



Factors to Market Your Rural Health Clinic

Identify & Communicate Strengths
Invest in Challenges

A publication by

3RNet



*National Rural Recruitment
and Retention Network*

Table of Contents

I	About 3RNet	4	IV	Economic Factors	18-19
II	About this Training	5		Perceived fiscal stability	20
III	Geographic Factors	6-7		Employment Status	21
	Access to larger community	8		Loan repayment	22
	Perception of community	9		Signing bonus/Moving allowance	23
	Climate	10		Income Guarantee	24
	Housing (availability and/or affordability)	11		Take home Pay	25
	Schools	12		Retention Payments	26
	Shopping and other services	13		Retirement package	27
	Recreational opportunities	14		Part-time opportunities	28
	Social bonding	15	V	Scope of Practice Factors	30-31
	Spousal satisfaction	16		Inpatient care	32
	Demographics /Payor mix	17		Obstetrical Care	33
				Nursing Home	34
				Emergency / Stabilization care	35
				Minor trauma (casting/suturing)	36
				Mental health	37
				Patient Centered Medical Home Skills	38
				PA and NP Collaboration	39
				Administration	40
				Teaching	41

VI	Medical Support Factors	42-43
	Perception of quality	44
	Stability of physician workforce	45
	Call/practice coverage	46
	PA and NP workforce	47
	Nursing workforce	48
	Lab/X-ray services	49
	Physician Sub-Specialist availability	50
	Mental Health Integrated Care Resources	51
	Dental Integrated Care Resources	52
	Pharmacy Integrated Care Resources	53
VII	Hospital and Community Support Factors	54-55
	Physical plant and equipment	56
	Plans for capital investment	57
	Electronic medical records (EMR)	58
	Internet access	59
	Telemedicine	60
	RHC leadership	61
	Physician recruitment efficacy	62
	Household member recruiting and onboarding	63
	New physician mentorship	64
	Community need/support of physician	65
VIII	Conclusion	66

About 3RNet

3RNet Mission

3RNet works to improve rural and underserved communities' access to quality health care through recruitment of physicians and other health care professionals, development of community based recruitment and retention activities, and national advocacy relative to rural and underserved health care workforce issues.

3RNet Vision

3RNet is the national leader for community-based health professional recruitment and retention, using interactive technologies and communication.

3RNet is a nonprofit organization focused on people. Our members connect professionals searching for jobs in rural or underserved areas with health care facilities.

3RNet is made up of member organizations such as:

- State Offices of Rural Health
- Primary Care Offices
- Area Health Education Centers
- University programs
- State-based non-profit organizations
- Primary Care Associations

These agencies help physicians and health professionals find your dream opportunity in a rural or underserved community.

As a non-profit agency, our interest is not in placing you somewhere for a commission. Our goal is to match your interests to a community's needs. You've worked hard for your profession – we believe finding a job you enjoy should be easy!

“3RNet works to improve rural and underserved communities' access to quality health care through recruitment of physicians and other health care providers”

About this Training

Where did these factors come from?

The factors used in this book were adapted from the Rural Health Clinic Apgar Questionnaire. This questionnaire is a validated research tool implemented and developed by Dr. Ed Baker, Boise State University and Dr. Dave Schmitz, Idaho Family Medicine Residency. The factors are categorized into five classes; geographic, economic, scope of practice, medical support, and facility/community support.

The advantages, challenges, and solutions presented in this book are not based on any specific research, but instead are drawn from 3RNet's 20 years of practical experience in rural recruitment and retention. To learn more about the Community Apgar Program, contact Dr. Baker at ebaker@boisestate.edu or Dr. Schmitz at dave.Schmitz@FMRIIdaho.org.



Dr. Ed Baker



Dr. Dave Schmitz

Training Objectives

- Introduce key factors in recruitment and retention for Rural Health Clinics.
- Describe key factors and why they are important.
- Identify how communities/facilities may have recruiting advantages related to each key factor.
- Explore how communities/facilities may have recruiting challenges related to each key factor.
- Discuss possible solutions to recruiting challenges for each key factor.

How to Use This Training

This training is meant to help recruitment stakeholders explore the key factors of recruitment to Rural Health Clinics. By exploring each factor and conceptualizing how that factor applies to your community and facility, you will be better able to identify and communicate strengths, and invest in challenges.

Section III



Geographic Factors

Geographic Factors

For any career, where you live is paramount to almost every aspect of your day-to-day life. Driving across town to eat at a specific restaurant or visit a grocery store is much different than driving 90 miles to access those same services. The access level to shopping, dining, cultural, entertainment, and religious opportunities can be a major consideration for many health care professionals who are used to easy access to these amenities.

Similarly, family support is a key consideration of the geographic factors. Does your community have opportunities for the spouse to be employed (if needed)? If the health professional has children, is there access to quality schools and activities such as ballet, piano lessons, or others? Being knowledgeable about what geographical advantages and challenges your community has is a top priority when communicating to candidates.

How geographic factors relate to different health professional candidates

- Strength in these factors may be more important to candidates with a spouse or children as opposed to a candidate that has adult children or no significant other.
- Strength in these factors may be more important to candidates who have been raised in areas where access to services was never an issue (urban areas) as opposed to candidates who grew up in areas where certain services may not have been readily available.
- Strength in certain geographic factors (recreation opportunities, climate) may strongly appeal to candidates who are interested in outdoor activities like hunting, fishing, snowmobiling, or others.

Geographic Factors

1. Access to larger community
2. Perception of community
3. Climate
4. Housing (availability and/or affordability)
5. Schools
6. Shopping and other services
7. Recreational opportunities
8. Social bonding
9. Spousal satisfaction
10. Demographics /Payor mix



Access to Larger Community

What does this factor mean?

The ability to access or ease of access to a larger community.

Why is it important?

Accessing a larger community often means access to specialized dining, entertainment, shopping, cultural, and religious opportunities.

Example: a candidate likes to regularly attend professional sporting events.

Potential Facility/Community Advantages

If your community has easy access or is a short commute to a large community, candidates may see an advantage of being able to benefit from a small community but still have easy access to the conveniences of a large community.

Example: a candidate is looking for loan repayment and outdoor opportunities which your community offers, and once a week they can easily travel 40 miles to a large city for any conveniences they may need.

Potential Facility/Community Challenges

If your community doesn't have easy access or is a long commute to a large community, candidates may see a challenge of getting specialized services.

Example: a candidate enjoys Asian cuisine, but the closest oriental restaurant or grocer is a two hour drive (which in winter becomes even tougher).

Ideas for Solutions to Challenges

Offer candidate every other Friday/Saturday/Sunday off so they can take an extended trip to the larger community.

Offer or leverage existing shared transportation options (bus, van, etc...) so candidates and their families can enjoy the larger community without having to commute themselves.

Sponsor or promote online access to specialized services (Amazon Prime, delivered specialty food, etcetera).

Have cultural night events where specialty cuisine and culture is sampled (a local university or college may be a good partner).

Summary

Know what your community has easy access to and if the candidate needs something that your community lacks, find creative solutions within your control that make it easier for them to obtain.

Perception of Community

What does this factor mean?

Perception of the community overall by someone not from the community.

Why is it important?

Rural communities are often thought of by outsiders as isolated, remote, and rundown. If a candidate's first impression of your community reinforces this, it can be hard to overcome.

Candidates get their first impression of your community in a number of ways. Often times it starts out online through your website, or a website promoting your community. Another crucial time is the candidate's first visit to town, and first glimpse of "Main Street".

Example: Candidate finds your job posting on your website, becomes interested, and explores some of your links to other community websites. Candidate likes what they see, and decides to drive through town on the weekend with their spouse/partner.

Potential Facility/Community Advantages

If your community has a fresh, strong online presence and your facility uses vibrant marketing materials (flyers, job postings, video) candidates may have an initial positive reaction to your community.

If your community is well maintained, including houses, businesses, and "Main Street" a candidate may see that as an advantage.

Example: Candidate and their spouse/partner like the idea of living in a smaller town, but are concerned about feeling isolated. They search online and find very attractive and up-to-date information. Shortly after, the candidate schedules an onsite interview, and is impressed by the upkeep and friendliness of your community.

Potential Facility/Community Challenges

If your community has outdated online and/or marketing material, a candidate may have a negative first impression of your community.

If your community has run down housing, or empty buildings on "Main Street" a candidate may have a negative first impression to your community.

Example: Candidate sees your job posting and searching for your community online to see what comes up. The first result is a website built for tourism in your community that hasn't been updated in 10 years. Candidate has a bad first impression and does not contact you.

Ideas for Solutions to Challenges

Keep your marketing material (pictures, videos, print) up-to-date and engaging.

Work with stakeholders in your community to ensure your tourism (or other) websites are updated, and your town looks well maintained.

Summary

Negative first impressions are tough to overcome. Many candidates will first connect with your community online or through your marketing material; keep it fresh and eye-catching.

Climate



What does this factor mean?

The weather in your community.

Why is it important?

Weather, especially in cold areas, is often the first thing that comes to mind about a particular region.

Candidates who haven't lived in your climate before may be apprehensive about doing certain tasks (driving in snow, etc...)

Example: You fly a very solid candidate in for an onsite interview. They get off the plane wearing a light jacket, and it is 10 degrees below zero and windy out.

Potential Facility/Community Advantages

If your community has a moderate climate, candidates may view this as an advantage.

If you are recruiting a candidate that comes from a similar climate as your community, the candidate may view that as an advantage.

Example: You are recruiting a candidate who grew up in Minnesota, and your community (while cold) has great snowmobiling, hockey, and ice fishing.

Potential Facility/Community Challenges

If your community has an extreme climate, especially if it's cold, attracting certain candidates may be a challenge.

Example: Your average temperature in winter is right around 10 degrees. Candidates often are interested in the other aspects of your community, but feel it is too cold.

Ideas for Solutions to Challenges

Promote conveniences that help mitigate the weather; for example, heated garages, remote car starters, in-ground pools, engine block heaters, etc...

Offer candidates a reserved parking spot right next to the door of your facility.

Work with the local snow plow service to see if your provider's streets can be plowed first, especially when they are on call. Promote all the different seasons you have, and the positive factors about your climate.

Don't constantly reference the climate when a candidate is visiting. If you don't make a big deal out of it, it's likely the candidate won't either.

Compare extremes; Sometimes in Minnesota it is too cold to go outside during the winter, but sometimes in Arizona it is too hot to go outside during the summer.

Summary

Climate is a factor completely outside your control. The best you can do is communicate the positive aspects of your climate, and discuss and mitigate the downsides (heated garage, car starters, private parking, etc...).

Housing (availability and/or affordability)

What does this factor mean?

The availability and affordability of desirable housing as viewed by physician, spouses or family.

Why is it important?

Access to affordable and desirable housing is a priority for most physicians, spouses and families.

Affordable housing is often more available in rural communities as opposed to their urban counterparts.

Example: A candidate with a family asks about your housing market.

Potential Facility/Community Advantages

If your community tends to have a lower cost of living, allowing the physician to get a more desirable home for less money than they can in other areas, this may be viewed as an advantage.

If a candidate doesn't want a long commute, and there are desirable housing options located near your facility, this may be viewed as an advantage.

Example: A candidate has narrowed down their search to your clinic, and an urban based hospital. Working with a realtor, you locate and show the candidate an available home that sits on 20 acres and is 15 minutes from your facility. The candidate likes the idea of a hobby farm, and signs with your clinic.

Potential Facility/Community Challenges

If your community, has a lack of available housing, or limited options for new construction, this may be viewed as a challenge.

If your community has limited affordable housing options, the candidate may view this as a challenge.

Example: Candidate is looking to relocate to your community, but due to a high rate of seasonal oil workers, is unable to find adequate housing.

Ideas for Solutions to Challenges

Establish relationships with local realtors, bankers and Chamber of Commerce to assist with the housing market in your area.

During the on-site visit be sure to leave time in the schedule for the candidate to view homes and neighborhoods of interest with a realtor.

Seek housing arrangements with local partners, such as local hospitals or businesses that have housing they use for their own employees.

Summary

Everyone needs somewhere to live and housing/land are often more available in rural markets as opposed to their urban counterparts. Know what the candidate and their family are looking for, work with community members, and focus on selling the quality of life your community offers.

Schools

What does this factor mean?

Adequacy of schools for the provider's child(ren).

Why is it important?

Healthcare professionals are very well educated and typically place a high value on the importance of education for their children.

Small, rural communities tend to take a lot of pride in their schools, sports, clubs, etc.

Schools are often a factor where rural communities have a competitive edge over urban.

Example: Candidate with three school-aged children is interested in your community and asks you about the quality of the school system.

Potential Facility/Community Advantages

If your community proudly supports their schools, especially if you only have one school for each segment (primary, middle, high school) candidates may see this as an advantage.

If your community has small class sizes, and all kids can participate in extra circular activities like sports and music, the candidate may view this as an advantage.

Example: During their onsite visit, the candidate notices many signs and banners prominently displayed around town supporting the local high school athletic teams.

Example: During the onsite visit, you are able to show the candidate data on the schools in regards to performance and class size, and schedule a school tour with the local principal.

Potential Facility/Community Challenges

If your community schools are old and need physical updating, or if your schools have trouble with large class sizes or poor teachers, the candidate may view this as a challenge.

If your community schools don't offer an activity the candidate's child has previously participated in, the candidate may view this as a challenge.

Example: Candidate has children that play hockey and are in advanced classes, but your schools offer neither.

Example: Candidate tours local school and sees old building and poor nutritional programs.

Ideas for Solutions to Challenges

Emphasize community support of schools, activities available, and small class sizes.

Offer to help the candidate get children enrolled in schools, and have information on daycare options.

If a challenge is present (e.g. school needs updating, or no hockey team) engage the candidate and spouse/partner in the possibility that they could help address the need.

Check out distance learning programs in your state that may be an option for advanced classes.

Summary

Children are often one of the top considerations for candidates considering rural living. Schools are a factor that rural communities often take tremendous pride in and can evoke a sense of belonging for the candidate and their family into the community.

Shopping and Other Services

What does this factor mean?

Adequacy of local access to shopping or services for provider and family.

Why is it important?

Rural communities can often lack specialized services and shopping. A candidate's perception of this shortage can be a big hurdle to overcome.

Healthcare candidates typically have significant buying power, and having options for them to make purchases can be viewed as a major benefit to quality of life.

Example: Candidate is being offered a \$240,000 contract right out of residency. Your community has two gas stations, three bars, a church, and a diner.

Potential Facility/Community Advantages

If your community has conveniences such as specialized dining options, quality grocery stores, department stores, or an "all in one" shop, a candidate may view this as an advantage.

Example: Candidate has lived in an urban center for the last three years during residency. They believe going to a rural community means having no access to shopping. During your initial conversations, you highlight your community's supper club, golf course, and shopping.

Example: Your community has a local Chinese restaurant, a few fast food options, two grocery stores, and an "all in one" department store.

Potential Facility/Community Challenges

If your community lacks access to shopping, dining, and other services, a candidate may view this as a challenge.

Example: Candidate is used to being able to get everything they need within a ten minute drive, but most people in your community make weekly trips to a city 40 miles away to do their shopping.

Ideas for Solutions to Challenges

Promote online shopping options (eBay, Amazon Prime, etc...). Offer a weekly shuttle for providers and/or their families to the nearest shopping center.

Be flexible with time off and travel for continuing education credits.

If a candidate has special dietary needs or wants, work with the local grocery stores to see if they could get the items in stock.

Summary

Access to shopping and services can be a big challenge for rural communities. However, with online shopping and other options, almost anything can be found or delivered to a rural community. When speaking with candidates, focus on what is available locally, regionally, and online.



Recreational Opportunities

What does this factor mean?

Opportunities for local, enjoyable, non-work time activities.

Why is it important?

Candidates have hobbies and with their dedicated work schedule, having easy access to their hobbies can provide enjoyment while reducing stress and burnout.

Some recreational opportunities are more readily available in rural areas, giving you a competitive advantage with some candidates over urban areas.

Example: Candidate grew up on a farm where wildlife was always abundant along with opportunities to participate in outdoor activities.

Potential Facility/Community Advantages

If your community has access to the type of recreational opportunities the candidate prefers, that candidate may view that as an advantage.

If you offer adequate time off so a candidate can participate in recreational activities, the candidate may view that as an advantage.

Example: Candidate is choosing between your rural location and a more urban one. The candidate loves the outdoors, and your community has access to great hunting, fishing, and snowmobiling, all of which would require significant travel from the urban location.

Example: Candidate enjoys walking/running and maintaining a healthy lifestyle. Your community offers extremely safe roadways for walking/running, great parks, local produce, and the ability for the candidate to have a garden.

Potential Facility/Community Challenges

If your community lacks recreational opportunities the candidate enjoys or is used to, the candidate may view that as a challenge.

If your community has the recreational opportunities the candidate prefers, but the candidate is unable to access them, the candidate may view this as a challenge.

Example: Candidate enjoys yoga, and your community doesn't have a yoga studio.

Example: Candidate enjoys yoga, and your community has a yoga studio, but it is only open during the hours the candidate is working.

Ideas for Solutions to Challenges

Target candidates interested in recreational opportunities your community offers by placing an ad in an outdoors or hunting/fishing magazine.

Connect and expose candidates to recreational opportunities your community does offer.

Use technology to connect candidate to recreational opportunities that are not available in your community.

Summary

Access to recreational opportunities, especially outdoor activities, is often a strength for rural communities but candidates need the time and desire to access them.

Social Bonding

What does this factor mean?

Opportunities or ease of social networking and community relationships for physicians and household members.

Why is it important?

Rural communities are often very tight-knit. Health care professionals typically have high stress jobs and socializing outside of work can be a healthy, rewarding way to relieve stress.

When candidates start to feel like they belong in the community, or are invested in the community, this may lead to greater career stability and retention.

Example: A candidate's schedule would require 40-60 hour work weeks, but your facility is able to allow the candidate some flexibility to attend weekly meetings of a local nonprofit which the candidate is extremely active in.

Potential Facility/Community Advantages

If your community has a strong social network and activities that relate to the candidate, the candidate may be able to easily integrate into the community and view that as an advantage.

If your community can identify and recruit candidates who are local, a strong social connection and familiarity may already exist.

Example: A candidate has a history and interest in music, and through local connections, you are able to help them find a volunteer music teaching position at the local high school.

Potential Facility/Community Challenges

If the candidate you are recruiting is from a different culture than the predominate culture in your community, it may be tougher to fully integrate that candidate into the community. If you're recruiting to a large rural community it may be tougher to get candidates fully integrated and invested in the community as there are more people and layers of activity.

Example: Your community is recruiting an International Medical Graduate from India, but your community lacks infrastructure to support the candidate's social interests.

Ideas for Solutions to Challenges

Connect the candidate with social contacts during their onsite visit. Knowing a couple friendly faces when coming to a new community can go a long way.

If you are recruiting a candidate who may have trouble integrating into your community, especially an International Medical Graduate, try to recruit two or more candidates who have similar interests or come from similar areas.

Visit with local high school and college students to develop a workforce pipeline.

Host monthly socializing events, and connect the candidate with local groups (Young Professionals, Knights of Columbus, etc...).

Summary

Everybody needs a social outlet outside of work. By knowing your candidates' interests and background, you can help them make community connections that benefit everyone.

Spousal/Partner Satisfaction (education, work, general)

What does this factor mean?

Overall satisfaction of the spouse/partner in regard to local community living such as education, work, and in general.

Why is it important?

If a candidate has a spouse/partner, you are recruiting both of them to your community.

When considering possible practice locations, candidates typically heavily rely on input from their spouse/partner.

Rural communities can especially have difficulty with spousal satisfaction. In an urban area, there typically are a lot more options for the spouse/partner.

Example: Candidate is interested in practicing rural. Spouse/Partner grew up in a metropolitan area and has a PhD in English.

Potential Facility/Community Advantages

If your community has many employment, education, and recreational opportunities for a candidate's spouse/partner, the candidate may view that as an advantage.

Example: Candidate is interested in your community, and you are able to showcase desirable housing, employment, and recreational options to the spouse/partner.

Potential Facility/Community Challenges

If your community lacks employment, education, and recreational opportunities for a candidate's spouse/partner, the candidate may view that as a challenge.

Example: Candidate is interested in your community, but spouse/partner works in marketing, and your community doesn't have any marketing firms.

Example: Candidate is interested in your community, spouse/partner doesn't need employment, but feels like he/she will be isolated and lonely while candidate is working.

Ideas for Solutions to Challenges

Treat recruitment of the spouse/partner as importantly as recruitment of the candidate.

Find ways to get the spouse/partner engaged in the community (volunteering, socializing).

If your community lacks employment options for the spouse, find out if jobs are available regionally or via telecommute. Have monthly or biweekly gatherings for provider's spouses/partners.

Summary

Spousal/Partner satisfaction is one of the most important factors when recruiting a candidate. Find out what the spouse/partner needs, and sell your community as much to the spouse/partner, as you do to the candidate (and make sure the spouse/partner gets involved in the community!).

Demographics/Payor Mix

What does this factor mean?

The demographics of patients in the community including age, gender, race or other.

Why is it important?

Access to a diverse demographic of patients, or conversely, access to a specific niche of patients may be integral to how the candidate wishes to practice.

Example: Candidate is trained to Family Medicine and enjoys seeing patients ranging in age from pediatrics to geriatrics.

Potential Facility/Community Advantages

If your community has a diverse demographic patient mix that covers many groups, candidates interested in working with a variety of types of patients may view that as an advantage.

Conversely, if your community has predominately one demographic, a candidate who specially wants to treat that demographic may view this as an advantage.

Example: your community has a significant Native American population and you are interviewing a candidate who has previously volunteered abroad and published research on the health disparities Native Americans face.

Potential Facility/Community Challenges

If your community has a small demographic patient base, candidates who are interested in working with a variety of patients may view that as a challenge.

If your community has a large demographic patient base that the candidate doesn't feel adequate to care for, this may be viewed as a challenge.

Example: your community has a mostly elderly population and the candidate is interested in caring for a variety of age groups (specifically enjoys pediatrics).

Ideas for Solutions to Challenges

Be upfront with information related to patient demographics. This will help negate any problems later.

Target providers who may have a specialized interest in your demographic group.

If your patient base isn't diverse enough, connect with a partnering facility and allow your candidate to practice there a few times a month.

Have support available or offer training if a new candidate is uncomfortable with treating a certain demographic (example – advanced training in caring for elderly patients).

Summary

Some candidates have an interest in having access to certain demographics of patients. Know your patient demographics, and be prepared to relate them to the candidate and their practice.

Section IV



Economic Factors

Economic Factors

How much money a provider makes is likely one of the most important things they will consider when making a decision on where to practice. However, traditional take home pay isn't the only important economic factor. Some providers may be willing to accept less pay if it means more scheduling flexibility. For some providers, loan repayment or a signing bonus may be crucial. Knowing what you have to offer and what the candidate is looking for is critical when it comes to talking dollars and cents.

How economic factors relate to different health professional candidates

- Strength in these factors may be more important to candidates with a stay at home spouse or children as opposed to a candidate that has adult children or no significant other.
- Strength in these factors may be more important to candidates that are right out of training as they haven't had a lifetime of earning, and may have high student loan debt.
- Strength in certain economic factors (loan repayment, income guarantee) may give rural communities a competitive advantage over urban counterparts.

Economic Factors

1. Perceived fiscal stability
2. Employment Status
3. Loan repayment
4. Signing bonus/Moving allowance
5. Income Guarantee
6. Take home Pay
7. Retention Payments
8. Retirement package
9. Part-time opportunities
10. Competition

Perceived Fiscal Stability

What does this factor mean?

The perceived financial stability of the hiring RHC facility.

Why is it important?

Candidates want to feel secure in the future of the facility they are working for.

Candidates may have a preconceived notion about rural health clinics, that their funding and revenue aren't as stable as other healthcare entities.

Example: Candidate is interested in your community. The candidate has an offer from you and the local hospital, and asks fiscal stability.

Potential Facility/Community Advantages

If your facility actively seeks available funding streams, and has a track record of securing adequate funding, this may be viewed as an advantage.

If your facility has open and direct communication about the facility's fiscal stability, this may be viewed as advantage.

Example: Candidate asks about the potential of your grant funding being continued. You show the candidate non-confidential financial information that shows the breakdown your revenue and explains the stability of the facility.

Potential Facility/Community Challenges

If you are unable to speak to your facility's financial wellbeing, this may be viewed as a challenge.

If you are encouraged to be indirect or hide financial information about the organization's fiscal stability from potential candidates, this may be viewed as a challenge.

Example: Candidate reads about federal funding for rural health clinics being decreased and asks about it during the interview. Your CFO won't allow you to discuss financial matters with anyone outside the facility. The candidate's concerns are not addressed and they do not take the offer.

Ideas for Solutions to Challenges

Share relevant, non-confidential, financial data in easy digested formats such as pie charts or graphs so the candidate can understand funding and income in relevance to the overall financial health of the organization.

Outline in detail the candidate's responsibility in contributing to the fiscal stability of the facility.

Share information about the philosophy and importance of rural health clinics, and the rationale of why they are funded.

Summary

Rural health clinics may receive some grant funding. Don't gloss over this fact or other financial information but be transparent when discussing the challenges and advantages of the financial health of the organization.



Employment Status

What does this factor mean?

Whether or not a desire for employee status is available or encouraged or required.

Why is it important?

The difference in employment models (employed, independent contractor, etc...) usually require different levels of risk for candidates.

Candidates that are risk adverse may prefer the security of employment as they are not experienced with how to operate a practice.

Example: Recently graduated candidate has very little experience or exposure to the business of operating a practice. Candidate is only looking for jobs where employed status is available.

Potential Facility/Community Advantages

If your facility offers employed status for candidates that desire, candidates may view that as an advantage.

If you facility is flexible with employment models depending on the candidate's desire, candidates may view that as an advantage.

Example: Candidate is looking to retire from owning their own practice, and is looking for employed status in your facility for the last few years of their career.

Potential Facility/Community Challenges

If your facility doesn't have an employed option for candidates that desire, candidates may view that as a challenge.

Example: Risk adverse candidate is interested in relocating to your facility, but your employment model would require more risk than the candidate is looking for.

Ideas for Solutions to Challenges

Review state and national trends for preferred employment models. Typically, younger candidates seem to be preferring a model where they are contracted employees.

Talk to candidates about their preferred model and be flexible and open to candidate ideas/requests.

Summary

In previous generations, physicians and other healthcare professionals often owned their own practice. With the way healthcare has evolved this model has shifted to a preference of different models; typically with the greatest desire for employed status.



Loan Repayment

What does this factor mean?

Whether or not loan repayment is available for qualifying physician.

Why is it important?

Loan repayment is often one of the first benefits candidates think of when they consider practicing in a rural area.

Many candidates come out of training with a huge burden of debt.

Federal and state programs exist that communities may be able to leverage for little or no cost.

Example: Candidate has \$200,000 of student loan debt upon finishing medical school and is looking for assistance in paying them off.

Potential Facility/Community Advantages

If your facility is eligible for state and/or federal loan repayment options, candidates may view this as an advantage.

If your facility offers its own student loan repayment program, candidates may view this as an advantage.

If you have staff within your facility that are knowledgeable about state and federal loan repayment programs, candidates may view this as a strength.

Example: Candidate is interested in loan repayment help, but doesn't know much about it. You are able to determine and explain to the candidate that they would be eligible to apply for loan repayment through a state program while working in your community.

Potential Facility/Community Challenges

If your facility isn't eligible for state/federal loan repayment options and doesn't offer its own program, candidates may view this as a challenge.

Example: Candidate is interested in working in a rural area, partly because of loan repayment programs, but your facility hasn't been approved as an eligible site for loan repayment.

Ideas for Solutions to Challenges

Become knowledgeable about loan repayment options by reviewing 3RNet's guide to loan repayment options for healthcare professionals.

Contact your state Primary Care Office to determine your Health Professional Shortage Area (HPSA) score, and if you are (or could be) eligible for state/federal programs.

Explain to candidates their total compensation from your facility. If you offer a higher salary or retention bonuses, you may be competitive even without loan repayment.

Summary

Loan repayment is often a tremendous benefit for rural communities. Know what you quality for by developing a good relationship with your state Primary Care Office.

Signing Bonus / Moving Allowance

What does this factor mean

Whether or not a signing bonus is available for new physician and whether or not a moving allowance is available for new physician.

Why is it important?

Signing bonuses were once thought of as a bonus, but due to intense recruitment competition, candidates are increasingly coming to expect a sizable signing bonus.

Changing jobs and moving to a new area is very stressful. Some candidates may not have the resources or the time to coordinate moving all their possessions.

Example: Candidate is interested in relocating their family to your community from about 800 miles away. Candidate is concerned about coordinating a potential move that far.

Potential Facility/Community Advantages

If your facility offers competitive signing bonuses, candidates may view that as an advantage.

If your facility offers signing bonuses to healthcare professionals that other facilities typically do not (registered nurses, ancillary positions, etc...) candidates may view this as an advantage.

If your facility offers a moving allowance, candidates may view that as an advantage.

If your facility contracts with a moving company that takes care of the move for the candidate, the candidate may view that as an advantage.

Example: Candidate is interested in moving across two states to your rural community. You contract with a local moving company that would handle all logistics of the move for the family.

Potential Facility/Community Challenges

If your facility is unable to offer competitive signing bonuses, candidates may view that as a challenge.

If your facility doesn't offer a moving allowance, candidates may view that as a challenge.

Example: A candidate is looking at four competing rural communities in your state. Your facility has a very competitive long term compensation package, but the candidate is lured to another community because of a big upfront signing bonus.

Ideas for Solutions to Challenges

Stay up to date and knowledgeable about current signing bonus levels.

Work with stakeholders in the community to see if money can be raised for a bonus, or if other incentives could be offered (help with housing, etc...).

Explore working with professional moving companies. Oftentimes, facilities can find one company and contract with them for relocations.

Be familiar with Stark regulations on relocating so you know what you can and cannot reimburse for the candidate. If you don't specifically offer a moving allowance, make sure to stress other upfront financial benefits (signing bonus, etc...).

Summary

Signing bonuses are often a very flashy factor in the minds of incoming candidates. Even if they can make more money over the long run at your facility, it may be hard to persuade them to accept a small signing bonus than is being offered elsewhere. Helping with relocation is fairly common. If you don't make the process easy, you may end up missing out on candidates simply because they can't handle relocation alone.

Income Guarantee

What does this factor mean?

Whether or not an income guarantee is available for new physician.

Why is it important?

Candidates that are new to your community/facility, may not know how much patient volume will be expected or available.

An income guarantee is an option for the facility to take on the risk of low productivity for the incoming candidate. If the candidate is guaranteed all, or a portion of their salary, they may feel more comfortable relocating, buying a house, etc...

Example: Candidate is looking to relocate from a high production urban area to your community that has relatively low average patient volume.

Potential Facility/Community Advantages

If your facility is willing to offer new candidates an income guarantee regardless of production indefinitely, or for the first few years, candidates may view that as an advantage.

If your facility is willing to offer an income guarantee, newly trained candidates may view that as an advantage, as they are less familiar with production incentives and volume compared to a more established healthcare professional.

Example: You are recruiting a 3rd year Family Medicine resident to your community. Your other two physicians are long established and are on a production compensation model. Despite this, you offer the 3rd year resident an income guarantee for the first three years of their contract.

Potential Facility/Community Challenges

If your facility doesn't offer an income guarantee candidates may view this as a challenge, especially if they are new to the area, or inexperienced in production based compensation.

Example: Candidate is looking to relocate to your rural area, but feels uneasy uprooting their family and buying a house without an income guarantee or firsthand knowledge of production levels.

Ideas for Solutions to Challenges

Even if it can't be sustained long term, offer an income guarantee for the first period of a candidate's contact.

If an income guarantee isn't an option, have patient volume data and potential compensation ranges based of that real patient volume data to show the candidate.

Target your recruiting to candidates that are more experienced with production compensation models, and are familiar with the volume of your facility.

Summary

Certain candidates (newly trained, making a big relocation, etc...) often prefer to minimize their financial risk when accepting a new position. Offering an income guarantee allows candidates stability and a greater sense of control over their financial planning.

Take Home Pay

What does this factor mean?

The impact of financial and benefit compensation including base pay, production, incentives.

Why is it important?

Take home pay is the most visible benefit for potential candidates.

Depending on the candidate's risk tolerance, they may prefer one type of compensation package (e.g.-salaried employment) over another.

Example: A candidate is interested in your facility but assumes they could make more at the local hospital.

Potential Facility/Community Advantages

If your facility offers a comparable or slightly higher base salary to other competing clinics in your community this may be viewed as an advantage.

If your facility has flexible compensation packages depending on the risk tolerance of the candidate, this may be viewed as an advantage.

Example: You are recruiting a candidate right out of residency who has a large student loan debt, and you are able to offer a competitive, guaranteed salary for the first three years.

Potential Facility/Community Challenges

If your facility is unable to compete with local competitor salary levels, this could be viewed as a challenge.

If your facility only offers one type of compensation package regardless of the candidate's experience or risk tolerance, this may be viewed as a challenge.

Example: A Family Practice candidate with over 15 years of experience and is interested in your facility. All your other Family Practice physicians have less than three years of experience. The experienced physician wants a compensation package based more heavily on production, but because your facility doesn't do that with other physicians, a standard base salary is offered and rejected.

Ideas for Solutions to Challenges

Participate in compensation surveys to make sure you are staying competitive.

Communicate compensation as an entire package with the base salary as a piece of the overall compensation offered to the candidate, including unique benefits that only you offer. Be flexible with providers to allow them to earn extra money by moonlighting, work at a local ER department.

Summary

Know what the candidate expects, what the current market value is and what your facility can afford. Use all available resources to help you make a competitive offer. Show compensation as an entire package with base salary as a piece of the package not as a standalone item.

Retention Payments

What does this factor mean?

Existence and impact of timed payments or bonus structures for retention including loan repayment, retirement, other rewards.

Why is it important?

Recruiting physicians is very expensive. It is always better for the patient, and your bottom line, to retain the providers you have.

Physicians are constantly getting offers from competing facilities to entice them away from yours.

Example: A physician has worked at your facility for 5 years, and is due to sign another contract in the next year. Unbeknownst to you, this physician has been receiving numerous offers from competing facilities.

Potential Facility/Community Advantages

If your facility has an organized retention incentive program, candidates may view this as an advantage.

If your facility has a unique benefit package that greatly rewards long time providers, candidates may view this as an advantage.

Example: Your facility has been able to establish a tremendous retirement package available to long term physicians that retire with you. This makes your facility very desirable to physicians that are 10 years pre-retirement.

Potential Facility/Community Challenges

If your facility doesn't have an organized retention incentive program, candidates may view this as a challenge.

If your facility is unwilling to reward providers with retention bonuses or other retention incentives until they receive a competing employer offer, candidates may view this as a challenge.

Example: Your facility has no retention incentive program. An employed physician receives an offer from a competing facility complete with signing bonus. You try to match the offer the best you can, but at this point, the physician has already made up their mind to leave.

Ideas for Solutions to Challenges

Be creative with retention incentive programs. Look to structure your program in such a way that it benefits long term employees, keeps them competitive with newly signed employees, and sets you apart from your competitors.

Keep in mind your ideal candidate. A retirement package may not be a huge incentive if you are trying to recruit physicians right out of residency, but structured retention student loan payments may be.

Focus on retention. The cost of turnover is astronomical. Work with leadership to make the case that dollars spent on retention are the best dollars you can spend.

Summary

Retention starts as soon as the physician is on-boarded. The endless cycle of recruitment can be devastating to a facility. Focus on keeping the good providers you have, and you will save recruitment costs, and your recruitment will become easier with a more stable workforce.

Retirement Package

What does this factor mean?

The existence and favorability of a physician retirement package or program.

Why is it important?

Many candidates are coming out of training with a huge debt and acquiring financial freedom is an important factor in their employment decision. A retirement package may be an important part in that goal.

Established candidates may prefer the security of knowing that a retirement plan is offered.

Example: Candidate is looking for a place to finish their career and asks about your retirement package in the interview.

Potential Facility/Community Advantages

If your facility can invest in a retirement plan for your employees that will show a vested interest in their future this may be viewed as an advantage.

Example: Candidate is interested in your state and has job offers from three other employers. Your facility has the only offer that includes a retirement package.

Potential Facility/Community Challenges

If your facility doesn't offer a retirement package, or your package isn't competitive, this may be viewed as a challenge.

Example: Candidate is interested in retiring in your community and seeking opportunities with you and another facility. Your facility doesn't offer a retirement package as a benefit.

Ideas for Solutions to Challenges

Schedule candidates with a financial planner to help talk through advantages of your facilities' plan.

There are a number of plans available, 503c, 401k, SEP, etc... Research which one your facility can financially engage in.

Research what national and state benchmarks are by participating in compensation surveys.

Summary

Retirement plans can be tailored by employee type, size of facility, and type of facility. Research a plan that works for you and take advantage of this opportunity to recruit and retain your employees.

Part-time Opportunities

What does this factor mean?

Whether or not a desire for part-time work status is available or supported.

Why is it important?

Healthcare professionals, especially physicians, aren't typically working as many hours as they have been in the past.

Many demographics of healthcare professionals have an interest in part time employment. Examples may include candidates (male or female) that have young children or are planning to start a family, candidates that are close to retirement, and others.

Example: Candidate is interested in working .6 FTE in your community, but you are hiring full time.

Potential Facility/Community Advantages

If your facility is willing to consider part time options, candidates may view this as an advantage.

If your facility offers family friend options like extended maternity leave and job sharing, candidates may view this as an advantage.

Example: You are working to replace a retiring physician who worked full time. You find a great candidate, but they are only interested in working half time. Your facility is able to hire this physician, and recruit another half time physician to replace the full time retiree.

Potential Facility/Community Challenges

If your facility doesn't offer part time options, candidates may view this as a challenge.

Example: Husband and wife are both physicians and interested in your community. Husband would like to work full time as a general surgeon, but wife prefers a half time position in family medicine. Worried that other physicians will start to request part time, you offer both candidates full time options, and candidates choose another location.

Ideas for Solutions to Challenges

Be as flexible as you can with scheduling, time off, and part time options.

If you don't have the ability to offer part time, consider trying to recruit two half time positions.

Be knowledgeable about what scheduling options your competitors provide, and if you can't match their flexibility, try to target providers who prefer full time employment.

Summary

In previous generations, it was not uncommon for candidates to expect to work more than a full time schedule. However, data suggests that candidates now value flexible scheduling and time off just as much as compensation. This is especially true for certain groups of candidates (eg – young, female, etc...).

Competition

What does this factor mean?

The sense of competition amongst primary care providers for patients.

Why is it important?

Collegiality between providers is paramount.

When providers can help other providers with patient questions or are willing to take additional patients to cover another provider's time off, it can make the work environment much better.

Example: Your facility has a great group of providers that work together and help each other as needed.

Potential Facility/Community Advantages

If your facility is able to keep all providers at a full schedule, candidates may see this as an advantage.

If your facility has a good of providers that work well with one another, a candidate may see this as an advantage.

Example: During a site visit, your candidate interacts with the other providers they would be working with, and feels a sense of collegiality between them as they often help each other with diagnoses and cover time off when needed. The candidate leaves feeling like they could work with the group very well.

Potential Facility/Community Challenges

If your facility has a provider or group of providers who are territorial or don't work well with others, a candidate may view this as a challenge.

Example: You are recruiting a full time provider to support your one existing full time provider. Your existing provider has been critical of the need to hire another provider while putting up roadblocks for every candidate you bring in. When candidates are on their onsite visit, they often leave feeling unwelcomed by your current provider and ultimately go elsewhere.

Ideas for Solutions to Challenges

Work with hospital leadership to gain support for your recruitment efforts. If an existing provider is making recruitment more difficult, it pays to have leadership on your side.

Host monthly social events during or outside of work hours to help providers develop relationships with one another.

Don't let an existing provider disrupt your recruitment efforts. A lot of providers who are at first resistant to bringing in another provider, become your biggest supports once the new provider gets up and running.

Summary

Everyone wants to work well together with their colleagues. For providers, this can often be a make or break issue. When conducting your onsite visit, prep your existing group of providers so they know what to expect.

Section V



Scope of Practice Factors

Scope of Practice Factors

For a provider in a rural facility, covering the clinic, emergency room, nursing home, inpatient care, and providing mental health can rightfully seem overwhelming. On top of that add supervising mid-levels, teaching, and administration and it's a wonder rural physicians have time to sleep!

A large scope of practice and the chance to get involved with all aspects of a facility is a core reason many physicians choose to practice rural. For the candidate that is looking for a challenge, and the chance to do something different every day, what could be better than practicing rural?

However, scope of practice can become overwhelming for physicians when they take on too much, or don't have an interest in certain scope of practice factors. Being flexible with physicians on scope of practice is key to not only recruiting a candidate, but beginning the process of onboarding and retaining that provider as well.

How Scope of Practice factors relate to different health professional candidates:

- A large scope of practice may be viewed as a strength for primary care providers considering rural as opposed to urban.
- Scope of practice factors can often be make or break issues for candidates. They either very much want to do something, or won't do it (obstetrical care, nursing home, etc...)
- Newly trained physicians may be more easily overwhelmed with a large scope of practice than experienced physicians. Planning work duties accordingly in lieu of the candidate's prior experience is crucial.

Scope of Practice Factors

1. Inpatient care
2. Obstetrical Care
3. Nursing Home
4. Emergency / Stabilization care
5. Minor trauma (casting/suturing)
6. Mental health
7. Patient Centered Medical Home Skills
8. PA and NP Collaboration
9. Administration
10. Teaching

Inpatient Care

What does this factor mean?

The impact of whether or not inpatient hospital care is an option, not an option, or mandatory.

Why is it important?

Increasingly, Family Medicine physicians are expressing a desire for “outpatient” only options.

Hospitalist programs are becoming very common across the nation, even in smaller hospitals.

If your candidate is coming to your rural facility from a larger facility, they may not have much experience with inpatient care.

Example: A Family Medicine physician is interested in your rural facility. You require your physicians cover inpatient care.

Potential Facility/Community Advantages

If your facility offers an inpatient care option to providers, but doesn't require it, candidates may view that as an advantage.

If your facility requires inpatient care practice, but have other dedicated staff to assist (Hospitalists) a candidate may view that as an advantage.

Example: A Family Medicine physician is interested in the wide scope of practice offered by your rural facility. They follow up with their inpatients, but most inpatient care is provided by a Hospitalist rotation.

Potential Facility/Community Challenges

If your facility requires extensive inpatient care, candidates may view that as a challenge.

Example: You are recruiting a Family Medicine physician to your rural community and require inpatient care. You source a good number of viable candidates, but most are interested in outpatient only.

Ideas for Solutions to Challenges

Be as flexible as you can with offering/requiring inpatient care practice to potential candidates.

Utilize different staffing models (Hospitalists, etc...) to alleviate the burden from your Family Medicine physicians.

Summary

Family Medicine physicians have different levels of comfort with inpatient care, but overall, the trend seems to be that they are preferring low levels if any. Research staffing models to accommodate growing trends and physician preference.

Obstetrical Care

What does this factor mean?

The impact of whether or not providing obstetrical care is an option, not an option, or mandatory.

Why is it important?

Especially for Family Medicine physicians, most providers feel very passionate about doing or not doing normal deliveries and/or C-Sections.

Increasingly, Family Medicine physicians are expressing a desire to not do normal deliveries and/or C-Sections.

Example: Your rural facility partners with a critical access hospital that delivers babies, and is looking to replace a retiring physician that had been your primary normal deliveries and/or C-Sections provider.

Potential Facility/Community Advantages

If your facility gives Family Medicine physicians the choice whether or not to do normal deliveries and/or C-Sections, candidates may see this as an advantage.

If your facility doesn't offer Obstetrics and therefore doesn't require Family Medicine physicians to actively deliver babies, candidates may view this as an advantage.

Example: You are recruiting a Family Medicine physician to your rural community. As your facility doesn't do normal deliveries and/or C-Sections, you find that your potential candidate pool is larger.

Potential Facility/Community Challenges

If your facility requires Obstetrics coverage for all Family Medicine physicians, candidates may view this as a challenge.

If your facility doesn't offer Obstetrics, candidates that wish to do Obstetrics may view this as a challenge.

Example: You are recruiting a Family Medicine physician to your rural community. You find a great local candidate, but they wish to practice Obstetrics, and due to financial constraints, your facility no longer has an Obstetrics department.

Ideas for Solutions to Challenges

Be as flexible as you can with Obstetrics requirements for Family Medicine physicians and look for options to cover deliveries and C-sections while still having an obstetrics program.

If you don't offer Obstetrics and are recruiting a physician who wishes to "keep up their skills", explore partnerships with regional facilities that do offer Obstetrics.

Summary

Typically, Obstetrics is something Family Medicine physicians feel very strongly about. Maintaining Obstetrics in a rural facility can be tough, but if you can, you may be able to attract physicians as it is relatively rare in rural areas. If you don't require Obstetrics, your candidate pool for Family Medicine physicians will likely be larger.

Nursing Home

What does this factor mean?

The impact of whether or not nursing home care is an option, not an option, or mandatory.

Why is it important?

Many rural areas have a significant elderly population, and a limited number of providers to care for them.

Too much nursing home coverage can burnout primary care providers.

Example: A Family Medicine physician is interested in your rural facility. Your community has low hospital/ER volume, but a large nursing home/swing bed unit.

Potential Facility/Community Advantages

If your facility offers nursing home practice to providers, but doesn't require it, candidates may view that as an advantage. If your facility requires nursing home practice, but to a limited extent (for example one or two days a week) candidates may view that as an advantage.

Example: A Family Medicine physician is interested in the wide scope of practice offered by your rural facility. They would be required to cover the nursing home, but only one day a week.

Potential Facility/Community Challenges

If your facility requires extensive nursing home practice, candidates may view that as a challenge.

Example: A mid-career Family Medicine physician is interested in your rural facility. Relocating from an urban area, they don't have a lot of nursing home experience and especially enjoying offering pediatric care. The candidate is weary that your providers typically have a heavy load of nursing home practice to your community's aging population.

Ideas for Solutions to Challenges

Be as flexible as you can with offering/requiring nursing home practice to potential candidates.

Offer additional training, or use a mentor program, for candidates not completely comfortable with caring for the elderly.

Utilize different staffing models (Adult-Gerontology NPs, etc...) to alleviate the burden from your Family Medicine physicians.

Summary

In rural communities, nursing homes are often a big part of the overall healthcare landscape. Physicians have different preferences regarding working in a nursing home so it is important to define their role to meet their comfort/interest level.

Emergency / Stabilization Care

What does this factor mean?

The impact of whether or not emergency or stabilization and transfer coverage is an option, not an option, or mandatory.

Why is it important?

Requiring high volume emergency/stabilization care coverage may be intimidating for recently trained providers as they may not have as much experience.

Example: Your rural facility has three primary care providers, and requires each to share emergency/stabilization care coverage.

Potential Facility/Community Advantages

If emergency/stabilization coverage is offered, but not required, candidates may view this as an advantage.

If your emergency/stabilization care volume is very low, candidates adverse to emergency/stabilization coverage may view this as an advantage.

Example: Your rural facility has an emergency/stabilization clinic the provider may have the option to cover (they get paid by the hour for coverage). A candidate you are recruiting appreciates the flexibility and the ability to make extra money.

Potential Facility/Community Challenges

If your facility requires providers to cover the emergency/stabilization clinic, candidates may view that as a challenge.

If your facility has a high volume emergency/stabilization care, candidates that lack experience in the emergency/stabilization but still wish to have some responsibilities, may view that as a challenge.

Example: Your rural community has a high volume emergency/stabilization care due to the local trucking industry. You are recruiting a Family Medicine resident, but they are wary of the amount of emergency/stabilization care coverage required.

Ideas for Solutions to Challenges

Explore compensation models that allow your providers to take emergency/stabilization coverage for additional pay.

Look into tele-emergency room options. Options are available that connect rural areas to specialists, translators, and more. Anything you can do to help providers feel less isolated will make a positive difference.

Provide additional CE training for trauma procedures.

Summary

Emergency/stabilization coverage can be a heavy load for providers in a rural community. If you don't have the luxury of having specialized emergency/stabilization clinic staff, make sure to have support avenues (telehealth, etc...) for the provider as much as possible.



Minor Trauma (Casting / Suturing)

What does this factor mean?

The impact of whether or not minor trauma care such as casting or suturing is an option, not an option, or mandatory.

Why is it important?

Minor trauma, such as suturing and casting is often something that may be necessary in small rural facilities with few providers.

Example: Your facility has a minor trauma clinic and requires each primary care physician to share coverage.

Potential Facility/Community Advantages

If your facility offers trauma care, but it is not required, candidates may view this as an advantage.

If your facility doesn't offer minor trauma, but is willing to consider it for the experienced provider, a candidate may view that as an advantage.

Example: Your rural facility doesn't require coverage in trauma care, but gives providers the option (they get paid additional for providing services). A candidate you are recruiting appreciates the flexibility and the ability to make extra money.

Potential Facility/Community Challenges

If your facility requires providers to cover trauma care or you have high volume trauma care, candidates may view that as a challenge.

Example: Your rural community has a high volume trauma care due to the local lumber mill industry. You are recruiting a provider that is not confident in trauma care and is wary of the amount of coverage required.

Ideas for Solutions to Challenges

Explore compensation models that allow your providers to take trauma care coverage for additional pay.

Provide additional CE training for trauma procedures.

Summary

Trauma care can be an important service for your community. Ensure providers have the support avenues they need as much as possible.

Mental Health

What does this factor mean?

The impact of whether or not mental health care by the physician is an option, not an option, or mandatory.

Why is it important?

The amount of mental health that a Family Medicine physician is comfortable providing varies greatly from candidate to candidate.

Rural areas often have disproportionately high incidents of mental health conditions (depression, substance abuses, etc...)

In rural areas, Family Medicine physicians may not have a specialized mental health provider to refer to. This can lead to physicians feeling overwhelmed and isolated.

Example: If your rural community there are no specialized mental health providers, so mental health concerns are often seen by your one Family Medicine physician.

Potential Facility/Community Advantages

If your Family Medicine physicians aren't required to provide mental health care, and can refer to in house mental health providers, candidates may view that as an advantage.

Example: During an onsite visit, a candidate expresses angst about potentially treating patients with serious mental health issues. You are able to explain to the candidate that in addition to several allied mental health providers, your facility also has a tele-psychiatry program.

Potential Facility/Community Challenges

If your Family Medicine physicians are required to provide substantial mental health care, and don't have in house mental health providers to refer to, candidates may view that as a challenge.

Example: When reviewing data on your community, a candidate notices and inquires about high suicide and substance abuse rates. The candidate also inquires about your facilities lack of mental health providers, and feels uneasy about the potential of being the only provider that can help patients with mental health issues.

Ideas for Solutions to Challenges

Explore options in tele-psychiatry.

Recruit mental health providers (allied mental health professionals, Psychiatric Nurse Practitioners, etc...) to help your Family Medicine physician.

Speak with your nurses and encourage them to look at virtual training options for degrees in Psychiatric Nurse Practitioner.

Summary

Family Medicine physicians often don't feel qualified to provide substantial mental health care. In rural communities however, they are sometimes required to because of the lack of other providers.

Patient Centered Medical Home Skills

What does this factor mean?

The impact of whether or not providing skills related to PCMH leadership is an option, not an option, or mandatory.

Why is it important?

Developing new models of primary care will demand a level of managerial expertise that few of today's primary care physicians possess.

Medicine is moving from episodic to global care with the PCMH model being the model of choice.

Example: Your facility has a PCMH designation and you are recruiting a new physician to be your Chief Medical Officer and you require PCMH leadership skills.

Potential Facility/Community Advantages

If your facility doesn't require PCMH leadership skills but allows a physician to utilize any PCMH leadership skills they choose to, or offers training if they desire to learn, candidates may see this an advantage.

Example: You are recruiting a new physician who has not had any "managerial" training in school. Your facility offers physicians specialized learning when they perceive a gap between their current knowledge and the skills needed to incorporate some management tasks into their daily clinical work.

Potential Facility/Community Challenges

If your facility requires a significant amount of a physician's time on PCMH leadership skills, candidates may see this as a disadvantage.

Physicians with PCMH leadership skills that wish to use them in practice but your facility does not have a PCMH, may see this as a disadvantage.

Example: A physician is interested in your rural facility. They would bring a lot of PCMH leadership knowledge to your facility but your facility isn't interested in a PCMH designation.

Ideas for Solutions to Challenges

Be as flexible as you can with requiring PCMH leadership skills.

Create and implement training in PCMH leadership skills including: Operations Design, Data Management, Human Resources, Managing Teams, Financial Control, Negotiation and Conflict Resolution, Capital Allocation, and Innovation and Performance Improvement. Provide these to those interested or where gaps are identified in physician staff.

Summary

As patients are turning more to their primary care physician than the ER, coordinating a patient's care through the primary care physician is essential to ensure they receive the necessary treatment when and where they need it. New models of primary care frame primary practice as proactive, bundled, and shared and as these models are implemented, facilities will need to navigate what skills are relevant for their physicians.

PA and NP Collaboration

What does this factor mean?

The impact of whether or not PA and NP collaboration with the physician is positive, negative or neutral.

Why is it important?

Mid-level providers (Nurse Practitioners, Physician Assistants, etc...) are a crucial piece of healthcare delivery in rural areas.

Depending on state regulations, mid-level providers require a varying degree of physician oversight (chart reviews, etc...). Example: You are recruiting a physician to replace a retiring provider. This new physician will have to supervise two Nurse Practitioners and one Physician Assistant.

Potential Facility/Community Advantages

If your facility offers, but doesn't require mid-level supervision, candidates may see this as an advantage.

If your facility has very experienced and stable mid-level providers, a candidate that will potentially have to supervise them, may view this as an advantage.

Example: A Family Medicine physician is interested in your rural facility. During their onsite visit, the candidate meets with your mid-level providers and is very impressed with the team based care model your facility uses.

Potential Facility/Community Challenges

If your facility requires significant mid-level supervision, candidates may see this as a challenge.

If your facility has constant turnover of mid-level providers, candidates that potentially have to supervise them, may view this as a challenge.

Example: A Family Medicine physician is interested in your rural community. They haven't had to supervise mid-level providers in quite some time, and over the last three years, your facility has had a lot of midlevel turnover.

Ideas for Solutions to Challenges

Know the mid-level oversight regulations in your state. If you have multiple sites, be sure to know how technology is addressed in oversight regulations.

Let your midlevel providers practice to the full scope of their license. In certain states, Nurse Practitioners have the ability to practice independently.

Hold team building exercises with your provider workforce, and be sure to have a retention plan for both midlevel providers and physicians.

Summary

Most rural facilities would struggle to operate without mid-level providers. Often they are easier to recruit than physicians, and still provide high quality patient care. However, be aware that physicians can sometimes view midlevel oversight as a burden, and it may take them awhile to fully realize the benefits of working with mid-level providers.

Administration

What does this factor mean?

The impact of whether or not administrative duties for the physician is an option, not an option, or mandatory.

Why is it important?

Physicians tend to have a lot of responsibilities, especially in rural communities.

Physician time is precious, so administrative duties like serving on committees or working with hospital leadership, may overburden a provider.

Conversely, physicians want to feel like they have a voice in administration. If a provider feels like their voice isn't being heard on important issues, they may develop resentment.

Example: You employ one physician in your rural facility. They are the Chief Medical Officer, and have numerous administrative duties in addition to their clinic responsibilities.

Potential Facility/Community Advantages

If your facility allows physicians to have a voice in administration without overburdening them, a candidate may see this as an advantage.

Example: A newly trained physician is interested in your rural community. In speaking with them about administrative duties, you lay out a plan that is flexible and allows the physician to get accustomed to their clinical practice while getting involved with administration at their own pace.

Potential Facility/Community Challenges

If your facility requires physicians to spend a significant amount of time in administration, or has an environment where physician feel like they don't have a voice, candidates may view this as a challenge.

Example: An experienced physician is interested in coming to your rural facility. They would bring a lot of good ideas and knowledge from their previous experiences, but your facility doesn't typically include physicians in administrative decision making.

Ideas for Solutions to Challenges

Have physician representation at your facility board of directors meetings.

Use a feedback system where providers (and all employees) can bring forth ideas and have questions answered.

Communication is key. Make sure your physicians are informed and not caught off guard about major facility decisions.

Summary

Providers go to school to take care of patients, not to be an administrator. However, being such a critical piece of your facility, physicians must feel like they have a voice in major issues while not feeling too overburdened by administration.

Teaching

What does this factor mean?

The impact of whether or not teaching residents or medical students by physicians is an option, not an option, or mandatory.

Why is it important?

Every licensed physician has at some point, trained under another physician.

Many physicians had great training experiences, and wish to “give back” by helping educate future physicians themselves. Example: A physician is interested in your community, and has a long history of helping your state’s medical school with student rotations.

Potential Facility/Community Advantages

If your facility allows, but doesn’t require physicians to participate in medical teaching, candidates may view this as an advantage.

If you have a provider that likes to get involved with medical student/resident training, this may be a great way to develop a future workforce pipeline for your community. Oftentimes residents ultimately choose to practice in a community they had visited during their training.

Example: A physician in your community really likes to supervise medical students during their 3rd and 4th year rotations. Your facility encourages this even though the physician is able to see less patients during these times. You stay in contact with the trainees that come through your facility, and have been able to recruit a few of them after their training.

Potential Facility/Community Challenges

If your facility doesn’t allow or have access to get involved with medical training, candidates may view that as a challenge.

If your facility requires physicians to participate in training medical students, candidates may view that as a challenge.

Example: A physician is interested in your rural community. They are coming from a large urban center where they spent two days a week teaching at the medical school. The candidate would like to continue to be involved in medical education, but your facility has never hosted students or residents.

Ideas for Solutions to Challenges

Reach out to the medical schools and residency programs in your state to learn about what options may be available to you for hosting students.

When students do spend time in your facility, make their experience as pleasant and fulfilling as possible by getting them integrated into the community, helping with temporary housing, etc...

Contact your state’s Area Health Education Centers (AHECs) to learn about opportunities for your facility to get involved with medical education.

Summary

Many physicians have fond memories of their training, especially when it comes to a physician mentor they may have had. Encouraging, but not requiring your physicians to teach can provide them a chance to give back, and get your facility additional exposure to the next generation of physicians. Additional, studies have shown that teaching can play a significant role in job satisfaction and retention of physicians.

Section VI



Medical Support Factors

Medical Support Factors

Physicians want to be able to do their job well, but they need assistance. When a physician has access to a quality team of other healthcare professionals, they feel more confident and supported. Nurses, allied mental health professionals, mid-levels, and ancillary staff all can make a physician's life much easier (in addition to enhancing patient care).

In rural areas, having adequate staff to fully support a physician can be tough. Oftentimes, rural facilities may not have the need for full time providers in certain specialties and professions. However, having these professionals available (through any means) may help you recruit and retain family medicine physicians.

Access to quality medical support cuts back the feeling of isolation for physicians and allows them to provide better overall patient care.

How medical support factors relate to different health professional candidates

- Strength in these factors may be important to physicians that are used to having access to abundant medical support staff.
- Strength in these factors may be important to newly trained candidates that lack experience working completely independently.
- Candidates often have a perception that rural areas lack medical support so it is important to emphasize the support you have to all candidates.

Medical Support Factors

1. Perception of quality
2. Stability of physician workforce
3. Call/practice coverage
4. PA and NP workforce
5. Nursing workforce
6. Lab/X-ray services
7. Physician Sub-Specialist availability
8. Mental Health Integrated Care Resources
9. Dental Integrated Care Resources
10. Pharmacy Integrated Care Resources

Perception of Quality

What does this factor mean?

The overall reputation for quality of medical care for this community as seen by someone not from this community.

Why is it important?

Physicians want to work in facilities that are viewed as providing high quality healthcare.

If your community perceives your facility to not provide quality care, that perception can have a negative impact on recruiting and retaining potential physicians.

Example: While on their site visit, a candidate meets many people from your community. Each community member has a reaction when the candidate informs them they are applying to your facility.

Potential Facility/Community Advantages:

If your facility is perceived by the majority of your community to provide quality care, a candidate may view that as an advantage.

Example: A candidate is interested in relocating to your rural community. Their spouse is from the area, and when discussing the potential move with the spouse's family, they have many positive stories about the quality of care at your facility.

Potential Facility/Community Challenges:

If your facility is perceived by the majority of your community to not provide quality care, a candidate may view that as a challenge.

Example: While visiting your community with their family, a candidate speaks to numerous people with bad experiences at your facility that would indicate a lower quality of care.

Ideas for Solutions to Challenges

Using available promotional tools (social media, website, etc...) find and promote positive stories from people your facility has cared for.

If your facility participates, be aware of your HCAHPS scores and speak to those people in your facility that are responsible for monitoring them.

Hold events in the community that promote the good work your facility does. Local healthcare access in rural communities is something to be proud of!

Summary

Community members can often hold a grudge against healthcare facilities for something that happened long ago, or that was completely outside your facility's control. Working hard to know how your facility is perceived by the community and addressing concerns, can go a long ways in attracting providers.

Stability of Physician Workforce

What does this factor mean?

The stability of the physician workforce and longevity of the retained physicians.

Why is it important?

Physicians are often wary about coming into a facility that has been a “revolving door” for other physicians.

In rural areas, physicians can often feel isolated. Having a stable physician workforce can cut down on feelings of isolation for new providers.

Constantly having to replace leaving physicians is expensive and can negatively impact the continuation of care for patients in rural areas.

Example: Your facility has a team of four full time physicians and three of them have been with your facility for over five years.

Potential Facility/Community Advantages

If your facility has a stable physician workforce, candidates may view that as an advantage.

If your facility only employs one or two physicians, but you have a stable midlevel and administrative workforce, candidates may view that as an advantage.

Example: A candidate is interested in your rural community but is nervous about the perception of being isolated. During their onsite visit, the candidate has lunch with your long tenured medical director who is able to greatly ease the candidate’s concerns.

Potential Facility/Community Challenges

If your facility has had trouble retaining physicians for over three years, candidates may view that as a challenge.

Example: A newly trained physician is interested in your rural facility. Over the last five years, your facility has turned over the entire physician workforce and relied heavily on Locum Tenens coverage. The candidate assumes you must have internal issues with keeping providers, and takes a position elsewhere.

Ideas for Solutions to Challenges

When speaking to candidates about workforce stability, consider all facets of your facility workforce; nursing, administrative, mid-levels, ancillary, etc...

Develop a physician retention program that starts as soon as your physicians are recruited!

Speak to the provider as if they will become the stable physician your community needs. Many physicians like the idea of a facility that is willing to support and build around their practice.

Summary

The importance of physician retention cannot be overstated for many reasons. One of which is that your inability to retain physicians may decrease your ability to recruit physicians. Communicate with your existing physicians and make sure issues are addressed before they reach a critical juncture.

Call/practice Coverage

What does this factor mean?

The adequacy of call coverage and practice coverage for physician leave, holidays and vacation for both quantity and quality.

Why is it important?

Next to salary, call schedule is one of the factors of most importance to physicians.

There is a perception that call schedule will often be higher in rural areas because of the lack of providers.

Too much time on call can burn a physician out, and make them feel too tied to your facility.

More and more, younger providers are expressing the desire for less call and more flexibility for their life outside of medical practice.

Example: A candidate is interested in your rural facility, and is concerned about how the potential call schedule would impact their family's quality of life.

Potential Facility/Community Advantages

If your facility offers a favorable call schedule, candidates may view that as an advantage.

If your facility allows physicians to take call, but doesn't require it, candidates may view that as an advantage.

Example: A newly trained physician is interested in your moving their family to your rural community. In reviewing a job opening at your facility they see that call schedule is available for physicians, but not required.

Potential Facility/Community Challenges

If your facility requires physicians to take a demanding call schedule, candidates may view that as a challenge.

Example: A candidate is interested in your rural facility, but doesn't apply due to the 1:3 call schedule.

Ideas for Solutions to Challenges

Investigate your compensation model for physician call schedule. Could you incentivize call to make it more attractive to providers?

Utilize a remote nurse first call response system to filter calls to only the most in need of physician attention.

Bring in Locum Tenens providers to cover occasional weekends for your providers to help alleviate call schedule burden.

Make sure your physicians feel like they can "get away". Often, physicians in rural areas feel like they can't relax because they might get called in at any time. Encourage your providers to have time away.

Summary

Call schedule adds a layer of unpredictability to a physician's life. Some physicians are willing to accept this for increased compensation, but other physicians prefer the stability and freedom of a no call required schedule. Requiring no call in a rural area can be tough to do, but if you can it may set you apart and offer long term benefits in physician retention.

PA and NP Workforce

What does this factor mean?

The adequacy of mid-level provider for both quantity and quality.

Why is it important?

Most rural facilities would have a hard time meeting patient demand without nurse practitioners and physician assistants (mid-levels).

Mid-level providers can free up your physicians to focus on the more extensive or complicated patients.

Physicians and mid-levels must work closely together to effectively care for patients.

Example: A candidate is interested in your rural facility. If they choose to accept your offer, they would be working with two physician assistants, and one nurse practitioner.

Potential Facility/Community Advantages

If your facility has enough quality mid-level providers, candidates may view that as an advantage.

Example: A candidate is interested in your rural facility but worries about being the only onsite physician. The candidate meets your mid-level provider group which greatly eases their concern about patient load, support, and call schedule.

Potential Facility/Community Challenges

If your facility doesn't have enough quality mid-level providers, candidates may view that as a challenge.

Example: A candidate is interested in your rural facility but worries about being the only onsite physician. Your facility has had troubles retaining mid-level providers, so you are constantly hiring new graduates which worries the candidate.

Ideas for Solutions to Challenges

Identify nurses in your facility that may wish to continue their education to become a nurse practitioner, and help them support the time/cost. This gives you the ability to support nurses that have connections to the community, are stable, etc...

Have a retention plan in place for mid-level providers. Use mid-level providers to help address gaps in what your physician likes/doesn't like to do.

Summary

Mid-level providers are a big asset to rural facilities and typically easier to recruit than physicians. Having good mid-level providers can help keep your community health, and your physicians happy.

Nursing Workforce

What does this factor mean?

The adequacy of nursing workforce for both quantity and quality.

Why is it important?

Having enough quality nurses helps ensure physicians in your facility have the support to properly care for their patients.

Proper communication between nurse and physician can help alleviate potential barriers from the physician's care.

Example: A candidate tours your facility during their site visit, observes the nursing staff, and meets with your director of nursing.

Potential Facility/Community Advantages

If your facility has adequate nurses, in both quantity and quality, candidates may view that as an advantage.

Example: A candidate is interested in relocating to your facility. During their site visit, they are impressed with your nursing staff, their communication skills, and overall helpfulness.

Potential Facility/Community Challenges

If your facility has good nurses, but not enough of them, candidates may view this as a challenge.

If your facility has enough nurses, but they are inexperienced or have other issues, a candidate may view this as a challenge.

Example: Your facility had traditionally had troubles recruiting and retaining enough quality nurses. During their site visit, a candidate interacts with your nursing staff and isn't impressed.

Ideas for Solutions to Challenges

Think of your nurse recruitment/retention as being just as important as your physician recruitment/retention.

Provide training and career development options for your nurses.

Work with your local nursing education programs to see if you can set up rural experiences at your facility for nursing students during their training.

Summary

Having enough quality nurses impacts all facets of a healthcare facility, including physician recruitment and retention.



Lab/x-ray Services

What does this factor mean?

The adequacy of and integration of lab and X-ray services.

Why is it important?

Ancillary staff hold many important roles within a facility.

Having enough quality ancillary staff ensures that physicians are able to provide treatments that are in the best interest of the patient.

Example: A candidate is interested in your rural facility. Your facility has great ancillary staff – your x-ray technician has been with your facility for over 30 years.

Potential Facility/Community Advantages

If your facility has enough quality ancillary staff, candidates may view that as an advantage.

Example: While touring your facility, a candidate is very impressed with the capacity and turnaround of your ancillary staff. The candidate feels comforted that the ancillary staff are in place to make their job easier.

Potential Facility/Community Challenges

If your facility doesn't have enough quality ancillary staff, candidates may view that as a challenge.

Example: A candidate is interested in your facility. Your facility has recently had turnover in a few key ancillary areas which makes routine occurrences (getting an x-ray done, physical therapy, etc...) much tougher.

Ideas for Solutions to Challenges

Recognize the good work your ancillary staff does. Everybody likes to feel appreciated.

Work with your local ancillary training programs to see if you can set up rural experiences at your facility for students during their training.

Work with your local high school and offer to help educate their students about great careers in the ancillary health career field.

Summary

While it is often taken for granted by physicians, being able to access quality ancillary services is crucial to patient care. Without quality ancillary staff, physicians will quickly realize their job becomes much tougher.

Physician Sub-Specialist Availability

What does this factor mean?

The availability of specialists and sub-specialist for patient care; either on site or by other means.

Why is it important?

Being a rural primary care physician can feel very isolating.

Having access to an onsite, visiting, or virtual specialist can provide physicians a feeling of comfort and support.

Having specialist availability allows you to provide more healthcare locally, and may increase your positive reception by the community.

Example: Your facility is staffed by two primary care physicians, but have a number of visiting specialists that come onsite a couple days a month.

Potential Facility/Community Advantages

If your facility has onsite, visiting, or virtual access to specialists, candidates may view that as an advantage.

Example: a candidate is apprehensive about being the only physician in your rural facility because of the emergency department implications. However, your facility has access through telemedicine to a service that provides assistance to the provider for emergency room care.

Potential Facility/Community Challenges

If your facility doesn't have onsite, visiting, or virtual access to specialists, candidate may view that as a challenge.

Example: A candidate is used to have specialist access to be able to ask questions and get second opinions. Without access to key specialists, the candidate can't see themselves working in your facility.

Ideas for Solutions to Challenges

Investigate what options for telemedicine services are available in your area. Even if they aren't a revenue generator, they may help you recruit and retain physicians.

Work with regional facilities to set up visiting specialists. If part of a larger system, work to develop relationships between your local provider and specialists in the larger system. Sometimes, a simple phone call to a specialist can greatly assist a physician. Speak to these relationships when recruiting a candidate.

Summary

Medical care is complicated and often requires multiple providers working as a team. Rural areas may not be able to support an onsite specialist for every need that arises, but make sure specialist support is available to your physicians as best you can.

Mental Health Integrated Care Resources

What does this factor mean?

The adequacy of and integration of mental health services.

Why is it important?

The amount of mental health coverage a family medicine physician has to provide can be a big obstacle for both recruitment and retention.

Mental health is often a major issue for rural communities. Family Medicine physicians typically don't feel comfortable providing mental health care.

Allied mental health workforce (social workers, counselors, etc...) can greatly help physicians feel more comfortable and supported in your rural community.

Example: A family medicine candidate is interested in your facility. Your community has high incidents of depression and substance abuse.

Potential Facility/Community Advantages

If your facility has onsite allied mental health workforce, candidates may view that as an advantage.

Example: A candidate interested in your facility is worried about their ability to help with your community's substance abuse problems. You are able to ease their concerns when you introduce the candidate to your onsite substance abuse counselor.

Potential Facility/Community Challenges

If your facility doesn't have onsite allied mental health workforce, candidate may view that as a challenge.

Example: A candidate is speaking with your existing provider. The existing provider details their struggles with having to be a physician, social worker, counselor, and more. The existing provider explains that many of the patients in your facility have health issues greatly compounded by mental health problems.

Ideas for Solutions to Challenges

Make the case for recruiting allied mental health workforce. Even at part time, allied mental health providers can greatly support a physician.

Offer resources and training to help your physicians feel more comfortable working with patients that have mental health issues.

Work with your county public health department to address the social determinants of health that lead to the mental health issues in your community.

Summary

Mental health is a huge issue in rural communities. To adequately help, your facility may need more than family medicine physicians. Recruit staff and offer resources and training to help support your physicians.

Dental Integrated Care Resources

What does this factor mean?

The adequacy of and integration of dental care services.

Why is it important?

Patient health consists of many different aspects, and dental care is an important part of overall health.

Physicians want to feel supported and have the ability to address the overall health of the patient, including dental.

Example: A patient is repeatedly coming to your facility for services, but the root of the issues your physician is treating are related to poor dental care.

Potential Facility/Community Advantages

If your facility has integrated dental care resources such as onsite staff once a week, a candidate may view that as an advantage.

Example: Your facility has onsite capacity every Friday from 9am-3pm for dental services. Physicians are able to schedule patients with recurring dental issues and improve their overall health.

Potential Facility/Community Challenges

If your facility lacks integrated dental care resources, a candidate may view that as a challenge.

Example: A patient in your community is often sent to the local ER for dental procedures. Your physician has referred the patient to a dentist, but the patient cannot travel easily and doesn't comply. Not being able to effectively treat the patient wears on the physician.

Ideas for Solutions to Challenges

Research different models of providing basic dental care in your facility.

Partner with local agencies like public health to develop capacity for dental care. Examples may include visits with a dental hygienist to local schools and/or nursing homes.

Explore data on local ER visits related to dental issues. Depending on cost, it may be more cost effective to have local dental capacity within your facility than to rely solely on ER care.

Summary

Taking quality care of patients means treating their entire health, not fragmenting parts of it. Having integrated dental resources can be challenging, but the rewards are likely worth the struggle. For physicians, having an outlet to take care of the patient effectively is often a crucial factor for their overall practice satisfaction.



Pharmacy Integrated Care Resources

What does this factor mean?

The adequacy of and integration of pharmacy care resources.

Why is it important?

The ability to improve their patients' health through a key strategy of medication management is a primary concern for most candidates.

Candidates may have a preconceived notion that rural and underserved areas may lack pharmacy services.

Example: A candidate is interested in your facility and ask about your pharmacy services during the interview.

Potential Facility/Community Advantages

If your facility offers pharmacy services, candidates may view this as an advantage.

Example: A newly trained candidate is nervous about access to pharmacy services. However, your facility has access to funding through a local charity and has a strong pharmacy services program.

Potential Facility/Community Challenges

If your facility is unable to offer pharmacy services, candidates may view this as a challenge.

Example: A candidate is interested in your rural facility. During their site visit, they become concerned when they learn you do not offer pharmacy services.

Ideas for Solutions to Challenges

Seek out partnerships and funding with local charities to supplement medicine for patients who can't afford it.

Explore partnerships in the community and work to develop a pharmacy services program or network.

If eligible, participate in the 340B program offered through HRSA.

Summary

Physicians may feel cautious about working where they can't provide treatment based on their prescribed care. Work with your community to develop pharmacy services so your provider will feel confident when prescribing.

Section VII



Facility & Community Support Factors

Facility & Community Support Factors

Many physicians go into medicine with a desire to serve, and often rural and underserved communities are where physicians are needed most. In urban areas a physician may have access to more shopping and other conveniences, but in a rural area they might get delicious cookies from a patient, or homemade soup when they are sick. The good news for rural communities? One physician's money and shopping, are another physician's soup and cookies.

When rural communities value and appreciate their providers, it can be a distinct advantage for recruitment and retention.

How facility and community support factors relate to different health professional candidates

- Strength in these factors may be important to physicians that have a desire to serve or give back.
- Strength in these factors may be important to physicians that are looking to be heavily involved in the community.
- If a candidate is interested in these factors, that may indicate a long-term investment into the community by the candidate.
- Facilities that have strength in these factors typically have a strong vision for the future.

Facility & Community Support Factors

1. Physical plant and equipment
2. Plans for capital investment
3. Electronic medical records (EMR)
4. Internet access
5. Telemedicine
6. RHC leadership
7. Physician recruitment efficacy
8. Household member recruiting and onboarding
9. New physician mentorship
10. Community need/support of physician

Physical Plant & Equipment

What does this factor mean?

The current adequacy of the hospital and clinic physical plant and equipment.

Why is it important?

Working in a current medical facility, and having access to up-to-date equipment helps physicians in their day to day practice.

Many candidates have the perception that rural facilities lack important medical equipment.

Having a rundown facility can increase the perception of physician isolation.

Example: A candidate sees the front of your hospital on your website, marketing material, and their site visit. Immediately they have a reaction to what sort of facility it is.

Potential Facility/Community Advantages

If you have a well-kept medical facility and access to current medical technology/equipment, candidates may view this as an advantage.

Example: When speaking to the candidate during their phone interview, you describe and impress the candidate with the medical technology available at your facility.

Potential Facility/Community Challenges

If your facility is old and/or run down, candidates may view that as a challenge.

If your facility doesn't have access to current medical technology/equipment, candidates may view this as a challenge.

Example: Your facility is fairly old, and isn't connected to other key medical facilities (nursing home, clinic, etc...). A candidate who was trained in an urban center, tours your facility and can't picture themselves working there.

Ideas for Solutions to Challenges

Pay attention to the aesthetics of your facility (inside and outside). Often low cost improvements like paint, furniture, and lighting can help improve the feel of a facility.

Explore options for obtaining medical technology/equipment. Sometimes mobile options are available (mobile CT scanner, etc...) or you can find used equipment or even donations from other facilities.

Work with groups in the community (economic development, etc...) to discuss ways to fund improvements to the facility. Make the case of how important the facility is to the community when addressing community-wide solutions (increase in sales tax, etc...).

Summary

Having a nice facility and current medical technology is a great way to initially attract candidates. Working in a place that is modern, convenient, efficient, and aesthetically pleasing makes a physician's life much easier.

Plans for Capital Investment

What does this factor mean?

The adequacy of the hospital plans for capital investment in the hospital and/or clinic.

Why is it important?

Many physicians desire to be part of something that is growing and improving. Reinforcing that your facility has expansion and/or improvement plans supports this idea.

New medical technology and equipment is always being developed.

Plans for capital investment can be especially important if your current facility is older or lacks current medical equipment.

Example: A candidate is looking at your website and sees a link that highlights your facility's 5 year expansion plan.

Potential Facility/Community Advantages

If your facility has conceptualized expansion/improvement plans for the future, a candidate may see this as an advantage.

If your facility has concrete plans expansion/improvement plans for the future, a candidate may see this as an advantage.

Example: During a site visit, you bring the blueprint of your expansion plan to lunch with the candidate. The candidate is able to see concrete plans and feels excited that they could be part of them.

Potential Facility/Community Challenges

If your facility lacks conceptualized plans for improvements or expansion, a candidate may view this as a challenge.

If your facility lacks an organized vision of the future of your facility, a candidate may view this as a challenge.

Example: Your facility is so busy “putting out fires” that plans for the future are rarely formally discussed. A candidate asks about plans to implement more technology in the future, and your facility has no plan or solutions to discuss.

Ideas for Solutions to Challenges

Have a budget each year to save for new medical technology and facility renovations. Work with providers to project what they might need/want in the future and make sure they know you are working to get it.

If you have concrete plans (timelines, budgets, blueprints, etc...) make sure to show them to the candidate.

Form a facility improvement committee that makes recommendations to the board of directors. Although they have no formal power, having a committee can help organize and provide legitimacy to future goals.

Summary

For many candidates, if your facility isn't growing, it is dying. Having written plans or goals for expansion and improvements can excite a candidate about a future with your facility.

Electronic Medical Records

What does this factor mean?

The existence and adequacy of electronic medical records in the hospital and clinic environments

Why is it important?

Many newly trained physicians have likely never practiced without using electronic medical records (EMR).

Some physicians may struggle or resist using EMR, or using a new EMR system.

Having an EMR that isn't widely used in your area, or hasn't been well implemented by your facility can be very frustrated for physicians regardless of their comfort level with technology. Example: A candidate appreciates the fact that your facility was an early adopter of EMR, and has achieved meaningful use stage two.

Potential Facility/Community Advantages

If your facility has a well-established EMR system, candidates may view that as an advantage.

If you have good technical support and an on-site "champion" of your EMR system, candidates may view that as an advantage.

Example: A newly trained candidate used a different EMR system during residency, but feels like they could pick up your facility's well-established system quickly because of the onsite support and technical assistance available.

Potential Facility/Community Challenges

If your facility is struggling in transition to an EMR system, candidates may view this as a challenge.

If your facility has used one system, but is planning to change to another EMR system soon, candidate may view this as a challenge.

If your facility uses an EMR that isn't widely used in your state, and doesn't have support from your facility's providers or staff, a candidate may view this as a challenge.

Example: Your facility purchased an EMR system two years ago that no one else in the state uses. The company doesn't provide good support, and providers and staff dread using it. A candidate interested in your community asks about EMR implementation during their phone interview.

Ideas for Solutions to Challenges

If you don't have one already, develop an on-site "champion" of your EMR system and use.

Use a train the trainer model to develop technical capacity on-site for your EMR system. Contacting someone down the hall, as opposed to calling an 800 number can make frustrations a lot easier to deal with.

Summary

Learning how to use a new EMR system can be challenging for providers. This challenge is compounded if your facility has an unorganized implementation plan or lacks support/capacity to assist with questions on the EMR system.



Internet Access

What does this factor mean?

The existence and adequacy of internet access in the hospital and clinic.

Why is it important?

In modern medicine, the internet is used for looking up patient symptoms, telemedicine connections, and much more.

Rural areas are more prone to having internet connection/speed issues than urban areas.

Example: Your facility is recruiting a candidate that values being able to connect with other providers and find information over the internet.

Potential Facility/Community Advantages

If your facility has dedicated internet access that is reliable and fast, candidates may view that as an advantage.

If your facility has a good Wi-Fi network that covers the whole facility, candidates may view that as an advantage.

Example: When touring your facility, a candidate happens to connect their mobile phone to your Wi-Fi network. They are able to send and receive messages and check their email very easily over your network.

Potential Facility/Community Challenges

If your facility has internet access that is not reliable or slow, candidates may view that as a challenge.

If your facility doesn't have Wi-Fi coverage for all areas of the facility, candidates may view that as a challenge.

Example: During a site visit, a candidate interacts with a patient who is frustrated with their inability to video chat with their family because of the lack of Wi-Fi in the facility. Not having proper Wi-Fi reinforces the candidate's notion of your facility being remote.

Ideas for Solutions to Challenges

Work with your internet provider to get proper internet access that is secure, fast, and covers all of your facility via Wi-Fi.

If facility wide coverage is unavailable, look into personal Wi-Fi options (mobile hotspot, cellular networks, etc...).

Have your physicians communicate to facility leadership (CEO, CFO, board) how important good internet access is for their day to day practice.

Summary

Having good internet access is something most urban areas never have to think about. For rural facilities, your options may be limited. Understand that internet access is important to physicians and work to let them communicate and find information easily.

Telemedicine

What does this factor mean?

The existence and adequacy of telemedicine capability in the community for patient care or other communications.

Why is it important?

Telemedicine availability helps physicians connect to other providers and decreases feelings of isolation.

Having telemedicine available can allow your physicians to have access to specialists and subspecialists that aren't available on-site.

Telemedicine can also be utilized by physicians for CME credits.

Example: Your facility only employs one primary care physician, but you have a number of telemedicine options for that physician to connect with other providers as needed.

Potential Facility/Community Advantages

If your facility has telemedicine capability for physicians to connect with other providers, candidates may view this as an advantage.

Example: A candidate is interested in your rural facility. They are worried being the only physician in the community, especially in the emergency department. However, you are able to show the candidate how your emergency department would connect them with a service of emergency physicians that are able to provide support 24/7.

Potential Facility/Community Challenges

If your facility doesn't have telemedicine capability for physicians to connect with other providers, candidates may view this as a challenge.

Example: A candidate is interested in your rural facility, but is nervous about being the only physician in the community. They ultimately decide to go elsewhere as you have been unable to convince your facility's board to invest in telemedicine technology because they don't see revenue potential.

Ideas for Solutions to Challenges

Work with your facility's leadership to invest in telemedicine. Communicate to them that telemedicine helps keep physicians supported, in addition to helping with patient care.

Network with your State Office of Rural Health to identify if any assistance is available for developing telemedicine capacity.

Summary

In rural communities physicians can often feel isolated and alone in making patient care decisions, especially in the emergency department. Having on demand telemedicine access so physicians can connect to other providers for support can help combat burnout and isolation.

RHC Leadership

What does this factor mean?

The adequacy of RHC leadership including the owners, leadership, managers and/or board functioning.

Why is it important?

RHC leadership make the financial decisions that greatly impact a physician's practice.

When physicians are confident in and supported by their facility's leadership, they feel valued and empowered.

When facility leadership doesn't communicate effectively with physicians, physicians can feel like they are not being supported or heard.

Example: Your facility has a long established CEO, and most feel very confident in their leadership ability.

Potential Facility/Community Advantages

If your facility has well established effective leadership, candidates may view this as an advantage.

Example: During their onsite interview, a candidate meets with your CEO, CFO, and a few members of the board. The candidate leaves the meeting feeling very confident in the ability and stability of your facility's leadership.

Potential Facility/Community Challenges

If your facility doesn't have well established or effective leadership, candidates may view this as a challenge.

Example: Your facility has had three different RHC CEOs over the last five years. The new CEO views the position as a stepping stone to a larger facility, and this comes across when they meet with new candidates.

Ideas for Solutions to Challenges

If you have frequent turnover in top level leadership, communicate where leadership may be more stable (director of nursing, board members, community leaders, etc...).

Make sure the board is knowledgeable about how frequent turnover in leadership impacts physician recruitment/retention. Invest in training and education for middle management. These staff may become your next leaders.

Summary

Rural and underserved facilities will struggle in most areas, including physician recruitment and retention, without strong top level leadership. Develop leaders with connections to your community that can provide stable and effective leadership for incoming physicians.

Physician Recruitment Efficacy

What does this factor mean?

The existence and adequacy of current physician recruitment process.

Why is it important?

Competition in physician recruiting is extremely high. If you aren't following through with a candidate, another facility surely is.

Recruiting a physician is all about the process. The team involved must have specific duties, and be able to follow through as needed.

Rural facilities often lack dedicated recruiting staff. There is also usually a smaller pool of candidates interested in rural.

Example: Your rural facility doesn't have an in house recruiter or formalized recruitment plan, and most recruiting duties fall on your CEO.

Potential Facility/Community Advantages

If your facility has dedicated recruitment staff, candidates may view this as an advantage.

If your facility has a formal recruitment plan/process, candidates may view this as an advantage.

Example: A candidate is interested in your rural community after receiving one of your marketing mailings. They are easily able to find the job on your website, and apply for more information. After applying, they are contacted the next day, and always get information quickly as they request it.

Potential Facility/Community Challenges

If your facility doesn't have dedicated recruitment staff, candidates may view that as a challenge.

If your facility doesn't have a formal recruitment plan/process, candidates may view this as a challenge.

Example: A candidate is interested in your rural community after seeing your job posted online. They leave a message for the contact listed, who is on vacation. When the contact returns and calls back two weeks later, the candidate has already accepted a position elsewhere.

Ideas for Solutions to Challenges

Try to identify holes in your process by asking simple questions about your recruiting process such as "who returns calls if the primary recruitment contact is on vacation?" and "how long does it take us to make contact with a candidate after they are sourced?"

Form a recruitment committee and establish a written recruitment process.

Leverage existing resources on the recruitment process like 3RNet's Recruitment for Retention manual.

Consider joining 3RNet as an Associate Member, and/or the Association of Staff Physician Recruiters (ASPR).

Summary

Your facility may have a great practice opportunity available, but if you don't have a written recruitment process or timely follow up with candidates, it is going to be very hard to successfully find a physician.

Household Member Recruiting & Onboarding

What does this factor mean?

The existence and adequacy of current household members (of physician) recruitment and onboarding.

Why is it important?

When recruiting a physician, you are not just recruiting them, but also their spouse/partner and family.

Oftentimes, the opinion of the spouse/partner is as or more important as the opinion of the physician you are recruiting.

Example: Your facility has a recruitment process that interacts solely with the recruiting physician. All your visits seem to go very well, and your CEO can't understand why you are not signing these recruits.

Potential Facility/Community Advantages

If your facility has a recruitment process that interviews the spouse/partner and seeks to gain their satisfaction, the candidate may view that as an advantage.

If your facility has ongoing support and networking opportunities for the spouse/partner and other household members, the candidate may view that as an advantage.

Example: Candidate is interviewing at three facilities around the area. Your facility is the only one that interviews the spouse/partner. From that interview, you are able to connect them with various opportunities of interest in your community. The spouse/partner now advocates for the physician signing with your facility.

Potential Facility/Community Challenges

If your facility doesn't have a recruitment process that considers the spouse/partner, the candidate may view that as a challenge.

If your facility works with the spouse/partner initially, but doesn't have ongoing support, the candidate may view that as a challenge.

Example: You interview the spouse/partner initially and make a very good impression. However, once the candidate is signed, your staff doesn't follow through with the spouse/partner and they begin to feel isolated during the long hours the physician is practicing. The physician and spouse/partner leave your facility soon after.

Ideas for Solutions to Challenges

Make the recruitment/onboarding of the spouse/partner a central piece of your overall recruitment/retention strategy. Be knowledgeable of local opportunities that the spouse/partner may be interested in.

Don't make promises initially to the spouse/partner, then not follow through once the physician is signed. Treat retention of the spouse/partner as an ongoing priority.

Summary

When a physician is considering signing or staying with your organization, they have many factors that influence their decision. One of, if the more important factor, will be the opinion of their partner/spouse. Work with your entire facility to treat the partner/spouse as well as you treat the incoming physician.

New Physician Mentorship

What does this factor mean?

The existence and adequacy of mentorship of newly hired and less experienced physicians.

Why is it important?

Newly trained physicians are often anxious about a solo practice, even if they won't admit as such.

Medical education doesn't end with residency. Ongoing support from a more experienced physician is crucial to a new physician's development.

Providers in rural areas often feel isolated. Connecting a newly hired physician to a more experienced provider can cut back on this feeling of isolation/anxiety.

Example: Your facility is uniquely positioned to be desirable for physicians right out of residency. Knowing this, you developed an extensive mentorship program for onboarding physicians.

Potential Facility/Community Advantages

If your facility has a structured mentorship program for newly hired physicians, and allows the physician dedicated time for it, candidates may view this as an advantage.

Example: A newly trained physician accepts a position within your facility. A provider that has been with you for 5 years has dedicated time to spend with the new physician and ease their fears of isolation.

Potential Facility/Community Challenges

If your facility doesn't have a mentorship program, or has one but doesn't support it with resources/time, candidates may view this as a challenge.

Example: Your facility has a mentorship program in theory, but it isn't useful because newly physicians are assigned with a mentor that they hardly ever see and lack the ability to connect with.

Ideas for Solutions to Challenges

There is a lot of data on the importance of mentorship for new physicians. Use this to establish the need for a structured program in your facility.

If a good mentor doesn't exist in your community, leverage technology and give the new physician adequate time to travel to visit the mentor.

Support the mentoring physician as much as you can. They can often be a great resource of information if problems are arising that might affect retention of the new physician.

Summary

Physicians often are involved with making life and death decisions. For a newly trained physician this can be terrifying, especially in a rural community that likely won't have the support to offer like they received in training. Have an established mentor can greatly impact the new physician and make sure they get off on the right foot with your facility.

Community Need / Support of Physician

What does this factor mean?

The perceived sense of need for and/or community support of a new physician.

Why is it important?

Physicians that choose rural family medicine often could have chosen a higher paying specialty or area to practice.

Feeling needed, supported, and appreciated by a community can be much more rewarding to physicians that additional money, etc...

Example: A candidate interested in your community is doing their site visit and will be meeting with numerous stakeholders in town.

Potential Facility/Community Advantages

If your community supports your facility and appreciates your providers, a candidate may view that as an advantage.

If your recruitment process involves support from key local stakeholders, candidates may view that as an advantage.

Example: A candidate is interested in your rural facility. Your recruitment process is a community initiative and involves community members, local businesses, and more. During their recruitment, the candidate gets support from the local school, bank, and help finding their spouse a job. The candidate feels needed and appreciated.

Potential Facility/Community Challenges

If your community members have mixed feelings about your facility, and frequently travel to go to other facilities, candidates may view that as a challenge.

If your community is large enough to have a number of healthcare facilities and providers, candidates may not feel as needed and view that as a challenge.

Example: Your rural facility is located 20 miles away from another hospital. Because of their dissatisfaction with previous providers, many community members travel to get care from the neighboring facility.

Ideas for Solutions to Challenges

All recruitment is local, but this is especially true in rural communities. Get key stakeholders involved in your recruitment process!

Target providers interested in living in your rural community (as opposed to commuting from a larger area). When providers don't live in your community, community support can suffer.

Capture real life stories about how your community appreciates their providers and share with incoming candidates.

Summary

In urban areas, physicians are often just another member of the community. For some family medicine physicians, the chance to be needed and appreciated in a rural community can be more desirable than money and other conveniences.

Conclusion

So what do rural physicians want? It depends.

The key question is, what recruitment advantages does your facility have?

By knowing your strengths, you can target specific groups of physicians those strengths are desirable to.

If your strengths don't align with your ideal candidate, changes must be made.

Example: Dr. Smith is searching for a job, and determines what she is looking for. As she is reviewing practice opportunities, she compares each opportunity based on the factors she wants in her practice.

Using the table below, she is able to find an opportunity that offers what she needs.

If Dr. Smith is your ideal candidate, you must have and be able to communicate strength in the factors she desires.

	Scope of Practice	Salary	Outdoors	Call Schedule	Loan Repayment	Services	Physical Plant	Part-time	Telemedicine
RHC 1	X	X	X	X	X			X	X
RHC 2	X	X	X		X	X	X		
RHC 3	X	X	X		X	X	X		
RHC 4		X	X	X	X	X	X		X

