Exploring Rural Healthcare Systems: An Administrative Learning Approach to Operations, Growth, and Success

Lessons on Barriers, Facilitators, and Strategies

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MPH Candidate
2025

Outline

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- Purpose and Passion
- Background and Research
- Internship Site Overview
- Learning Objectives and Responsibilities
- MPH Foundational Competencies and Products
- Emphasis Area Competencies
- Discussion
- Summary
- Acknowledgements

About Me

Education

- Bachelor of Science in Nutrition and Health – Kansas State University
  - Minors: Biology, Psychology
  - Certificate: Global Health, Medicine and Society
  - Emphasis: Pre-PA

Professional Experiences

- Teaching Assistant – Nutritional Assessment and Personal Wellness
- Research Assistant – Healthy for Life Program for Grandparents
- Certified Nursing Assistant

Purpose and Passion

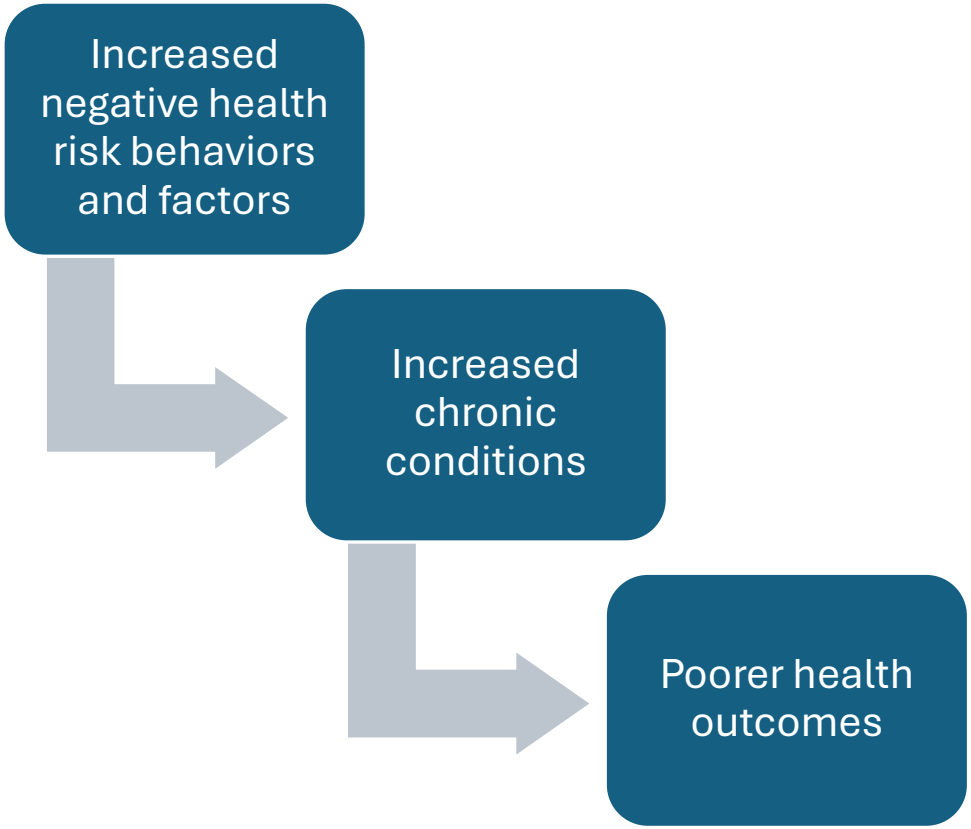
- To develop the knowledge and skills necessary to become an effective Healthcare Administrator in a successful and growing rural healthcare institution
- Passionate about:
  - rural populations
  - healthcare access
  - health and wellness
  - servant leadership

Background: Rural Populations

- **1 in 5** Americans live in rural areas, but only **1 in 10** clinicians practice there
- **Over 80%** of rural America is medically underserved
- Rural populations are older and more likely to be veterans
- **Over 60%** of all health professional shortage areas are rural
- **At least 25%** of rural hospitals in most states are at risk of closure
- Many lack access to affordable, safe transportation, housing, food, and clean water

Background

Rural-Urban Health Disparities:



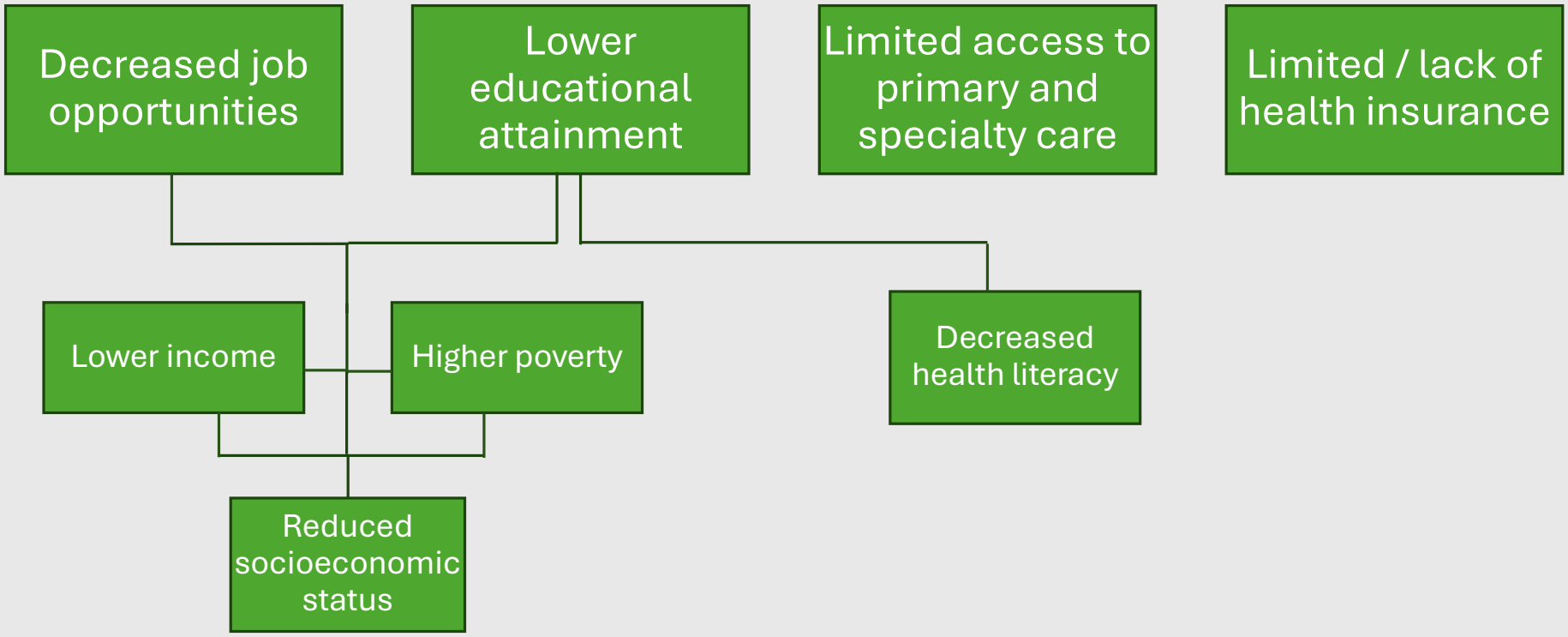
Rural populations

Increased negative health risk behaviors:

- smoking and tobacco use
- alcohol consumption
- physical activity
- food insecurity
- weight
- sleep

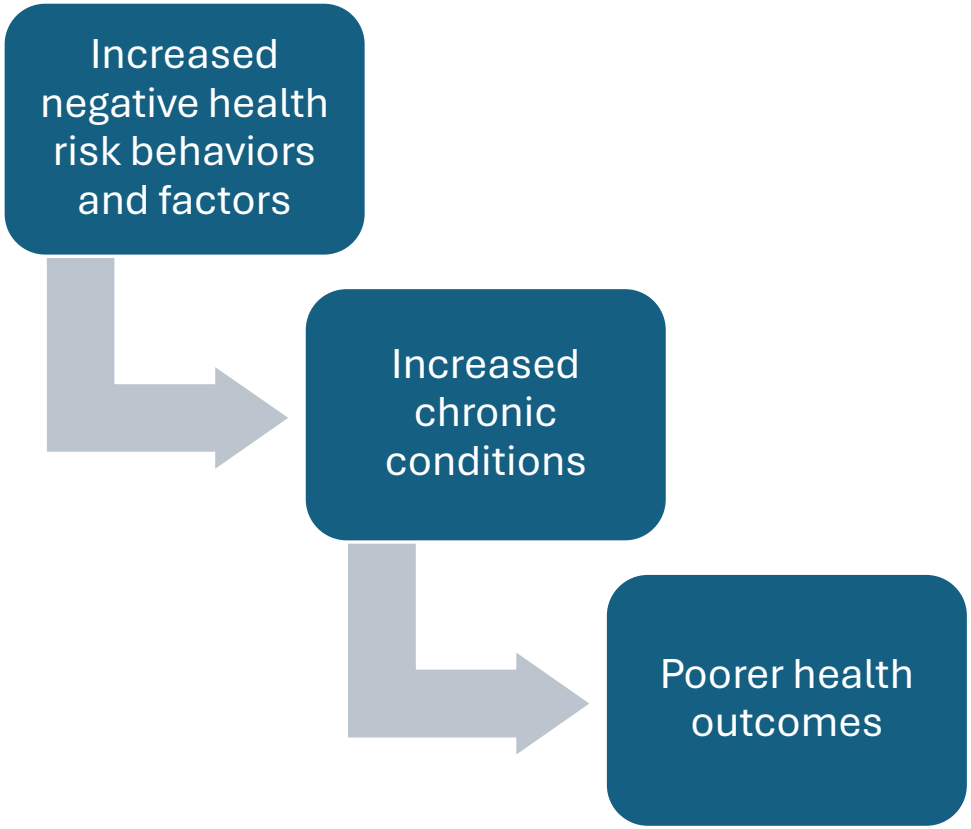
Rural populations

Increased negative health risk factors:



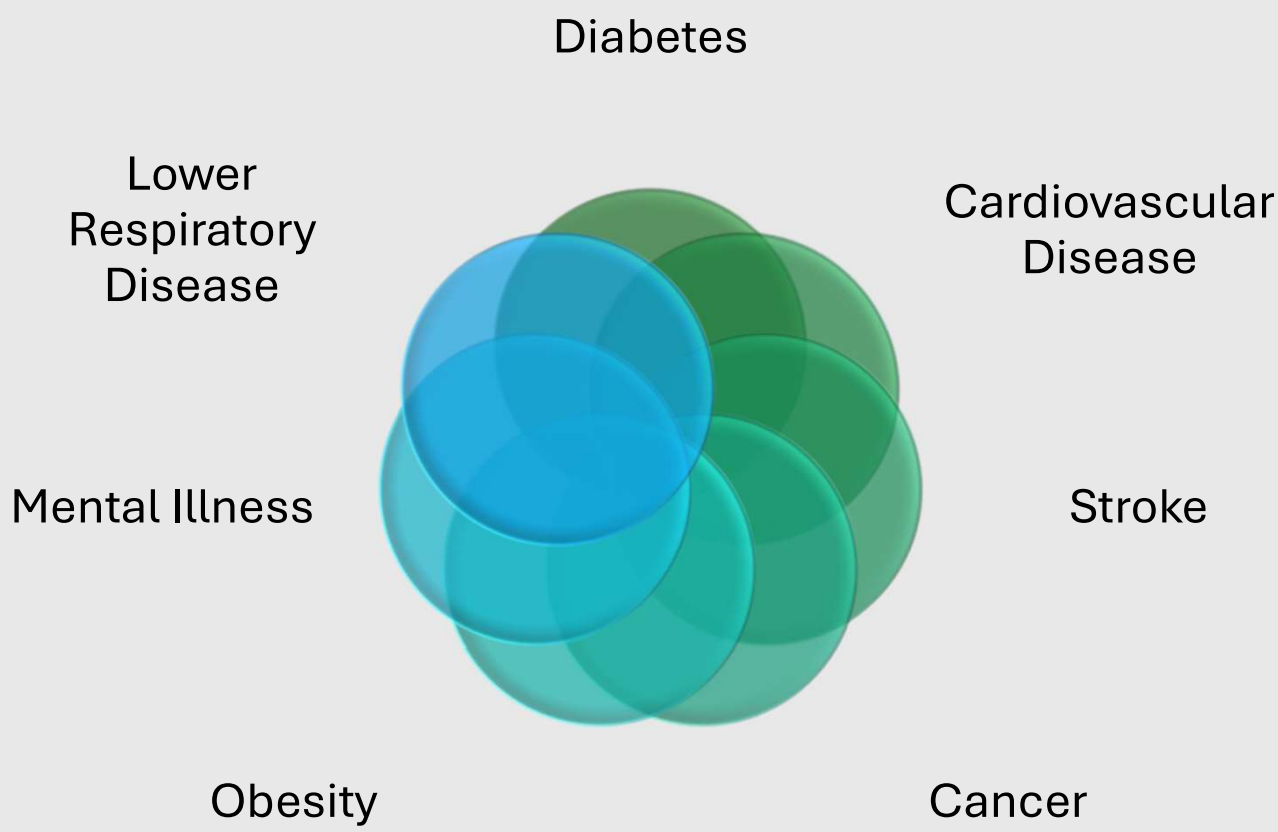
Background

Rural-Urban Health Disparities:



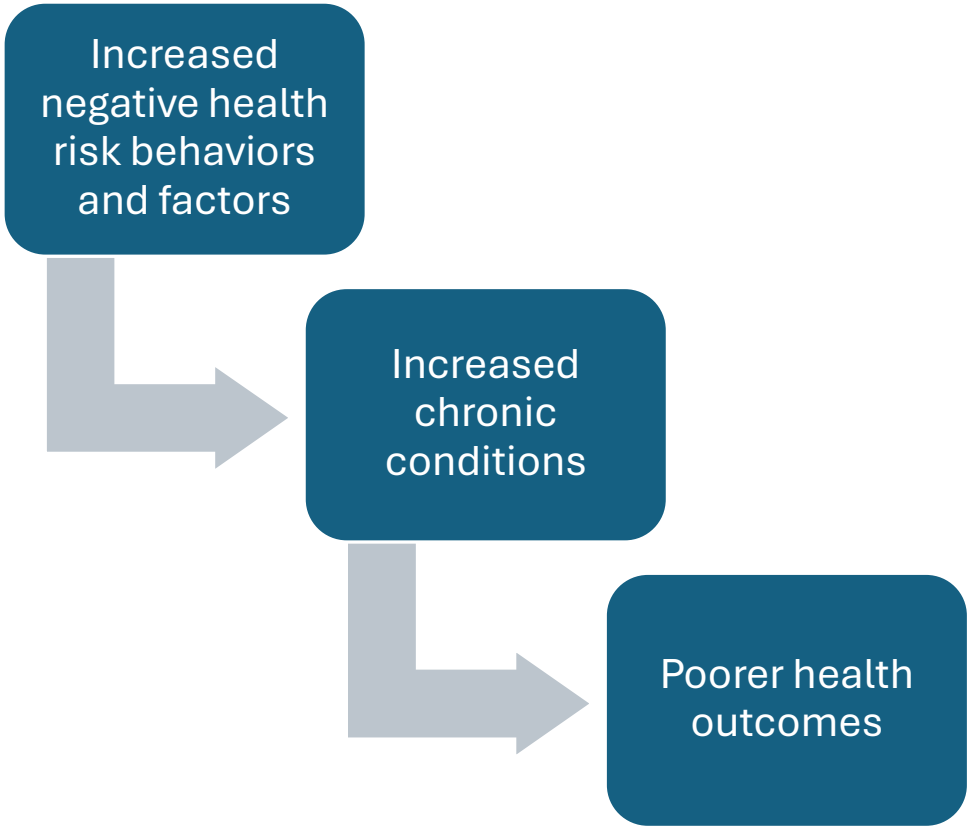
Rural populations

Increased chronic conditions:



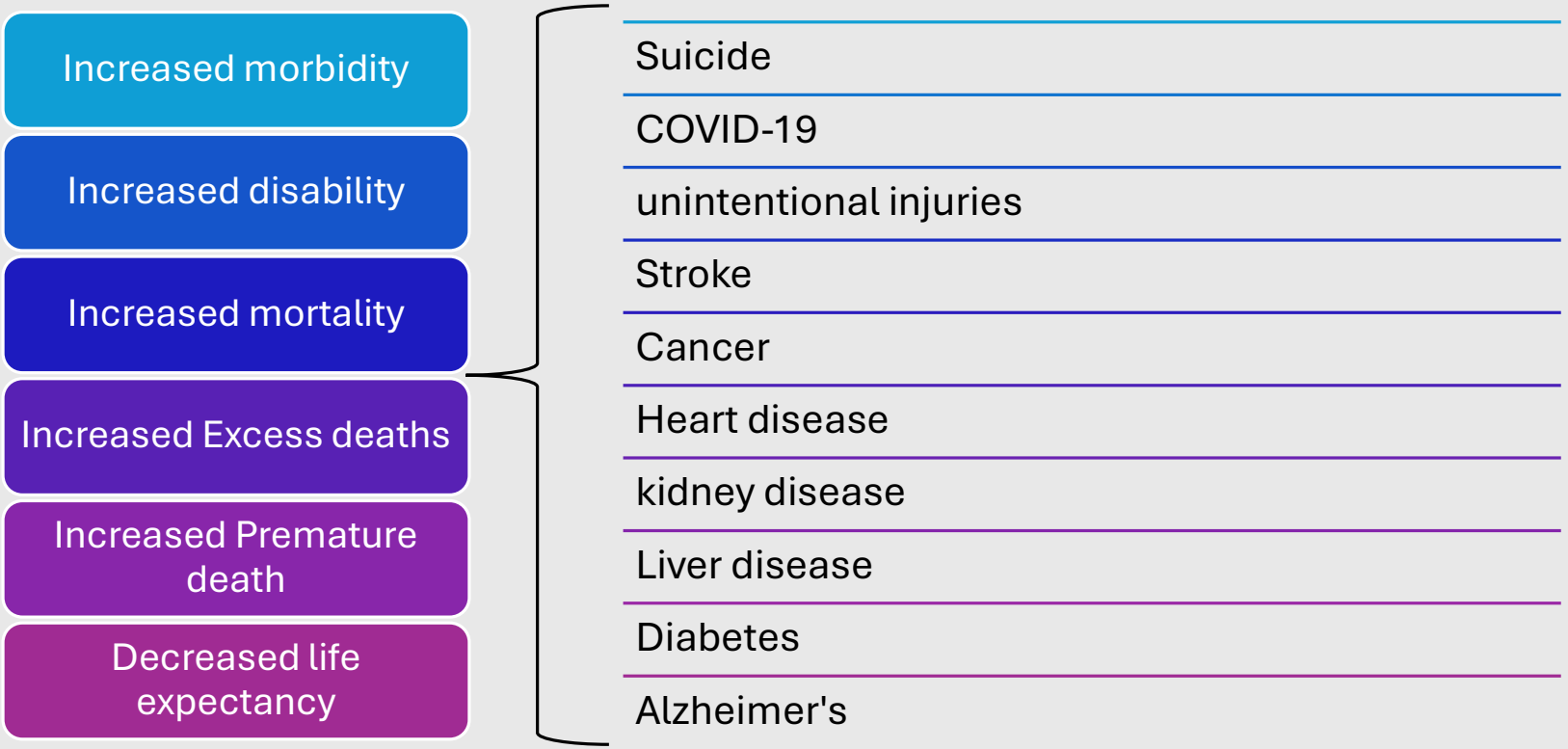
Background

Rural-Urban Health Disparities:



Rural populations

Poorer health outcomes:



Barriers to Healthcare Access for Rural Americans

Transportation and Geography

- Limited public transportation
- Long travel distances

Provider Shortages

- Limited specialists
- Puts increased strain on existing limited primary providers

Economic and Insurance

- Limited reimbursement
- Fewer insurance options
  - Higher premiums, copays, deductibles; with fewer benefits
  - Uninsured, underinsured
  - Small businesses and self-employed

Technological

- Limited broadband access
- Limited technological literacy
- Limited insurance reimbursement

Social and Cultural

- Low health literacy
- Privacy, stigma, and discrimination concerns
- Limited cultural awareness

Facilitators and Strategies

Workforce and Recruitment

- Advanced Practice Providers
- Home-grown recruitment
- Increased incentives
- National Health Service Corps
- Conrad 30 Waiver Program

Organizational Improvement

- Positive leadership and culture

Financial and Logistic

- Sliding fee scales
- Subsidized care services
- Address social determinants of health

Care Models

- Federally Qualified Health Centers (FQHC)
- Critical Access Hospital (CAH)
- Rural Emergency Hospital (REH)
- Rural Health Clinic (RHC)

Legislation and Funding

- Allocate resources
- Adjust reimbursement models
- Expand coverage

Telehealth

- Expand reimbursement and broadband access

Infrastructure and Service Integration

- Co-locate ancillary services
- Integrate emergency, primary, specialty
- Expand supportive services

Collaborative Networks

- Accountable Care Organizations (ACO)
- Clinically Integrated Networks (CIN)

Applied Practice Experience

Internship Site Overview

Agency: Clay County Medical Center (CCMC)

Clay Center, Kansas

May 2025 – August 2025

Preceptor: Austin Gillard, MHA, FACHE

Learning Objectives

- Develop and demonstrate administrative skills
- **Analyze healthcare financial management and administrative decision-making**
- Illustrate ability to use electronic medical record (EMR) technology
- Advance and demonstrate communication skills
- **Learn about personnel, roles, and responsibilities in a rural healthcare facility**
- **Analyze growth and success factors of a rural health care facility**
- Identify new personnel, design and deliver an onboarding program
- Learn how to propose a new facility project
- **Analyze financial reports, budgets, and planning documents**

Activities and Responsibilities

- **Themes:**
- Leadership Observation and Organizational Culture
- Administrative & Leadership Development
- Operational Responsibilities
- Policy and Governance
- Financial & Resource Management
- Quality Improvement
- Human Resources and Personnel Management
- Community Health & Public Health Integration
- Marketing & Communication
- Systems Thinking & Project Design
- Clinical and Compliance Exposure

MPH Foundational Competencies and Products

Category	Number and Competency	Products
Planning and Management to Promote Health	#9. Design a population-based policy, program, project or intervention	Policies, Policy Template, Policy Development Workflow process map
Policy in Public Health	#12. Discuss the policy-making process, including the roles of ethics and evidence	

Policy-related competencies

Policy Template

Competencies: 9, 12, 16

Title of Policy

Purpose: the purpose of this policy is to [insert purpose].

Scope: this policy applies to [insert which employees, departments, or personnel which is applies]. **Ex:** This policy applies to all CCMC employees across all departments and roles, and all CCMC representatives including but not limited to volunteers, students, instructors, contractors, and vendors.

Policy:

Details

Details

Details

Reporting: If applicable – standardized

To report a concern or suspected breach of any CCMC policy, please contact your department manager or Human Resources as soon as possible. Follow-up the report with an email, summarizing the issue to ensure proper documentation. All reports will be handled confidentially and in accordance with CCMC's procedures for addressing workplace concerns.

Enforcement: If applicable – can be reworded as necessary

Supervisors and managers are responsible for addressing violations of this policy in a timely and respectful manner. Continued or serious breaches may result in progressive disciplinary action, up to and including termination.

Personal responsibility: If applicable – can be reworded as necessary

Employees are expected to use sound judgment and respect shared workspaces. Activities that disrupt and/or disturb coworkers and guests, reduce productivity, or give the appearance of disengagement will be addressed accordingly.

All employees are expected to maintain professional conduct in the workplace, including refraining [insert inappropriate behavior or corrective action needed here]. Each individual is personally responsible for ensuring that their behavior aligns with the company's values of professionalism and respect.

Questions and Clarifications: -- can be changed as needed but should always be included

For any questions regarding this policy or to request an accommodation, employees should contact their supervisor or the Human Resources department.

Or

Employees with questions about this policy, or who wish to report a concern should contact the Human Resources department.

Employee acknowledgement: if applicable

I have read and understand the [insert policy name here] Policy and agree to comply with all provisions stated.

Employee Name: _____

Signature: _____

Date: _____

Personal Electronic Device Usage Policy

Competencies: 9, 12, 14, 16, 18, 21

Clay County Medical Center

Policy: Personal Electronic Device Usage

Purpose

The purpose of this policy is to ensure a safe, productive, and professional work environment by limiting the use of personal electronic devices during working hours. Excessive or inappropriate use of such devices can lead to decreased productivity, safety hazards, and distraction from work-related responsibilities.

While the default expectation is that use of personal electronic devices should be limited during working hours, department managers may authorize use if it is deemed necessary to support productivity or operational efficiency.

Scope

This policy applies to all employees across all departments and roles.

Personal Responsibility

Employees are expected to use sound judgment and respect shared workspaces. Activities that disrupt coworkers, reduce productivity, or give the appearance of disengagement will be addressed accordingly.

Personal Communication Cell Phone Use

We understand that occasional personal phone calls, text messages, and other forms of messaging may take place during working hours. However, we ask that employees keep personal communications to a minimum and ensure that work-related responsibilities remain the top priority. Unless it is an emergency, personal communications should not interfere with productivity or disrupt the work environment.

Departmental Discretion

Department managers may implement additional guidance, restrictions, or approved exceptions to this policy based on specific job functions or operational needs. Any department-level changes must:

- Be communicated clearly to all affected staff
- Be consistent with overall safety and productivity standards
- Be approved by senior leadership or Human Resources when appropriate

Enforcement

- Supervisors will monitor compliance and may address exceptions or inappropriate use directly.
- Repeated or blatant misuse may be addressed through the organization's progressive disciplinary process.
- Reasonable accommodations may be made for documented medical or sensory needs, coordinated through department management and Human Resources.
- Department managers will decide what, if any, accommodations to this policy will be made, on a case-by-case basis and within each specific department.
    - Exceptions to this policy should be thoroughly documented with HR.

Questions and Clarifications

For any questions regarding this policy or to request an accommodation, employees should contact their supervisor or the Human Resources department.

(Continued)

Policy:

Personal Entertainment Use

- The use of personal devices to play games, watch television and videos, and stream content, listen to podcasts, and access social media during working hours may only occur during scheduled breaks.
- Music may be played on a personal electronic device if approved by a manager. Music must be work appropriate, following all other guidelines, policies, and professional standards. Music must be played at an acceptable level to be respectful of others working.
    - Not following rules of appropriate volume level and appropriate choice of music, may cause privileges to be revoked as necessary.

Earbud/Headphone Use

- The use of earbuds or headphones is prohibited during working hours unless approved by a supervisor for specific work-related tasks or trainings. Earbuds and headphones may be used during scheduled breaks without prior approval.

Etiquette:

- Be respectful of guests, patients, team members, etc. by removing earbuds if someone approaches you and wants to talk. Employees should take ear buds out and focus on the conversation.
- Additionally, if using earbuds or similar listening device while attending a training, watching a webinar, etc. the common appropriate courtesy is to place a sign notifying you are "in a meeting" on your door in single offices or in a visible area on your desk if in shared offices.

Concerns:

- To report a concern or suspected breach of policy, please contact your department manager or Human Resources as soon as possible. Follow-up the report with an email, summarizing the issue to ensure proper documentation. All reports will be handled confidentially and in accordance with CCMC's procedures for addressing workplace concerns.

Acknowledgment

Clay County Medical Center values a productive, respectful, and safe working environment for all employees. Employees are required to acknowledge receipt and understanding of this policy and agree to abide by its terms.

Employee Acknowledgment Form

I have read and understand the Personal Electronic Devices Policy and agree to comply with all provisions stated.

Employee Name: _____

Signature: _____

Date: _____

Public Displays of Affection (PDA) Policy

Competencies: 9, 12, 14, 16, 18, 21

Clay County Medical Center
Public Displays of Affection (PDA) Policy

Purpose:
To maintain a professional and respectful workplace environment that supports patient trust, employee comfort, and the reputation of the healthcare facility.

Scope:
This policy applies to all CCMC employees across all departments and roles, and all CCMC representatives including but not limited to volunteers, students, instructors, contractors, and vendors.

Personal Responsibility:
Employees are expected to use sound judgment and respect shared workspaces. Activities that disrupt and/or disturb coworkers and guests, reduce productivity, or give the appearance of disengagement will be addressed accordingly.

All employees are expected to maintain professional conduct in the workplace, including refraining from inappropriate or excessive public displays of affection (PDA). Each individual is personally responsible for ensuring that their behavior aligns with the company's values of professionalism and respect.

- Employees agree to:
  - Conduct themselves in a manner appropriate to a professional work environment at all times.
  - Be mindful of how personal interactions may be perceived by others in the workplace, including patients, colleagues, and visitors.
  - Respect workplace boundaries and avoid behavior that could cause discomfort, distraction, or create an unprofessional atmosphere.
  - Exercise discretion in personal relationships to prevent any real or perceived conflicts of interest or favoritism.

(Continued)

Failure to uphold these standards may result in corrective action, up to and including disciplinary measures, as determined appropriate by management.

Policy Statement:
Professional conduct is essential in maintaining the integrity and effectiveness of our healthcare environment. Public displays of affection (PDA) among employees—including but not limited to kissing, prolonged hugging, or other intimate physical contact—are not appropriate in the workplace.
Such behavior may be perceived as unprofessional, distracting, or even uncomfortable for patients, visitors, and colleagues. It may also undermine the therapeutic and respectful atmosphere we are committed to providing.

Guidelines:

- **Permissible Conduct:** Friendly greetings such as a brief hug or handshake are acceptable when culturally or situationally appropriate and mutually welcome.
- **Inappropriate Conduct:** The following are considered inappropriate in the workplace and may be subject to disciplinary action:
  - Kissing
  - Prolonged or close physical contact suggestive of romantic intimacy
  - Holding hands in patient care areas
  - Any other behavior deemed disruptive or unprofessional by management
- **Locations:** This policy applies in all areas of the facility and its premises, including patient care areas, staff lounges, hallways, lunchroom, parking lots, and administrative offices.

Reporting:
To report a concern or suspected breach of policy, please contact your department manager or Human Resources as soon as possible. Follow-up the report with an email, summarizing the issue to ensure proper documentation. All reports will be handled confidentially and in accordance with CCMC's procedures for addressing workplace concerns.

Enforcement:
Supervisors and managers are responsible for addressing violations of this policy in a timely and respectful manner. Continued or serious breaches may result in progressive disciplinary action, up to and including termination.

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Questions and Clarifications:
Employees with questions about this policy or who wish to report a concern should contact the Human Resources department.

Employee Acknowledgment Form
I have read and understand the Public Displays of Affection Policy and agree to comply with all provisions stated.

Employee Name: _____

Signature: _____

Date: _____

Leadership and Communication Competencies

Category	Number and Competency	Products
Leadership	#16. Apply leadership and/or management principles to address a relevant issue	Strategic Plan, Policies, Policy Template, Agendas
Communication	#18. Select communication strategies for different audiences and sectors	Strategic Plan, Interviews, Policies, Agendas, Policy Development Workflow process map

Agendas

Competencies: 14, 16, 18

Executive Committee Agenda Example

Date

Austin:

- Construction update
- General update
- Recruitment update
- Goals

Jess:

- General update
- Staffing update
- Specialty clinic

Angela:

- General financial update
- Last month finances

Julie:

- General update
- Quality update
- Mock survey

Christi

- HR update
- Time card
- Performance improvement plan
- Policies

Amy

- General update
- Staffing

Dr. Kelley

- General update
- Recruitment update

Erin

- Policies
- Strategic plan

CLAY COUNTY MEDICAL CENTER
Our Family. Caring for Yours.

Strategy Meeting Agenda Example

Date

Growth

- Item A
- Item B

In process:

- Item C
- Item D

Hold:

- Item E
- Item F
- Item G

Operations

- Item 1
- Item 2
- Item 3
- Item 4

In process:

- Item 5
- Item 6

Hold:

- Item 7

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*Notes:

"items" may be related to personnel, staffing, scheduling, policies, financials, procedure and treatment options, facilities, programs, projects, interventions, challenges, conflicts, strategies, materials, data metrics, legals, contracts, insurance, etc.

INTERVIEW GUIDELINE

Competency 18

Introductory script to be read before interview:

"Hi thanks for joining me today and allowing me to interview you. I'll be conducting this interview today for personal knowledge, and as a learning objective that I created for my internship and MPH program. If it is okay with you, I would like to take notes today to review later. No information directly from your interview will be shared with anyone else. I plan to do a qualitative analysis of all the interviews I conduct to try to establish 'themes'. Is it okay if I take notes while we talk?

I will ask you a bunch of questions, and if you don't have an answer to one, just let me know and we can skip over it or we can come back to a question also. There may be some questions that you feel are not applicable to the type of work which you do-in that case just let me know and we can skip over it, or if you have thoughts in which it is related in a different way, you can tell me that too."

Background

- What is your name?
- Please describe your main role and responsibilities. What is the title of your role? What does a day/ week in your life look like?

CCMC Connection

- How long have you been with CCMC?
- Why did you choose rural health care? Why CCMC?
- What is your favorite and least favorite thing about CCMC specifically?
- How does CCMC collaborate with other providers or facilities? Do you in your role collaborate with professionals outside of CCMC?

Roll specific

- How do you define success in your position?
- What is your favorite part of your job? What is your least favorite part of your job?
- What is something that needs addressed or completed on your to-do list?
- Have there been any successful innovations (clinical, operational, or financial) implemented recently? Anything implemented to create better efficiency?
- Do you feel limited in your role in any way? If so, how?
- How much, if applicable, does changing federal/ state policy affect you in your position? And how, in what ways?

Personal leadership

- Do you manage anyone? Is there anyone working "under" you?
  - What do these relationships look like?
  - How do you practice leadership with them?
  - What is your leadership style?
  - How do you hold others accountable? What do check-ins look like?
  - Has your leadership style changed? If yes, describe how.
- Who is your supervisor and what is your relationship like with them?
  - What performance metrics are most important to you?
  - How is your success "measured"?
  - Do you like the way your supervisor interacts with you? What would you keep and what would you change about this relationship?

CCMC success

- What factors do you think contribute to the success of CCMC?
- What factors do you think contribute to the growth of CCMC?
- What sets CCMC apart from other healthcare facilities? Other critical access hospitals? And other jobs in general?
- What role do you personally play in the growth and success of CCMC?
- What keeps you up at night?
- What gives you hope about the future of CCMC?
- If you could change anything about your job or the organization, what would it be?

Future opportunities

- Where do you see the greatest opportunity for improvement or investment in rural health care over the next five years?
- What advice would you give to someone looking to lead in rural health care settings?

Rural health care

- What are the biggest challenges CCMC faces in delivering care to rural populations?
- How do workforce shortages (physicians, nurses, support staff) affect operations and care delivery?
- How do you assess community needs and decide on new services or investments?
- How do you address access to care for underserved or geographically isolated patients?
- What strategies have you used to grow services or patient volume in a rural area?
- What role, if any, does telehealth play in your strategy for access and outreach?

Financials

- How has reimbursement (e.g. Medicare/ Medicaid) affected your growth strategy?
- What steps are you taking to diversify revenue or control costs without sacrificing quality?
- How do you balance financial sustainability with mission driven care?

Quality

- What initiatives have been most effective in improving health outcomes or patient satisfaction?
- How do you engage with community health or social services to address broader health determinants?

General wrap up

Thank you so much for your time today. I appreciate your openness and honesty to further my personal learning and professional development towards rural healthcare administration. Before we end the conversation,

- Is there anything else you would like me to know?
- Is there anything I can do for you?

Qualitative analysis

Strong organizational culture	Leadership mindset	Teamwork and collaboration	Commitment to rural healthcare
Community engagement	Adaptability	Strategic marketing	Definitions of success

Category	Number and Competency	Products
Planning and Management to Promote Health	#10. Explain basic principles and tools of budget and resource management	Strategic Plan, Billing Cycle process map
Policy in Public Health	#14. Advocate for political, social or economic policies and programs that will improve health in diverse populations	Strategic Plan, Policies, Agendas, Policy Development Workflow process map
Interprofessional and/or Intersectoral Practice	#21. Integrate perspectives from other sectors and/or professions to promote and advance population health	Strategic Plan, Policies

Strategic Plan
(selected excerpts)

- Competencies: 10, 14, 16, 18, 21

Strategic Plan- competency 10

- Enhance the value of team members through recognition programs, closed-loop communication, and relationship techniques.
  - Budgeted $__ per employee for recognition years
- Annual celebration
  - BBQ in June
  - Budgeted $_____ for venue, catering, activities, and prizes
- Emergency preparedness
- Evolve our business model to maintain sustainability through succession planning and organizational alignment
- Improve profitability and long-term financial strength of the organization
  - Start Revenue Cycle Action Team (RCAT) meetings monthly
  - Focus on clinical initiatives to improve profitability

Strategic Plan- competencies 10, 14, 21

- MDSave
- Patient and Family Advisory Committee (PFAC)
- Expand (specialty) service lines
- Develop a multi-disciplinary team for patient care review
- Improve profitability and long-term financial strength of the organization
  - Start Revenue Cycle Action Team (RCAT) meetings monthly
  - Focus on clinical initiatives to improve profitability
- Educate the patient population on wellness needs at all stages of life
  - Advanced care planning
  - Health insurance
  - Hospice
  - Women's night
  - Community baby shower
- Physical and mental health improvement
  - Wellness committee

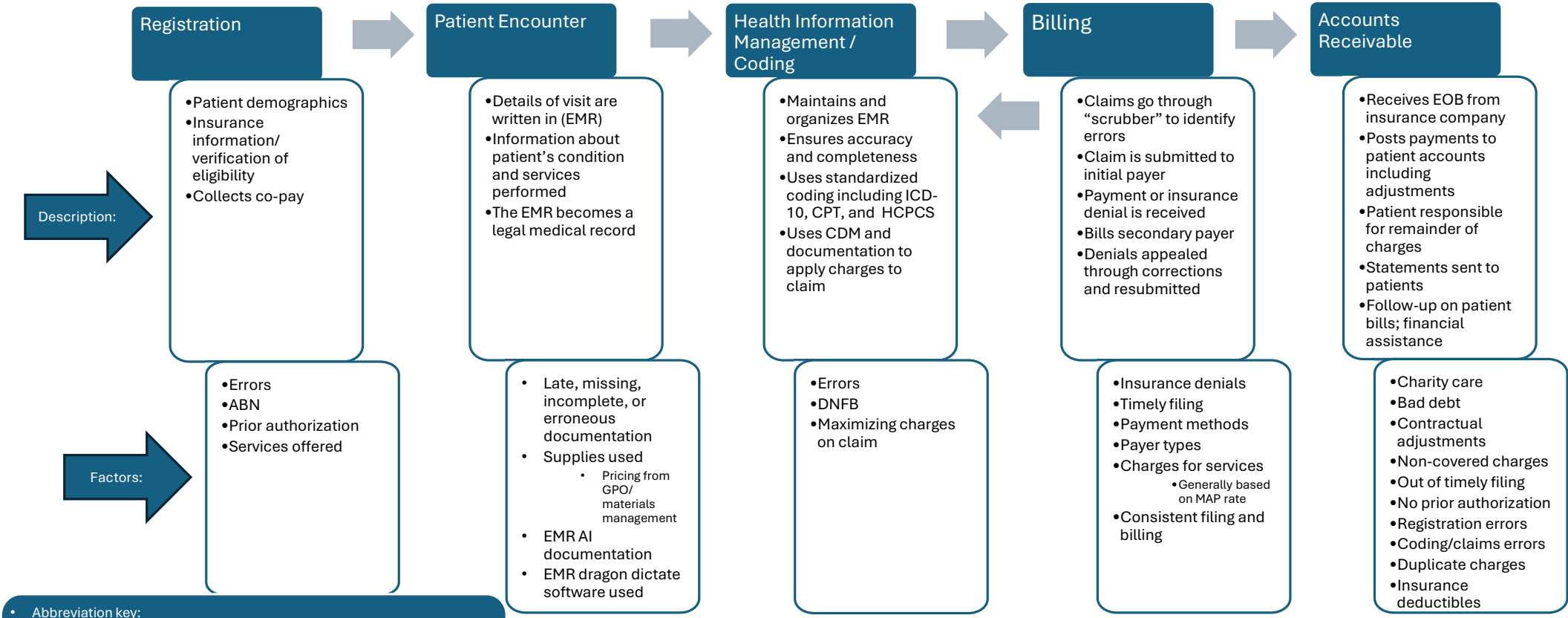
Strategic Plan- competencies 10, 16, 18

- Drive continued development of our team members through orientation, career growth, mentoring, and educational opportunities.
- Improve our patient communication

Systems Thinking Competency

Category	Number and Competency	Products
Systems Thinking	#22. Apply a systems thinking tool to visually represent a public health issue in a format other than a standard narrative	Billing Cycle process map, Policy Development Workflow process map

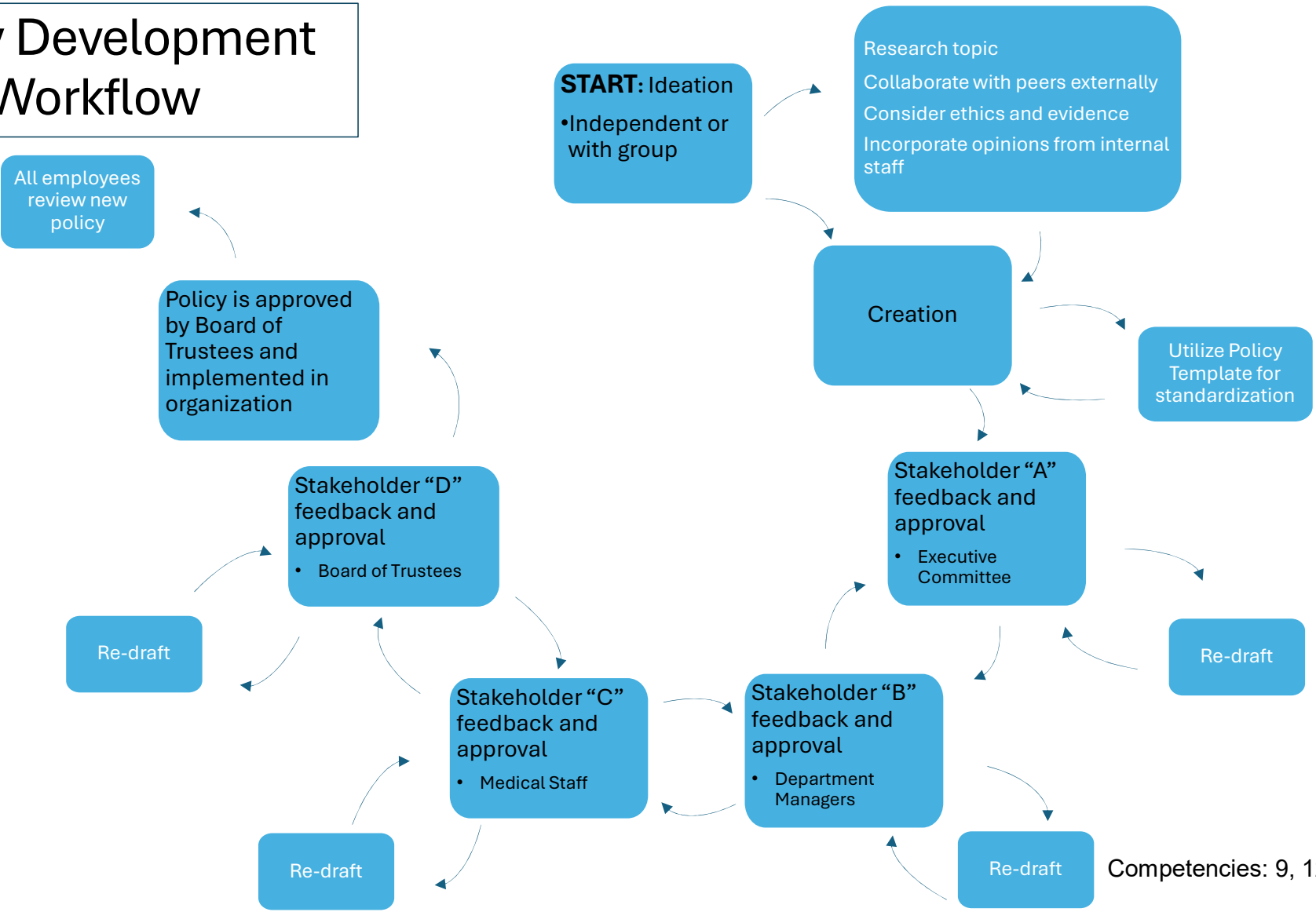
Billing Cycle



- Abbreviation key:
  - EMR = electronic medical record
  - ICD – 10 = international classification of diseases, 10th edition
  - CPT = current procedural technology
  - HCPCS = healthcare common procedure coding system
  - CDM = charge description master
  - EOB = explanation of benefits
  - ABN = advanced beneficiary notice
  - GPO = group purchasing organization
  - AI = artificial intelligence
  - DNFB = discharged, not final billed

Competencies 10 and 22

Policy Development Workflow



Competencies: 9, 12, 14, 18, 22

Nutrition competencies

Summary of MPH Emphasis Area Competencies

MPH Emphasis Area: Nutrition		
Number and Competency		**Description**
1	Information literacy of public health nutrition	Inform public health practice through analysis of evidence-based policy, systems, and environmental change.
2	Compare and relate research into practice	Examine chronic disease surveillance, policy, program planning and evaluation, and program management, in the context of public health nutrition.
3	Population-based health administration	Critically examine population-based nutrition programs
4	Analysis of human nutrition principles	Examine epidemiological concepts of human nutrition in order to improve population health and reduce disease risk
5	Analysis and critique of functional foods, nutraceuticals, and dietary supplements	Analyze and evaluate nutritional research studies related to the relationship between diet and chronic disease prevention

Discussion

Limitations to Research

- Inconsistent definitions and measurement tools
- Subjective studies -> increased bias
- Selective use of literature in systematic reviews
- Limited generalizability
- Rural communities are diverse, findings may not be applicable
- Use of rural-urban comparisons can be harmful and limiting
- Research often overlooks social, policy, and behavioral factors

Future Directions

- Improve rural health research
- Tailor policies and programs unique to community needs
- Expand insurance coverage and rural workforce support
- Strengthen infrastructure (both physical and broadband)

Summary

- Rural areas face persistent challenges and barriers
- Effective interventions require multilevel and multisectoral collaboration, with rural-specific research methods and evidence-based approaches
    - Rural public health provides a framework for integrating healthcare and public health initiatives
- My research and hands-on experience have given me the skills and knowledge needed to serve as an effective healthcare administrator in a rural healthcare facility

Professional Acknowledgements

- Kansas State University
  - Committee Members
    - Dr. Linda Yarrow – Major Professor
    - Dr. Margaret Kincaid
    - Dr. Priscilla Brenes
  - MPH Office
    - Dr. Ellyn Mulcahy, Program Director
    - Plern Kongsamut, Program Coordinator
  - Professors
- Clay County Medical Center
  - Executive Committee
    - Austin Gillard, CEO – Preceptor
    - Jessica Badsky – Director of Outpatient Services
    - Christi Rice – Human Resources Director
    - Dr. John Kelley – Chief Medical Officer / Emergency Department Director
    - Julie Crimmins – Director of Inpatient Services
    - Angela Kobel – Chief Financial Officer
    - Amy Burr – Hospice Program Director
  - Department Managers (40)
    - Bryce
    - Paige
  - Committees
  - Team Members

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- My grandma, Darlene
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- My future in-laws
- My friends
- Erika Lindshield
- Dr. Wendy Reeves
- Crystal Coffman
- Church family
- Community members and other supporters
- My cat, Gigi
- My dogs, Coors, Skyy, and Kahlua

Scholarship

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