Rural Hospital Technical Assistance

Technical assistance is available through the ND Flex Program to all rural hospitals in the state. Assistance is geared toward helping small rural hospitals with planning and decision making in order to be prepared to meet the health needs of rural residents in North Dakota.

The following is a list of available assistance, free-of-charge, to North Dakota’s small rural hospitals. Activities are supported by grant dollars from the Medicare Rural Hospital Flexibility Program, Office of Rural Health Policy (ORHP), Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services.

1. **COMMUNITY HEALTH NEEDS ASSESSMENTS:**
   
   **Purpose** of conducting a community health needs assessment
   
   - Describe the health of local people
   - Identify use of local health care services
   - Identify community needs; and
   - Identify action needed to address the future delivery of health care in the defined area.

   **Benefits**
   
   - Access to timely input from the local community, providers, staff as well as secondary data related to health conditions, disease status, and more.
   - Information to guide decision making, marketing efforts, and the development of a strategic plan.
   - Community engagement and local involvement that informs the future of health care delivery.
   - Meet federal regulation requirements ([H.R. 3590](http://example.com)) of the Patient Protection and Affordable Care Act for charitable hospitals.

The survey tool was developed in 2010 and is administered by the Center for Rural Health, School of Medicine and Health Sciences at the University of North Dakota through its Medicare Rural Hospital Flexibility (Flex) Program. Targeted users of the survey are critical access hospitals. The survey tool is designed to:

- Meet individual hospital needs and may be further customized upon request
- Understand community awareness of services provided by the local health system
• Understand whether consumers are utilizing local services
• Solicit the need for additional/different services
• Solicit suggestions to improve the overall delivery of health care at the community level

Basic demographic information is requested of consumers in order to cross tabulate the results by gender, age, and others. The survey tool also asks questions related to health care barriers, local collaboration, major health concerns, and insurance status.

Three versions of the survey tool are utilized for different audiences (each is made available online and hard copy):
1. Health care consumers
2. Community leaders
3. Health care professionals

Survey administration
In order to make the assessment widely and publically available, assistance from the local health care facility is needed. A number of methods or strategies are available to administer the surveys. Actual methodologies chosen are decided by hospital administration and Flex program staff.

1. Consumers
   a. Publish the availability of the community health needs assessment (local newspaper, flyers, bulletin boards, television, etc.). Hard copy surveys may be distributed at local venues (e.g. library, chamber of commerce, cafes); posters/bookmarks marketing the online link may be distributed and posted (e.g. local grocery store, library, community and organizational newsletters).
   b. Hard copy surveys may be distributed to all patients having visited the local health facility over a certain period of time (e.g. two month timeframe) and provided with a postage-paid return envelope to the UND Center for Rural Health.
   c. The local health facility might ask community leaders (e.g. local pastors, public health nurses, chamber of commerce, business owners, school district) to distribute a certain number of hard copy surveys to their respective constituents and/or share the online link and encourage others to share their opinions.
   d. Hard copy surveys may be distributed through a mass mailing if reliable local addresses are available (e.g. mass mailing from health facility; post office distribution; other).

2. Community leaders
   a. The health facility is asked to provide the UND Center for Rural Health with a list of community leaders including their contact information. The list may
include up to 15 individuals who are viewed as community leaders across the varying community sectors (e.g. education, health, business, farming, faith). These individuals are contacted by the UND Center for Rural Health and asked to participate in a key informant interview which is held either in person or by phone. If community leaders do not have time to complete an interview they are asked to complete a hard copy survey.

3. **Health care professionals**
   a. The local health facility provides a list of employees who are each mailed a survey for their completion; a postage-paid return envelope if provided and surveys are returned to the UND Center for Rural Health. Another option is to attach a survey to each employee’s pay check or make survey available in a common area. In all cases completed surveys are mailed directly to the UND Center for Rural Health to assure confidentiality.
   b. Local health providers not employed by the health facility conducting the assessment are identified and asked to provide feedback via survey or key informant interview as described under “community leaders”.

**Getting Started**

Complete these steps to have the UND Center for Rural Health complete a community health needs assessment for your facility. You can also [print out this checklist](#).

1. Contact the ND Flex Program to advise of your interest and establish an agreeable timeline.
2. Review the survey options and provide adjustments as needed (including providing a list of local health services available through the facility, and adjusting other questions if desired). May develop additional questions that the facility wishes to include.
3. Finalize the survey together with the UND Center for Rural Health.
4. Decide on survey administration methodology.
5. Provide list of community leaders.
6. Provide list of staff and local providers.
7. Assist with local marketing of survey availability.

2. **STRATEGIC PLANNING:** Facilitation for planning purposes is available for small and large groups including board of directors, department managers, community members, network members and other. A nominal group process is generally used as a facilitation technique. The identification of strengths, weaknesses, opportunities and threats is addressed followed by the development of action plans.

*Benefits to the hospital:* The primary outcome is to develop consensus around a goal(s) and a set of actions to achieve the goal(s). It can assist administration in developing more clearly defined goals and action steps. It can be used to engage staff or the community as
a whole and key constituencies in particular. It can be an effective tool to not only set direction, but also a vehicle to implement action. It is also critically important for the hospital to be committed to the process. In other words, planning implies action, implementation, and carry-through. Achievable goals, clear and reasonable time lines, and identified individuals and/or groups to implement the actions necessary to reach the goals need to be adhered to in order to develop effective planning.

3. **INTERNAL PERSONNEL AUDITS:** This instrument is used with hospital personnel to evaluate their opinions and impressions on a ten item scale: work facilitation, concern for others, team building, decision making, motivation, communication, conflict management, image, doctor/staff relations, and compensation systems. The instrument specifically asks staff to rate each item of measure such as the amount of teamwork in the organization based on how they feel it actually is in the organization and then how they feel it should be in the facility. This way a “differential score” is created. The greater the difference between perceived reality and perceived ideal, the more intense the problem.

   *Benefits to the hospital:* While a community assessment looks at the external world shaping the hospital, the personnel audit does much the same thing for the internal work environment. This helps board of trustee members and administrators in understanding how staff perceive their work environment and how they think or believe it should be in the facility. It is an instrument to assist the administration in planning.

4. **PERFORMANCE IMPROVEMENT - BALANCED SCORECARD:** The Balanced Scorecard is a performance improvement tool that translates an organization’s mission and strategy into a comprehensive set of performance measures that provides the framework for a strategic measurement and management system. This integrated management system consists of three components: 1) strategic management system, 2) communication tool, and 3) measurement system. It focuses on a balance between finance, customers and community needs, internal processes, and learning and growth of staff. A flexible approach is used when assisting hospitals with the development and implementation of a performance improvement plan.

   *Benefits to the hospital:* The Balanced Scorecard is considered a unique approach, in contrast to other methods, because it links strategy with performance and goes beyond the traditional financial metrics in determining whether or not an organization has been successful. It now has a documented history of successful implementation in several industries including healthcare. Benefits of implementation have included:
   - Increased financial returns;
   - Greater employee alignment to overall goals;
   - Improved collaboration; and
   - Unrelenting focus on strategy.

5. **CAH QUALITY NETWORK:**

The Network serves as a common place for North Dakota’s critical access hospitals to share best practices, tools, and resources related to providing quality of care. A goal of
the Network is to improve information sharing, networking at the regional and state level among tertiary facilities and stakeholders to help prevent duplication of efforts.

6. **COMMUNITY FORUMS:** A forum can be a two-way street where information and perspective from the public is shared with local health decision makers and where information and perspective held by the hospital can be disseminated to the public. A community forum can be used as part of a strategic planning process and/or part of a community education process. As part of the former, it can be used to attain perspective and insight from the general public, to generate interest and support for proposed actions, and to locate volunteers. As part of a community education process, forums can be used to share information, to explain actions, and to clarify misinformation. A forum is an effective way to initiate a community dialog; however, it requires management with a defined focus and rules of conduct and order.

*Benefits to the Hospital:* A structured community forum is an effective way for a hospital to connect with its community. It conveys to the public that the hospital is interested in their opinions, their advice, and their ideas on important health care issues. Combined with a presentation from the Speaker’s Bureau, a community forum can create an effective dialogue. It also allows the hospital to exercise leadership, increase visibility, and facilitate constructive change.

7. **SPEAKERS BUREAU:** As part of a hospital board meeting, annual meeting, community forum, or other event, Center for Rural Health staff are prepared to come to your community and offer presentations. Any of the following subjects can be presented at board meetings, annual meetings, community forums, and special events. Each session can be presented as a standalone subject or discuss with us the possibility of “mixing and matching” ideas. Most subjects can be presented in 30 or 60 minute time frames. Some, such as grant writing, can be done as one, two, or three hour workshops. You may want to consider developing and hosting a workshop. For example, consider having your organization sponsor a Grant Writing Workshop for the community, county, and/or area. Your facility is seen as taking an active role in local community development. You can use it as a vehicle to develop closer relationships with other providers and/or organizations by having co-sponsorship.

**Presentations:**
- Grant Writing Process: You Want Me to Write a Grant?
- Rural Health at a Crossroads: Issues and Trends
- Recruitment and Retention of Health Professionals
- Healthcare Workforce Issues and Trends
- Health Professional Shortage Designation Process
- Community Development: The Importance of the Health Care Sector in Your Economy
- Networking and Collaboration: Keys to Rural Health System Survival
- Other
**Benefits to the Hospital:** As part of a planning and decision making process, the board, community members, and key constituencies can benefit from the infusion of ideas. Continuing adult education on health system subjects is important for the continued development of local leaders and an informed public.

8. **FOCUS GROUPS:** A focus group is a small group of individuals, selected to participate in a discussion in which specific questions have been developed. The focus group is a form of planning; however, it is more a technique to gain input, insight, and perceptions from a distinct group of consumers than it is a consensus building technique. Like a community assessment instrument, focus groups gather information and can be part of a proactive process. However, they can be used in a retroactive manner too, to gain more specific consumer impressions regarding issues that emerge from a community assessment. In this way, a focus group can add depth and clarity not present in a survey.

**Benefits to the Hospital:** Focus groups can be used to build community involvement. They can be used to isolate and target distinct community groups for greater probing and opinion clarification such as groups based on age (elderly, middle age, young adults), family status (adults with/without children of school age, adult children with elderly parents), employment (farmers/ranchers, local business owners, employees of small/large businesses, educators), geography (town with the hospital and towns in the service area of that hospital), services (users of current services or potential users of new services), or issues that emerge from the community survey. Focus groups can be an effective tool in an overall planning process.

9. **KEY INFORMANT INTERVIEWS:** Key informant interviews are another form of community assessment. Under this process, instead of a survey instrument being sent to a randomly identified sample of your community, the hospital selects “key” informants/leaders in the community or surrounding area for direct one-on-one interviews. Interviews are conducted by Center staff and an aggregate report, based on the interviews, is developed for the hospital. Approximately 15 to 25 people are interviewed. It is recommended that a cross section of key informants be identified from the following key community sectors: health care, business/agriculture, education, government, and religion.

**Benefits to the Hospital:** The hospital is able to listen to key constituents in the community and service area. What are their opinions on issues and solutions? Sometimes community people are more forthright with non-residents and are more willing to share opinions and insights. Key informant interviews are an effective means for the hospital to reach out to leaders in a non-threatening manner. Interviews can also serve a marketing purpose for the hospital because in effect, the hospital is saying to key leaders, “we think your opinions are important.”

10. **CAH CLEARINGHOUSE:** The North Dakota Healthcare Association is supported through the Flex Program to serve as a CAH Clearinghouse. Weekly information dissemination through the *Informer* highlights regulatory and policy issues for small rural hospitals in addition to other useful resources and information from the state and national
levels. The Center for Rural Health disseminates a statewide publication, the CRH-U, which includes relevant rural health information, in addition to Flex Updates that feature CAH specific information from the state and national levels. Each of the Flex Program partners are available to assist with information needs as well.

**Benefits to the Hospital:** The CAH Clearinghouse features common information related to program implementation, reimbursement, regulation, and policy; it will link providers to information sources throughout the country; and it can serve as a vehicle for providers to communicate with each other on CAH/Flex matters.

11. **SPECIALIZED ASSESSMENTS AND DEVELOPMENT:** Every need of area for assistance cannot be identified. However, the Flex Program staff will work with you to either develop new techniques or instruments to assist your hospital or to find other resources and experts. For example, if the current community assessment instrument does not address specific needs you have (e.g. housing or telemedicine), we can design new questions or locate information from other sources.

**Benefits to the Hospital:** As the program develops, new areas of assistance will be identified. The Flex Steering Committee will make every effort to help you find local, regional, or national resources to assist your facility.

12. **GRANT WRITING WORKSHOPS:** The UND Center for Rural Health conducts grant writing workshops that provide participants from organizations such as schools, faith-based organizations, non-profit agencies, community service groups and businesses, with the tools necessary to compete successfully for grant funds. The workshop covers methods for searching and applying for private and public grant funding, critical steps for planning and writing a grant proposal, and the most common components or sections for most grant applications. Providing this form of technical assistance is considered a function of the North Dakota State Office of Rural Health and therefore no costs are associated with staff time. Other costs such as refreshments and meeting room rental are the responsibility of the host.

**Workshop objectives involve:**

- Researching federal agencies and private foundations for funding
- Gaining organizational and community support
- Scrutinizing Requests for Proposals (RFPs), Grant Application Packets, instructions
- Thinking through different approaches or models to developing a proposal
- Writing effective proposals (review of common components and/or sections)
- Outlining effective proposals
- Outlining management plans
- Outlining evaluation plans
- Developing budgets
- Revising proposals and grant applications
- Providing helpful hints for successful grant writing
**Format:**
Workshops primarily involve lecture with problem-based learning. All participants receive a hard copy of the PowerPoint presentation and additional background information. Interested organizations serve as the local host and are responsible for local marketing and coordination. Customized workshops are available and may involve four to eight hour sessions.

**Contact:**
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For more information on the technical assistance listed above, and on other options please contact:

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