

## 6<sup>th</sup> ANNUAL RURAL HEALTH CONFERENCE A SUCCESS

*Sarah Moe Winterstein, Education &  
Outreach Coordinator*

The Holiday Inn in Mt. Pleasant was the setting for the 6<sup>th</sup> Annual Rural Health Conference, held April 30<sup>th</sup> - May 2<sup>nd</sup>, 2003.



*Ned Hughes, Immediate Past President (R) presents the 2003 Loren O. Gettel award to Douglas Pattullo (L) of West Branch Regional Medical Center*

Douglas Pattullo, CEO of West Branch Regional Medical Center received the 2003 Loren O. Gettel award. Gettel scholarship awards were presented to three students from the Michigan State University College of Human Medicine

and College of Osteopathic Medicine, the recipients were: Elizabeth Palmer, Robert Bo Poley, and Gloria VanKlompberg. The Loren O. Gettel Award and Scholarship Program in Rural Health is a tribute to the life of Loren Gettel. He was a third generation farmer in the Thumb of Michigan. Loren had a strong commitment to rural health and a passion that rural Michiganders deserved only the best of health care service

This year's 2003 MRHA Citizen Award recipients were, Carol Parker Lee from the Michigan Primary Care Association, Representative Stephen Ehardt and Representative Bill Huizenga.

Nearly 60 attendees heard an outstanding lineup of speakers including: John Supplitt, American Hospital Association on *the Current and Future State of Rural Healthcare*, Gerber Memorial Hospital staff on *Leadership Development, Michigan Stroke*, Larry Lawhorne from the Geriatric Education Center of Michigan, *Workforce Needs*, Walter Wheeler with MDCIS on *Bio Preparedness*, and Nancy Lindman with the *2-1-1 Initiative*.

For information about next year's conference, or to participate on the conference planning committee, contact Sarah Moe Winterstein at (517) 355-7979.

## Michigan Center for Rural Health

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## PHYSICIAN RECRUITMENT- DEVELOPING A COMPENSATION PACKAGE

*Steve Shotwell, Recruitment Coordinator*

Once you have determined the type of provider your facility requires, you have put together your opportunity profile and the recruitment team is in place, don't forget the contract. When the right candidate has interviewed and is interested in your community, having a draft agreement ready to share with them may be the icing on the cake.

Take the time to determine what a reasonable compensation package will be. Is it market competitive? Are the benefits standard for your industry? Is there room for negotiation? Will the candidate be employed or offered an income guarantee?

Compensation packages come in various sizes and forms. Size refers to the dollar value of the offer, while form refers to the specific compensation agreement. Both the size and form of your compensation package will impact the attractiveness of your offer. What's more appealing to candidates today: a simple one or two year income guarantee with entrepreneurial potential and the opportunity for higher income or an employment model with a lower annual salary, full benefits and no risk. Many new physicians will opt for the second offer because it is guaranteed, less risky and they will not have the onus of practice management. Take the time to analyze what is best for your facility, your medical staff and your community. It will help you screen and choose the right candidate. You should exercise caution when developing hospital sponsored

recruitment packages, and you should always seek legal counsel. Failing to comply with laws affecting provider recruitment can bring stiff penalties to your facility and you. Non-profit hospitals can lose their tax-exempt status. Hospitals in violation of illegal remuneration fraud and abuse statutes can lose their Medicare/Medicaid provider status

## **FROM THE DESK OF THE EXECUTIVE DIRECTOR**

*John Barnas, MCRH Executive Director*

The Annual Rural Health Conference is now in the history books and we thank all of you for attending. If you missed the conference you missed a great opportunity to become familiar with "Learning Organizations." Ned Hughes, CEO of Gerber Memorial Hospital, and his three administrative staff (Sue Niebor, Gary Allore, and Brian Henick), presented the concept and how it has transformed their hospital. As another hospital administrator told me, "If I knew how powerful this topic would be I would have sent five more people to the conference." It was that powerful.

Big news. On Friday, May 2, Health and Human Services Secretary Tommy G. Thompson announced the winners for the first-year funding of the federal Office of Rural Health Policy Rural Outreach and Rural Network Development grants. Michigan has three winners for new rural Outreach grant programs: Marquette General Hospital, Harbor Beach Community Hospital, and Borgess Lee Memorial Hospital. What makes this announcement exciting is Harbor Beach Community and Borgess Lee Memorial

Hospital are both Critical Access Hospitals; and Marquette General Hospital is the Network hospital for the six CAHs in the Upper Peninsula. These grant dollars will strengthen the health care systems in the smallest of our rural communities and encourage collaboration among communities. We are quite proud of their achievements.

The Michigan Center for Rural Health Annual Meeting was April 25 and election of officers occurred. New officers are President Dr. Afonso Ferreira (representing the MSMS), Vice-President Dr. Thomas Fasbender (representing the MOA), Secretary/Treasurer William Hart (representing the MDCH), and Immediate Past-President Ned Hughes (representing the MHA). Barb Mikowski (representing the MNA) is officially out of the 'officer' role she has held as two-term president and one-term as immediate past-president. She has been a wealth of information and true leader for the organization.

Our newest board member is Cali Mortenson. She is the Office of the Governor representative and works in the Public Policy Division. We look forward to her energy and health policy knowledge at MCRH board meetings and events.

In this issue you will read about the "Rural Traffic Safety Partners" grant we are managing. What a fantastic community development model Standish, Kalkaska, Pigeon, and Manistique residents are participating in and learning. The carry-over learning will assist the communities in solving other community issues as they arise. We are investigating expanding the program to other rural communities.

As always, please contact the MCH staff with issues as needed. We are striving to be your rural single point of contact.

**TELEHEALTH CONFERENCE**  
**JUNE 18<sup>TH</sup> & 19<sup>TH</sup>, 2003**  
**Ostego Club at**  
**Hidden Valley • Gaylord**  
*Marolee Neuberger, RHI Program*  
*Coordinator*

The second Annual Telehealth Conference will be held the afternoon of June 18<sup>th</sup> and all day on Thursday June 19<sup>th</sup>. The conference will focus on the practical aspects of telehealth applications: education, administrative, and clinical. Current projects in rural Michigan will be presented as well as a demonstration of various applications and devices. Wednesday afternoon sessions start at 1:00 PM. There will be a presentation on "An Overview of Telehealth" and "Telehealth: What is Happening in Michigan." A social hour with poster presentations and displays will take place from 5:00-6:30 PM. Thursday morning sessions include the following: "Research: What Data Tells us," "Looking for Money In All The Right Places," "Reimbursement: How to Approach 3<sup>rd</sup> Party Payers," and a "Technology Demonstration." The afternoon session will be presentations on ten current program applications in rural Michigan. These programs deliver services in the areas of education, specialty clinical services, or other applications such as medical informatics and electronic medical records. Registration information is on our website at [www.com.msu.edu/mich](http://www.com.msu.edu/mich) or you can contact Marolee Neuberger at [mneuber@msu.edu](mailto:mneuber@msu.edu) or call 517-355-8250.

**GETTING TO KNOW YOU:**  
*Sarah Moe Winterstein, Education & Outreach Coordinator*

If you are interested in having your organization featured in the "Getting to Know You" section, please submit an article or pamphlets to Sarah Moe Winterstein: [winter23@msu.edu](mailto:winter23@msu.edu) or (517) 432-0007 Fax.

**PHYSICIANS**  
**INFORMATION RESOURCE**  
**FOR MEDICINE**

The Centers for Medicare and Medicaid services announces the redesigned Physicians web page. The new page titled "Physicians Resource for Medicare" went live Friday, March 21, 2003 and can be viewed at <http://www.cms.hhs.gov/physicians/> There are many new features including a Physician Listserv and the Medicare Physician Fee Schedule Look-up.

**ANNUAL ORAL HEALTH**  
**CONFERENCE**

MPCA and MDCH put on an annual Oral Health Conference each year. The targeted audience is local public health, dentists, and clinic administrators. This year with the cut of adult dental under Medicaid, it is expected that hospitals may have a renewed interest in oral health.

Mark your calendars for June 17<sup>th</sup> and 18<sup>th</sup>, 2003 for Michigan's premier oral health conference. For more information please contact MPCA at (517) 381-8000 ext. 212 or log on to [www.mpca.net](http://www.mpca.net)

## 2003 GRAND ROUNDS

*Sarah Moe Winterstein, Education & Outreach Coordinator*

The Michigan Center for Rural Health has partnered with the Geriatric Education Center of Michigan to jointly sponsor monthly Geriatric Grand Rounds and also with the Michigan Arthritis Collaborative Partnership to jointly sponsor monthly Arthritis Grand Rounds via telebroadcast to rural areas of Michigan. The grand rounds are dually accredited for a maximum of one hour of Category 1 Continuing Medical Education credit per presentation.

*Geriatric Grand Rounds* are held the *first Wednesday* of each month from *Noon to 1:00 p.m.* except in July and August.

### GERIATRIC GRAND ROUNDS 2003 SCHEDULE

June 4 - Foot Care in the Elderly  
September 3 - Unintended Weight Loss  
October 1 - HOLD: Health Literacy  
November 5 - Update on the Dementias  
December 3 - Medications in the Elderly

*Arthritis Grand Rounds* are held the *second Wednesday* of each month from *Noon to 1:00 p.m.* except in July and August.

### ARTHRITIS GRAND ROUNDS 2003 SCHEDULE

June 11 - Use of the Laboratory in Arthritis  
September 10 - Presentation of RA in Childhood  
October 8 - Inflammatory Muscle Disease  
November 12 - Gout and its Therapy  
December 10 - Treatment of Arthritis in Pregnancy

## THE MICHIGAN CENTER FOR RURAL HEALTH & CARDIAC SCIENCE

The Michigan Center for Rural Health and Michigan Department of Consumer & Industry Services are pleased to announce that Cardiac Science has been awarded the rural AED contract to distribute 120 AEDs in rural Michigan. Funded through a grant through the Federal Office of Rural Health Policy, the Cardiac Science Powerheart will be distributed to licensed Medical First Responders in 38 rural counties. Additionally, the Cardiac Science Powerheart contract pricing (\$1749.00) is extended to any rural (501) (c3) organization.



### **Powerheart® RescueReady Features:**

*Powerheart® is the only AED that confirms your AED's three critical components (battery, circuitry and electrodes) are in proper working order. Powerheart® is the only AED that can determine the electrode integrity. Powerheart® AED is the only AED that does not require an additional battery to be with the device at all times. Powerheart® features one-button operation.*

## FUNDRAISING WORKSHOPS

*Sarah Moe Winterstein, Education & Outreach Coordinator*

The Michigan Center for Rural Health and the Michigan Nonprofit Association will be jointly sponsoring quarterly Fundraising Workshops via telebroadcast to rural areas of Michigan. The cost for these workshops will be \$15.00 per person per workshop.

Fundraising Workshops will be held the third Wednesday quarterly from Noon to 1:30 p.m. The Workshops will originate from Michigan State University and will be transmitted to rural health care providers in Michigan via the REMEC Telehealth network and the Upper Peninsula Telehealth Network.

### FUNDRAISING WORKSHOPS 2003 SCHEDULE

May 21 - Fund Advancement Planning  
August 29 - Proposal Writing  
November 19 - Planned Giving



## FUNDRAISING WORKSHOP REGISTRATION

NAME

ORGANIZATION

ADDRESS

CITY

STATE/ZIP

PHONE

FAX

EMAIL

- August 29 - Proposal Writing
- November 19 - Planned Giving

\$15.00 per person per session  
\$30.00 for entire series

Please fax/mail registration and payment to:

Michigan Center for Rural Health  
B218 West Fee Hall  
Michigan State University  
East Lansing, MI 48824  
(517) 432-0007 Fax

Please call Sarah Moe Winterstein at:  
(517) 355-7979 if you have questions.

# PARTNERS FOR RURAL TRAFFIC SAFETY PROJECT-UPDATE

*Angie Dietlein, CAH Program Administrator*

The Partners for Rural Traffic Safety Project is a model community campaign developed in partnership with the National Rural Health Association (NRHA) and the National Highway Traffic Safety Administration (NHTSA).

Michigan's project team includes representatives from the State of Michigan Highway Safety Planning, Michigan State Police Section of Traffic Services, Michigan Department of Community Health "Safe Kids Program", and the MSU Extension Service.



Ranging from the Upper Peninsula to the thumb, four Michigan communities were chosen to participate in the project to improve traffic safety, specifically working to increase safety belt use and child safety seat use. Each participating Michigan community – Manistique, Kalkaska, Pigeon, and Standish, will receive grant funding. Each community will develop skills through education and training activities to implement grass-roots

initiatives to enhance rural traffic safety. Interestingly, each of these communities is served by one of Michigan's Critical Access Hospitals.

Community volunteers representing health, business, education, religious and community-at-large sectors, in partnership with their local critical access hospitals, were charged with developing a 30-day campaign beginning May 1<sup>st</sup> to include community education as well as pre and post safety belt surveys to determine the level of impact. The four communities have met with their volunteers and developed plans for communities.

Kalkaska Memorial Health Center –Joe Dupuie, Team Leader. The Kalkaska community plans to:

- Conduct a poster contest with 4<sup>th</sup>-8<sup>th</sup> grades
- Place posters in local businesses
- Provide paycheck stuffers with flyers for the 4 largest employers in the community
- Conduct a Kids Health Fair – May 1<sup>st</sup>
- Hold a car seat inspection day
- Buttons will be passed out at the area festival
- Marquees will go up in Kalkaska encouraging citizens to "Buckle Up"
- Placemats will be provided to area restaurants



- Buckle Up Kalkaska" signs will be placed at business exits.

Schoolcraft Memorial Hospital – Susan Phillips, Team Leader. The Manistique community has adopted an aggressive project, and plans are continuing:

- Deputize kids with junior police badges for family cars
- Showcase seatbelt survivors in public service announcements, or paid advertising
- Hand out reward incentives, i.e. Lifesavers for persons buckled up
- Benediction at church." Go in Piece and Buckle Up"
- Car seat check/incentives
- Color poster contests



- Kids coloring grocery bags
- Law enforcement speakers at service meetings
- Pledge tree
- Appearances at local schools by "Vince & Larry", the National Highway Traffic Safety Administration's (NHTSA) crash test dummies
- Children writing thank you letters for buckling up
- Several of the groups will plan additional activities.

St. Mary's Standish Community Hospital –Mary Pearsall, Team Leader. The Standish community has met twice. Their May events include:

- "Vince and Larry," at elementary schools to greet students
- Convincer and rollover simulator at different community events e.g., at 3 high schools on prom day
- Law enforcement will monitor motorists for seatbelt usage and enter their names into a drawing for four weeks. There will be 10 drawings a week
- Free car wash from high school students for motorists using seat belts
- Role model speaker at the middle school.

Scheurer Hospital – Kelli Braun, Team Leader. Events for Pigeon and the surrounding communities for May are:

- Car seat inspections
- "55 Alive" (Mature Driver's Safety Program)
- Poster campaign
- Convincer and rollover simulator, and "Vince and Larry"
- Grocery bag contest
- "Buckle Up America" T-shirt giveaway for community events and raffles.



Community participation and support for the Partners for Rural Traffic Safety Project in all four communities has been excellent. Each project is set according to individual community design to enhance rural traffic safety. They are "taking charge" to increase safety in their communities. We look forward reports following the May campaign.

## **LITERACY SKILLS ARE STRONGEST PREDICTOR OF HEALTH STATUS IN UNITED STATES**

*New Coalition Unveils Action Agenda, Tools to Elevate  
'Health Literacy' Among At-Risk Populations*

Literacy skills are a stronger predictor of an individual's health status than age, income, employment status, education level, or racial/ethnic group, according to the Partnership for Clear Health Communication. The group, a new coalition of 19 of the nation's top health and civic organizations, today unveiled an aggressive action agenda that addresses the growing public health problem of low "health literacy," or the ability to read, understand and act on health information.

An increasing body of evidence indicates that low health literacy may be an underlying factor in high use of some health care services as well as influencing health outcomes. This pervasive but, until now, relatively hidden issue is estimated to cost the U.S. health care system up to \$73 billion annually and puts 90 million people -- nearly 1-in-3 -- at risk for poor health outcomes.

The difficulty may be due to poor reading comprehension skills, the complexity of medical information, or the format in which it is delivered. Certain groups are more vulnerable due to age, language skills, cultural factors or reading skills; however, anyone can have difficulty understanding health care information. Studies have shown that even people who are college educated and can understand complicated words prefer to have medical information stated simply.

"Medical terms often come across to patients as if the doctor is speaking another language," said Dr. David Baker, a member of the Partnership and Chief of General Internal Medicine at the Feinberg School of Medicine, Northwestern University. "Health information needs to be communicated to patients in plain language and in a way that is appropriate to patients' individual background and culture. The Partnership for Clear Health Communication was formed to leverage the collective resources and expertise of its members to improve communication between patients and health care providers."

### **The Partnership for Clear Health Communication Action Agenda**

The Partnership for Clear Health Communication will promote awareness of and solutions to low health literacy and its effect on health outcomes while furthering the cause of increased, meaningful communication between patients and providers by:

1. Educating patients and providers
2. Developing and applying practical solutions to improve patient-provider communication
3. Conducting nationally coordinated research to further define the health literacy issue and evaluate solutions.
4. Increasing support for health literacy policy and funding

The Partnership and its members are committed to offering free and low-cost resources and programs that deliver information, medical education and practice management tools to health care providers and groups that provide information to patients.

“Effective communication tools are particularly critical when people of different cultures, ethnic and racial backgrounds need to exchange information in a way that all parties can understand and respond,” said Dr. Sharon Allison-Otley, a physician and Chair of the Health Literacy Task Force of the National Medical Association, a member of the Partnership. “The first step in this solution is to help patients and providers communicate in a clear manner. One tool that can help this process is *Ask Me 3*.”

*Ask Me 3* is a tool developed by the Partnership to help improve health communication between patients and providers. Through patient and provider education materials developed by leading health literacy experts (available online at [www.AskMe3.org](http://www.AskMe3.org)), *Ask Me 3* promotes three simple but essential questions patients can ask their providers in every health care interaction:

1. What is my main problem?
2. What do I need to do?
3. Why is it important for me to do this?

“There are many solutions to the low health literacy problem that cost little or nothing, are easy to implement, and don’t take much time,” said Janet Ohene-Frempong, MS, health literacy expert and a member of the Partnership. “Most can help to effectively organize and focus patient-provider interactions in a way that can ultimately save time for the provider, improve health outcomes, and even save lives.”

Better understanding of low health literacy is an essential step in improving patient/provider communication. Therefore, additional educational and resource materials such as examples of simple interventions, literacy resources, and a bibliography of research studies are also available at [www.AskMe3.org](http://www.AskMe3.org).

### **About the Partnership for Clear Health Communication**

The **Partnership for Clear Health Communication** is a coalition of national organizations that are working together to promote awareness and solutions around the issue of low health literacy and its effect on health outcomes. The Partnership serves consumers, public health officials, health care professionals, health educators, literacy specialists, patient advocates and caregivers, health associations and policy makers.

The Partnership and its members are committed to offering resources and programs that deliver information, medical education and practice management tools to providers of care and information to patients.

**Partnership for Clear Health Communication Steering Committee members include:**

American Federation for Aging Research  
American Medical Association Foundation  
American Nurses Association  
American Pharmacists Association  
American Public Health Association  
David Baker, MD  
California Literacy, Inc.  
National Alliance for Caregiving  
National Alliance for Hispanic Health  
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*For more information on the Partnership for Clear Health Communication or Ask Me 3, please visit our Web site: [www.AskMe3.org](http://www.AskMe3.org).*

For additional information, to submit an article or questions about materials contained in this newsletter, please contact:

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