NOSORH Update
NOSORH Update

Strategy for 2019 - 2022
✓ Focus on future and function
✓ What it means for how we work together and what we are planning for you.
✓ What do you think?

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Board leadership

- Focus on future
- Focus on governance & structure

Q11 Please rate the effectiveness of the NOSORH Board in the following areas.
Craft a broad vision for State Offices of Rural Health and their stakeholders to best meet the evolving needs of the rural communities they serve by 2025 and beyond.”

Chair: Graham Adams

- Crystal Barter
- Natalie Claiborne
- Alisa Druzba
- Scott Ekblad
- Michelle Mills
- Melissa VanDyne

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Futures Task Force Top Trends

1. Evolving Rural Health Landscape
2. Payment Reform
3. Mental and Behavioral Health (including SUD)
4. Population Health and Health Equity
5. Rural EMS
6. Workforce
7. Aging
8. Technology
9. Data

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# Evolving Rural Health Landscape

<table>
<thead>
<tr>
<th>Area of Focus - Community Need in the Future</th>
<th>Skillset or staff needed in the future</th>
<th>Resources - Funding Needed</th>
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</thead>
</table>
| • Rural healthcare provider infrastructure is changing  
• Primary care is a driver of increasing quality and cost containment  
• Hospitals closing and merging into larger systems  
• Physician employment increasing  
• Increasing consumer demands for convenience & transparency  
• Business and commercial health clinic solutions  
• Focus on chronic care management  
• Need for oral and behavioral health integration | • Knowledge of emerging access points (e.g. minute clinics, employer-owned clinics)  
• Ability to effectively engage with larger systems staff with health system experience | • Continued flexibility in existing FORHP lines |
## Population Health & Health Equity

<table>
<thead>
<tr>
<th>Areas of Focus/Community Need in the future</th>
<th>Skillset/staff needed in the future</th>
<th>Resources/Funding Needed</th>
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</thead>
<tbody>
<tr>
<td>- SORHs can help primary care providers better integrate population health efforts and meaningfully engage community partners</td>
<td>- Knowledge of the social determinants of health, social justice, and equity issues</td>
<td>- Ongoing educational offerings NOSORH and others make available to SORH staff</td>
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<td>- Poverty as a driver of poor health status</td>
<td>- Effective use of social media</td>
<td>- Flexibility in current funding lines to address these issues</td>
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<td>- Focus on wellness and health promotion</td>
<td>- Multi-lingual training in community</td>
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<td>- Flex program efforts</td>
<td>- Motivational interviewing</td>
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<td>- Community Health Needs Assessments</td>
<td>- Economic development awareness</td>
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<td>- Consideration of special populations</td>
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## Data

### Areas of Focus/Community Need in the future

- Health care providers are required to submit increasing levels of quality data to payers
- Providers & health systems will need data to effectively manage patient care and outcomes
- Consumer data can help improve NRHD messaging and rural community development

### Skillset/staff needed in the future

- The value of big data in predicting patient & consumer behavior
- Data use in care management
- Ability to assist providers in required quality data submission

### Resources/Funding Needed

- NOSORH and others can assist SORHs with educational offerings related to data collection, submission and management
So
What?
National Organization of State Offices of Rural Health

NOSORH promotes the capacity of State Offices of Rural Health and their stakeholders to improve health in rural America through leadership development, advocacy, education and partnerships.
### POWER OF RURAL - STRATEGIC PLAN
#### 2019-2022

#### CULTIVATE
- Cultivate a vital, innovative rural health landscape and infrastructure.
- The value of rural innovation, integration and quality of care.
- Grow capacity and share new models for community engagement and primary care access.
- Align with NOSORH corporate and association partners to build urban system and rural collaborative efforts for the future.
- To ensure sustainability and growth of emerging access points for rural Americans.
- 25% growth in primary care TA reach and primary care proficiency.

#### GROW
- Grow leadership to address rural population health and health equity.
- The importance of leadership to improve population health, achieve health equity and address the SDOH.
- Utilize a leadership framework for alignment and integration of community-based programs to make the business case for population health and health equity.
- Affiliate with state and county focused partners to grow leadership for SDOH and health equity.
- Identify models and priorities for program integration and leadership to improve population health, health equity and address SDOH.
- 25% growth in leadership and proficiency for population health and health equity.

#### BUILD
- Build capacity for rural data driven program planning and decision making.
- Rural relevant data and messages for the power of rural.
- Share and analyze data for responding to program changes, integration of care, SDOH, population health and health equity.
- Connect research and data needs of SORH and rural stakeholders with research partners.
- Resource SORH with state data sets which can inform programs and decision making on integration, rural urban connection, new access points, SDOH, health equity and population health.
- 25% increase of SORH providing TA and proficiency for data.

#### ADVOCATE
- Advocate for meaningful partnerships and additional resources for SORH, and their stakeholders.
- The role of SORH, future TA needs of rural stakeholders and NOSORH policy and program priorities.
- Inform policy makers and partners on the unique position, model programs, and capacity of SORH and their stakeholders.
- Engage national, federal, state and local partners with their SORH to communicate rural success, needs and the Power of Rural.
- Identify and resource communities, partners and SORH to seed new sustainable models of innovation.
- New line of SORH funding and basic SORH funding increases to $15 million by 2022.

#### COMMUNICATE
#### EDUCATE
#### COLLABORATE
#### INNOVATE
#### IMPACT
CULTIVATE

Cultivate a vital, innovative rural health landscape and infrastructure.

25% increase in primary care TA reach and proficiency
Cultivate - Where shall we prioritize our time and effort?

Communicate-The value of rural innovation, integration and quality of care.

Educate-Grow capacity & share new models for community engagement & primary care access.

Collaborate-Align with NOSORH corporate and association partners to build urban system and rural collaborative efforts for the future.

Innovate- To ensure sustainability and growth of emerging access points for rural Americans.
GROW

Grow leadership to address rural population health and health equity.

25% growth in leadership and proficiency for population health and health equity.
GROW – where shall we prioritize our time & effort?

Communicate-The importance of leadership to improve population health, achieve health equity and address the SDOH.

Educate-Utilize a leadership framework for alignment & integration of programs to make the business case for population health & health equity.

Collaborate-Affiliate with state and county focused partners to grow leadership for SDOH and health equity.

Innovate-Identify models & priorities for program integration & leadership for population health, health equity & SDOH.
BUILD

Build capacity for rural data driven program planning and decision making.

*25% increase in SORH TA for data and proficiency.*
BUILD – where shall we prioritize our time and effort?

Communicate- Rural relevant data and messages for the power of rural.

Educate- Share & analyze data for responding to program changes, integration of care, SDOH, population health & health

Collaborate- Connect research and data needs of SORH and rural stakeholders with research partners.

Innovate- Resource SORH with state data sets on integration, rural urban connection, new access points.
Advocate for meaningful partnerships and additional resources for SORH, and their stakeholders.

New line of SORH funding and an increase in basic SORH line to $15 million
ADVOCATE – where shall we prioritize our time and effort?

Communicate-The role of SORH, future TA needs of rural stakeholders and NOSORH policy and program priorities.

Educate-Inform policy & partners on the unique position, model programs, and capacity of SORH and their stakeholders.

Collaborate- Engage national, federal, state and local partners with their SORH to communicate rural success, needs and the Power of Rural.

Innovate-Identify & resource communities, partners & SORH to seed new sustainable models of innovation.
“Assure that NOSORH board structure and committee structure are performing to the highest measure of efficiency and effectiveness.”

Chair: Kris Juliar
Corie Kaiser
Crystal Barter
Lynette Dickson
Cathleen McEllicott
Melissa VanDyne
Ernie Scott

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Function ...

- Board expertise
- Best practices assessment
- Reviewed relevance of community purposes
Refreshed committee purposes

• Educational Strategy
• Innovation Development Committee
• Primary Care
• Policy Analysis and Response Committee
Small groups

Utilize informal, volunteer led “Small Education Exchange and Development” groups (SEEDs) to promote learning, information exchange and engagement among SORH and their colleagues.
What SEEDS shall we experiment with? (Pick 2)

- Payment reform
- Population health and health equity
- Public health collaboration
- Building urban rural collaboration
- Emerging access points and health professions
- Rural technology solutions
- Behavioral health services and systems
What SEEDS shall we experiment with?

Payment reform

Population health and health equity

Public health collaboration

Building urban rural collaboration

Emerging access points and health professions

Rural technology solutions

Behavioral health services and systems
Comments?
Thumbs up?
Thank you!