Rural Health Transformation Program Public Survey Results

Public Engagement History

- Initial public comment period ran from 8/20 to 9/12, before the NOFO was release.

- The structured survey had broad questions, speaking to unmet needs and challenges, ready-to-launch projects, and other evidence-based initiatives that align with the RHTP permissible uses of funds.

- OHA received over 240 responses.

Initial Public Comment Themes: Challenges

Top Challenges Identified:

1. **Workforce Development** – Lack of robust training programs, recruitment & retention difficulties, housing shortages, and insufficient professional development and support across all provider types.

2. **Access to Care** – Service gaps all around, including dental, mental health, pharmacy, and specialty care. Limited transportation and long travel distances. EMS shortages and unstable workforce.

3. **Chronic Disease Management and Prevention** – Higher rates of preventable diseases. Limited prevention programs and access to specialists. Need for more community-based solutions, care coordination, and CHW-led programs.

4. **Telehealth & Technology**– Insufficient investment in digital infrastructure, technologies, and telehealth services for patient access and provider efficiency.

5. **Behavioral Health & SUD** – Severe shortages in behavioral health services, including addiction treatment. Need for more integration with primary care and outpatient services, especially for youth.

6. **Financial Instability** – Insufficient reimbursement rates and concerns about Medicaid cuts. Rural hospitals and clinics operating at a loss.

7. **Maternal & Child Health** – Maternity deserts, closures of L&D units, and lack of alternative perinatal care and early childhood interventions.

8. **Data & Quality Infrastructure** – Lack of capital to update HIT systems with improved EHRs, real-time analytics, and shared platforms.

Initial Public Comment Themes

Top Areas of Action Identified (non-exhaustive list of projects and strategies):

- **Primary Care Access and Outcomes** – new pharmacy access points, mobile clinics, CHW-led home visits, school-based health, nutrition classes

- **Behavioral Health** – fellowships and apprenticeships, youth residential treatment programs, integrated BH in outpatient settings

- **Technology and Data-driven Care** – digital health tools, e-consults, virtual psychiatry, and closed-loop referral systems

- **Workforce Development** – rural residency programs, loan forgiveness, telementoring and upskilling opportunities

- **Maternal and Child Health** – perinatal coordination, caregiver support systems, OB training programs for family physicians

- **Capital investments and infrastructure** – facility upgrades, equipment investments, short-term housing for staff

- **Emergency Services** – EMS system improvements, EMS buprenorphine train-the-trainer program, community paramedicine

- **Regional Partnerships and System Transformation** – cross-sector planning and forming of structured partnerships including clinically integrated networks (CIN), learning collaboratives, health information exchanges

Public Engagement History and Oct. Public Survey

- First public comment period ran from 8/20 to 9/12, before the NOFO was release. The questions were broad, speaking to unmet needs and challenges, ready-to-launch projects, and other evidence-based initiatives that align with the RHTP permissible uses of funds.

- October's public survey was open from 10/8 to 10/15, following two public forums. The purposes was to gather input on the four non-Tribal proposed initiatives under consideration by OHA.

  - 180 responses were collected.

- Public survey questions were more targeted because OHA is farther along in developing the application framework, having incorporated information and learnings from the NOFO, the previous comment period, and ongoing partner conversations.

- Respondents are asked to:

  1) Share their opinion on whether each of the proposed initiatives would improve health care for rural Oregonians

  2) Rank the potential initiatives by impact

  3) Share any additional thoughts or ideas

Question 1-4: Likert Scale to Gauge Impact

Please share your opinion on this statement: The "Healthy Communities and Prevention" initiative would improve health care for rural Oregonians.

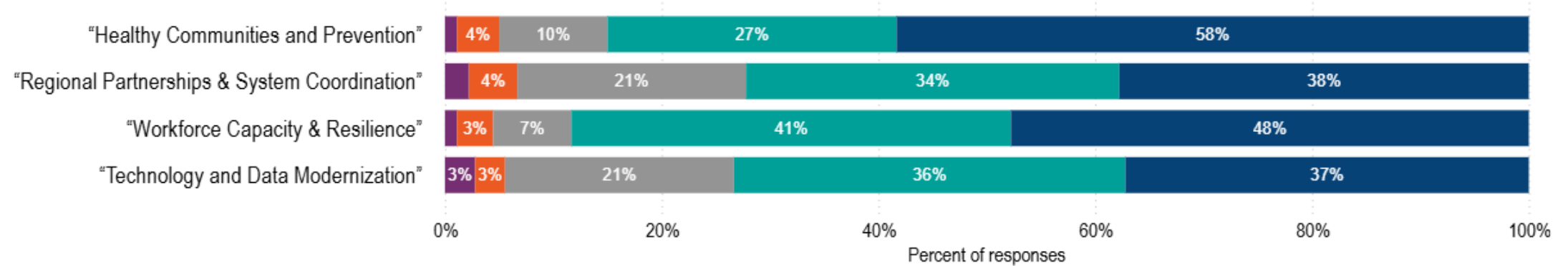(Scale 1-5: Strongly disagree – Strongly Agree)

1. Strongly disagree

2. Disagree

3. Neutral / Neither Agree nor Disagree

4. Agree

5. Strongly agree

*same question was repeated for the other three initiatives: "Regional Partnerships & Systems Coordination," "Workforce Resiliency & Capacity," and "Technology and Data Modernization"

Results for Question 1-4

Response summary for the question: "The following initiatives would improve the health care of rural Oregonians:"

Response ● 1 - Strongly Disagree ● 2 - Disagree ● 3 - Neutral/Neither Agree nor Disagree ● 4 - Agree ● 5 - Strongly Agree

Initiative	5 - Strongly Agree	4 - Agree	3 - Neutral/Neither Agree nor Disagree	2 - Disagree	1 - Strongly Disagree
"Healthy Communities and Prevention"	105	48	18	7	2
"Regional Partnerships & System Coordination"	68	62	38	8	4
"Workforce Capacity & Resilience"	86	73	13	6	2
"Technology and Data Modernization"	67	65	38	5	5

Question 5: Ranking on Priority

Ranking of all the initiatives

We want to know which initiatives you think would have the greatest impact on improving health care in rural communities. Please rank the initiatives from 1 (highest impact) to 4 (lowest impact)

Results for Question 5

Summary of initiative area rankings

Rank choice ● Rank 1 ● Rank 2 ● Rank 3 ● Rank 4

Number of selections

Number of responses

180

Area	Overall Rank ▼
Healthy Communities and Prevention	543
Workforce Capacity & Resilience	496
Regional Partnerships & System Coordination	434
Technology & Data Modernization	327

Chart values:

Area	Rank 1	Rank 2	Rank 3	Rank 4
Healthy Communities and Prevention	81	44	32	23
Workforce Capacity & Resilience	51	60	43	26
Regional Partnerships & System Coordination	34	46	60	40
Technology & Data Modernization	14	30	45	91

Free-Text Question Themes

- The last survey question provided respondents the optional space to share any explanation or additional input related to the initiative areas.

- Numerous themes were identified.

  ➢ Workforce Capacity & Retention

  ➢ EMS System Sustainability

  ➢ Technology Innovation

  ➢ Behavioral Health Access

  ➢ Community-Based Prevention and SDOH

  ➢ Equity for High-Risk Populations

  ➢ Regional Partnerships

  ➢ Policy & Funding Recommendations

Workforce Capacity and Retention

Subthemes	Types Organizations (non-exhaustive)
• Recruitment & retention challenges • Rural housing & cost-of-living barriers • Rebalance workforce opportunities (training, residencies, apprenticeships) to reflect rural representation & need • Loan forgiveness & incentives for non-traditional providers (e.g., optometrists, PAs)	Aviva Health (Douglas County) Wallowa Valley Center for Wellness Columbia County Public Health Consortium for Advanced Practice Providers Oregon Midwifery Council Backpack Healthcare Samaritan Health Services St. Charles Health System Oregon Rural Practice-Based Research Network (ORPRN) AGE+ Oregon State Pharmacy Association Oregon School Nurses' Association Linn County Health Services

EMS System Sustainability

Subthemes	Types Organizations (non-exhaustive)
• EMS workforce shortages • Medicaid reimbursement concerns • EMS as essential infrastructure not being duly prioritized • Community paramedicine & mobile response	Oregon State Ambulance Association Clackamas Fire District Mid Columbia Fire & Rescue Depoe Bay Rural Fire Protection District Tualatin Valley Fire & Rescue Polk County Fire District No. 1 La Pine Rural Fire Protection District Siletz Valley Fire District McMinnville Fire District Association of Oregon Counties City of Burns Fire Department *Rep. Dacia Grayber

Technology Innovation

Subthemes	Types Organizations (non-exhaustive)
• EHR interoperability • Cybersecurity • Telehealth infrastructure • AI-enabled analytics • Technology-enabled service delivery	CareNimble Wallowa Valley Center for Wellness Unite Us OHSU (Moore Institute, ORPRN) Backpack Healthcare

Behavioral Health Access

Subthemes	Types Organizations (non-exhaustive)
• School-based mental health • Workforce shortages • Integration with primary care • SUD treatment access • Prenatal care for SUD affected patients	Cartwheel Care Ballmer Institute for Children's Behavioral Health Backpack Healthcare Oasis Center of the Rogue Valley Wallowa Valley Center for Wellness Aviva Health OHSU (Moore Institute)

Community-Based Prevention and SDOH

Subthemes	Types Organizations (non-exhaustive)
• Strong support for CHWs, mobile clinics, and wraparound services • Addressing food insecurity, transportation, and housing • Calls for focusing on prevention and shoring up local resources before expanding • Expanding, if not preserving, early detection screening programs for cancers such as breast, cervical, colorectal, prostrate	Klamath County Public Health Moore Institute for Nutrition and Wellness (OHSU) Foodsmart Columbia County Public Health Connected Care for Older Adults Oregon Rural Practice-Based Research Network AGE+ Wallowa Avenue Wellness American Cancer Society Cancer Action Network Oregon School Nurses' Association

Equity for High-Risk Populations

Subthemes	Types Organizations (non-exhaustive)
• Deaf, DeafBlind, and Hard of Hearing access • Older adults in rural areas • Eye care and vision services • Children and youth with special health needs • Labor & Delivery services	Bridges Oregon AGE+ Connected Care for Older Adults Envision EyeCare for All Oregon Center for Children and Youth with Special Health Needs (OCCYSHN) Oregon School Nurses' Association Baker County Commissioners

Regional Partnership

Subthemes	Types Organizations (non-exhaustive)
• Interoperability and data sharing between health systems and independent organizations • Leverage community partnerships (high schools, community colleges, workforce boards, county health departments, other health care providers, etc) to improve efficient use of resources • Cross-sector partnerships (e.g., contract with technology-enabled specialty service providers that multiply existing workforce capacity) • Regional planning around school nursing services	Columbia County Public Health Oregon Health & Science University (OHSU) Oregon Rural Practice-Based Research Network Central Oregon Intergovernmental Council Association of Oregon Counties Oregon School Nurses' Association

Policy and Funding Recommendations

Subthemes	Types Organizations (non-exhaustive)
• Focus funding on rural hospitals and sole community and critical access providers • Incentives for patient compliance to new Medicaid requirements • Specific legislative references (e.g., HB 3572) • Utilize regional Workforce Development Boards to effectuate partnerships and programs	Hospital Association of Oregon Salem Health Hospitals Oregon Legislature (multiple respondents) Oregon State Ambulance Association Oregon Fire Chief's Association Southwestern Oregon Workforce Investment Board Willamette Workforce Partnership Northwest Oregon Works

Summary

o Healthy Communities & Prevention **received the highest number of "Strongly Agree" responses (105)** and **ranked #1 overall** in perceived impact across all initiatives.

- Strong support for upstream investments in prevention, community health workers (CHWs), and community-based care models.

o Workforce Capacity & Resilience **had the highest combined total of "Agree" and "Strongly Agree" responses (159).** Ranked #2 overall, closely following Healthy Communities & Prevention.

- Emphasis on recruitment, retention, rural training pipelines, and addressing housing and cost-of-living barriers for rural healthcare workers.

o Regional Partnerships & System Coordination received **moderate support with a higher number of neutral responses (38)**, indicating some uncertainty. Ranked #3 overall in impact.

- Recognized as essential for long-term sustainability but may require clearer defined goals and targeted resources to gain broader support. For instance, one respondent noted it is important to *"promote partnership and sustainability rather than amplify competition"*

o Technology & Data Modernization **received the lowest number of "Strongly Agree" responses (67), though still generally supported.** Ranked #4 overall, indicating it was seen as less impactful relative to other initiatives.

- Support focused on telehealth, interoperability, and cybersecurity, but concerns were raised about rural expertise and capacity to implement and maintain tech solutions.