



# Rural Health Matters

## Investing in Stakeholder Engagement

Michelle Rathman, CEO, Impact! Communications, Inc.

Host of Rural Matters Podcast

*“When we make the connection between rural health, education and business Shift Happens..”*

- Founded in 1989 dedicated to healthcare
- Facilitating alliances between academic and rural hospitals
- Specialists in caregiver, patient, and community stakeholder engagement
- Thought-partners with **National Organization of State Offices of Rural Health** transforming National Rural Health Day into a sustainable movement #PowerofRural
- Organizational development strategists, teaching tools, facilitators, advisors and coaches
- Host of Rural Matters Podcast



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# Key Messages & DATA POINTS





Rural America is fueling  
an innovative rural health  
infrastructure.

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Rural America is fueling an innovative rural health infrastructure.



Over 1,200 Critical Access Hospitals and more than 300 rural prospective payment system hospitals support the acute care landscape of rural communities.

1,200+

Critical Access Hospitals

300+

Rural Prospective Payment System Hospitals



Independent Rural Health Clinics, whether not-for-profit or for-profit, are a part of the rural health safety-net



Nearly

4,500

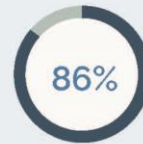
Rural Health Clinics and

3,398 rural health centers or health center look-alikes

provide the backbone of the primary care infrastructure in rural America



Rural communities are sparking their own change - citing cooperation, social cohesion and "community spirit" as assets in innovative approaches to improving health and well-being.



Offer free or reduced cost care



Accept new Medicaid or state CHIP patients

50% of rural local health departments (LHDs) report operating school-based health clinics, and are more likely than urban LHDs to provide an array of services, including: childhood immunizations, body mass index (BMI), blood lead screenings, and home health care.

LOCAL HEALTH DEPARTMENTS





Rural America is a great place  
for mission-minded health  
professionals to provide  
individualized care.

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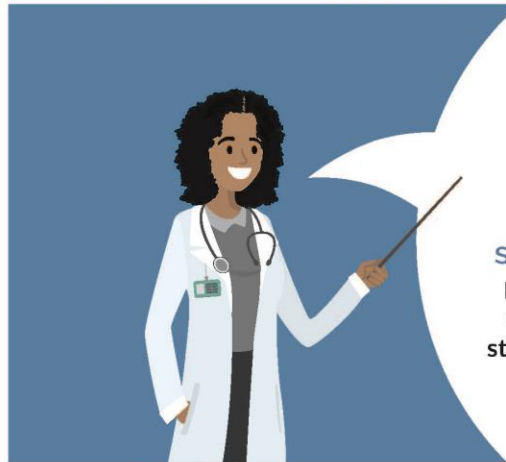
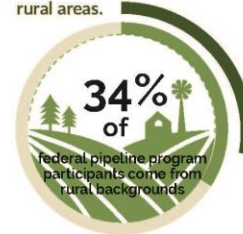


Rural America is a great place for mission-minded health professionals to provide individualized care.



Graduates of osteopathic medical schools, rural schools, and schools with a rural mission are more likely to choose rural primary care practice. All schools can improve by adopting rural missions and supporting those missions through programs and curricula that encourage rural practice.

Nearly 34% of participants in federal pipeline programs are from a rural background, but only 29% of participating sites offer opportunities for students to learn and grow in rural areas.



Compared to urban nurse practitioners, rural NPs report being more satisfied with their jobs, practicing to the fullest extent of their license and anticipate staying in their jobs much longer.



BACKGROUND



CURRICULUM



ROTATIONS

Successful strategies for encouraging rural Physician Assistant (PA) practice include a rural mission as part of the program,

recruiting students from a rural background, having a rural focused curriculum, and including rural clinical rotations.



Rural America offers a beautiful and  
challenging landscape, requiring  
unique approaches.

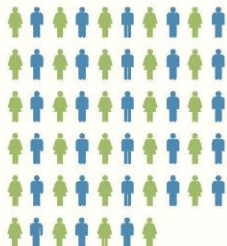
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## More than 57 million

Americans live, work and play in rural communities,



spread across 72% of the total U.S. land area



Rural communities face a disproportionate shortage of qualified health care providers, leading to

# 69%

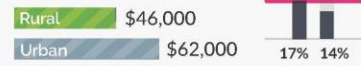
of health professional shortage areas in rural and frontier communities.

## Rural minorities

(African Americans, Hispanics, American Indians and Alaska natives) have even higher rates of poverty and obesity, as well as lower educational attainment, than rural White and urban children.



The median annual household income of rural residents is lower than urban residents;



with 17% of rural residents living at or below the poverty line, compared to 14% in urban.

## Food insecure

15.8% of rural residents report being food insecure, compared to 14.5% of urban residents.

Rural	15.8%
Urban	14.5%



Who will choose a career |  
in rural health here?

## Over 100 Hospital Closures


An estimated 700 classified as vulnerable and at risk.

- Underperformance Patient Care Areas (Market Share)
- Quality Ranking
- Population Risk
- Patient Perspectives / Poor HCAHPS
- Financial Instability
- Escalating Turnover
- Outmigration
- Policy Driven Closures

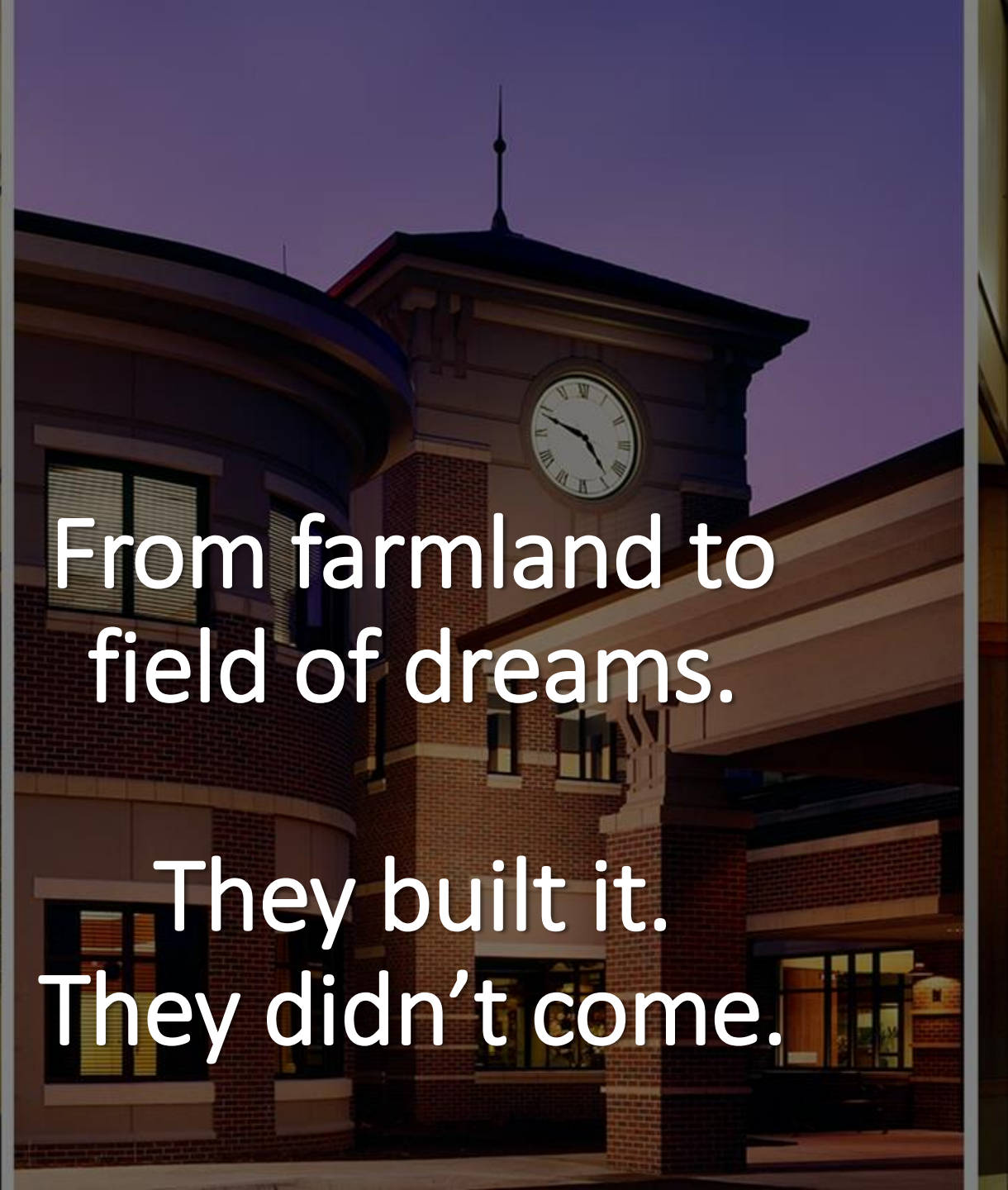


# Opioids is most definitely a Rural Matter!





# Rural Medicine and the Important Role of Critical Access Hospitals



From farmland to  
field of dreams.

They built it.  
They didn't come.

# Every Box Checked...Right?

- Land Available
- District Dissolved
- Compiled projections vs. feasibility study
- CON Approved
- New ER Physicians & Alliance w/Academic Medical Center
- Overwhelming Support from Broader Rural Health Community



Dan Mennooh, Midwest Regional Medical Center board of directors chairman, and Jeff Hill, Galena-Stauss Hospital & Healthcare Center CEO, celebrate the ground breaking of the new hospital Friday, Oct. 20. Construction is scheduled to last until fourth quarter of next year. P. Carter Newton photo

## Construction to take a year

GALENA—The \$38 million replacement hospital is located on a 35-acre campus located on U.S. 20 near the Galena Golf Club, about 2.5 miles west of the current facility, and adjacent to the proposed Galena bypass.

The current location at 215 Summit Street will remain home to Galena-Stauss' long-term care programs. The adult day care, assisted living and nursing home facilities will continue to serve in the existing location. Construction is scheduled for completion late next year.

"Many years ago, a group of visionary people believed that Galena and Jo Daviess County should take the risk and build it. Time has proven that they were right."

## Hospital heralds new era

by Jay Dickerson  
ed@galenagazette.com

GALENA—On Friday, Oct. 20, the future of health care delivery broke ground.

At the site of the Midwest Regional Medical Center, the replacement hospital for Galena-Stauss Hospital, community members and hospital staff watched as Galena-Stauss Hospital & Healthcare Center CEO Jeff Hill and Midwest Regional Medical Center board chairman Dan Mennooh joined with American Hospital Association Senior Director John Stuppitt and University of Illinois Chicago Associate Dean Robert McAuley to break ground on the new facility.

"This is really a special time in the history of Galena-Stauss Hospital. This is really a new beginning for us," Hill. "This new facility will launch us into the future of health care delivery."

Galena-Stauss Hospital & Healthcare Center was once a state-of-the-art facility.

"Over the years, that went away. Now, we're bringing it back," said Hill.

The new hospital is a "healing environment, where the challenges of space, an aging structure and technology limitations would no longer stand in the way of provided advanced care closer to home," said Hill.

Mennooh agreed.

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Continued on page 3A

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## The Perfect Storm

- Lackluster community, employee and stakeholder engagement out of the gate.
- Vocal and ardent local physician opposition from day one.
- Tsunami of rumors on the pages of local media.



# Midwest Medical Center son: Board decided 'to take a change in direction'



By John Decker  
jdecker@gazette.com

GALENA on Friday, Jan. 16, the Board of Directors of Midwest Medical Center announced that CEO Jeff Hill will no longer serve his organization. In addition to the departure of Hill, Midwest Medical Center Board Chairman Daniel Monaghan announced that he has resigned.

"I really was a hard decision to take change in direction," explained McCloskey. Kathleen, a former Midwest Medical Center executive, will continue to do so over these next weeks, to be certain to staff members questions and answer that the transition is a smooth one. All services remain fully operational and there is absolutely no change in care or interruption of services."

According to the press release, Midway Health Clinic and all in-service areas at Midwest Medical Center continue to be fully operational and staffed with its management team.

Tom Bowers, president of the hospital, in a press release said he will be leaving Jan. 14. Board member Mary Sheahan, a former hospital administrator, was named the interim CEO and board chair. She is served as the chair of the board of directors for the past two years.

The Midway Sheahan explained that board members at the hospital, talking and meeting with hospital staff.

"This was instrumental in bringing Jeff Hill to our organization and we are very grateful for their commitment to improve the quality of healthcare here in Jo Daviess County," Sheahan said. "This collective vision of building a replacement hospital that will serve this community is to be commended. To thank them both for their years of dedication and service and wish them the best in their future endeavors."

Sheahan has begun working closely with interim managers to ensure a smooth and successful transition to Midwest Medical Center. This decision was reached after exhaustive analysis of various challenges the organization has experienced.

"Mary Sheahan and the entire Board of Directors were pivotal instrumental in ensuring a stable healthcare delivery system in Galena," said Kathleen. "They are working very hard to lead and

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Midwest Medical Center in Galena

# Critical funding

## Many smaller hospitals receive a boost in federal aid

By JOHN DECKER  
jdecker@gazette.com

GALENA, Ill. — Midwest's largest hospital, which has been partially chartered by a state board of health, has received a boost in federal aid.

The Midwest Medical Center opened its doors in December 2007. The collaboration of years of work to build a replacement facility for the Galena-Daviess Hospital & Healthcare Center. The facility offers specialized surgery and radiology and lab services. Midwest Medical Clinic also operates out of the hospital.

In recent months, a number of employees were laid off, including a surgeon, as well as staff who had been in the hospital for several years. Hill announced a reduction in the hospital's work force this past December, a year after the facility opened, raising the concern operational costs and a big to Midwest replacement hospital being better in the hospital's decision to cut staff.

The secondary reduction was necessary to ensure adequate financial performance in the face of the rapidly changing healthcare climate. This decision was reached after exhaustive analysis of various challenges the organization has experienced.

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Thursday, November 06, 2008

# THIS JUST IN: Hospital battles a new illness: tumors

Thursday, November 06, 2008



Midwest Medical Center not losing

By Jay Dickerson  
jdickerson@gazette.com

GALENA, Ill. — In the case it has seen in the past 12 months since it opened, Midwest Medical Center is now combining a few illness, tumors.

Hospital officials are concerned about a tumor that Midwest Medical Center is closing. That, says the board of directors, is a major part of the case. In an effort to deal the tumor, the board sent out a two-page letter to 1,000 members of the community.

To download the letter, click here.

Members of the board have been approached by a various members of the community and told that they have heard Midwest Medical Center will soon close its doors. This is troubling to us and we do not believe that engagement in tumors is over a productive approach. In this case, we also had a strong sense of responsibility to ensure our community that Midwest Medical Center is here and here to stay. Using strong and prudent business practice, we have adjusted and are managing our growth and planning in response to the current economy."

The letter continues that people in the community are being told they cannot use the hospital's services. This, the letter says, is also not true. The letter includes a list of diagnostic, imaging and surgery services.

The letter is signed by board chair Dan Monaghan and vice chair Mary Rosemary Sheahan, and includes the rest of the board members' names.

In addition to reassuring the community the hospital is here to stay, the letter suggests that those who are spreading misleading information "should be educated and they choose not to be, will be a consequence for their actions."

"One of the best ways to stop rumors and keep them from spreading is to find the source and deal with them directly. If you wish to help put an end to the unfounded information that has clearly had such a negative impact on our community, help us identify the individuals infusing the conversation so that we can take the appropriate actions. Also, if you are here and you cannot utilize the services of Midwest Medical Center related to an insurance matter, call the business office at 815-777-1340.

If someone tells you that your local community hospital, which provides over 200 community members with jobs in its program, will soon straight and ask them if they care to share their concerns with us rather than spread negativity and propagate lies."

Midwest Medical Center is a successfully valuable asset to this community, its history is in its every breath.

This organization provides important services to every segment of the community. Some of the services include an assisted living facility, nursing home, women's clinic, emergency care, diagnostic surgery, fitness center and hospital.

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With operations in some private buildings, one of the jobs for the hospital's board of directors is to begin the discussion. The job of that committee is to have thoughtfully and to ask good questions.

The organization must be successful.

For certain, the board's career will ground out countless stories about Midwest Medical Center's financial picture. The reason all is important.

about how long Chad Dickerson CEO Jeff Hill might see before looking for a higher opportunity. The public commentary could help anyone as any position.

Late last year, Midwest Medical Center had half of a number of people. That set the record and kept one again.

Last week, however, a bunch of staff will no longer be the CEO and no longer employed at the hospital, and two board members, Dan Monaghan and John Decker, had resigned.

Midwest Medical Center's CEO Mary Sheahan must pick up the pieces on this organization can survive forward. The past few days will be extremely important, because there are numerous relationships within the community that must be repaired.

It is our hope that these responsible to Midwest

# New dialogue needed

## It's time to end all of the speculation on Midwest Medical Center and move forward



John Decker, publisher

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# \$40 million in new debt. Astounding community ill will.



**BUILDING STRONGER  
COMMUNITY PARTNERSHIPS**



## WHERE STRATEGY AND COMMUNICATION CONNECT

Impact! 360° Community Stakeholder Toolkit Snapshot



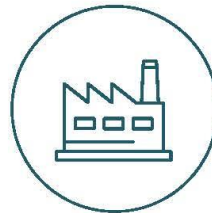
SCHOOLS



CHURCHES



CIVIC SERVICES



BUSINESSES

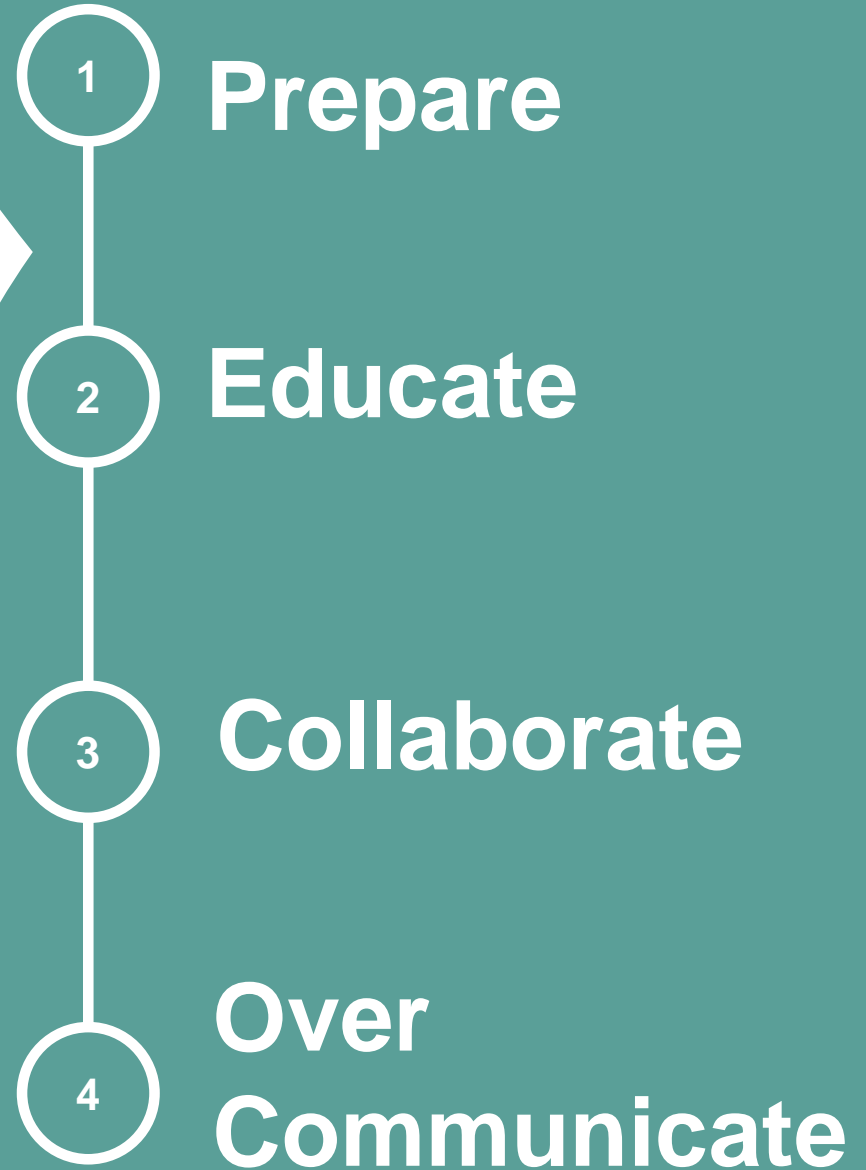


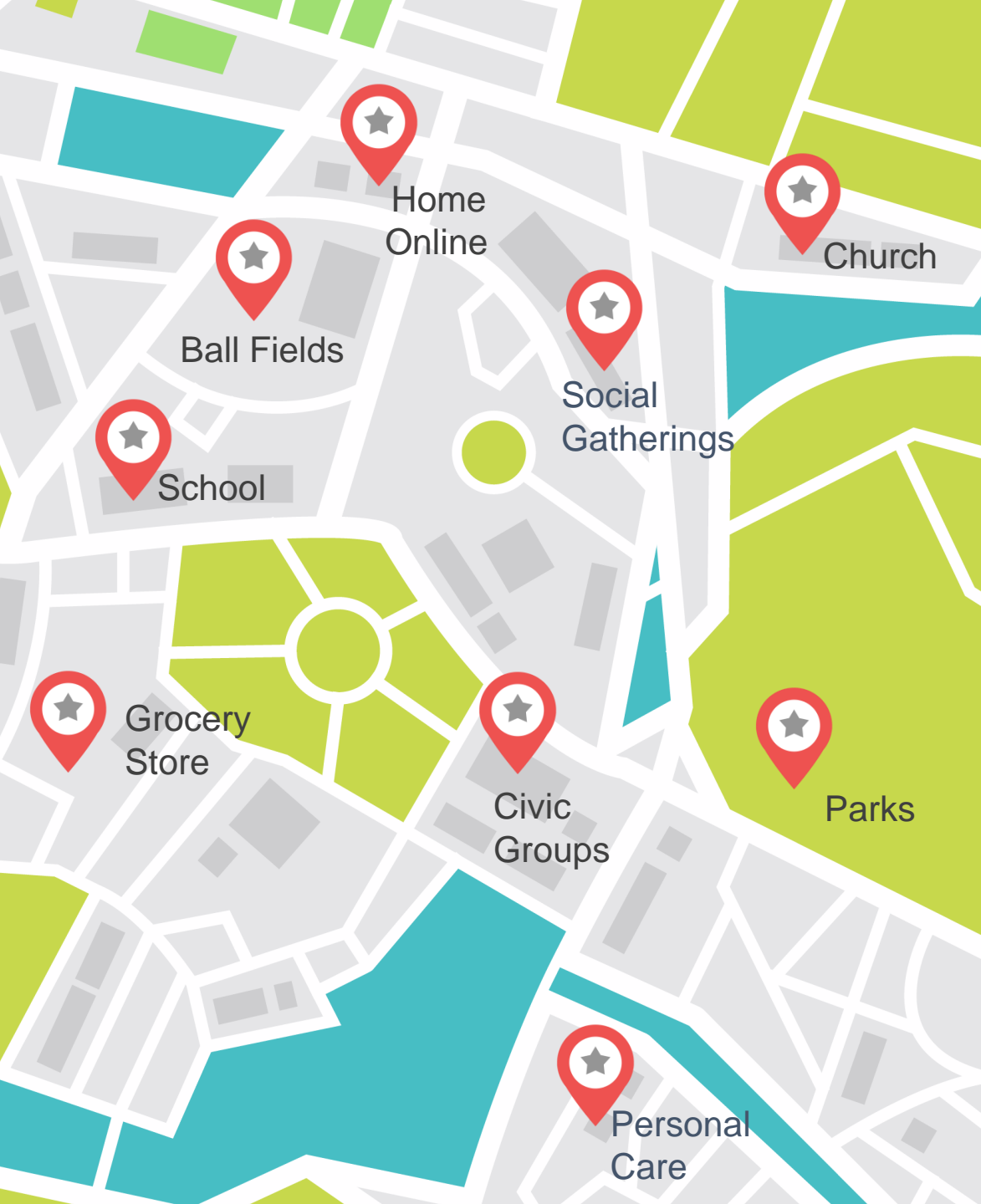
SOCIAL NETWORKS

# Courageous Candid Continuing Stakeholder Conversations

*“The truth is, most of your communities are not waking up everyday giving second thought to their local hospital. Work to establish everyday relevance!”*

*-Michelle Rathman*





**Be present in  
the places  
people live their  
lives.**

*To expand your  
visibility, expand your  
reach.*



# Components of a Strategic Communications Plan



**Marketing:** Create material that conveys to your stakeholders that you are listening.



**Social Media:** Put the right amount of thought and effort into your digital efforts. Doing so conveys that you are in touch.



**Advertising:** Print, billboard, radio, and other forms of advertising are and will continue to be vital to your visibility. Confirm that all messages in circulation/rotation are accurate and aligned.



**Media Relations:** Editorial media continues to be an important avenue for exposure. If your community still has a local paper, your hospital should a frequent feature.



**Fulfillment:** A great experience, low wait times, friendly faces, compassionate care, whatever you promise, make sure you deliver!



Established in 1989

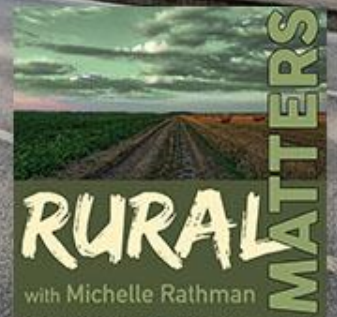


# Sample initiatives proven to improve community perception, staff engagement, and outmigration.

Contact Michelle Rathman to gain access to view an online eBook containing case community and stakeholder engagement initiatives designed to address outmigration and protect rural hospitals from market share loss that adversely affects financial performance..

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# EXPAND YOUR RURAL REACH.



We're making the connections between rural education, business, health and economies.

@MRBImpact

@RuralMattersPod