

Issue Paper: Creating a Rural Healthcare Workforce

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PROBLEM

Most of rural Colorado faces a chronic shortage of healthcare providers - physicians, dentists, nurses, ancillary staff, and others. The federal government designates areas that have a shortage of primary care practitioners as Health Professional Shortage Areas (HPSAs). In 2003, Colorado had 53 rural counties (As of 2007, there are 47). Of these, forty had HPSA designations over all or part of their county in 2002. Fifteen of rural counties have 2 or fewer physicians providing patient care for the entire county. There isn't a single dentist in 14 rural counties. The national nursing shortage crisis is even more critical in rural Colorado where the loss of one or two nurses can affect the very survival of a hospital or nursing home. The Colorado Rural Health Council* prepared this Issue Paper to offer proven techniques for training and education programs for creating providers who are ready, willing, and able to practice in Colorado's rural areas.

BACKGROUND

While numerous factors contribute to the shortage, this paper focuses on the role training programs can play in alleviating the workforce shortage. It offers recommendations for how training programs can produce healthcare providers who are ready, willing, and able to practice in Colorado's rural areas. While this paper offers general recommendations for all types of healthcare training programs, the Council has prepared additional papers that are applicable to specific categories and specialties of healthcare providers.

RECOMMENDATIONS

Students who have grown up in rural areas are most likely to return to a rural area to practice. Therefore, training programs are urged to:

- Give enrollment preference to applicants who have a rural background.
- Conduct primary outreach efforts to potential students from rural areas. This outreach should start as early as possible, even in elementary school where presentations from local healthcare providers, summer programs etc. could help develop mentorship relationships and nurture early interest in healthcare careers.
- A small percentage of students currently in training have an interest in rural practice. Such students should be identified and have their interest nurtured through various mechanisms including role modeling and mentoring by rural providers and by exposure to rural practice experiences and seminars during the regular curriculum.

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



Creating a Rural Healthcare Workforce (Continued)

- Most training programs are located in urban centers. Thus, students tend to prefer urban practice. Training programs should provide students with access to mentors who have or have had successful rural practice experience and who are prepared to identify and encourage students to pursue rural practice.
- The fear of professional isolation discourages some students interested in rural practice. Training programs should be aware of and develop affiliations with support mechanisms available to rural professionals such as through related professional societies, public and private agencies, and technologies that address isolation. Interdisciplinary training experiences that broaden the perception of "colleagues" should be offered.
- Rural practice settings can require skills sets not needed, or needed as often in urban settings, training programs should develop Specific rural tracks that provide this additional training or emphasize the skills needed in a rural setting.
- Resources are available to support providers in rural settings. Training programs should make sure students are aware of rural practice support resources - tax credits, loan repayment, scholarships, etc. - at the federal, state and local levels. These resources should be presented to students at multiple during their training to make sure they are aware of this assistance. Ongoing affiliations with the programs and communities offering these resources will assist with their use and promotion.
- Rural healthcare providers are often required to serve in community and institutional leadership roles in their community. Training programs should help prepare providers for these roles by offering training in grant writing, community development and capacity building, financial management, and personnel management. Information about securing assistance in these areas after placement should also be provided.
- Colorado's rural areas can offer a diversity of language, ethnicity, socioeconomics, and culture that can affect how their healthcare is sought, received or provided. Training programs should include curriculum, guidance, and experiences that prepare providers to work in culturally diverse environments.

*Colorado Rural Health 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.