

Rural Communities and “Growing Your Own”

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Ways Rural Communities Can Address the Healthcare Workforce Shortage

Many communities in rural Colorado, as in rural America, suffer a chronic shortage of healthcare professionals - nurses, dentists, physicians, pharmacists, radiology techs, and more. The solutions to these shortages are complex, multi-faceted, and involve many players in the government, healthcare, education, public, and private sectors. The Colorado Rural Health Council compiled this list of suggestions for rural communities to consider that might help alleviate the shortages, while long-range, more permanent solutions are found.

Local Recruitment and Retention Committee

Any rural community that faces challenges in recruiting and retaining healthcare professionals (or any kind of professional) should consider forming a local Recruitment and Retention Committee (RRC). In most cases, the RRC's role is to assist (hopefully, not work against) the local hospital or physician that is actually hiring a provider. In some cases, smaller towns for instance, the RRC is actually the recruiter for that community. The RRC should include a variety of members, from different sectors of the community - schools, healthcare, business, recreation, real estate, etc. - who know the community, love the community, and can work together to show it off in its best light to prospective recruits. The RRC also helps, once the provider is recruited, to make him/her and his/her family feel welcome in the community. This paper provides additional roles for the RRC to play in the ongoing recruitment and retention of healthcare providers.

Growing Your Own

Research has consistently shown that someone from a rural area is more likely to practice in a rural area upon graduation. The first place rural communities should be looking is right in their hometown. It's called "growing your own," and it's a great investment in the community's future healthcare infrastructure.

- Make sure local counselors are aware of public and private financial support and other resources to assist students interested in healthcare training and careers. And, if local students are away pursuing a much-needed career in healthcare, it wouldn't hurt to stay in touch with a birthday card or subscription to the local paper so they don't forget their roots.
- Host health career days or fairs at the local junior high and high schools to introduce students to a broad range of health career options.

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“Enhancing healthcare services in Colorado by providing information, education, linkages, tools & energy toward addressing rural healthcare issues.”



- Work with local healthcare professionals to develop mentoring programs, or internships or "shadowing" opportunities for local students. Don't forget to consider the broad range of health careers - pharmacy, public health, dentistry, etc.
- Develop a scholarship program - no matter how small, this is a good way to support local students. Scholarship support ranges from \$500 each year to paying for the entire medical school and residency experience. The arrangements also vary regarding whether or not the student is obligated or merely encouraged to return to the community to practice upon graduation.

The town of Burlington recruited its two family practice physicians when a local rancher paid their way through medical school and residency program. The deal was made simply on a handshake; the students graduated top of their class; and are back practicing where they started.

- Of course, it's a necessary step to make sure everything is done to help local students complete school and graduate. Also providing strong math, science, and English curricula are important so local students are eligible and able to further their education.

In Yuma, the local high school implemented a "med-prep" program for students interested in health professions. When medical students from the University of Colorado traveled to Yuma for a rural immersion experience at the hospital and nursing home, the local med-prep students were invited to participate.

Attracting Healthcare Students and Residents

A positive experience in a rural community during training is also a factor known to contribute to practicing in a rural area. In fact, many training programs require such an experience and are seeking sites to take their students. These are ideas for rural communities to attract and support students in healthcare training.

- Many healthcare training and education programs do offer or require a rural rotation or preceptorship. Make sure local healthcare providers who can offer a positive experience are participating in these programs. Some programs don't offer housing, so making arrangements in advance to provide housing for visiting students or residents, and their families, is a nice benefit to offer.

When the town of Lake City designed their new clinic, they built living quarters over the ambulance barn. Not only does this apartment house visiting providers, but advanced nurse practitioner students who do rotations in the clinic have a nice, convenient place to stay.

- Establish a relationship with the healthcare training and education programs in your area whether the community college, nursing school, or family medicine training program. These programs have a variety of ways to let their students know about practice opportunities and you want to make sure they know about yours. This might include a job bulletin, web site, or annual opportunity fair. They might also be interested in one of your local providers - if they are a compelling and entertaining speaker - providing a presentation to the students on the pros and cons of rural practice.

- Many students graduate from their healthcare training with substantial student loan debt. Loan repayment has proven to be a factor in helping new providers decide where to practice. Making sure your community is aware of and participating in any loan repayment programs for which they are eligible is important, but a community can develop its own local loan repayment award and contract, tailored to meet their needs and expectations.

To find out more about existing loan repayment programs in Colorado, contact the Colorado Rural Health Center at (303) 832-7493, (800) 851-6782, or info@coruralhealth.org

Getting Off On The Right Foot

There are several ways a rural community can make their practice opportunity more attractive to provider candidates. These are a few ideas for the RRC can help put together an attractive, competitive recruitment package:

- Don't forget, you're often recruiting a spouse too, if not a whole family. In assembling a recruitment package, consider how you might attract the spouse too. Do they have employment needs? Social or hobby interests? Often a provider is interested in a rural community, but if the spouse isn't recruited as well, the deal is off.

A community in Utah discovered that the candidate they were trying to recruit loved horses and looked forward to having his children take riding lessons and learn about caring for them. The local committee made arrangements with a rancher to provide free lessons and other equestrian experiences.

- If the candidate provider has children, do you have information, resources, and people to help with their recruitment? Also, make sure you have adequate information on childcare and day care services in your town.
- Work with the local realtors and banks to help the new provider build or purchase a home. They will be more likely to stay.
- Work with the Chamber of Commerce to put together a wide variety of materials that promote your community and area. Remember, while you might like pheasant hunting, your prospective candidate might be a chamber music fan or be fascinated by the local geology or Native American history. Have a variety of information and contacts ready to respond to specific interests.

A larger town in Colorado was very excited to attract a certain prospective candidate who had visited the community once before. During their second visit, the local committee arranged a community barbecue in the city park to welcome him. Unfortunately, they didn't pay close attention in their visits. The only meat they served was pork and the provider and his family were Jewish. While the match was still made, this oversight made for a few awkward moments.

- For newly graduated providers who will be practicing on their own, the business end of practicing medicine can be a mystery and challenge. Working with a local community college or effective business person to offer assistance or guidance in setting up a practice - hiring staff, developing policies and procedures, implementing a billing system, etc., can be an attractive and much-needed benefit.

- Working with the local bank to offer a start-up loan for the practice can be a welcome benefit.
- In some situations, a local hospital may be willing to guarantee the new provider's salary for a year or two to allow them time to establish their practice. In return, the local hospital might stipulate that the provider will remain in the community for a specified period of time or they may place other stipulations like providing call coverage or ER coverage.

Retention

One of the best retention methods is to have done your homework and recruit a provider (and his/her family) who is well suited to the community. Still, studies show that the average professional changes positions or jobs at least seven times. Gone are the days of Marcus Welby, where the town doc stays in place for forty years. Additional activities that can improve a rural community's retention rate are:

Looking in the right place for providers is a good start. A community on the Western Slope, known for its fly-fishing, advertised in a fishing magazine for their new physician. Skiing or pheasant hunting magazines are other good bets for some Colorado communities.

- One of the major reasons physicians avoid rural practice is the long hours and call schedule. If the physician doesn't have adequate time off for vacation, continuing medical education, or simply catching up on sleep, burn out can result. A rural community must offer a reasonable call schedule. If this is not possible with the other providers in town, arrangements should be made with other providers in the region, a nearby residency program, or private company providing "locum tenens" coverage. The RRC can help explore these options in advance of the provider's arrival.
- Arranging in advance for time off and a "vacation package" for the provider and his/her family in their first year is a nice benefit to offer. Make sure the vacation is something the provider is likely to enjoy based on what you've learned about his/her interests and hobbies.
- Provider isolation is another reason practitioners avoid smaller, rural communities. Particularly with new graduates, they are accustomed to being surrounded by professional colleagues who can offer advice and consultation. Rural communities should develop linkages with larger sites for specialty consultation and continuing medical education (CME) opportunities. Opportunities may also exist at local community colleges for technology advances such as interactive television connections to larger metropolitan centers that would allow the local provider to connect to colleagues, training opportunities, and specialty consults.
- Continuing education opportunities are a way for your provider to connect with colleagues, learn about the most recent trends in medical care, and update their skills. Create generous opportunities for your provider to pursue such CME opportunities. It may also be useful to include some dollars in their compensation package to help them attend these CME events. In addition, it may be useful for the RRC to learn from the provider an area or areas where the provider would like to become more proficient. The RRC could then work with regional medical schools and other organizations to provide "mini-sabbaticals" for the provider to learn or enhance their skills (e.g. emergency medicine and trauma care, OB, special procedures such as colposcopy, flexible sigmoidoscopy, vasectomies, etc.)
- The transition from urban to rural can be difficult for providers who have just spent their last twelve years training in a metropolitan community. The RRC should spend time with the provider and his/her family touring the community. Don't forget to show the provider and his/her family where the grocery store, bank, gas station, etc. are located and remind them that, in a rural community, the grocery stores often close early in the evening.

- Involve your provider in local community decision-making about healthcare related issues. Invite them to sit on panels, to participate in grant projects and serve on committees. Although they will probably have limited time, most will appreciate the opportunity to lend their voice and ideas to the development of the healthcare system in the community.

Wray has an unusual retention tool for nurses. It's kind of a "dating service" approach. They recruited a couple single nurses from back east somewhere who just happened to marry local residents. They aren't saying if this was a planned strategy, but it sure seems to be working.

- Do you know why the last providers left? Conducting exit interviews of providers who are leaving is one of the best ways to design a more suitable practice environment the next time. Did they leave because the salary was inadequate or the call schedule too full? Did they leave because their child was picked on in school? These reasons call for very different interventions.
- Sometimes, the local community remembers to reach out to the newly recruited provider and family in the first month or so - the "honey moon" period, but then they are soon forgotten. No one checks to see that the spouse has found employment; that the family is settling into a local church, that the son is happy on the soccer team. While you certainly don't want to overwhelm the new family, making a conscious, coordinated effort to make sure they are happy in their new community, will help address potential problems before they get out of hand.

A town on the eastern plains created a huge "community birthday card" for their new provider at his one-year anniversary. They left the card in a community building so that everyone could add their good wishes and gratitude, then presented it to the provider during a barbecue in the city park.

Recruitment and Retention Services

Rural communities have a variety of resources to available them as they begin the recruitment process. One of these resources is the Colorado Provider Recruitment program (CPR). This program was created by the Colorado Rural Health Center to address workforce shortages in Colorado's rural communities.

CPR offers a wide range of recruitment and retention services with very reasonable fee structures including:

- Online job postings
- Candidate prescreening and referrals
- Linkages to a national recruitment network
- Information and workshops on recruitment and retention related topics
- Assistance developing recruitment and relation strategies

Please contact the Colorado Rural Health Center at (303) 832-7493 or cpr@coruralhealth.org to learn how CPR can help your community.

This report was prepared by the Colorado Rural Health Council. The Council served as the advocacy arm of the Colorado Rural Health Center from 2001 to 2005. Members of the Council identified, discussed, and prioritized emerging rural health issues. They then developed strategies for educating others about these issues and addressing them. The Council was composed of representatives from public and private organizations statewide, interested and involved in rural healthcare.