Recruitment and Retention Programs Drawing More Physicians and Health Care Providers to South Dakota

Two Recruitment and Retention (R&R) programs sponsored by the South Dakota State Office of Rural Health (SD SORH) have been so successful that they were recently revised and expanded. The programs are designed to help rural facilities— including hospitals and long-term care facilities—recruit physicians and other health professionals.

“We have great support from the executive and legislative branches in the state—both programs are funded by the state government,” said Sandra Durick, Administrator of the SD SORH. “Our governor has been supportive of rural health care including R&R programs.”

The Recruitment Assistance Program (RAP), which has been in existence in various forms since 1988, was expanded in the state’s last legislative session to encompass more levels of practice. Whereas in the past only family medicine physicians, general practice dentists, physician assistants and nurse practitioners were included in the program, it now also includes pediatricians, internists, ob/gyns, pediatric dentists and nurse midwives, said Josie Petersen, who coordinates the RAP program.

The Rural Healthcare Facility Recruitment Assistance Program (RHFRAP) was enhanced and approved by the 2012 legislature, with the incentive amount increasing from $5,000 to $10,000, along with the service obligation expanding from two to three years. The program recruits health professionals from a variety of fields including dietitians, LPN or RN nurses, occupational, physical and respiratory therapists, pharmacists and laboratory technologists. “With the legislative changes, all 60 spots for the 2012 program were filled and we anticipate filling all spots in the 2013 program as well,” said Karen Cudmore, RHFRAP program coordinator.

“The retention rates have been excellent,” Durick said. When a facility finds someone they want to recruit, they apply to the SD SORH for the funding. Communities of 10,000 people or less are eligible to participate in either program. Communities will pay a portion of the incentive payment based on their population size. Health professionals receive the full amount of the incentive after they have worked the required three years.