
Flex Program News

Health Workforce Recruitment & Retention in Critical Access Hospitals

The University of Washington surveyed Critical Access Hospital (CAH) administrators in 2003 about health workforce staffing. A survey was mailed to 605 eligible hospitals (all those that had converted to CAH status as of June 30, 2002). A total of 329 hospitals responded from 43 states. Registered nurses, radiology, physician and laboratory personnel are the most difficult staff to

hire in small, rural CAHs. The administrators in the survey described RNs and radiology personnel as even more difficult to recruit than physicians.

Read the rest of this article in Findings from the Field, a publication of the CAH/FLEX National Tracking Project, at www.rupri.org/rhfp-track/results/vol3num5.pdf.

“Flexibility Program” Evaluation Kick-Off



*Sheldon Weisgrau,
Rural Health Consult-
ants, Inc. visits the
Office of Rural Health*

Sheldon Weisgrau of Rural Health Consultants, Inc. provided a presentation to begin his evaluation of the Oregon Rural Hospital Flexibility Program at the Office of Rural Health on Tuesday February 17, 2004. Rural Health Consultants was contracted through a competitive process that began last fall, and was selected based on previous

experience and expertise, program evaluation plan, and proposed budget.

Weisgrau began his presentation with an overview of the Medicare Rural Hospital Flexibility Program, both nationwide and in Oregon. This program is supported through a federal grant to states to achieve the following goals:

- ◆ Develop a Rural Health Plan
- ◆ Plan and Implement Rural Health Networks
- ◆ Enhance Rural EMS

- ◆ Enhance Quality of Care
- ◆ Designate Hospitals as Critical Access Hospitals (CAHs)
- ◆ Evaluate the Program

The purpose of the evaluation is to quantify the State of Oregon’s track record in completing proposed program activities and provide input to improve program management, better meet constituent needs and plan future program direction. Weisgrau interviewed many staff and key stakeholders during his visit. He will make two more trips to Oregon to accomplish this work. He will present a summary of findings and recommendations during his final visit.

Oregon is one of just a handful of states that have contracted for an impartial external evaluation. The Oregon Office of Rural Health looks forward to Weisgrau’s input. Scott Ekblad, Deputy Director, commented, “This program is vitally important to our rural hospitals and communities, and we want a thorough evaluation to make sure we continue to do the best job possible for rural Oregon. I am happy that Sheldon and Rural Health Consultants agreed to perform the work.” For more information, please contact Sandra Assasnik, Community Grants Coordinator, Oregon Office of Rural Health, at 503-494-4450 or assasnik@ohsu.edu.

