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Rural Health

Knocking Down Silos for Healthier Communities

By guest author Mari Freiberg, Couleecap Board of Directors and CEO of Scenic Bluffs Community Health Centers



Study after study shows that people who live in poverty have shorter life expectancies simply because they earn less money. Since many rural communities have a significant population of low income residents, these are especially important issues to attend to in rural health services.

Poverty is a dramatic indicator of health.

To maintain good health, identifying that someone cannot read, or has a history of domestic abuse, or worries about where they will be sleeping that night, or doesn't have a job —is critical. As people who care about community health, it's important to understand that these are not simply nice things to help with when there is time or extra resources: these are the very issues that can make or break someone's ability to maintain a medication regime or even prioritize an appointment.

Rural Wisconsin is changing and rural health care needs to change too. While many rural small towns continue to depend on agriculture and industries that support the business of farming, small towns are starting to look and feel different. Families often include those who earn their living telecommuting, new immigrant populations create a more dynamic tapestry for community life and rural schools have found new ways to bring a broad array of educational offering to students and communities. Rural health remains a central asset to community growth and development. When rural health providers look at assuring individuals and communities have access to care, it's a win-win. Access includes geography – can a person get to healthcare; financial – can someone afford care, with and without health insurance; culture – are health care services provided with an understanding of the diversity of patient ethnicity and background; and language – are services provided in the language that the person best understands. In rural Wisconsin, health care providers need to demonstrate flexibility and adaptability in order to assure effective services in all these areas.

Scenic Bluffs Community Health Centers delivers patient-centered primary care, supporting healthier people and communities.

At Scenic Bluffs Community Health Centers, our “specialty” is primary care. It's crucial therefore that we focus on coordination in order to merge primary care service with the needs that patients often have around specialty care. Ultimately, it is the job of a rural health provider to assure needs are understood and where we can impact this, that the services a patient receives are coordinated across the health care system. At the Health Center, our large audience of low income patients demonstrates daily that poverty can have a significant impact on a person's interest in and ability to receive care.

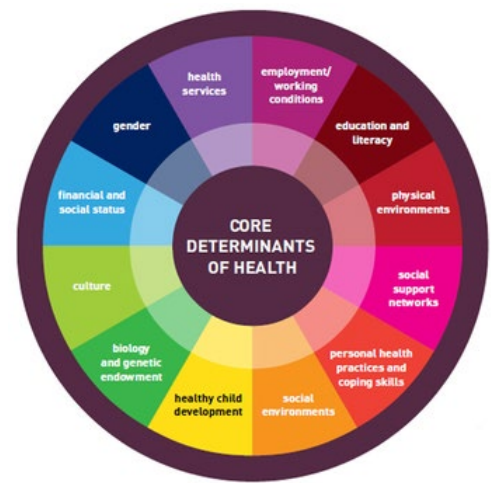
To assure coordinated and responsive care, rural provider strategies are ever evolving.

Especially when you are working with persons in poverty, coordination is key, and it's not just about medical services. The goal is to get a person to come in for preventive services and treat health conditions early so they don't become significant problems. Financial barriers often play a significant role in someone's choice to seek care. Our employer based health insurance system doesn't work for people who are not employed, can't afford insurance, or don't have access to it. Access to sliding fee scale services

(like the Health Center’s sliding fee scale called the Healthy Neighbor Plan) or programs that allow for financial access (the Well Woman Program, Essential Health, local public health departments, free clinics, for example) are critical, and we all need to work together.

It is incumbent on rural health care providers to bring coordinated care to patients. This is tough. Specialty services can be geographically distant and cost prohibitive, and it takes connected partners to deliver good services. To this end, Scenic Bluffs routinely partners with agencies to bring the service we offer closer to the people that need them. We work with schools – serving as the school nurse in Cashton and NOW Schools, help with after school programs, and offer employee education and support around healthy living. Of note, we bring mental health care, dental sealants and immunizations into schools. This reduces the barriers of transportation (parents don’t have to leave work and student time away from class is minimal), cost (because of our sliding fee scale) and reduces the stigma that is too often associated with behavioral health services. We work with area business on employee wellness too, along with serving on 49 different coalitions, committees and boards to stay connected and engaged in the region.

It works best when there is a focus on interdisciplinary support to reduce barriers. This is time intensive and most often, people need someone face-to-face, with a reassuring hand to explain, answer and assist. As rural providers, this happens in various ways but at Scenic Bluffs, we do this through outreach staff, called the Help Team, through a brief intervention, by doing a daily huddle on the schedule to figure out who might need some extra assistance and lots of training for staff in understanding that what impacts someone’s health has as much to do with their zip code and life experiences as it does their genetics. Where someone lives, works and plays relates to the determinants of health and life experiences as they impact health is often called trauma informed care.



Primary to a strong rural health delivery system is workforce.

Rural Wisconsin routinely experiences health care provider shortages – physicians, pharmacists, dentists, dental hygienists, mental health therapists, chiropractors, nurse practitioners, nurse midwives, physician assistants, clinical assistants in all fields and health educators of all types. Rural health organizations (clinics like Scenic Bluffs, hospitals, nursing homes, therapy practices, independent provider offices) need to recruit and retain the best and the brightest. This means we have to work in tandem with schools, local businesses and realtors to “sell” the community together. It is important for rural providers to help train the next generation of health workforce as well, because we can show the needs and challenges, along with the strengths of rural practice. In our region, we do this with area colleges, universities, and high schools, along with the Scenic Rivers Area Health Education Center.

Agency relationships assure we can effectively link people to the wide range of social supports in the region. Food pantries (like the ones operated Couleecap, Bethel Buttik and Cashton Cupboard and Closet), recovery supports through Coulee Recovery Center, homeless prevention programs, legal access through Legal Action of Wisconsin – all serve as essential pieces of the net of support that move people from living in stress to being able to focus on healing.

Language access is also increasingly important in rural western Wisconsin. Immigrant communities are settling in our communities to raise families and work in local businesses and as farmers. Supporting our new neighbors means rural health care providers need to step up their game in language and cultural

access to care. Maintaining a healthy workforce alone, not to mention state and federal regulations, means clinical services provided in the language that is most comfortable for the patient is essential. When someone has strep throat or a persistent cough or a pain in their arm, assuring they can communicate effectively in the language they are most comfortable means they can get care.

Healthy rural communities also means a focus on land and water, and efforts to strengthen environmental health, led by local public health departments, are essential. Safer playgrounds and walking paths, electronics recycling and planning help. As an example, Couleecap led the way in building regional capacity for safe medication disposal through a network of medication drop boxes. These are places where anyone can dispose of unused, unwanted or expired prescription and over-the-counter medication. This is not only a strategy for preventing illicit drug use and unintentional poisonings in the community, but also protects our water supply from pharmaceutical contamination. We are pleased to host one at our Cashton location.

Collaboration and interdisciplinary care, along with strong communication is required in order to link people living in poverty to the resources needed in order to focus on their own health and that of their families and support networks. Doing this is time intensive and requires rural providers to do more than the traditional visit. It can be done however in partnership, and communities and individuals will be healthier because of it.

Couleecap, Inc. is a private non-profit 501(c)3 charitable organization created in 1966. Our mission is to fight poverty and promote self-sufficiency, economic development, and social justice. We are People Helping People, and every day our actions make a difference in the lives of people and families throughout the Coulee Region. We currently implement more than 50 contracts in the areas of housing, emergency assistance, child and family development, business development, employment, transportation, and health services. Each year, Couleecap helps more than 22,000 people work towards self-sufficiency and realizing a better tomorrow. Visit our website at couleecap.org or connect with us on [Facebook](#), [Twitter](#), and [YouTube](#).

Special thanks to our guest author Mari Freiberg, Couleecap Board of Directors and CEO of Scenic Bluffs Community Health Centers.

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