

Winds drive smoke to Dan River Region, bringing health concerns

Charles Wilborn

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A smoky haze covers the skyline of downtown Danville on Thursday evening. The smoke can cause issues for residents with health problems.

Charles Wilborn, Register & Bee

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The smoky haze covering the skyline of the Dan River Region — courtesy of still-burning wildfires in Canada — presents a health worry for children, the elderly and anyone suffering from lung conditions or heart issues, according to the local health district.

Thursday and Friday were especially bad air-quality days, with Danville in what's known as code orange, a level that's considered unhealthy for sensitive groups.

The way the wind blows — especially in the high levels of the atmosphere — is the main factor in pushing the smoke toward the Dan River Region or steering it elsewhere.

“Weather plays a huge role,” Phil Hysell, a meteorologist with the National Weather Service in Blacksburg, explained in an interview with the Register & Bee.

The wildfires continue to burn in Canada with little relief in sight to douse the flames. The smoke basically meanders where ever the winds take it.

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“If they are strong enough, that's going to pulled down the smoke into the Mid-Atlantic region and our area,” Hysell explained.

A shower or quick thunderstorm may provide temporary relief, something that's in the forecast daily through the Fourth of July.

There's no particular weather pattern triggering the daily storm chance. In fact, it's pretty common for early July, Hysell said.

“This is particularly one of our most active times of year,” he said.

There's only a chance of "hit and miss" variety of showers and storms Monday and Tuesday, but even a quick burst of rain could be enough to filter out the smoke.

Children, residents who have chronic lung and heart conditions, and the elderly are the ones most at risk from the smoke, Linda Scarborough, a spokesperson for the Virginia Department of Health, told the Register & Bee.

But the poor air quality can impact just about anyone.

"It can cause breathing problems and aggravate long-term conditions like high blood pressure," she explained. "It can further exacerbate breathing problems for people with asthma or other lung diseases."

Since the Fourth of July goes hand-in-hand with outdoor festivities, Scarborough cautions residents to be mindful when the air quality is low.

"Try to spend less time outdoors, don't exercise strenuously and take breaks during outdoor activity," she suggested. "If you notice eye or lung irritation, go indoors."

The smoke also can infiltrate inside a home if doors and windows aren't kept closed. The ventilation system should run to recirculate the air in a house, and the HVAC filter will help to remove the particles.

"If you have a room HEPA filter, these are very effective at cleaning room air," she also noted.

So far, Sovah Health-Danville hasn't seen an increase of people coming into the emergency room from problems associated with the smoke, Corey Santoriello, a hospital spokesperson, told the Register & Bee.

Dr. Scott Spillmann, director of the Pittsylvania-Danville Health District, said humans aren't the only ones who need to worry about the air quality.

"Remember that low air quality can also impact pets," he said. "Keep them inside if possible."

Livestock, like horses, should be moved to a sheltered location if one's available.

“When driving, use the recirculating air feature so that you are breathing the air that is already inside of the car, rather than letting more outside air into the vehicle,” he also suggested.

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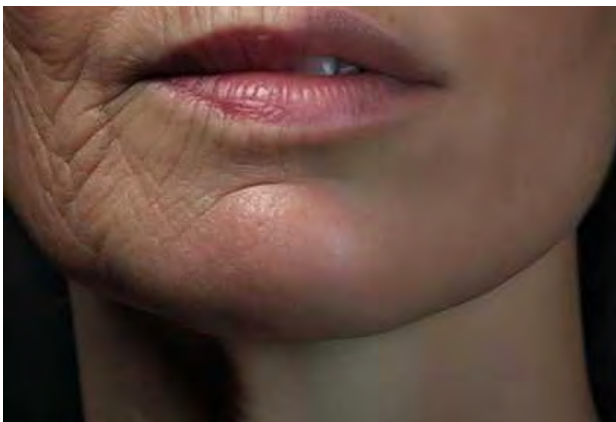
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A community link: Far more than vaccines and testing, local health department aims to spark engagement

Charles Wilborn

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In some respects, the local health department flew under the radar for residents until the coronavirus pandemic upended life in March 2020.

Then the voices of public health — most notably Dr. Scott Spillmann, the director of the Pittsylvania-Danville Health District — started to broadcast advice to navigate the new era.

Then when worries started to calm down, the health department also subsided from the minds of folks eager to get on with a life put on a years-long pause.

But the health department hasn't gone away. In fact, COVID-19 helped to spark bonds with the community. That's something they are building upon as they aim to become a steady face of engagement.

“I think we've established some pretty good partnerships and relationships on the community side,” Spillmann said in a recent interview.

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COVID-19 — a time he calls “hair, teeth and eyeballs” — helped to put the health department more in line with industry.

“What we found is business as usual is no longer business as usual,” he explained in a recent meeting with senior leaders attended by the Register & Bee.

The work goes far beyond vaccines and tips to stay healthy. They are charged with everything from checking to make sure requirements are met for pools, campgrounds and concession stands. For example, they’ve been preparing for this weekend’s Blue Ridge Rock Festival since January.

With more than 40 food vendors, local health department workers will be busy on-site making sure everything is safe. If there’s a complaint — like someone selling food out of their home — they will have to address it.

The health department also deals with rabies, making sure bites get reported properly and ensuring no one else was involved or exposed.

On the nursing side there’s everything from screenings for long-term care, lead case management and sexually transmitted disease infections.

Little-known services include access to vital records. Virginia residents can go into a health department to get birth, marriage and death certificates,.

“That’s an important service that we provide,” Krystal Davis, the business manager for the local district, said.

Getting into public health



Members of the local health department engagement with residents at a July back-to-school event in Danville.

Charles Wilborn, Register & Bee

Davis also explained that people go into this field because they have a servant's heart.

McKenna Luzynski ventured into a public health career after experiencing latent tuberculosis.

Even though she wasn't infectious, when she went to the doctor they treated her as if she had the plague.

"It made me feel terrible," she explained.

Then she was treated by someone at the Roanoke Health Department.

"His name was Steve," she said. "He was amazing."

That experience not only guided her career into public health, but specifically steered her to the health department.

Luzynski is now a district epidemiologist and uses her personal experience to go out into the community and recruit others into the field of public health.

“We believe in our cause,” Spillmann said.

Spillmann transitioned to the health department from another specialty that paid “quite a bit” more money.

The reason? “To offer an opportunity for a greater impact on my community,” he said. “So we can all try to be that rising tide that floats more boats.”

There are other perks of his job that come from the inside.

For example, he said they recently hosted a town-hall meeting with workers and staff to generate ideas.

They decided to put up little free libraries for children inside the facilities. Not only attending to health needs, they are looking to help literacy also.

“This is how committed our people are to this community,” Spillmann said of the idea that sprouted from a talking session. “This is what makes me so proud to be a part of this.”

Staffing

The Pittsylvania-Danville Health District works in tandem with the Southside District — an area that includes Halifax, Brunswick and Mecklenburg Counties — essentially as one large department.

Both districts certainly aren’t immunity from the employment pains of the pandemic.

When asked if they were up to staff, Spillmann wasted no time answering.

“Oh, heck no,” he said, starting a wave of sighs and head shakes that extended around the room.

“It’s short handed all over,” he said. “We just don’t have enough folks.”

All together, both districts have about 64 full-time employees.

There are 16 open positions of everything from clerical jobs to a nurse practitioner.

Some positions have been open for more than a year.

Even when they find a qualified candidate, that person often backs out before starting because they've landed A more lucrative job in the private sector.

“So pay is an issue,” Spillmann confirmed.

And these are just the slots that are funded. Even if all of the jobs were filled, it still wouldn't truly be enough to get it all done.

“Actually, we need more people that that, in virtually every department,” Spillmann said.

And when the new casino opens in Danville, more workers will be needed, especially in the environment health fields.

“You look at all the growth that is happening,” and more hands on deck will be required to keep up, Spillmann said.



Residents get information at a Virginia Health Department table during a July back-to-school event in Danville.

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Community link

Brenna Link heads up the newest sector of the local health district as the population health manager.

Her goal is outreach and engagement.

Last year they worked with more than 100 partnerships in the community.

Basically they go to any and all events they can find.

“We do a lot of the events that churches will put together and the back-to-school events,” she explained. “We also help work with community-based organizations.”

In July, they had a tent at back-to-school festival in Danville, handing out like water bottles and literature on health. Vaccines also were available for children.

The community link is something positive that came from COVID-19.

It started with churches, since those were essential meeting places.

First they did COVID-19 testing, then giveaways for personal protective equipment. It rounded out with vaccine events.

“Since then, we’ve been able to really develop those partnerships and work together,” Link said.

Now those churches have invited the health department back just to do presentations.

One major focus is opioid overdose training for some groups.

“Population health tries to caulk a lot of those health gaps by reaching out,” Spillmann said.

As an example, it’s not always about finding a doctor. It’s about having a way to get to the doctor.

Sometimes the health department can’t be the answer. Instead, they want to be an advisor for the community.

“Ideally the community takes hold of this and runs with this,” Spillmann said. “I think we’ve established some pretty good partnerships and relationships on the community side, including our NAACP partners, they are great folks, and many others.”

Clinical health and more

Julia Gwaltney, the nurse manager for the Pittsylvania-Danville Health District, said there’s a lot of non-clinical aspects of nursing.

“Nursing is incredibly busy. Keeping up with that is almost like air traffic control and Julia is our air traffic controller,” Spillmann said.

That includes the Special Supplemental Nutrition Program for Women, Infants and Children, commonly known as WIC.

The pandemic forced all of the WIC clinics to move to a virtual mode, but as of August, they are all now back home.

“They are steaming forward doing face-to-face with clients,” Gwaltney said.

For parents, services include training on properly installing a car seat. They come in and go through a class and for parents who can't afford one, a car seat can be provided.

There's also family planning and a large variety of birth-control methods.

Gwaltney's team also handles the Every Woman's Life program, a federal initiative that has some state funding as well. It covers women that are 40 and above who don't have insurance to get mammograms.

“So we provide a clinical breast exam,” Gwaltney said. “They can get a free mammogram.”

If it comes back abnormal, then they can get the client set up with diagnostic testing. If the woman has cancer, social services will get involved to help the patient obtain treatment via Medicaid.

Lead testing also comes under her territory. When a young child goes to the doctor, that's a routine part of blood work. If the figures come back high, the health department gets involved.

“There are a lot of different ways these children could get it,” she explained. Depending on the severity level, a team could be dispatched to the capture water, paint or even dirt samples.

The nurses also take part in special events, like National Night Out.

“It's a good way for us to meet people in the community and give out information to them,” she said.

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'It's so much more than just health care,' coordinator says of improving medical outcomes in Dan River Region

Charles Wilborn

Aug 17, 2023



Nearly 10 years ago, Dan River Region organizations and community leaders realized to change the direction of health, they needed to make a collaborative approach.

Year after year, the data seemed to only get worse when it came to medical outcomes for residents living in Danville, Pittsylvania County and Caswell County, North Carolina.

The findings come from an annual report known as the County Health Rankings & Roadmaps via the University of Wisconsin Population Health Institute.

It uses a multitude of information to check the pulse of a city or county.

In the latest findings released earlier this year, Danville ranked 128 out of 133 Virginia localities for the worse health outcomes.

That's one slot down from last year.

In 2014, The Health Collaborative was formed as a networking tool to start a dialog on what's needed for that change.

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“The idea was that The Health Collaborative itself is not a nonprofit,” Maggie Richardson, the regional coordinator, explained in a recent interview in her new office space on Eastwood Drive.

“We’re not the ones developing and operating programs, but we can bring people together to implement the type of strategies that individual organizations can’t do on their own,” she said.

And the issues aren’t as cut and dry as making sure people go to the doctor when sick.

“It’s so much more than just health care,” she explained. “It’s a lot in the community that’s impacting the ability to live healthy lives.”

The first health equity report in 2017 highlighted the disparities in a “deep-dive” that went down to the census level.

Basically, this centered on the individual neighborhoods to illustrate the gap. In some cases, the outcomes changed vastly by just crossing the street.

This was the pivotal point when some people — who may have realized there were gaps — truly saw how wide the disparities are.

“It’s often called the social determinants of health,” she explained.

Now the collaborative is seeking to make changes on the policy and environmental level to get to the main cause of some of the poor health metrics.

“We know that those are the type of changes that moved the needle in those county health rankings,” Richardson said.

When she joined the group in 2019, she was about to start a new plan of action for the collaborative.

Then, the pandemic hit.

“That was very much a challenge,” she said, noting they had to quickly shift the focus. It became a matter of “How do we help our partners survive the day-to-day?”

Since The Health Collaborative itself was a relationship builder, they were in a better position to link organizations together to get through the COVID-19 ordeal.

Other than the physical aspects that pop to mind when the word health surfaces, the collaborative is digging under the surface to get to the real root of the problem.

That includes things like housing and transportation.

For example, it's not possible to schedule an annual physical if someone doesn't have a vehicle to go to the doctor. At the same time, managing a chronic illness isn't on the priority list for a resident who recently became homeless.



Maggie Richardson, the regional coordinator for The Health Collaborative, stands next to a giant poster outlining the mission of the group.

Charles Wilborn/Register & Bee

The networking

Last year — when life finally got back to a post-pandemic normal — the collaborative hosted a series of community meetings across the region.

Each was geared toward a different audience. One was for religious organizations, another for health care and even government had its own session.

“We had some really good discussions because people were with their peers in these meetings,” Richardson said, meaning they felt more free to talk.

For the first part of the session, they went through a “data walk” that was a more interactive way of showing the information instead of just reading a report.

For the second half, they brought in Dr. Kent Key, a health disparity professor at Michigan State University.

“He seemed to capture the attention” of everyone across the board, Richardson explained.

He talked with the groups about what change would look like for the individual sector.

“The goal was to think about you as an individual within your role in the community,” Richardson said.

After enlisting what she called community ambassadors — courtesy of a grant from the Danville Regional Foundation — they sent people on a grassroots movement to talk to even more residents.

“That was really cool,” she said. “They reached so many people that we never would have.”

Sometimes it was as simple as inviting people over to their living rooms.

“Not everyone feels comfortable coming to a big community meeting,” Richardson explained.

Again, not tied to the medical aspect of health, a lot of people talked about economic opportunity. It’s not just about bringing more jobs to the region. Instead, it’s having quality jobs with benefits and living wages.

The next step

“We felt there was this great momentum,” after the community meetings, Richardson said. So they set out to update the signature Health for All plan, which is basically an outline on how they can go about making change.

They took the feedback from the community, which included a push for more leadership opportunities and government accountability.

“Our thinking was that, we’re in this unique position where we can fill this gap,” she said before explaining the updated vision.

The so-called “Big Goal” includes three aspects. First, it’s to aid organizations, institutions and local governments to implement policy changes. The second part is to help residents advocate for themselves and their community.

The final part is to bring both together in a collaborative effort.

There are local chapters — Danville, Pittsylvania and Caswell — that meet monthly to chart the strategies.

Recently, the Danville group has taken a keen interest in housing, identifying it as the No. 1 issue across the board.

The meetings provided a better understanding at some common misconceptions.

“For a lot of these issues, there’s a feeling like ‘no one is doing anything,’” Richardson said.

Instead, they heard from guest speakers who explained that there are things happening, but at the same time, some groups are limited in what they can do to alleviate the shortage of housing units in the area.

No easy fix

Often Richardson will talk to a group and hear someone say they “can’t wait to see the new numbers” next year because they feel the region has improved.

It's not that simple.

"That's always a challenge," she said. Yet, most people understand the data isn't going to change overnight.

This is a long-term haul.

At the same time, it's important to celebrate the small wins. That's as simple as having a packed house — about 40 to 45 people — who attend the local chapter meetings. Sometimes it's so many attendees that they have to search for more chairs just so everyone has a place to sit.

For Richardson, that's engagement — all with volunteer members — is huge.

It's also an empathy check for many to realize disparities do not represent a personal failing.

"Health is part of our personal responsibility, but there is a much greater responsibility of our communities to create opportunities for people to live healthy lives," she said.

Sovah Health-Danville CEO Steve Heatherly told the Register & Bee recently that collaboration is one way to fix the health issues.

"This fact requires us to be exceptionally diligent in engaging in partnerships that expand capacity for the community," he said.

He provided behavioral health as an example.

"It is a nationwide problem and there is certainly a high incidence in the communities we serve," he said. "Almost no acute care hospital is equipped to deal with all of those issues, but when they aren't addressed, a disproportionate number of patients in crisis end up in our emergency department, which backs up our whole system of care."

For Heatherly, the answer is getting to the cause of the problem instead of just waiting for a crisis to happen and respond.

“There aren’t easy solutions but we have to be continually looking for ways we can partner and help,” he said.

Johnny Mills, the recently installed CEO of the Danville Life Saving Crew, experiences on a daily basis that keeping healthy isn’t just about eating the right foods or taking medicine.

“A lot of it is awareness,” he explained.

Mills launched the community paramedicine program for the life saving crew in 2017 after the nonprofit realized some calls were for routine situations and not medical emergencies.



Community health workers LaKendra Lipscomb, middle, and Chaquita Chappell, left, laugh with a client in an office at Cardinal Village in March 2019.

Sometimes residents just needed connections to resources.

Richardson described a similar program encouraged years ago by the collaborative. They mapped out areas of the “super users” of the emergency rooms and started a community health worker project.

These health care navigators didn’t practice medicine. They were all about building relationships.

“Initially the main goal ... was how many people they could get connected to a primary care doctor,” Richardson said.

That’s when they discovered the other social determinants are the problem.

“Connecting to primary care for a lot of people is nowhere near the top of the list,” she said.

Still, those community helpers made progress.

“It’s amazing how many people they’ve worked with,” Richardson said, noting that over time it started to make an impact.

Those people who used to frequent the emergency room now have access to other resources and have become self-sufficient.

Hopeful

Richardson is passionate about civic health and making sure people feel hopeful about the future of the community.

“I feel very strongly that this civic health focus is something that could be incredibly impactful,” she said when asked what’s the one thing that could jumpstart a change. “Just because it’s something that would improve our ability to make progress on all of these other issues.”

That includes watching the process of decision making with “leaders who truly represent the community,” and who are not just talking, but having a dialog with residents.

“I know those things sound fluffy, but I truly believe that’s the kind of things that’ll make the difference for everything else,” she said.

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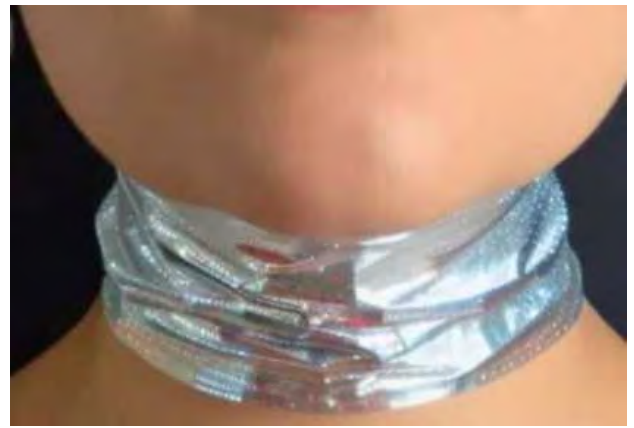
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