

## State Offices of Rural Health

**Grant Number:** H95RH00100

**Organization:** ALABAMA DEPARTMENT OF PUBLIC HEALTH

**Start Date:** 07/01/2014

**End Date:** 06/30/2015

**Report Due Date:** 09/14/2015

Total number of technical assistance (TA) encounters provided directly to clients within your State by SORH:

### Examples of Different Types of TA Provided

Types of TA Provided		Number	Description
R	In-Depth Telephone and email interactions	1102	Provided considerable data to Cahaba Medical Care Foundation (an FQHC corporation) for a grant to expand services to a new location in the Bessemer service area.
R	Webinar Technology	27	An introduction to Grant Writing webinar was presented on July 8, 2014, and was attended by 49 rural health care stakeholders.
R	Thru Teleconference	42	A teleconference was held with DCH Regional Medical Center in Tuscaloosa to discuss the possibility of their using Alabama Department of Public Health tele-medicine equipment stationed in highly rural Marengo and Perry counties for the purpose of providing tele-prenatal care. Neither of these counties have hospitals providing obstetrical services.
R	Face to Face	129	Traveled to multiple Certified Rural Health Clinics in northwest Alabama over a two-day period to discuss their needs and inform them about services offered by Alabama's SORH.
R	Other	129	Worked with other professionals in the Alabama Department of Public Health in designing, conducting, assuring the accuracy and completeness of, analyzing, publishing, and presenting on statewide and regional findings from a survey of over 6,000 individuals and over 500 organizations identifying the 13 leading health care issues in Alabama. Special effort was included to identify issues in rural areas and to present these issues in subsequent outreach initiatives.

Total number of clients within your State that received TA directly from SORH:

### Examples of Different Types of Clients that Received TA

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	Types of Clients that Received TA	Number	Description
R	Communities	72	Made a public presentation at a community forum in highly rural Randolph County informing the residents of what to expect if a sales tax vote was defeated and their last remaining hospital closed. Considerable research was conducted on this subject and data was provided backing up expectations. This was done without taking an official stand on the vote. The sales tax was approved by 86 percent of those voting in the referendum.
R	Government Officials	82	Worked closely with the Alabama Rural Development Office in gathering information on how tele-medicine and tele-health were being utilized in Alabama. There is currently no private insurance reimbursement for this service in Alabama. This information is being used to inform the public about the value of this technology and its potential for rural residents.
R	Academic Institutions	45	Assisted the University of Alabama at Birmingham in obtaining the services of a neonatologists to assist in the study of infant mortality in Alabama. Alabama currently has the second highest infant mortality rate among all 50 states.
R	Associations	45	Met with officials from the Alabama Rural Coalition for the Homeless to update them on the status of rural health care and learn more about their programs. A new partnership with great potential was developed through this effort.
R	Agencies	47	Conducted a study on the economic impact of establishing a joint internal medicine and dental residency program in the Colbert County area of Alabama's Shoals Region. This report was conducted for the Shoals Area Economic Development Authority. This project involves two formerly competing academic institutions working together on this program addressing one of rural Alabama's greatest health care needs.
R	Networks	26	Provided data and other technical assistance to Gulf Health Hospitals, Inc. in several Alabama locations which resulted in the awarding of a \$300,000 Rural Health Network Development Grant and a USDA Distance Learning/Telehealth Grant award.
R	Emergency Medical Services (EMS)	2	Made a presentation to the Randolph County Association of Fire Chiefs, which is also the county EMS association, on the status of health care in that county with emphasis on those conditions requiring the quickest EMS response.

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R	Clinics	154	Provided detailed information and guidance to 16 clinics which were considering conversion to a Certified Rural Health Clinic, FQHC, or FQHC Look-Alike. Several of these clinics completed conversion to Certified Rural Health Clinics.
R	Hospitals	103	Assisted all rural hospitals in Alabama with their public transportation concerns by conducting a detailed survey of the status of public transportation in Alabama and producing the first-ever report on this subject. All rural hospitals were contacted and interviewed about their specific public transportation assets and needs. This report is being widely disseminated to involved stakeholders.
R	Providers	56	Joined with the Alabama Rural Health Association in presenting an ICD-10 Coding Boot Camp for rural providers. This training included the awarding of continuing education credits for nurses and social workers. This was attended by several physicians as well as members of their staffs.
R	Other	23	Made presentations to student rural health organizations at several Alabama college and university campuses on the need for rural health care providers, their economic impacts, and on ways to have student debt forgiven in return for service in underserved areas.

Any Comments About this Form or the Data You Entered:

The high number of technical assistance events for this grant year is due to an exceptionally large number of activities that were involved in a state-wide Community Health Assessment and the development and implementation of a Community Health Improvement Plan. Those initiatives involved surveying over 6,000 individuals and 500 different organizations, and working with a myriad of state, private, and non-profit organizations. Additional activities were also incurred in relation to rural hospital sustainability issues and the ongoing transition in the health care environment from volume-based to a value-based system.

Is this Form Complete?