Access to healthcare is not only a problem for poor and indigent Americans. Many rural Americans face the same plight, especially when it comes to specialty medical care.

For example, recently, my sister, Karen, and my friend Melissa each discovered she had a lump on her breast. Although the outcomes for both were positive—benign tumors—their journeys were quite different.

Melissa, who lives in Chicago, saw her gynecologist on a Monday—the day she called for the appointment. She had the lump removed by the end of the week and received the biopsy report the following week.

Karen, on the other hand, lives in central Illinois, at least 30 miles from any city of significant size. After waiting more than a month for her appointment with the gynecologist who visits her small community once a week, she had to wait until he was in town again to discuss the results of the mammogram. He said she would have to have surgery as soon as possible. After waiting two weeks to see the surgeon (who also visits her rural town once a week), Karen had the tumor removed the following week. Because the
surgery was a simple, outpatient procedure, it was performed at the small hospital in her community. A week later, when the surgeon was back in town, she learned that the tumor was benign.

Any woman who has had a lump on her breast is familiar with the anxiety such a discovery can cause. Despite the frustrations of waiting for physicians to be in town and waiting for test results, Karen was fortunate that an outreach program allowed her to obtain care in her own community. Other rural Americans are not as lucky.

If specialists do not come to their communities, some residents will travel (perhaps several hours, perhaps losing wages) to obtain the care they need; others may simply forgo care because they have no way to get to a physician or cannot afford to miss work.

Fortunately, some urban healthcare organizations are filling this gap in rural healthcare by arranging for medical specialists to regularly visit rural areas, some so remote that physicians must be flown there or drive several hours. The Regional Healthcare Program is one such service that reaches out to its rural neighbors.

**REGIONAL HEALTHCARE PROGRAM**
The Regional Healthcare Program, sponsored by Denver-based Saint Joseph Hospital, serves residents in some Colorado, Kansas, Nebraska, and Wyoming rural communities. The program began as a speakers bureau through which a
A group of physicians presented educational programs at rural hospitals. Rural physicians began telling speakers that they were in need of a variety of specialty services. They in turn passed on the request to Saint Joseph Hospital.

In 1989 Saint Joseph decided to bring specialty healthcare services to underserved rural communities and offer educational programs to their physicians, explained Sr. Marianna Bauder, SCL, the hospital's president and chief executive officer. According to Sr. Bauder, the hospital first saw a real need for specialty physicians in eastern Colorado and in western Nebraska and Kansas. The program later extended into Wyoming.

The Regional Healthcare Program reaches out to 24 communities, serving nearly 204,000 residents. Twenty physicians travel to a rural healthcare facility at least one or two days a month, conducting specialty clinics in these communities.

Saint Joseph Hospital, with a grant from the U.S. West Foundation, funds the Regional Healthcare Program; 80 percent of the total operational budget covers the costs of physicians’ travel, lodging, and meals. The remaining 20 percent is for salaries, supplies, a toll-free telephone number rural patients can use to reach the program, and membership in a rural health network.

**Program Goals**

The Regional Healthcare Program helps the rural communities it serves by:
Dr. Huang talks with a longtime patient. Plastic surgeons are in demand in rural areas, where residents experience a high incidence of cancerous skin lesions because they spend much of their time outdoors working as farmers and ranchers.

- Providing specialty healthcare services, such as pulmonology, plastic surgery, and cardiology
- Attracting an increased number of patients—and thus increased business—to the small rural hospitals, often the communities' largest employer
- Educating rural physicians and allied health professionals so they can serve their communities better

The program's goals reflect Saint Joseph Hospital's mission: to provide a continuum of healthcare services in partnership with medical staff and to provide excellence in patient care, accomplished with a special caring spirit that recognizes the dignity and unique value of each individual. This approach involves linking hospital resources with rural health clinics and rural physicians in the four-state region.

OBSTACLES TO SUCCESS

Although the Regional Healthcare Program was considered a worthwhile project from the beginning, Saint Joseph Hospital had to overcome several obstacles to ensure the program's success.

Gaining Rural Physicians' Trust

At first, some rural physicians were wary of the out-of-town specialists, asking themselves whether their rural patients would receive the high-quality care they expect and deserve. Although the time it takes for rural physicians to trust the outreach physicians varies from town to town, Sr. Bauder noted, once the out-
reach physicians become familiar, the rural hospital’s administrator often requests that additional specialty physicians visit. This is a boon for Saint Joseph because “it is as easy (and more economical) to fly two or more physicians to a rural facility as it is to fly one,” Sr. Bauder stated.

Outreach physicians gain the trust of rural physicians by establishing open lines of communication and proving (over time) that they provide high-quality healthcare to rural patients, Sr. Bauder explained.

In addition, Saint Joseph Hospital promotes the Regional Healthcare Program in its quarterly newsletter, which usually features a facility served by the program and a physician who works in it. Approximately 300 physicians, hospital administrators, and nurses in rural areas receive the newsletter.

Securing Medical Staff Commitment

Physician interest in the Regional Healthcare Program is high. A physician feels such a sense of satisfaction in caring for patients in one rural community, he or she will often offer to travel to additional towns where his or her services are needed, noted Sr. Bauder.

The Regional Healthcare Committee (the program’s advisory group) helps keep the hospital abreast of outreach physicians’ concerns, explained Sr. Bauder. For example, the hospital assures physicians (who fly in small aircraft to their rural destinations) that they need not travel if weather conditions are dangerous. The committee includes physicians and hospi-
tal administrators such as the vice presidents of clinical and information services.

EDUCATIONAL PROGRAMS

Because an outreach physician visits a rural hospital only one or two days a month, his or her schedule tends to fill up three or four months in advance. When a physician does not have patients scheduled during the lunch hour, he or she will often present educational programs, offering updates in medicine to help rural physicians keep current.

In addition to these noontime lectures, Saint Joseph Hospital sponsors educational conferences in various rural communities on the latest techniques and technologies. The program sponsors four one-day seminars a year for rural physicians and other healthcare professionals. Between 15 and 30 healthcare professionals attend the sessions, which cover topics such as the management of trauma patients and updates on congestive heart failure and diabetes. The Regional Healthcare Program sends brochures announcing the educational sessions to hospital administrators and nurse educators, who spread the word to interested professionals.

Saint Joseph also offers free lodging for as many as 10 rural primary care physicians who travel to Denver for educational conferences, many of which help healthcare professionals maintain registration and licensure. Saint Joseph Hospital sponsors four clinical updates each year. Approximately 35 primary care physicians attend each session. Physicians are apprised of upcom-
A pulmonology patient who has pneumonia, acute exacerbation of chronic obstructive pulmonary disease, and a pneumothorax condition requires surgery and must be airlifted to Saint Joseph Hospital in Denver.

ing educational conferences through direct mail and advertisements in hospital publications.

Without programs such as these, attending continuing medical education courses would be nearly impossible for many rural healthcare professionals.

A COMMITMENT TO RURAL AMERICANS

The Regional Healthcare Program continues to grow, noted Sr. Bauder. The hospital's medical director routinely contacts rural physicians to learn about their needs. And some rural hospitals contact the program, requesting specialty physician services.

The program may expand into northern Wyoming, said Sr. Bauder. A 120-bed facility there would like to have a tie to 602-bed Saint Joseph Hospital. For example, she explained, the rural hospital does not perform heart surgery and would like to automatically transfer cardiology patients needing surgery to Saint Joseph.

Saint Joseph Hospital has recently strengthened its commitment to rural Americans with the opening of Saint Christopher House—a 35-room hospital/hotel for rural patients and their families. Sr. Bauder pointed out that persons from rural areas are often not accustomed to the Denver traffic. By staying at Saint Christopher House, families of patients from rural areas are but a short walk to Saint Joseph Hospital. "Rural Americans deserve to have the same high-quality healthcare urban Americans have," stated Sr. Bauder.

—Michelle Hey