the progress we are making, Tazewell said.

"After our community needs assessment results were released publicly, the Hinton City Council scheduled a special housing meeting. Over 65 people participated," she said. "The city manager told me that it was one of the largest groups ever to attend a City

Council meeting. Working with other people in the community is not only rewarding, but it also fosters continued participation.”

At the end of 2019, the committee met to assess the root causes of the housing problems and identified two issues: a lack of safe and affordable housing for low-income residents and abandoned and dilapidated buildings.

“In any community, there are circumstances which energize action that something needs to be done about a problem,” Crawford said. “For us in Hinton, the county seat of Summers County, it was a house fire in which two children died. The tenant had complained about unsafe conditions but, sadly, they were not resolved before tragedy struck. The schools held a rally and community donations were accepted for the family left homeless and initially hopeless. It was apparent that unsafe housing was a big community problem, especially for low-income renters.”

### **Creating a health improvement team**

Along with setting housing as a top goal, the group also determined that a Community Health Improvement Plan is to be completed every three years, with an annual action plan developed by the core team, which meets monthly to strategize about how best to meet their objectives. Though the first couple of years were affected by the COVID-19 pandemic, they continue to meet virtually on a monthly basis joined by staff from the Center for Rural Health Development.

“The trainings and support of the Center for Rural Health Development were invaluable and continue to be so,” said Tazewell, who has served on the Center for Rural Health Development Board and the Wild, Wonderful & Healthy West Virginia steering committee, as well as being an advisory board member of the CDC-funded West Virginia Prevention Research Center, and with the CDC National Community Committee.

The initial core team was composed of retired physician Mike McNeer, MD, and his wife, Anna; Jack David Woodrum, formerly of the county commission and now the West Virginia Senate; Crawford, a retired rural health educator; Tazewell, a retired adult basic education teacher; and dedicated community volunteer Judy Peterson.

Over time it became evident they needed representatives from small business owners, Crawford said. Initially, Krystal Straub of Boho Boutique joined the group. Then they were joined by the owners of Botany Tropicals, Jordan Casey and Steven Jones, who have a special interest in housing.

The core team also benefits from representation from the economic sector in member Janima (J.) Bond, a personal banker. Team member Tania Bond a representative of high school- and college-age youth. Member Mike Yancey is from REACHH, a nonprofit community service organization. The Center for Rural Health Development also provided funding to hire a coordinator – Melissa Jacobs, who also is employed at an elementary school.

### **The group’s focus through 2026 is to improve access to rental housing, with three measurable objectives.**

- Increase the number of safe, affordable, and well-managed houses for low- and moderate-income renters by 10 properties by June 30, 2024.
- Improve community safety and the environment by coordinating the demolition of 15 blighted buildings by June 30, 2024.
- By June 30, 2024, ensure that city code and county ordinances continue to promote and sustain safe, affordable, and well managed-housing.



**Patti Crawford, retired director of Rural Outreach for the West Virginia School of Osteopathic Medicine, shows where homes have recently been demolished.**

Both dedicated community volunteers, Crawford and Tazewell lead the effort. Crawford described Tazewell as “the energizer bunny” in her dedication to the mission, and said her own focus is to continue to be a workhorse in advocating for the voiceless.

## Making progress

Already, cooperation between WWHSC and county and city officials has resulted in policy changes, with the following advancements made:

- A renters’ rights brochure has been distributed.
- As of October 2023, 48 dilapidated properties had been demolished in Hinton.
- The city hired a full-time code enforcer to ensure properties in Hinton are maintained at the standards required by city ordinances through building inspections.
- The city is addressing absent property owners in their five-year plan by charging them a fee if a property remains vacant and by requiring rental units to be inspected prior to rental to ensure the building is up to code.
- The city established a Land Reuse Committee to strategize how to use vacant lots and housing in need of repair that the city has acquired by default or donation.

- The Summers County Commission has revitalized its Dilapidated Structures Committee, and Tazewell serves as the current chair.
- WWHSC has worked with volunteers from Appalachian South Folklife Center to replace unsafe porch steps and railings at historic James Row houses, originally built in the late 19th century for Hinton railroad workers.
- They’ve also identified structures that the city of Hinton has used some funds to help repair, and explored ways to supplement funds for first-time homeowners and contracted to create a list of available rental housing.

Dilapidated properties are a detriment to public health, Crawford said.

“Falling debris compromises the safety of neighboring properties,” she said. “People can be endangered exploring such properties. It also creates a venue for illicit drug activity. Often low-income renters are forced to remain in hazardous housing because they are unable to find suitable housing within their limited budget.”

“Dilapidated buildings affect the property values of surrounding properties and contribute to an atmosphere of decay,” Tazewell said. “It also has a detrimental effect on how both residents and visitors perceive the community.”

With all its progress on that issue, it's not been the only issue that WWHSC has tackled. The group is also working on an improvement plan for transportation, including conducting a survey to find out which areas would benefit from a bus service. Though the city has three hybrid buses used for special events, the group is working on strategies and implementation plans to offer more consistent transportation service.

## Creating "our" park

In 2021, the Community Health Improvement Committee worked on reclaiming a vacant lot to create a mini park. The city of Hinton purchased it in 2022, and WWHSC raised \$43,000 in grants and matching private, county, city, hospital, and state funds to construct it, Crawford said. They broke ground in April 2022.

"This area of the city houses many lower-income families and has never had any access to outdoor recreational activities," she said. "The CHI committee agreed the best use of this space was to create a multigenerational greenspace that featured a gazebo, park benches, paved walkway, raised garden beds, and physically and mentally stimulating playground equipment."

Based on the railroad history of Hinton, it was decided that the centerpiece of the park should be a 25-foot colorful train, and the new greenspace was named "All Aboard Community Park." Its official opening was Dec. 3, 2022.

"Community volunteers who helped build the park included neighborhood families, retirees, high school students, volunteers from social service agencies, and city maintenance workers," Crawford said. "In Spring 2023, the city of Hinton and Hinton Area Elementary School scheduled an Arbor Day service to plant another tree in the park. The students and their therapy dog, Marshall, enjoyed the outing."

The West Virginia AARP helped upgrade the gazebo with landscaping as well as participating in the planting of the community garden beds. The library and adult basic education programs scheduled programs there, and WWHSC held a Halloween masquerade event in October 2023.



### Kason Nunn plays at the new community park.

"It was important to us that all sectors of Hinton helped to "build" the park," Tazewell said. "In particular I remember one father in the neighborhood whose daughters helped paint who said to me, 'I'll keep an eye out for this place because this is OUR park.'"

"We also wanted a green space that would create community pride and give residents a chance to interact with one another in a healthy environment," Tazewell said.

Other efforts included a health screenings event that was hosted at the Summers County Memorial Building in October of 2022. The transportation survey was first unveiled and 22 vendors gathered to offer health screenings and information. It was part of the "Making Health Happen" series of screening events hosted by South Central Education Development.

## A better quality of life

All of these efforts will, over time, improve the quality of life for community members, Crawford said.



“Change does not occur when health, economic, educational and social well-being are siloed into separate entities for individual citizens and the communities in which they reside,” she said.

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**“ We also wanted a green space that would create community pride and give residents a chance to interact with one another in a healthy environment.**

— Shalom Tazewell

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When Wild, Wonderful & Healthy West Virginia was first launched by the Center for Rural Health Development, communities were offered training in how to combine different sectors to improve the environment and the conditions in which people are born, grow, live, work, and age, including the health system.

“Specific social determinants of health include economic and housing stability, employment status, educational attainment, access to healthcare, access to healthy foods, exposure to crime and violence, and environmental conditions,” said Crawford, a long-time board member of the Center for Rural Health Development who serves on the statewide steering committee for Wild, Wonderful & Healthy West Virginia.

“I would highly recommend that communities interested in making changes locally partner with the Center and its Wild, Wonderful & Healthy West Virginia program to receive tools necessary to make core improvements in the overall health and well-being of their residents,” Crawford said..

“It is long, hard work – the end not even being realized within my lifetime – but it is necessary work and rewarding work, even if it is overwhelming at times.”

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# More to offer



## Newly opened Joe and Peg Greenlee Rural Health Clinic at Pocahontas Memorial Hospital provides more space for better care

Story by Jean Hardiman

As is the case for many West Virginians, the people of Pocahontas County are surrounded by the breathtaking natural beauty of their state. What is harder to find in their region are healthcare facilities.

Pocahontas Memorial Hospital has long been a lifeline for the people of the region. Dedicated to providing healthcare to the community, the hospital has recently expanded their services and cut the ribbon on a facility expansion.

In August, Pocahontas Memorial Hospital celebrated the opening of the new addition of its Rural Health Clinic – the Joe and Peg Greenlee Rural Health Clinic. Located at the hospital, the clinic is part of a larger, multi-phase expansion project that includes other departments.

“Pocahontas Memorial Hospital has had a primary care clinic for many years that was designated a Rural Health Clinic,” said Susan Wilkins, public relations and special projects coordinator for Pocahontas Memorial Hospital.”

As services grew and more providers joined the staff, the Rural Health Clinic quickly outgrew the tight space they were in. The hospital’s board of directors and administration had long wanted to expand not just the Rural Health Clinic, but other areas of the hospital, but they did not have the resources to do so on their own.”

Hospital executives spearheaded an effort to secure a \$5.7 million Rural Development loan from the U.S. Department of Agriculture, while a local capital campaign was launched to raise the additional needed funds for an expansion project encompassing the Rural Health Clinic, the Emergency Department, and other departments of the hospital.

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**“The county faces unique healthcare challenges, with increasing poverty and higher mortality rates for diseases such as cancer, cardiovascular disease, and Alzheimer’s.**

— Michelle Deeds, CEO of PMH

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The Joe and Peg Greenlee Rural Health Clinic is housed in the front portion of a new wing. In the back section are the Rehabilitation Departments, including physical, occupational and speech therapies, which were so small previously that they had very little privacy, Wilkins said. The new Rehab Department has four private patient rooms, as well as a gym, staff work area, and a full kitchen for use by occupational therapy patients.

The Rural Health Clinic was named for Charleston residents Joe and Peg Greenlee, who had vacationed at their cabin on the Greenbrier River since the 1950s.

“On one trip, Mrs. Greenlee had a medical emergency and ended up as a patient at Pocahontas Memorial Hospital,” Wilkins said. “The hospital and its staff left a lasting impression on the couple, who over several years, made various contributions to the hospital for improvements, including \$1 million to grow the Rural Health Clinic.”

The grand opening and ribbon-cutting celebration was held on Aug. 9, with the very first patients seen few days later.

## Challenging terrain

The Rural Health Clinic primarily serves the people of Pocahontas County, a rural, mountainous county covering 941 square miles. The population has seen much decline. The most recent U.S. Census count was about 7,800 people. The county’s main economic drivers are farming, logging, and tourism.

“High speed internet and cell phone service are nonexistent in some of the areas, making communication difficult,” Wilkins said. “People here are self-sufficient and often reluctant to seek healthcare. We are at least one to two hours away from reaching any type of medical ‘specialty,’ so the Rural Health Clinic and the hospital itself are vital to the health needs of our community’s residents.”

Pocahontas County is designated as a Health Professions Shortage Area and has very few healthcare providers, Wilkins said. The Rural Health Clinic has four full-time family practice providers, including physician Dr. Julie Hare, MD, along with nurse practitioners Donna Lidel-Burley, FNP; and Karen Melton, FNP; and physician assistant J. Copley, PA-C. Part-time providers include family nurse practitioners Jill Cochran, PhD, APRN-BC, FNP, pediatrics; Pamela Edens, DNP, APRN, FNP-BC, family practice and women’s care; and physician assistant Valarie Monico, PA-C.

“The county faces unique healthcare challenges, with increasing poverty and higher mortality rates for diseases such as cancer, cardiovascular disease, and Alzheimer’s,” said Michelle Deeds, current CEO of Pocahontas Memorial Hospital. “Pocahontas County has one of the highest rates of incidence for diabetes in the state. Without the Rural Health Clinic and





**Family nurse practitioner Karen Melton examines a patient at the Joe and Peg Greenlee Rural Health Clinic, located at Pocahontas Memorial Hospital.**

Pocahontas Memorial Hospital, we truly believe that many residents would not receive care at all, due to the hardship of driving to other facilities.”

### **Improvements at the hospital continue**

“We are currently in the second phase of our project, which includes expanding and remodeling our radiology and cardiopulmonary departments, as well as a more patient-and privacy-centered registration area,” Deeds said. “An expanded radiology space will allow us to bring much needed mammography services to the county. Currently, residents must travel out of the county or utilize Bonnie’s Bus to obtain mammograms. If additional funding can be obtained, the final phase of expansion will include adding an operating room and an expanded emergency room.”

The ongoing effort is exhausting, but worth it, said Summer Moore, manager of the Rural Health Clinic.

“Patients, visitors and even staff are in awe of the beautiful new Rural Health Clinic,” she said. “Our patients deserved this. It is both humbling and gratifying to be able to provide care for our patients in such a beautiful facility. We are excited to build on the momentum of this first phase of the expansion to bring more and better services to the residents of this community.”



**Ashley Hammons walks in one of the hallways of the clinic, which is named for Charleston residents Joe and Peg Greenlee. The couple made various contributions to the hospital for improvements including \$1 million to grow the rural health clinic.**



# Faith in action

Andrew Bailes

## Recovery center in Greenbrier County a journey of faith for an engineer-turned-nonprofit director

Story by Jean Hardiman

For Andrew Bailes, executive director of God's Way Home Inc., guiding men through the steps of recovery is a second career inspired by a story straight from the Bible.

In the Bible, Peter is imprisoned after Jesus' death and resurrection, but an angel protects him and leads him out of the prison to safety. In Rainelle, Bailes – along with his recovery home and everyone who has supported it in dozens of ways – is freeing men who hail from the rural communities

of southern West Virginia from the constraints of substance use disorder and guiding them to living drug-free, independent lives and giving back to their communities.

It's not a career that he saw coming after earning his degree and working as a mechanical engineer, but after his son, Cooper, was born prematurely, weighing less than 3 pounds, Bailes' priorities changed. He reconstructed his life to follow a new calling. It's one that is changing lives, one by one, and



**God’s Way Home helps Valley Works, a resource center that helps those in recovery find sustainable employment and offers furniture, a place for a hot shower, clean clothes, and hygiene products.**

is an example of what one inspired person can do if he’s willing to seek out the resources within reach and put his problem-solving skills into a new task.

Not that opening the doors to his recovery center happened overnight. It was three years of prayer and discovering connections, he said, as well as the generosity and dedicated effort of others before the center could open in 2019. Today, the original home serves eight men at a time from Summers, Fayette, Greenbrier, Nicholas, Pocahontas, Monroe, and Clay counties and is certified by the West Virginia Alliance of Recovery residences.

It’s a much-needed step for each resident that follows a 28-day program. It gives them safe housing, counseling, and surrounds them with a group of people who understand and care. It also helps them get back to being grounded in society with a job, a driver’s license, and Social Security card, everything they need to be “right on paper again.” They seem like little things, but for a person in recovery, they’re big steps on the right path.

**A system of support**

Bailes has a piece of paper covered with handwritten lines and names of individuals and organizations – from churches to civic groups and more – that combine to create the support system that makes God’s Way Home the transformational entity that it is.

Some of the key individuals that came along include peer recovery coach Matthew Thornton, April Vestal of the West Virginia University Institute for Community and Rural Health, former God’s Way Home staff member Tammy Feamster, and God’s Way Home manager Clint Walker.

“Matt was the first person I ever spoke with and truly helped get off the streets and into recovery and now, over five years later, he is back home and works for us at God’s Way Home as a peer recovery support specialist,” Bailes said. “He is a key person because God used him as my test subject. It was a real struggle helping Matt, and many times I wanted to give up, but God showed me that if I couldn’t help Matt, I couldn’t/wouldn’t help anyone on drugs. Through many trials and fights and long nights and countless rides all over the state something finally stuck and today Matt is one of the biggest assets to God’s Way Home.”

Vestal has helped with grant writing, “and had it not been for her contributions and helping get grant money God’s Way Home would have never opened,” he said.

Feamster served as an integral part of the organization, providing transportation and bookkeeping, and Walker has managed God’s Way Home almost from its beginning, Bailes said.

“He feels called by God to work in this field and could go anywhere else and make a lot more money but knows this is where he needs to be,” Bailes said. “He just put three years of sobriety under his belt in June of 2023.

“I could go on and on about the people that have been placed in my life to help me accomplish everything.”

It was August 2018 when he first looked at the building that houses God’s Way Home. It cost just \$5,000, which he did not have.

“I had quit my job as an engineer to preach full time and had no pay stubs to go to the bank to get a loan,” he said. “I was discouraged but kept praying and was determined that if God wanted us to have the building, he would make a way to buy it.”

In the end, it was his father-in-law who came through.

“I called the owners and told them we wanted it, and we closed on the building in February 2019 almost four years exactly from the date God had given me the sermon on praying for addicts,” Bailes said. “It has been a long process, and I have made a lot of connections over the past 4 ½ years.”

Now almost five years in, God’s Way Home has three arms. One is its original God’s Way Home sober-living facility; along with a resource center, Valley Works; and a second eight-bed, sober-living location called The Neal House.

Valley Works has a mission of finding sustainable employment not only for those in recovery but for those with other infractions that result in the loss of a driver’s license. Valley Works also accepts donations so that it can serve as a drop-in center with a food pantry, while offering everything from donated furniture to a place to get a hot shower, clean clothes, and hygiene products.

“We continually interact with the homeless population,” Bailes said. “Providing resources for them is not a top priority, but when we meet their basic needs, it allows us to build a relationship with them and encourage them that there is a better life to be had.

“We will use the drop-in center as an avenue to have conversations with these folks about entering into recovery. That is the basic principle. God’s Way Home funds everything at the moment as far as food and drinks go. We purchase all of those items from the Mountaineer Food Bank. We receive a tremendous amount of clothing and shoe donations as well as furniture and appliances.”

## A successful structure

For the men who are staying at a facility, there is a structure.

“Most of the guys have full-time jobs,” Bailes said.

“There is sometimes a lapse in employment when they first get here, but we keep them busy with community service and work around the houses and resource center. They go to work and have recovery meetings or church almost every night. They stay busy and usually take off for appointments and one-on-one sessions with Matt.

“The guys that come here can change as fast or as slowly as they want. Most of the time, it’s dependent on their willingness

to put forth the effort. Slow and steady almost always wins the race. Most of the guys that come to us have lost just about everything they have and have large fines and legal issues hanging over their head.”

One of the first residents to graduate from God’s Way Home was B.J. Wilson, who joined after a 56-day program in Summersville. He had an attempted murder charge and was accepted into the Greenbrier County Drug Court, which gave him a year to fulfill a list of requirements to get his charges dropped, followed by two years of probation, Bailes said.

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“I could go on and on about the people that have been placed in my life to help me accomplish everything.

— Andrew Bailes

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**Doug Tilley, left, discusses a work release. Tyler Bailes and Tammy Feamster, above, help operate Valley Works in Rainelle.**

The first thing God's Way Home did for Wilson was help him find a job. He and his dad had owned their own towing and wrecker service prior to his struggles with substance use, so it was easy enough to find him a job at Anthony's Towing in Sam Black.

"They hired him on the spot. He started the next day at \$15 an hour," Bailes said. "He only had a few driving violations and fines to take care of and his employer paid them for him, and B.J. let him hold money out of his paycheck for a while to pay him back.

"Within about two weeks, he had his driver's license back. He then began driving the tow trucks and they bumped him to \$18 an hour. He worked there over the course of a year and completed all his classes with drug court and graduated, having all of his charges dropped."

Then Wilson began thinking about opening his own shop. While working at Anthony's Towing, he started the process to open his own business, taking care of the paperwork to get licensed through the state. The Rolling Wrenches Road Service was born, Bailes said.

"There were a lot of tough days throughout the process, but God has blessed him abundantly," Bailes said. "He recently was married to my neighbor Meagan Callison, and now I see him almost every day. He has become a dear friend to me and my family. We go to church with each other frequently, and their kids are at our house almost every evening."

Those kinds of stories inspire Bailes, and "seeing these guys succeed and knowing that God is working in their lives and doing for them what they cannot do for themselves," he said. "They have chased after every single thing that this life has to offer and came to us empty-handed, and we share with them the hope that is in believing in Jesus Christ, and their lives change immediately."

### **Changes could help the recovery process**

There is a long list of things that could assist their effort, including policy changes, Bailes said.

"There are so many hoops for these guys to jump through to get their lives back in order," he said.

“Sometimes it seems almost impossible. I’ve felt like giving up multiple times, and it isn’t even my life. I am just trying to help these men — from getting a birth certificate to a Social Security card to a photo ID to a driver’s license to calling every jurisdiction where they have been arrested and paying off thousands of dollars of fines. There have been many laws passed that help some of these situations, but there are still so many more changes that need to be made to streamline the recovery process for folks.

“There needs to be more diversion programs to get men and women out of jails for minor drug charges and get them into recovery,” Bailes added. “There needs to be appropriations made for the county to pay program fees at recovery homes instead of paying jail bills and/or both. We are in desperate need of public transportation that no one can seem to come up with a good idea for. We need sustainable housing for people (not even for addicts). Our local housing situation is a mess. There are not enough homes.”

Bailes said he has learned so much through this experience, not the least of which is that “running a non-profit takes an overwhelming amount of paperwork and logistics to maintain.”

He’s also learning that making mistakes is part of his and others’ growth process. He appreciates a second chance when he makes mistakes as he’s learning this new career, and he tries to extend that same forgiveness to the people that he serves.

“I have learned that recovery is an extremely slow process that takes years at times to overcome, and even after years of sobriety, it is still a fight some days,” Bailes said. “... I have learned that most people just need someone to show them some love and that someone really does care about them. I have learned that 99% of drug addicts are not bad people. The drugs make them do what they do that society looks down on them for, and almost every testimony I have ever heard is marked with horrible trauma that led to their drug use.

“People cannot just stop using drugs and be recovered the next day or even the next year.”

## How to help

Anyone who wants to donate to God’s Way Home can contribute not only funds but food, furniture and appliances, new clothes and shoes of all sizes, toiletries of any kind, any kind of paper products (toilet paper, paper towels, paper plates, plastic silverware), and all types of cleaning products.

The organization also welcomes volunteers to help sort and clean donations and prepare food boxes.

Visit <https://www.godswayhome.org/> to learn more about God’s Way Home and how to help.



**Valley Works also accepts donations and serves as a drop-in center with a food pantry.**



Physician assistant Janie Knotts and Suresh Balasubramony, MD, accept patients at the Grantsville clinic.

# Help from Harvard

Story by Jean Hardiman

Technology, some creative problem-solving, and a desire to help communities that need it the most are combining to bring Harvard Medical School expertise to the patient populations of Calhoun, Gilmer, Ritchie, Roane and Wirt counties.

The Minnie Hamilton Health System (MHHS), a Federally Qualified Health Center in Calhoun County, has been chosen as one of three sites in the country to partner with Harvard Medical School's Center for Primary Care in a new program that uses teleconferencing to train rural healthcare providers. The program is called TEECH, Technology Enabled Education for Community Health, and it aims to give rural healthcare providers the tools to deliver the same high quality care that is being offered by Harvard-trained providers.

The collaborative learning process focuses on quality improvement and incorporates evidence based telementoring, case conferencing, and Harvard Medical School certificate courses developed and taught by Harvard faculty.



**Nurse practitioner Carrie Grogg interacts with the Patient Point system at the Glenville Clinic.**

“Harvard TEECH is a tremendous opportunity for our providers to have direct access to unparalleled medical expertise while providing services in a rural area,” said Suresh Balasubramony, MD, chief of staff at MHHS. “It has been a benefit to us as providers to have this educational opportunity enabling us to provide our patients with the highest standards of care.”

The training involves providing care in rural areas that is based on results. A quality improvement framework is used to answer three driving questions:

- What are we trying to accomplish?
- How will we know that a change is an improvement?
- What change can we make that results in improvement?

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**“ It has been a benefit to us as providers to have this educational opportunity enabling us to provide our patients with the highest standards of care.**

**— Suresh Balasubramony, MD**

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Harvard’s TEECH program has empowered providers, according to Stephen Whited, CEO of Minnie Hamilton Health System. It fosters a dynamic learning environment and elevates their skills, ensuring top-notch healthcare delivery for the patients they serve. It also has been a catalyst for positive change in Calhoun County, using technology and innovative teaching methods to support a healthier future.

Harvard has two other “spoke sites” participating in the TEECH program, the Arkansas-based ARcare, as well as a medical center and clinics

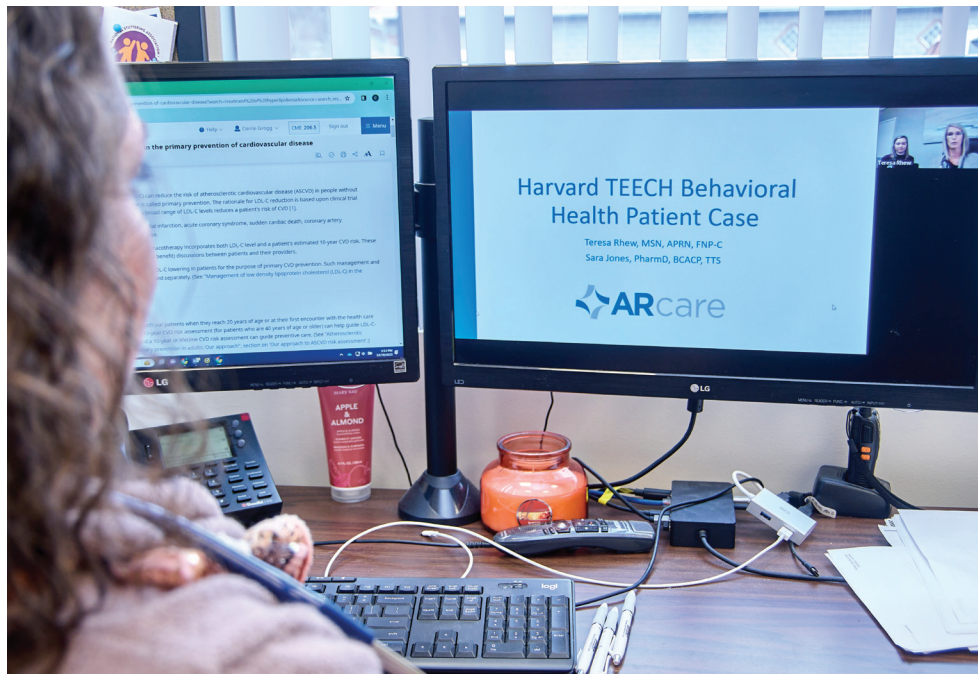
in the Chickasaw Nation in Oklahoma. Sites were chosen that provide care to rural populations that are disproportionately impacted by chronic disease. The sites are in areas that have a shortage of healthcare professionals and face conditions such as poverty and unemployment, lower levels of educational attainment and literacy, and barriers to healthcare access.





Teleconferencing helps train rural healthcare providers.

**TEECH, Technology Enabled Education for Community Health, aims to give rural healthcare providers the tools to deliver the same high quality care that is being offered by Harvard-trained providers.**



Minnie Hamilton Health System has 16 healthcare providers participating in the TEECH program and six members of the Quality Improvement implementation team. The program will run through 2026. So far, participants have completed clinical courses addressing Long-COVID and cardiovascular diseases, and recently a Behavioral Health Integration course has been added.

The quality improvement work, which began after the first clinical course, tracks the patients' 48-hour follow-up calls and their visits to their primary care providers within seven days after being discharged

from the hospital with moderate or severe COVID. Following completion of the cardiovascular course, the participants established an additional measure focusing on decreasing blood pressure to less than 140/90 for patients with a hypertension diagnosis.

Quality improvement teams meet regularly with Harvard Medical School faculty and coaches to review and revise reports. Providers also track participation, satisfaction, confidence, and knowledge development in the evaluation efforts of the TEECH program.



**Providers track participation, satisfaction, confidence, and knowledge development in the evaluation efforts of the TEECH program.**

Harvard and the health system hope to expand the program through a “Train-the-Trainer” model. Meanwhile, a group-messaging app keeps primary care providers at the three spoke sites to network and helps them stay connected to each other and Harvard Medical School specialists during and after the five-year project period.

“Our staff does a lot with a little,” Whited said. “Embracing Harvard’s transformative TEECH is not just an investment in knowledge it’s a strategic commitment to unlocking innovation and excellence, propelling Minnie Hamilton Health System to new heights.”

Minnie Hamilton Health System operates as a comprehensive healthcare delivery system that is composed of a community health center, school-based health centers, a critical access hospital, nursing home unit, swing bed unit, behavioral health, medication assisted treatment, oral healthcare services and rural health clinic.

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“**Our staff does a lot with a little.**

— **Stephen Whited, CEO of Minnie Hamilton Health System**

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## Our Mission

The West Virginia Rural Health Association (WVRHA) advocates for empowering all West Virginians to advance their quality of life, their well-being, and their access to excellence in rural health care. Our mission is to unite people, communities, and organizations to strengthen rural health in West Virginia.



## Become A Member

By being a member of the West Virginia Rural Health Association, you become a powerful advocate for empowering all West Virginians to advance their quality of life, their well-being, and their access to excellence in rural health care.

The WVRHA is a non-profit, grassroots, member-driven organization. A membership with us includes a variety of people and organizations that are interested in the health of rural West Virginians throughout the state. The WVRHA membership works together to identify the health care concerns of rural West Virginians and find ways to improve services in our communities.

The West Virginia Rural Health Association strives to represent the diversity of West Virginia, and we encourage people of all ethnicities, genders, and lifestyles to join.



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**Help Improve The Health Of All West Virginians.**



# WEST VIRGINIA

