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Eye On Health

Review & Commentary on Health Policy Issues for a Rural Perspective – October 1, 2021

Fighting COVID with Arm Tied Behind Back

From "Rural Hospitals Can't Find the Nurses They Need to Fight Covid" by Aallyah Wright, *PEW*, 9/1:

"On any given day, Mary Ellen Pratt, CEO of St. James Parish Hospital in rural Lutcher, Louisiana, doesn't know how she's going to staff the 25-bed hospital she manages."

"With the continued surge of the COVID-19 delta variant, she's had to redirect resources. Her small team, including managers, has doubled up on duties, shifts and hours to care for intensive care patients, she said."

" 'We're having to postpone elective surgeries that require hospitalizations because we can't take care of those patients in the hospital,' Pratt said. 'The staff working in outpatient services have been redeployed to bedside care.' "

"Since the beginning of the pandemic, Pratt said, she's lost nurses who decided to retire early. Across the country, thousands of hospitals are overwhelmed with critically ill patients, prompting many overburdened nurses to change careers or retire early. The shortages are particularly dire in rural areas, rural health experts say, because of the aging workforce and population, smaller salaries and intense workload."



"Rural hospital staff are walking the talk–'saving their unvaccinated neighbors as themselves.' "

"Rural health care leaders have begun offering sign-on bonuses and benefit packages to combat shortages during the pandemic. But they've found that even those perks aren't enough to keep or attract skilled health professionals. Instead, they say, **the focus needs to shift to boosting nursing school enrollment and getting workers into the field faster**."

" 'It's just very difficult to compete with some of the size and scale that bigger systems have,' Pratt said. For decades, hospitals and clinics have struggled to recruit and retain enough doctors, nurses and administrators. The problem is particularly acute in rural areas. The recent delta surge has worsened the shortage, pushing some hospitals into crisis."

"Some states and hospitals have requested assistance from the federal and state governments to deploy medical teams to alleviate the burden on local hospitals. Oregon Democratic Gov. Kate Brown announced Aug. 25 that up to 500 health care personnel would be placed in the central and southern regions of the state by way of Jogan Health Solutions, a medical staffing company. The state also signed a contract with staffing company AMN Healthcare to fill 60 additional nursing and clinical positions."

"Georgia and Kentucky requested help from their states' National Guard units. Mississippi is paying $8 million per week for 1,100 contract workers reported *Mississippi Today*. And Texas hired 2,500 out-of-

state medical professionals to reduce the strain on its hospitals."

"In August, the Louisiana Department of Health said that more than 50 hospitals requested staffing assistance, asking for more than 1,000 additional nurses. Gov. John Bel Edwards, a Democrat, warned that all staff shortages won't be filled, The Associated Press reported."



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"Whitney Zahnd, a health researcher and associate professor at the College of Public Health at the University of Iowa, voiced concern that rural hospitals may go unnoticed by government officials who are sending emergency assistance to larger hospitals with more patients."

" 'We're seeing that there's not enough ICU beds for COVID patients in some areas and that's a reflection for the need of nurses who have that expertise in intensive care,' Zahnd said, 'because it's not just about do these hospitals have physical beds, it's if you have nurses to staff the beds.' "

"But as federal aid dries up, other health care systems aren't able to provide extensive bonuses for recruitment."

"Her system's Paycheck Protection Program money has run out, Pratt said. 'That's been used. We've used all of our CARES Act money, so there aren't any additional sources right now.' "

"Lari Gooding, CEO of Allendale County Hospital in western South Carolina, echoed those concerns. Gooding said he has been working with staffing agencies to hire travel nurses, who are registered nurses employed by independent nursing staffing agencies. They work short-term stints at hospitals, clinics and other health care facilities to fill in during shortages."

" 'We've talked about incentives' Gooding said. 'I think the hard part is that a lot of these travel nurses have gone to agencies to work and the agencies are paying a lot more than we can afford, even with incentives. In the long term, it's not sustainable for us.' "

"There must be ways to attract nurses to practice in rural areas other than pay, she added, including easing student debt and making training more accessible."

"Recruitment efforts for rural nurses, she argued, should emphasize incentives beyond cash bonuses, such as the lower cost of living and a better quality of life relative to cities."

" 'There needs to be a work setting that makes people want to go work beyond the temporary influx of cash,' Zahnd said."

"Alan Morgan, CEO of the National Rural Health Association, said funding and salary increases could entice nurses to rural areas. Federal programs, Morgan added, such as the National Health Service Corps Loan Repayment Program that repays health professionals' student loans in exchange for working in shortage areas, help but are only a start."

" '**The immediate thing at hand is getting rural communities vaccinated and wearing masks because the burden being placed on clinical staff in a rural context is the crisis at hand**,' Morgan said."

"Practitioners, health leaders and experts tell *PEW* that the burnout from the pandemic workload, compound-

Eye On Health is the monthly newsletter of the Rural Wisconsin Health Cooperative. Begun in 1979, RWHC has as its **Mission** that rural Wisconsin communities will be the healthiest in America. Our **Vision** is that... RWHC is a strong and innovative cooperative of diversified rural hospitals... it is the "rural advocate of choice" for its Members... it develops and manages a variety of products and services... it assists Members to offer high quality, cost-effective healthcare… assists Members in partnerships to make their communities healthier… generates additional revenue by services to non-Members… ongoing use of strategic alliances in pursuit of its Vision. Tim Size <**timsize@rwhc.com**>, Editor, 880 Independence Lane, Sauk City, WI 53583

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ed by sometimes lower pay and misinformation about COVID-19 vaccines, makes it more challenging for rural staff to do their jobs. These factors also push some rural medical workers to find jobs elsewhere or leave the profession."

"In rural areas, the population is generally older and sicker and fewer people have health insurance than in urban areas, according to a National Rural Health Association policy brief. Physicians in cash-strapped rural hospitals are stretched thin, with longer hours, a larger workload and less pay."

"In June, the federal Health Resources and Services Administration reported that rural regions make up 60% of areas facing shortages of health professionals."

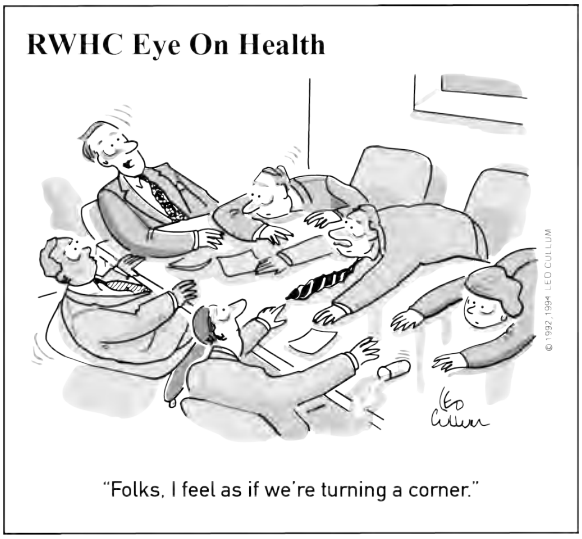
"By 2033, the U.S. could see a shortage of up to 130,000 physicians nationwide, according to a projection by the Association of American Medical Colleges."

"Increasing the health worker pipeline by investing in education, using resources such as federal repayment programs for nursing students and getting more people vaccinated would help close the gap, experts and health officials say."

"Having nursing students train in rural areas, using federal and state funds to pay for school and exposing younger students to the profession also would help strengthen the workforce over time, said Julie Marfell, a nursing practice expert and associate professor at the University of Kentucky College of Nursing."

"Pratt of Louisiana worries that the longer the pandemic carries on, the more the workforce pool will dry up for rural hospitals like hers."

" 'We don't have people in the pipeline that are ready to take on these roles,' Pratt said. 'And so **I fear that this shortage is going to be here for a while, unless we really start thinking about policies that will allow for more nursing school enrollment and faster ways of getting some of the staff out into the field because what we've got going right now is just not going to fill enough of the void**.' "



RWHC Briefs White House on Rural Health

Three senior staff at RWHC had the opportunity to meet on September 8 for an hour with several members of the White House Domestic Policy Council to share our perspective on rural health during the COVID era.

COVID has shown the strength, agility and resilience of our state's rural hospitals. We have made in-roads with communities that were previously unserved or underserved. Hospitals left the four walls of their buildings and provided care at drive-thrus, dairy breakfasts, and community events. They created new partnerships with public health, religious organizations, county fair boards, and other community groups that will outlast the pandemic.

But we face major challenges; highlights noted below with a full recap at: **https://bit.ly/3lBm5oD**

Rural Hospital COVID Era Challenges:

- Hospital staff are retiring and leaving bedside care at higher rates than before the pandemic.
- Hospital staff are exhausted and discouraged from being chronically short-staffed while needing to treat serious illness readily preventable.
- A growing number of hospitals are at or near capacity, with rural hospitals increasingly finding it difficult to transfer patients who need tertiary care.
- The nursing workforce shortage has gone from bad to worse for rural Wisconsin.

- Rural hospitals had increasing low or negative operating margins in 2020 while health insurers had unprecedented high profits. Some insurers have chosen this time to become extremely aggressive in undermining local rural hospitals.
- Access to rural EMS is going from bad to worse.
- The vitality of rural healthcare is dependent on its ability to encourage investments in local economic and community development that support local jobs, a sustainable payer mix, and combatting aging and shrinking demographic trends.

"Don't wait. Vaccinate." PSA



A new PSA (public service announcement) from the Stop the COVID Spread! Coalition has been released. The ad features, Pete, a former long-time high school football coach and Pete's doctor, Dr. Heyka, of Bellin Health. Both are from Oconto, WI.

"Don't wait. Vaccinate." **https://bit.ly/3DG9Wa6** was produced by Platform Communications and will run for four weeks on TV and radio, statewide in Wisconsin, thanks in part to the support from the CDC Foundation through RWHC. This strategy is being complemented by a digital media plan aiming to generate impressions with social media and targeted websites.

Please share this PSA as widely as you can.

For more information, visit the Stop the COVID Spread! Coalition website at https://bit.ly/3yvr8ev.

A Rural Hospital Partners for Childcare

The COVID-19 pandemic is rarely discussed in positive terms. However, many hospitals are building new relationships with external partners during the pandemic to create a community-centered approach to combatting the virus. Additionally, the pandemic has shed a light on health's integral role in economic well-being. Extending partnerships with healthcare institutions beyond the pandemic and integrating cross-sector approaches to development can result in healthier, more economically vibrant communities.

RWHC teamed up with the Wisconsin Economic Development Corporation's (WEDC) Downtown Development Program to showcase great examples of healthcare partnerships in communities across Wisconsin. Brian Stephens, CEO of RWHC member Door County Medical Center (DCMC), detailed DCMC's role in opening and sustaining Door Community Child Development Center. This childcare facility supports 26 families who are employed at the hospital while providing licensed care for up to 80 children in the Sturgeon Bay and greater Door County community. This partnership is a wonderful example of how hospitals can have a large impact in the communities they serve when they team up with community partners and take on pressing needs. Watch Brian Stephens explain this project and its value to DCMC in this 14 minute video at **https://bit.ly/3k5JTBe**.

"Five Keys to Rural Resilience"

From "Five Keys to Rural Resilience" by Kristen Fish-Peterson," *Redevelopment Resources*, 7/5:

"Growing up, I remember how the latest trends seemed to take extra long to show up in our small town. Particularly fashion, hairstyles, music, and even social issues related to crime, drugs, violence took their time to reach us. (We won't mention how long ago I was 'growing up' in these small towns.) At that time, it seemed like we were a bit insulated, which was good and bad. Time and technology have

sped up the adoption of fashion, hairstyles, and music in rural communities. They have an impact on how rural communities respond to economic challenges created by a variety of factors."

"Economic challenges such as businesses having to shut down due to COVID impacted every community regardless of size. Some may have felt it more than others, but every business felt the impact of business closures, supply chain shortages, statewide mask mandates, work from home, school closures, fear, illness, or having to quarantine. This leads me to question whether rural communities have a more significant challenge overcoming adversity. Are they more, or less resilient than larger metropolitan areas?"

"We would like to argue rural communities can be just as, if not more resilient than larger metros. However, there are a few key elements which must be present, and it is not easy work. Here are our five keys to resilience for rural communities."

Focus on Business Retention: "It cannot be overstated; business retention is the single most important task to ensure business success in your community. Economic development professionals must be in touch with the needs of businesses in your community. They need to be able to help find financial and technical assistance."

Foster a sense of community: "Recently we spoke with a municipal staff person who shared that their community did not lose one business as a result of the economic challenges created by the pandemic. He attributed business stability in his community to a connectedness and supportiveness that the community bestowed on its businesses. Residents rallied around the locally owned and operated shops and restaurants to ensure their success through the worst of times. In smaller communities, there may be a stronger loyalty to local businesses because people know each other better. They see each other in their shops, restaurants, church, schools, sporting events, and community events. There is high value in the connectedness which comes from living and operating a business in a small community."

Design a safety net: "Research suggests that rural areas can benefit from fostering a vibrant small business and entrepreneurship ecosystem. Rural small businesses generate wealth that stays in the community, builds local leadership, and even contributes to public health."

"Create and convene a supportive network of technical services to advise and coach startups. This network may include bankers, insurance agents, accountants, attorneys, marketing professionals, and others. Often Chambers of Commerce will pull together professionals/members who are open to assisting small business owners with questions about everything from tax issues, Human Resources, preferred vendors, and training opportunities."

"If you have space available for coworking or business incubation, promote it through all professional networks, appropriate social media channels, Rotary, Chamber events, and even in casual settings such as brew pubs or the local tavern."

Create networking opportunities for existing businesses: "Businesses who know of one another can rely on their peers when they need advice or a solution to a particular challenge. Even if no one has a solution, together they can brainstorm and manage on the fly. For example, during the pandemic when supply chains started breaking down for lack of inventory, knowing where their peer may have sourced a particular item a business needed, or submitting a bulk order together likely helped out a few businesses. Tackling an employee shortage by sharing talent sources or creating shared positions between companies with like needs is another creative way to benefit from networking with other businesses in the community. Cross-promotional opportunities can also be developed through business networking events."

Identify one business champion: "Whether your community has a dedicated economic development staff person, a Chamber of Commerce Executive Director, or those responsibilities go to the top elected official (Mayor or Village Administrator), there needs to be a designated business champion. If there is currently a vacancy in that role, consider hiring a third-party consultant in the interim. There is not a perfect model, but every community needs at least one person who can connect with, provide resources to, and advocate for the business community."

"These strategies are meant to be implemented consistently over time. Like economic and community development, resiliency is highly dependent on relationships. Knowing who to turn to in good times and challenging times provides confidence, peace and strength to local business owners and operators."

RWHC Celebrates Rural Health Ambassadors

The Rural Wisconsin Health Cooperative (RWHC) established the Rural Health Ambassador Award in 2004 to recognize employees at member hospitals who have gone above the call of duty in promoting their respective organizations, while making significant contributions to rural health. Nineteen individuals from across the state received awards for 2021.

I am fortunate to be the staff member that gets on the road to personally present most of these awards when requested by the member hospital. Usually the awards start being presented during Hospital Week in May and go through the end of summer. Obviously the last two years of these presentations have been much different, masked, socially-distant and the pandemic is still the elephant in the room.

The last two years have seen many of the awardees being heavily involved in their organization's response and outreach to their community in dealing with the COVID-19 pandemic. From a physician who was on a weekly podcast with the county public health director to educate the community to staff who quickly figured out how to staff-up testing sites. This year started with a Physician Assistant more than 30 years into practice that was slightly embarrassed by all the touching patient stories that were recalled during her presentation to a more recently minted emergency medicine physician in practice for four years at their member hospital, but stepped up to work through local politics and get an EMS partnership that worked for the community and surrounding area.





This last awardee was a little extra close to RWHC, as he interned with us during his time at the University of Wisconsin School of Medicine and Public Health's Wisconsin Academy of Rural Medicine. He also had gifted RWHC a marker stone that remains outside our Sauk City office to this day.

Let's all do our part for our Rural Health Ambassadors and heroes, please get vaccinated!

Leadership Insights: "Compassion"

The *Leadership Insights* series is by Jo Anne Preston, RWHC Workforce & Organizational Development Senior Manager. Back issues at **www.RWHC.com**.

Where the heck is my compassion? I polled myself and the result was: I'm tired and angry a lot lately. NPR confirmed that I'm not alone, reporting (from a poll much larger than my own) that August 2021, was one of the lowest points in our collective "morale" response to the pandemic. Hope lightened our step in early summer when COVID numbers were low. At my workplace we were nearly all vaccinated and being in the building felt almost like old times. Then Delta. And hurricanes. And the ever-growing political divisiveness. This topic picked itself to write about as I claw my way out of a gloomy morning. Perhaps you'll join me on this quest to lift up.

One of the best paths upward is acts of compassion, but on days like this it feels like my compassion is nowhere in sight. It helps to have some guideposts for remembering our way, to reduce the time and energy spent suffering.

Love your ugly. Compassion inward means that you allow yourself to feel what you feel instead of fighting it. "It is what it is," is just for this moment, not forever. My first draft of this is being written in a rather cranky and struggling space, but it is the time I

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LEADERSHIP

National Residency Program

In year six of this successful program in Wisconsin, RWHC is expanding nationally to engage new healthcare leaders in this one-year track of monthly education and skill development sessions. We cover a wide array of topics to ensure success for those newly promoted. Novice leaders–supervisors, managers, directors, team leads, charge nurses with less than one year of experience in a leadership role are ideal candidates. The commitment is for the full year of the program. **Registration information, all the program details and dates are at https://bit.ly/37fzcFd**. Class size is limited so please register by October 31. Questions? Contact Jo Anne Preston at **jpreston@rwhc.com.**

have set aside to write it. So I ask myself, "What is the best I can do right now?" and be ok with that. The best I can do tomorrow will probably be better, and maybe I'll edit this. But for this moment, this is what I've got. Simply accepting that has a calming effect.

Be selfish. I'm not talking here about taking time out for yourself to *escape* from your work, challenges or responsibilities. In a twist on selfishness, I am talking about **the selfish act of assuming goodness in others**. This compassionate assumption is for *you*. Brene Brown, in a talk on boundaries says: ***"to assume the best about people is almost an inherently selfish act because the life you change first is your own."*** <**https://bit.ly/3EeWv0X**>. Whoever you might put into the category of "those people," dwelling on what "they" do or think is neither improving your mood nor the situation. Choosing to recognize that others are doing the best they can guides us back to our higher selves, a place from which we can…

Connect. When I most want to retreat from the world might be the time I most need to reach out. NPR verified that I am not alone, so even writing this today and owning how hard it is to be hopeful is a way of connecting where I can. That helps.

RWHC Eye On Health



"I get the compassion thing but for me the antivaxers are one step too far."

Combat compassion fatigue with boundaries, not less compassion. To be clear, there is fatigue. Healthcare professionals have taken an absolute beating, and the trauma is real. But we can't be happy without compassion, so it matters that we know what does and does not fit in our lives. For you, does the exhausted feeling stem from being *too* compassionate?

If so, there may be boundaries that you need to set. Setting boundaries is a compassionate act. **When we do for others that which they can and need to do for themselves, that's not really compassion and it won't make anyone happy.**

Give 40 seconds. In patient experience studies, it turns out that an average of 40 seconds is about how long it takes in a doctor/patient interaction for the doctor to convey compassion. It is seconds well spent because there is a direct correlation to increasing quality and patient motivation for their self-care. I'll take the liberty of transferring this to leadership discussions as well. Give 40 seconds to someone who comes to you with a problem. Follow your listening with a compassionate response, e.g. *"That sounds really challenging. I hope you know I'm here to support you. Let's go over your plan together so we can explore how I can best do that."* A compassionate response from you is fertile ground for growth in those who come to you (and it's good for you too).

For more assistance, there is extensive research on this topic in the book, *Compassionomics: the Revolutionary Scientific Evidence that Caring Makes a Difference* by Stephen Trzeciak and Anthony Mazzarelli.

Contact Jo Anne Preston for individual or group coaching at ***jpreston@RWHC.com*** *or 608-644-3261. For info re the RWHC Leadership Series go to* **www.RWHC.com/Services.aspx** *or contact Carrie Ballweg at* ***cballweg@RWHC.com*** *or 608-643-2343.*

Upcoming RWHC Leadership Programs

10/13: **Refueling the Heart: Are You Running on Empty?**
10/28 & 29: **Preceptor Training Program** (2-day)
10/31: **National Leadership Residency** (1 yr) Virtual
11/19: **Manage Stress Before It Manages You** (4-hr) Virtual
12/1 & 8: **MindSET** (2-part) Virtual

Non-Members Welcome. Register & other events at: **www.RWHC.com/Services.aspx**

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