

# You Didn't Have To

by  
BROWN & GRAY

*in collaboration with*



Thank You Nurses

art by Bennett

**We're in the same small boat on very  
rough water.**



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The Rural Health Group  
Iosco County, Michigan



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# Building Bridges in Rural Health: Advocacy, Research & Collaboration

Lessons from Iosco County NEMT Study and Pathways to Systemic Change



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# Disclosure

The speakers and planners do not have any relevant conflicts of interest to disclose.

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# Agenda

- Silos of practice, structure and policy in rural health
- Building bridges to connect stakeholders in rural health
- Case Study – RHG Study of Non-Emergency Medical Transportation
- Discussion



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# The Problem of Silos in Rural Health

- Fragmented communication
- Clinical practice vs. policy vs. research
- Disjointed data collection
- Missed opportunities to collaborate

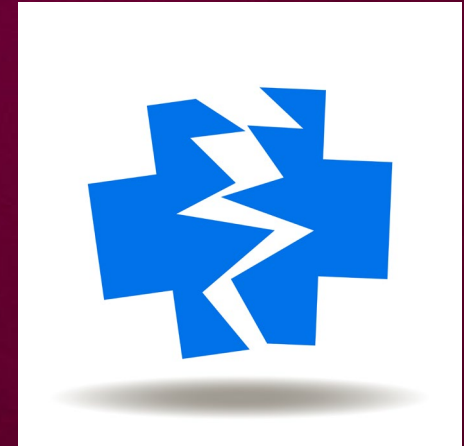


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# The Impact of Silos in Rural Health

- Delayed solutions/Missed opportunities for shared solutions, innovation and support
- Negative health outcomes and economic impacts
- Duplicated efforts and wasted resources



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# Building Bridges



- Research to Advocacy Partnerships
- Community-Based Participatory Research
- Michigan Institute for Clinical And Health Research



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# Building Bridges (Or Knocking Down the Silos)

- Discovering the full network of like-minded stakeholders
- Establishing lines of communication
- Sharing strategies, innovations, ideas
- Participatory policy development



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# Building Bridges



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- Address inequities in rural health status and healthcare delivery through cross-sector collaboration
- CMU Rural Health Equity Institute



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# Role of Rural Healthcare Staff



- Be the voice of your patients
- Identify local partners/stakeholders
- Knowledge of available resources for your patients
- Healthcare organizations are typically the largest employers in a county and hold a lot of power
- Engage in the process of change through networks and ongoing communication



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# Building Bridges

## The Rural Health Group



**The Rural Health Group  
Iosco County, Michigan**

Tapping community talents and resources for the greater good.



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# Case Study – RHG Study of NEMT



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# Rural Health Group Study of NEMT for the Michigan Health Endowment Fund

If you don't ask,  
you'll never  
know..



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# Key Points of 2023-2024 Iosco County Research:

- From population of 233 home-delivered meal recipients (all over age 60) a sample of 84 was interviewed in their homes regarding health status, transportation norms, & experience with lost or delayed medical care for lack of transportation.
- 26% Experienced problems simply getting to routine medical care for lack of predictable transportation.
- 9.4% Experienced disrupted or cancelled medical care.
- Highly generalizable to rural communities and extrapolation indicates that many thousands of people are at risk.



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# Research To Action



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- University of Michigan PACE grant
- Two community sessions
  - 158 invitations, selected for organizational and mission diversity
  - 75 total attendees from wide range of professions and organizations



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# Documenting The Range of Stakeholders

- Healthcare Providers
- County Governments
- N.E. Michigan Council of Governments
- EMS Operations (Private and Public)
- Public Transportation Programs
- Entrepreneurs
- Academics
- District Health Departments
- Current NEMT Providers
- Disability Rights Advocates
- Aging service systems
- Finance Systems (such as regional/county development offices)
- Insurance Companies
- County Commissioners
- Utility System Community Development Funds



# Goal: Knock Down a few Silos

- Pair stakeholders with others from different fields or practices
- Discuss essential questions about NEMT
- Share barriers you have faced about NEMT
- Brainstorm cross-sector solutions
- Inform and energize each other



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# Structured Group Discussions

- Used to Escape Silos preventing collaboration, innovation and communication
- Two Meetings:      Regional Stakeholders in East Tawas  
                                    Statewide Stakeholders in Mt. Pleasant
- Development of Invitation Lists
- Intentional seating to maximize inter-silo communication and sharing
- Collection and analysis: “Idea Harvest”



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# Harvested Ideas From Regional Conferences

- Current Status & Key Challenges
- Funding & Payment Issues
- Operational Barriers
- Awareness & Access
- Why NEMT Matters: The Cost of Inaction
- Recommendations for Regional Action
- Streamline Funding & Administration
- Remove Structural Barriers
- Build Capacity & Infrastructure: Create Sustainable Models
- Moving Forward: Establish a new like-minded community and network to pursue solutions together



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# Key Ideas From Regional Conferences

- The conferences revealed strong consensus that Non-Emergency Medical Transportation is a critical healthcare service requiring coordinated regional solution.
- Cross-sector collaboration between healthcare providers, government agencies, community organizations, and transit services is essential to develop sustainable NEMT systems that ensure all residents can access necessary medical care.



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# Lessons From Advocacy and Dissemination

- Partnering with local agencies and institutions generates creative communication.
- Cross-sector meetings encourage networking.
- Recognizing and respecting different professional expertise extends range of solutions.



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# Next Step: Already Underway

Michigan Department of Labor and  
Economic Opportunity, Rural Readiness  
Grant

Take one good idea and LEARN about  
how to move forward.



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# Discussion



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# Resources

- University of Michigan MICHHR
  - <https://michr.umich.edu/>
- Central Michigan University
  - <https://med.cmich.edu/rhei>
- Regional Public Health Dashboards
  - MIHIA - <https://dashboard.mihia.org/>
  - Northern Michigan CHIR - <https://northernmichiganchir.org/mithrive/mithrive-data/>
- Douglass, R.L., Stansloski, D., Mortimer, J., et al. (2024). *Assessment of Need for Non-Emergency Medical Transportation for Underserved, Vulnerable Aging Residents of Iosco County Michigan*. Final Report to the Michigan Health Endowment Fund. Tawas City, Michigan.  
doi: 10.13140/RG.2.2.27572.87684



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