

External Facilitation and Technical Assistance in Improving the Clinical Relevance and Financial Viability of Rural Health Systems

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Introduction

The health care environments in many rural communities in the United States have been in crisis for more than a decade, yet community leaders are often not organized to strengthen health and human services that contribute to improved access and health status.

Objective

To examine the role of targeted external facilitation and technical assistance in improving the collaboration, clinical relevance, and financial viability of rural health systems.

Population Studied

12 rural communities who experienced a fragile, failing health care system and were provided with external facilitation and technical assistance during the study period.

Improving Clinical Relevance and Financial Viability of Rural Health Systems

Methods

A literature review, a survey of national best practices, and pilot interventions in three rural communities suggested a framework for building and sustaining rural health systems. Case studies were conducted in 12 rural communities. Community specific information, technical assistance, resources and outcomes were documented for each community in 1999 and 2000. Data were examined vertically (within each site) and horizontally (across sites) for themes and outcomes.

Results Obtained

When provided with technical assistance, all 12 rural communities were able to maintain or improve local collaboration.

Local collaboration was followed by financial gains in 9 out of 12 communities.

Local collaboration was followed by clinical gains in 3 out of 12 communities.

Conclusions

Community leaders in areas with fragile, failing health and health systems are often not organized to strengthen health and human services that contribute to improved access and health status.

External, neutral facilitation can help local leaders representing providers, public health and other health and human services, government, business, schools, churches, and philanthropies organize along a continuum from fragmented to integrated local systems.

Once the local collaboration reaches a certain level and the ability to learn, plan, and implement exists, local leaders are able to begin to strengthen the local system.

Local health system financial viability and clinical relevance are theoretical precursors to access and health status improvement.

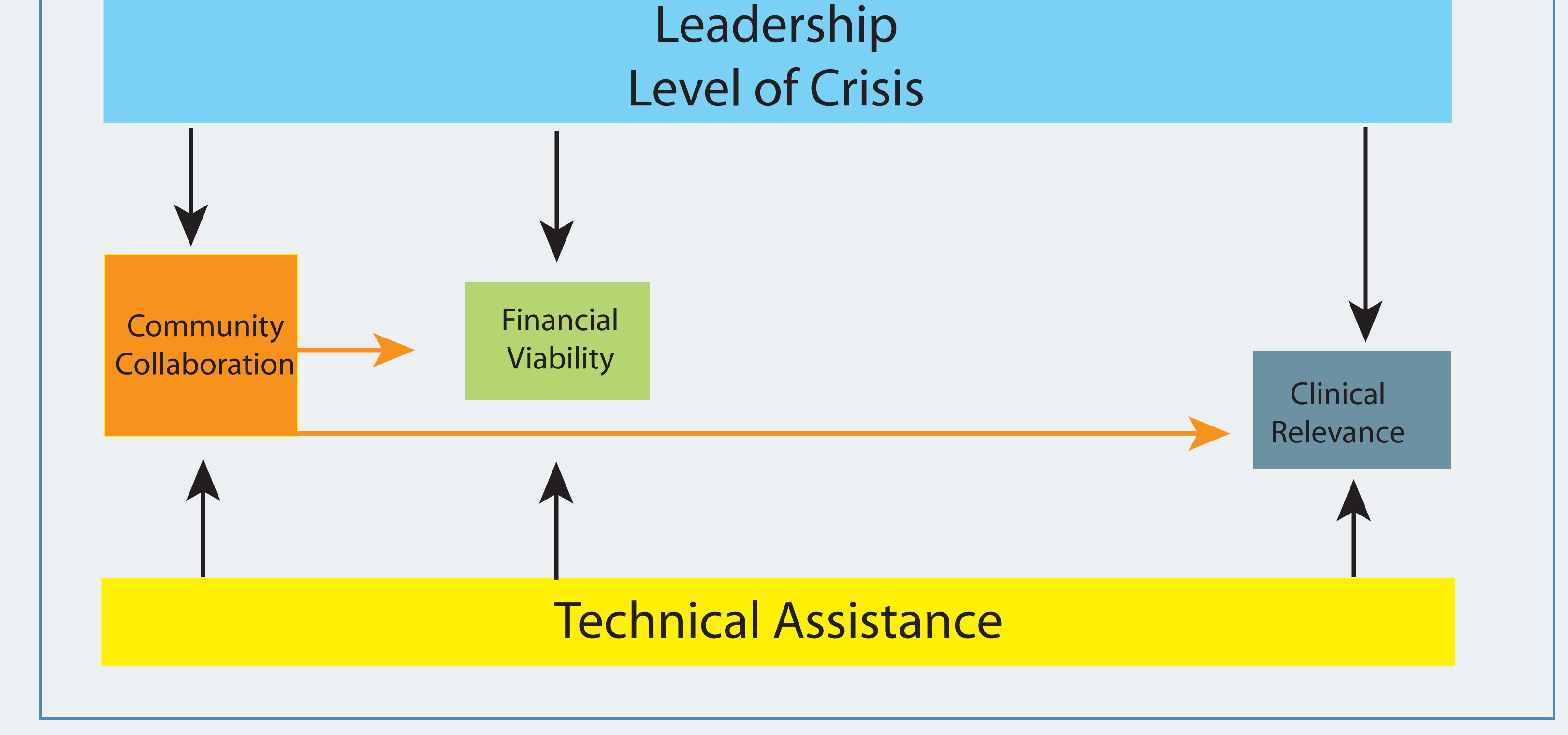
Implications for Policy or Practice

Health and health care are local. Local health systems provide the foundation on which the overall health care system is built.

The overall system consists of national, state, and local public and private programs, polices and resources.

Investment in strong local health care systems can make a difference and is an important investment in the health care system as a whole.

When these investments are made, external, neutral facilitation is necessary to ensure an environment of success.



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