

Oral Health • Mental Health • Donor Restricted Funds • Access to Services



FOUNDATION
— *for* —
COMMUNITY
HEALTH

Prevention, Access, Collaboration

ANNUAL REPORT 2006

Towns served by
FOUNDATION
for
COMMUNITY
HEALTH

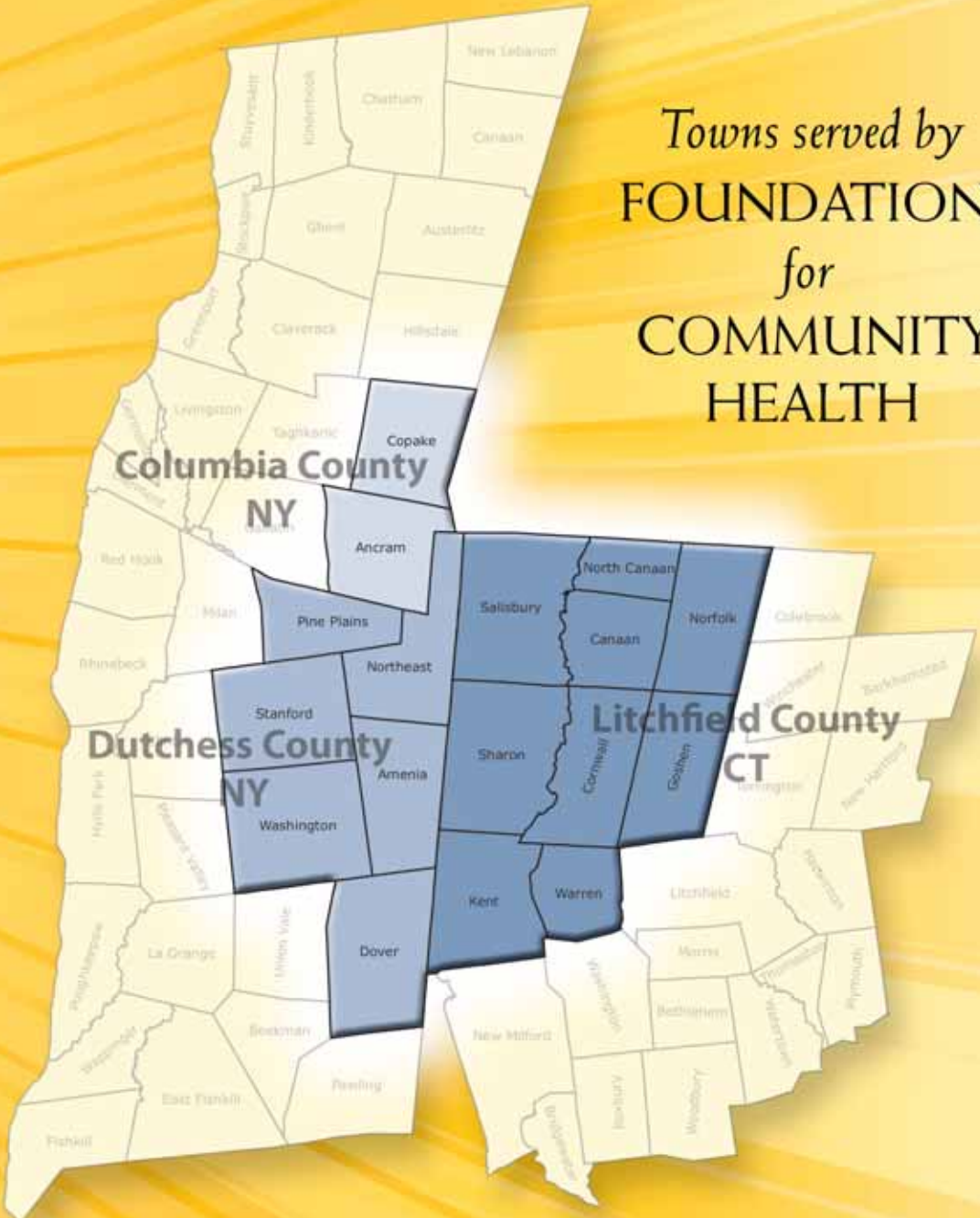


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Foundation for Community Health

106B Upper Main Street
 Sharon, CT 06069
 800.695.7210
 860.364.5157
www.fchealth.org

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MESSAGE FROM THE CHAIRMAN

“To be a leader and a catalyst for health promotion, disease prevention, and universal access to services that will improve and maintain the overall health and well being of the people living in our service area”.

We’ve come a long way in a short time toward realizing this vision. It was only four years ago that as concerned local residents we came together and began working to establish a new Foundation that would benefit the people living in our community. At first we were consumed with basic things such as learning how to work together as a Board, learning what was required of us as a new Foundation by the Attorney General and by our own bylaws, and choosing the best administrative practices in order to operate successfully, resourcefully and appropriately.

Very soon during that first year we also began talking to the community at large. We spoke to providers and consumers. We asked questions and conducted a health specific needs assessment of the entire area. We conducted surveys, reviewed data and talked to more people. From all of this, we came up with a pretty good understanding of the local gaps in

healthcare services that guided the development of our goals and our first strategic plan. As a result, we identified three primary areas which were perceived as having the greatest needs: Mental Health, Access to Services and Oral Health.

Over the subsequent three years we have made big strides in understanding the needs of our communities and have backed that up by awarding local grants to support these needs. We are very pleased to say that we are starting to see the results and improvements all around us. They are making a real difference.

In addition, we have dedicated ourselves to our community by investing not only money, but also a specific effort to encourage local cooperation and collaboration. Our service area includes two states with three counties and many townships, all unique and in many ways disconnected from each other. The Foundation has brought together various groups from these areas, including health providers, service providers and political leaders, to achieve common goals such as learning from each other, increasing awareness of problems and potential solutions, sharing successes, and working together to minimize duplication and

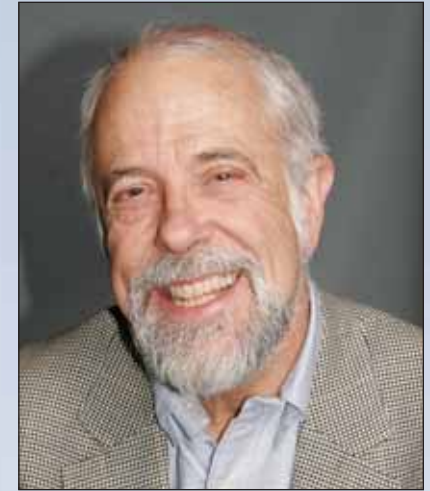
maximize results. We have learned that this role of “convener” is one of the most vital roles the Foundation can play.

We feel very good about our accomplishments. We have learned a lot about our community and will continue to do so. We’ve established our presence, supported needs, and experienced demonstrable improvements in services. We have been particularly good at connecting people and organizations. Our Board is hard working and very committed and is supported by an excellent Executive Director and her staff who have shown leadership, wisdom, and enthusiasm in catalyzing change for our rural area.

I am happy to say that as a Board and a Foundation, our successes have given us the self-assurance that we are on the right road. We will stay on this road. We are just getting started!



John Charde, MD
Chairman



“We have learned that this role of “convener” is one of the most vital roles the Foundation can play.”

• Prevention • Access • Collaboration

MESSAGE FROM THE EXECUTIVE DIRECTOR

“After five years working in the northeast corner of Dutchess County, I suddenly noticed a dramatic increase in communication and thus collaboration among agencies serving this area. After yet another call and meeting from a provider looking to expand their services and find new ways to meet the needs here, I realized that the Foundation for Community Health was behind this growth: the infusion of grant money, and the encouragement to partner with other organizations, was creating a dramatic new synergy that will help eliminate redundancy, draw on each organization’s strengths, build relationships and, ultimately, improve the quality of life and health for people in our region.”

*Jenny Hansell
Executive Director
NorthEast Community Center
Millerton, NY*



Dear Neighbors,

As you have just read in the Message from the Chairman, Dr. John Charde talks about the growth and development of the Foundation for Community Health (FCH) over these past few years. He makes special note of the important role we play in bringing people in the healthcare field together to discuss problems and coordinate solutions.

Yes, the Foundation is beginning to have an impact on this beautiful community, and yes, we have *invested over one million* dollars in local programs and agencies in the last two and a half years. I would like to draw attention to a key factor that has enabled us to accomplish so much in such a short period of time: the

interest, cooperation and involvement of the community. As Dr. Charde indicated, it is clear that this investment would not amount to much if not for the members and organizations of this community who actually provide and/or advocate for the services we fund. It is their willingness to come together, share their visions and work hard toward mutual goals that have and will result in the most positive outcomes for our community.

In this report you will find a list of the agencies that have worked with us in the past four years. It is important to recognize that these and other agencies that have worked with us since our inception, are staffed, guided and supported by real people – people who are your friends and neighbors.

I would also like to take this opportunity to thank the many providers, volunteers, legislators, and fellow grant-makers for their input, support and active participation. These people have often worked very closely with the Foundation, helping to shape our funding guidelines and opportunities. We are fortunate that there are so many local ‘natural leaders’ working for the improvement of our communities – both professionally and as volunteers.

Some that come to mind are the:

- Individual town social service workers (in some cases this is also the First Selectperson!) providing residents support and guidance in connecting them to needed services;
- Mobile mental health youth crisis counselors assisting families in crisis;

- Elementary school (staff, faculty and PTO members) working with a local domestic violence services agency to raise awareness and lower the incidence of bullying;
- Dedicated individuals providing us with Emergency Medical Services;
- Community members advocating for increased access to life-saving Early Breast Cancer Detection services;
- Board members guiding local organizations to long term financial stability;
- Local legislators willing to listen, learn and to act on our behalf;
- And the list could go on, and on...

The Foundation firmly believes that it is only through working together that we will be able to attain our goal of improving the health of our friends and neighbors in the greater Harlem Valley in New York and the northern Litchfield Hills of Connecticut.

On a personal note, I would like to thank everyone who has worked with me during the last few years and have made my work at the Foundation interesting, exciting and fulfilling.

Sincerely,

A handwritten signature in black ink that reads "Nancy L. Heaton".

Nancy L. Heaton, MPH
Executive Director

GRANTEES

Foundation for Community Health Has Awarded Over One Million Dollars To Date

Since its inception in 2003, the Board of Directors of the Foundation for Community Health has invested more than one million dollars into the community by funding various health related services and strategies.

FY 2005 – FY 2007

Grantmaking Strategy

The Foundation's grantmaking strategy gives priority to prevention and early intervention efforts, increasing access to services, and building effective collaborations across all areas of funding. The Foundation designed its three-year plan for grantmaking to focus on the three priority areas identified by its needs assessment process. These areas are: mental health, oral health and access to services.

Mental Health

Grantmaking in the area of mental health focuses on building collaborations, supporting organizational infrastructure and capacity building, providing educational and training opportunities to mental health and substance abuse service providers, and supporting prevention and early intervention programs.

Oral Health

Grantmaking in the area of oral health focuses on further assessing the status of oral health in our communities,

increasing access to care, and raising community awareness of the vital role of oral health in one's overall health and productivity.

Access to Services

Grantmaking in the area of access seeks opportunities to increase the ability of organizations to reach out to those in need, as well as supporting efforts that make it easier for those in need to access health related services (e.g. expanding transportation, increasing awareness of services, reducing language barriers, etc.).

Other Funding

The Foundation manages and administers a number of 'donor restricted' funds which are established by an individual(s) to support a specific purpose or program. The Foundation has also set aside funds for ongoing needs assessments and to be able to respond to "New Opportunities" which may be outside our current priority areas but are of interest and concern to our communities.





Housatonic Youth Service Bureau's Joseph Jude Brien demonstrates how to use an old fashioned saw horse to carve a three-legged stool. Brien is one of the instructors with "For Your Information" interactive learning workshops for children and their parents.

GRANTEES

MENTAL HEALTH/BEHAVIORAL HEALTH

The needs assessment conducted by the Foundation for Community Health identified a tremendous need for mental health services in the towns it serves. This was confirmed through consultations with local community leaders, health and human service providers, and consumers. The needs assessment also indicated that substance abuse and addiction were critical issues confronting our communities. In the language of providers in these two fields, the term behavioral health encompasses both mental health and substance abuse. The Foundation believes that in order to best move toward sustained positive change in this area, it needs to focus on efforts which promote prevention, increase access and support collaboration. To that end, the Foundation has and will continue to collaborate with current local providers of community-based mental health and substance abuse services to enhance their ability to provide effective behavioral health services in our communities.

Two Award Categories:

- Capacity Building/ Convening/Training
- Prevention & Early Intervention

Capacity Building/Convening / Training

Astor Home for Children, Inc.
Dover, NY

Youth Mobile Crisis \$50,000

To fund 2nd year of mental health mobile crisis services for children and families in Northeastern Dutchess County.

Housatonic Youth Service Bureau, Inc.
Falls Village, CT

Capacity Building \$50,000

To support 2nd year of strategic plan to strengthen the organization's ability to carry out its mission to assist youth in their positive growth and development.

Mental Health Association of Dutchess County, Inc., Poughkeepsie, NY

Community Collaborative \$50,000

To fund 2nd year of a community-based mental health collaborative in Eastern Dutchess County who share information, referrals, trainings, as well as identify and complete a joint project.

Northwest Center for Family Service and Mental Health, Inc., Lakeville, CT

Developing Strategic Partnerships \$25,000

For capacity building efforts exploring and developing a strategic partnership with a federally qualified health center.

GRANTEES



Sheri Cruikshank, Child Advocate and Community Educator for Women's Support Services, teaches fourth graders about the different aspects of bullying and the negative consequences involved.



Karen Finnerty, Project Coordinator for Eastern Dutchess Community Collaborative Project

Prevention/Early Intervention

Astor Home for Children, Inc.
Dover, NY

Mental Health Outreach \$10,000

To fund 2nd year of mental health screening and outreach services for children and families in Northeastern Dutchess County.

Beginning Years Children Center, United Methodist Homes, Sharon, CT

Parenting Skills Program \$6,700

To conduct parenting skills workshops with parents of very young children using the *Parents as Teacher* curriculum in collaboration with a New York based day care facility.

Mental Health Association of Dutchess County, Inc., Poughkeepsie, NY

**Parenting Defiant/
Explosive Children \$12,000**

To conduct a 2nd series of two research-based parenting programs entitled "Managing Defiant Behavior" and "Parenting the Explosive Child" in Eastern Dutchess County.

Northwestern Connecticut AIDS Project,
Torrington, CT

**HIV Prevention Education
& Forums \$10,000**

To support rebuilding of community education programs targeting youth substance abusers and social service providers.

Women's Support Services, Inc. with Sharon Center School
Sharon, CT

I'm Just a Superhero \$10,000

To develop, conduct and evaluate a school-based violence prevention education program.



Dave Cadwell, Coordinator for the EMS Institute, demonstrates CPR (Cardio-pulmonary resuscitation)

GRANTEES

ACCESS TO SERVICES

In its assessment of needs, the Foundation for Community Health found that access was the issue that impacted all other identified health needs. The factors affecting access to health services can vary from person to person, but aggregately, the major barrier to accessing services in the Foundation's service area was transportation. The other barriers to accessing care included lack of knowledge of resources and services, the costs of services and an inability to pay for them and language and cultural issues from the growing Spanish speaking population. It was clear that grant making in this area would require creativity and collaboration and the Foundation plans to be a catalyst for such activities. We will seek opportunities to reach out to those in need, as well as supporting efforts that will make it easier to access health related services. Examples include expanding direct transportation, supporting efforts to improve the awareness of existing services and reducing language barriers.

Two Award Categories:

- Increase Access to Services
- Transportation Services

Increase Access to Services

EMS Institute
Sharon, CT

Capacity Building Educational Outreach **\$20,000**

To fund 2nd year of capacity building support to focus on recruitment and retention, expanding training abilities, and develop a plan to increase operating revenue.

Greenwoods Counseling Referrals
Litchfield, CT

Improving Organizational Effectiveness & Accountability **\$5,417**

To support organizational development.

Hudson River HealthCare
Amenia, NY

Care Partner **\$25,000**

To fund 2 community outreach workers which target seniors and Latinos and assist them in accessing care and services.

The Salisbury Forum
Salisbury, CT

Healthcare Forum **\$2,500**

Supporting a December 06 forum entitled: *Health Care for All*.

Tri-State Communications

A Tu Salud **\$4,800**

Funded a Spanish language pilot health video project.

GRANTEES

Transportation Services

Geer Adult Day Care Center
Geer Foundation, Inc., Canaan, CT

**Transportation
Enhancement Program \$20,000**

To support additional hours of transportation for non-emergency medical appointments and to convene meetings of local transportation providers to better coordinate services.

NorthEast Community Council, Inc.
Millerton, NY

Care Car \$20,000

To purchase a van for transporting the elderly in the Amenia/Wassaic area to medical and social functions.

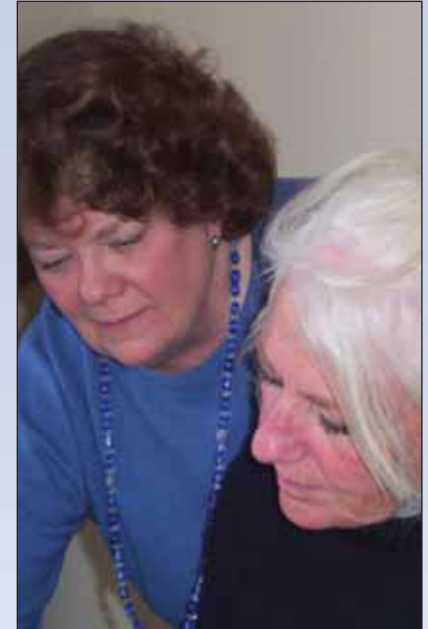
NorthEast Community Council, Inc.
Millerton, NY

**Transportation for
Amenia Program \$20,057**

For 3rd year of funding operating costs of transportation services.



Stella Togninalli, a Canaan resident, is assisted by driver, Dale Murphy, as she boards the Geer Dial-A-Ride bus on her way to a medical appointment in Waterbury, Connecticut.



(L-R): Molly Hinchman, Director, and Vicki Kinsella, Clinical Services Coordinator of Greenwoods Counseling Referrals.



Dr. Chester Douglass presenting at the oral health planning meeting in June 2006.

GRANTEES

ORAL HEALTH

The Foundation for Community Health conducted a dental assessment of third grade students in twelve schools in our service area in New York and Connecticut in the fall of 2005. The oral screenings were performed by the Department of Oral Health Policy and Epidemiology at the Harvard School of Dental Medicine who collected, analyzed and interpreted the data and then produced a report for the Foundation in the late spring of 2006 summarizing this information.

The findings of the Foundation's Oral Health Assessment Report were presented at a planning meeting convened by the

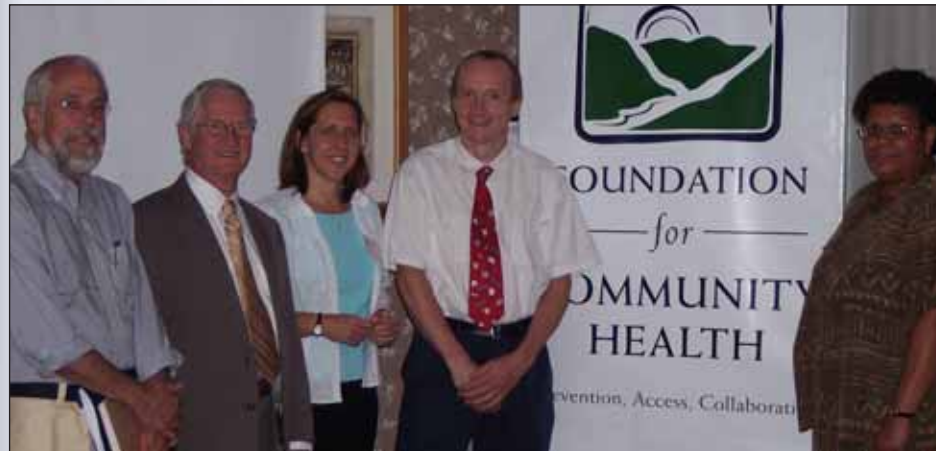
Foundation in June 2006. The meeting was facilitated by Harvard's Department of Oral Health Policy and Epidemiology Chairman, Dr. Chester Douglass, and presentations were given by the Harvard team's Dr. Michele Graham, Dr. Frances Kim, Dr. Farah Husain and dental student, Brad Washington. Also in attendance were, Ardell A. Wilson, Director of the Office of Oral Public Health for the State of Connecticut Department of Public Health and Timothy Cooke, School Based Program Coordinator with the Bureau of Dental Health for the New York State Department of Health as well as the Board and staff of the Foundation.

In addition to the findings, the Harvard team provided a conceptual framework for designing interventions to address the newly identified needs. After a lively discussion of the results and the presented framework, the group brainstormed a number of potential activities for the Foundation to further explore in developing its strategy to improve access to oral health and dental care services for our children.

The possibilities range from funding a direct-service project to making a capital investment that would initiate and/or expand an organization's capacity for offering dental services in our community. From educating primary care doctors on how to better assess oral health needs to informing legislators about institutional barriers for expanding access to care, all of these ideas are currently being explored while taking into account the Foundation's strengths and resources and keeping our focus on prevention, access and collaboration.

The full report and a corresponding issue brief prepared by the Foundation were shared with legislators, administrators of state and county health departments, educators, health professionals and civic leaders in both New York and Connecticut in order to provide evidence to support future efforts to impact policy changes to improve the health and well-being of our children.

The original full report and issue brief can be viewed at the Foundation's website.



(L-R): John Charde, Chairman of the Foundation for Community Health, Dr. Chester Douglass, Chairman for the Harvard Department of Oral Health Policy and Epidemiology, Nancy Heaton, Executive Director for the Foundation for Community Health, Timothy Cooke, School Based Program Coordinator with the Bureau of Dental Health for the New York State Department of Health and Ardell A. Wilson, Director of the Office of Oral Public Health with the State of Connecticut Department of Public Health.

GRANTEES

Oral Health Screenings

Excerpt from Summary of Aggregate Results/Findings*

- Overall participation rate was 66%: of the 482 students enrolled in the participating schools, 319 were screened.
- Overall, of the total students screened:
 - About 66% did not have any decayed teeth, i.e. the remaining 34% had more than or equal to 1 decayed teeth.
 - 64% did not have any filled teeth
 - 83% did not have any missing teeth
 - 61% did not have any sealed teeth
 - 36% had more than or equal to 1 fillings, 17% had more than or equal to 1 missing teeth, and 39% had more than or equal to 1 sealants.
- Poor oral hygiene appeared to be strongly associated with the more than or equal to 1 decayed teeth. Filled and/or sealed teeth did not appear to be associated with poor oral hygiene.

*Source: *Oral Health Screenings for Third Grade Students in Selected Schools in Connecticut and New York: A Report for the Foundation for Community Health, June 2006. Prepared by: Chester Douglass, D.M.D., .P.H., P.H.D., et. al. Department of Oral Health Policy and Epidemiology, Harvard School of Dental Medicine*



(L-R) Harvard's Brad Washington, Dr. Chester Douglass, Dr. Farah Husain, Dr. Frances Kim, State of Connecticut Department of Public Health's Ardell A. Wilson and the Foundation's Executive Director, Nancy Heaton.

“We have been very pleased to participate in the Foundation's efforts to improve oral health and access to dental care for children. The Harvard Dental Public Health residents, faculty and research fellows who have worked on this project consider it to be an honor to have been able to work with such a well run and well meaning Foundation and Board who clearly have the best interest of their community foremost in their hearts and minds. We hope we can continue to assist in these important efforts to improve access to better dental health for the children in the FCH area, thereby assuring a higher quality of life through better oral health.”

Dr. Chester Douglass, D.M.D., M.P.H., P.H.D. Professor and Chairman in the Department of Oral Health Policy and Epidemiology, Harvard School of Dental Medicine and Chief of Dentistry and Oral Surgery for the Cambridge Health Alliance.

“I would not be able to get my cardiac medication at all if it weren't for this prescription fund.”

60 year old female, resident of Falls Village, Connecticut, and a part time worker with no benefits and ineligible for ComPace, Medicare or Title 19.

“I am on medication for heart disease, hypertension, osteoporosis, macular degeneration and poor circulation. Medicare, Medicaid and some assistance through the state or the town has helped, but the extra help from this prescription fund has made it possible for me not to have to cut back on food and heating in order to pay for my prescriptions.”

Elderly female, resident of eastern Dutchess County, New York

GRANTEES

DONOR RESTRICTED FUNDS

Prescription Assistance Fund

The Foundation supported its Prescription Assistance Program which originated from the directives of several donor advised funds to help pay for medical expenses of those in need. The specific purpose is to assist individuals and families with paying for their prescription costs and priority is given to those with the most significant needs. Applicants should apply at the appropriate office depending on their residence. The funding requests are capped at \$250 per month per person.

Columbia County HealthCare Consortium, Inc., Hudson, NY

\$8,325

To fund the FCH Prescription Assistance Fund.

Northwestern CT Council of Governments, Warren, CT

\$32,800

To fund the FCH Prescription Assistance Fund.

Dutchess County Community Action Agency, Inc., Dover, NY

\$48,875

To fund the FCH Prescription Assistance Fund.



A prescription assistance client receives her medications at the Copake Pharmacy in Copake, New York.

GRANTEES

Medical Education Fund

The Foundation for Community Health began using the Medical Education Fund by hosting the first of a series of educational events for the medical, health and science community at the Interlaken Conference Center on May 4, 2006. Dr. Brian R. Smith, Professor of Laboratory Medicine, Internal Medicine and Pediatrics and Director of the Hematopathology Fellowship and Immunohematology Research Training Program at the Yale University School of Medicine conducted a presentation on the new frontier of immunologic based medical therapeutics.

The lecture, approved for one Category 2 CME hour for physicians, was well received by the members of the academic and medical community that attended. The presentation included medically relevant aspects of basic immunology and immunologically mediated pathophysiology that are important in devising therapeutic strategies to treat a variety of common diseases, including cancer and cardiovascular disorders. Specific examples of such therapies that have moved, and are moving, into routine clinical practice were discussed as well as information relevant to the basic biology of antibody reactivity; the current role of antibody treatment in

malignant disease; the current role of antibody treatment in non-malignant disease and the future of antibody and cell-mediated immunologic therapy of disease.

The Medical Education Fund at the Foundation for Community Health was created from the pooling of donor restricted funds previously held by the former not-for-profit Sharon Hospital. These funds were specifically donated to pay for a variety of medical education programs and are not intended to supplant educational programs supported by the current

Essent Health Care/Sharon Hospital, but rather to augment them in order to improve the health of the community it serves. The Foundation has created a Medical Education Committee with Foundation Board members and members from the local medical association and they have developed a working plan that utilizes the funds for providing educational opportunities on a variety of health topics that directly impact or affect the FCH's communities.



Dr. Brian R. Smith from the Yale University School of Medicine presenting at the Foundation's medical education event in May 2006.

“Best presentation I've ever heard on immunology. The speaker was excellent. Excellent setting also.”

*Dr. Joseph Curi
Pediatric & Adolescent
Medicine, Retired*

“...informative, relevant and up-to-date information, presented with authority and clarity. The event was a showcase for talent, learning, and sharing amongst long-time friends and colleagues, as well as for newcomers who were warmly welcomed.”

*Douglas Weisman, Science
Department Chair
Housatonic Valley Regional
High School*



Foundation Board members at a legislative breakfast held by FCH in July 2006.

“I love working with the Foundation because we directly affect the area where I live and work. Whether it is providing infant seats for ambulances, medicine for people who otherwise could not afford it, or fostering collaboration between agencies to provide transportation, we are able to produce helpful and real results for the people in the area where I live.”

Miriam Tannen

Copies of the Foundation's audited financial statements and Form 990 are available at our website www.fchealth.org

FINANCIAL REPORTS

	(unaudited) 2006	(audited) 2005
Statement of Financial Position December 31		
Assets		
Cash	\$ 5,907	\$ 38,415
BTCF Balanced Pool	22,361,760	19,837,676
Prepaid Expense	1,710	1,600
Property and Equipment, Net	25,294	19,696
Accounts Receivable	2,477	2,477
Total Assets	\$ 22,397,148	\$ 19,899,864
Liabilities & Net Assets		
Grants Payable	\$ 87,500	\$ 153,399
Expenses Payable	43,969	42,689
Net Assets (Fund Balance)	22,265,679	19,703,776
Total Liabilities & Net Assets	\$ 22,397,148	\$ 19,899,864
Statement of Financial Activities December 31		
Revenue		
Revenue from Trusts ¹	\$ 277,961	\$ 262,347
Contributions and Additions ²	500,475	2,424,654
Total Investment Earnings	2,587,027	1,246,933
Allocation from Essent Healthcare	0	2,477
Total Revenue	\$ 3,365,463	\$ 3,936,411
Expense		
Grant Awards	\$ 431,562	\$ 516,206
Program Development	234,911	187,845
Operating Expenses	3,731	81,166
Investment & Financial Services Fee	133,356	123,136
Total Expenses	\$ 803,559	\$ 908,353
Net of Revenue and Expense	\$ 2,561,904	\$ 3,028,058

¹ The Foundation receives regular income from approximately \$6.7 million held in trust by other.

² Contributions and Additions include the transfer of \$500,000 from the escrow account created by the sale of the former Sharon Hospital to Essent Healthcare. The release of these funds was triggered by the completion of all transactions and/or deadlines related to the closing of the former hospital.

BOARD MEMBERS & STAFF



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Anna Timell, MD
Cornwall, CT



Nancy Heaton
Executive Director



Gertrude O'Sullivan
Program &
Communications Officer



Cailin Welch
Office & Grant
Manager

Staff Members



Foundation Board members and Nancy Heaton at the oral health planning meeting held by FCH in June 2006.

“The Foundation for Community Health diligently continues to seek solutions for some of the gravest problems in our communities, and it does so with both brains and heart. It is a great privilege for me to be a part of this work.”

Ellen "Wendy" Curtis

“We have spent a lot of time researching and identifying the actual healthcare needs of our community and now we are putting our Foundation dollars to work where they will do the most good.”

Lea P. Davies



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