Brad Gibbens is the deputy director of the Center for Rural Health (CRH) at the University of North Dakota (UND) School of Medicine & Health Sciences (SMHS) and an assistant professor at the SMHS (with an appointment in the Department of Population Health).

During 2009-2010, he served as the interim co-director and in 2015 was the acting director of the CRH. His primary areas of responsibility are community development, community engagement techniques, program and grant development, qualitative research, program evaluation, and health policy. During his 34-year career with the CRH, he served as the deputy director (2011-present), associate director (1991-2011), program director and principal investigator (PI) for the State Office of Rural Health (SORH, 1992-2006), and program director and PI for the North Dakota Flex Program (1999-2006). He has been PI on numerous other grants, including the Centers for Disease Control and Prevention Community Transformation Cooperative Agreement, the W.K. Kellogg Foundation effort called Rural People Rural Policy, and the Margaret A. Cargill Philanthropies' Native Aging in Place Program. He has led the CRH's health policy area since about 1990.

Established in 1980, the CRH is one of the nation's most experienced rural health organizations. It was developed by the UND SMHS to be a focal point for rural health activity in North Dakota. It has developed a full complement of programs to assist researchers, educators, policymakers, healthcare providers and, most important, rural residents to address changing rural environments by identifying and researching rural health issues, analyzing health policy, strengthening local capabilities, developing community-based alternatives, and advocating for rural concerns. The CRH employs approximately 55 faculty and staff and operates six national programs, including two that are focused on Native American health.

Brad works closely with health policy, government affairs, community development (including assessments, strategic planning, and community engagement), program and grant development, and information dissemination activities. CRH programs that address community development include the SORH, Rural Hospital Flexibility, Small Hospital Improvement Program, Community Transformation Cooperative Agreement, Blue Cross Blue Shield of North Dakota Rural Health Grant Program, small program evaluation, and the Dakota Conference on Rural and Public Health. He currently is the lead on four CRH program evaluations and three external evaluations. He conducted qualitative research on three projects in the CRH's Health Resources and Services Administration-supported Rural Health Reform Policy Research Center.

Brad has provided 289 presentations (national, regional, state, and community) on such subjects as the future of rural health, the importance of the community in rural health, trends and opportunities in rural health, state rural health policy, understanding health policy, health reform and rural implications, the role of the health sector in community and economic development, grant development, and health planning. He has facilitated numerous strategic planning sessions and grant-writing workshops. Brad has worked with more than 130 rural communities in his 34-year career in North Dakota, South Dakota, Minnesota, Montana, Wyoming, Iowa, and Texas.

Brad has successfully secured more than \$20 million in grants through more than 80 grant awards as either the lead author and/or PI or through many collaborative efforts. He has provided leadership on rural health issues at a national and state level. He served as an alternate member to the North Dakota Health Task Force from 1990 to 1995. From 1993 to 2000, he served as a board member of the National Organization of State Offices of Rural Health (NOSORH) with one year as board treasurer. NOSORH represents all 50 state rural health offices, and Brad received their Recognition Award in 1996 and the Distinguished Service Award in 1999. He served on numerous NOSORH committees. He is an active member of the National Rural Health Association (NRHA), serving in their Statewide Health Resources Constituency Group for about 29 years. In 2010, 2015, and 2017, he was elected by his peers to serve on the NRHA Policy Committee and was selected by the NRHA president to serve on the Government Affairs Committee and the NRHA Medicaid Task Force for Health Reform. He served for six years on two policy advisory committees for Senator Heidi Heitkamp, including the senator's

Health Advisory Committee. From 2006-2012 he served on the Executive Committee (and the Evaluation Committee) of the Great Plains Rural Policy Network, comprised of representatives from six states (a network of the W. K. Kellogg Foundation's Rural People Rural Policy initiative). He is a currently a member of the North Dakota Steering Committee for the Flex Program, having served as chair from 1999-2005. He is the past chair of the National Flex Tracking Project Advisory Committee. He is also a past member of the Blue Cross Blue Shield of North Dakota Rural Health Grant Review Committee, which he had also chaired. For about 15 years he served as chair of the Dakota Conference on Rural and Public Health Planning Committee.

Brad is a native North Dakotan (fourth generation) who grew up on a durum wheat farm in Maza Township in Towner County near Cando. He has his master of public administration degree and a bachelor of science degree in public administration from UND.

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Primary Areas of Expertise: Health policy formulation and advocacy, qualitative research, program evaluation, needs assessment, grant writing, and community engagement techniques.

Projects:

- State Office of Rural Health Assist rural health organizations and communities in building and securing viable health systems and services through technical assistance, information dissemination, and health policy analysis.
- Medicare Rural Hospital Flexibility Grant Program -- Assist small rural hospitals to maintain access to health services for rural residents.
- CAH Quality Network, (FORH Network Development Grant), evaluator EMS/ED transfer and 1st Dose rule and implementation
- Native Aging in Place (Margaret A. Cargill Philanthropies), evaluator, QSP training and development with Spirit Lake Nation.
- National Resource Center on Native American Aging (Administration on Community Living –ACL) evaluation, tribal based surveys on aging used for Title VII, Service Locator, and other service development.
- National Indigenous Elder Justice Initiative (NIEJI) (ACL), evaluation, development of elder abuse services.