

## **Rural Wisconsin Health Cooperative: Milestones 1979-2020**

*By definition, lists are incomplete; below is a sample of important milestones.*

- 1979** The Rural Wisconsin Hospital Cooperative (RWHC) was incorporated on June 26 as a shared service organization by six hospital administrators: Ken Creswick (Cuba City), Earl Strub (Lancaster), Bill Beach (Prairie du Sac), Gary Deml (Dodgeville), Dave Shipley (Boscobel) and Tim Size (University of Wisconsin Hospital & Clinics, Madison).

Advocacy was added to the RWHC mission in response to a proposal from the Madison centric and federally funded Southern Wisconsin Health Planning Council. The HPC recommended (after a series of closed meetings with only one “rural” participant) that most rural hospitals in southern Wisconsin either close or merge.

St. Clare Hospital & Health Services (Baraboo), Edgerton Hospital & Health Services, Mile Bluff Medical Center (Mauston), Southwest Health Center (Platteville) and Stoughton Hospital also join during the inaugural year as voting members of RWHC.

- 1980** On January 1, RWHC opened a one-room office over the boiler room in the annex of Memorial Hospital of Iowa County with Tim Size as the Executive Director.

RWHC’s first shared service, Physical Therapy, was initiated by Dennis O’Connell.

Reedsburg Area Medical Center becomes the newest voting members of RWHC.

- 1982** Black River Memorial Hospital (Black River Falls), Columbus Community Hospital, Moundview Memorial Hospital & Clinics (Friendship), Memorial Medical Center (Neillsville) and Prairie du Chien Memorial Hospital become the newest voting members of RWHC.

- 1983** The Richland Hospital (Richland Center) becomes the newest voting member of RWHC.

RWHC applied for and received its first grant, “Cooperative Infection Control” from the W.K. Kellogg Foundation in collaboration with Dr. Bill Scheckler, hospital epidemiologist at St. Mary’s Hospital in Madison.

HMO of Wisconsin (now operating as Unity Health Plans) was developed by RWHC, again with key support from St. Mary’s Hospital in Madison.

- 1984** Vernon Memorial Healthcare, Inc., (Viroqua) becomes the newest voting member of RWHC.

RWHC first became active nationally as a vocal advocate for Medicare payment equity when its executive director was invited to speak in Washington, DC, on behalf of rural hospitals at a Georgetown University Health Policy Institute Roundtable focusing on the first year of the Prospective Payment System.

Mobile CT and Nuclear Medicine services were initiated through the development of private sector partnerships.

- 1985** RWHC was recognized with a “Citation of Merit” by the Wisconsin Legislature and given the “Outstanding Rural Health Program Award” by the National Rural Health Association.

Initiated a Health Benefits Program as a mechanism for RWHC members who self-fund their employees’ health insurance to pool their cash for claims payments and to gain the benefit of group purchasing for their claims administration and reinsurance. (The program was terminated seven years later due to changes in the applicable federal law as well as adverse risk selection.)

- 1987** Memorial Hospital of Lafayette County (Darlington) becomes the newest voting member of RWHC.

The Wisconsin Hospital Association gave RWHC its annual Award of Merit.

- 1988** RWHC, through the National Rural Health Association, triggered the fundraising and filing of a class-action suit against the Department of Health and Human Services for an “unjust taking of property” due to a failure to provide just compensation to rural hospitals for services to Medicare patients.

A three-year grant award was received from Robert Wood Johnson Foundation to participate in their Hospital-Based Rural Health Care Program. A key legacy from this Program was the eventual development of over three dozen RWHC Roundtables—structured peer to peer networking representing a wide range of clinical and non-clinical disciplines.

RWHC’s executive director was appointed by then Governor Tommy Thompson to the Wisconsin Health & Education Facilities Authority in order to encourage a more proactive approach with rural hospitals. (His most recent reappointment goes through June, 2025).

RWHC’s executive director testified before the US Senate Special Committee on Aging.

- 1989** A three-year grant award was received from the Robert Wood Johnson Foundation and the Pew Charitable Trusts for “Strengthening Hospital Nursing.”

RWHC’s executive director testified before the US Joint Economic Committee and the Senate Finance Committee.

- 1990** RWHC played a significant role in the Legislature when it authorized the Wisconsin's Rural Health Development Council.
- 1992** A three-year grant award was received for "Rural Occupational Health" from the Federal Health Outreach Program, Health Resources & Service Administration.
- 1993** RWHC established the Hermes Monato Annual Rural Health Essay Prize in memory of an employee; in 2011 the prize is \$2,500 from a fund held by the University of Wisconsin.
- 1994** HMO of Wisconsin was sold by its rural owners to United Wisconsin services (a BlueCross subsidiary) and subsequently merged with U-Care HMO based at the University of Wisconsin. A joint venture among these entities governed the resulting HMO, Unity Health Plans. Community Health System, LLC, was created to represent the prior rural provider/owners of HMO of Wisconsin and RWHC was chosen to administer the LLC.
- 1995** St. Joseph Community Health Services, Inc., (Hillsboro) becomes the newest voting member of RWHC.

Name changed to Rural Wisconsin Health Cooperative to better reflect RWHC's increasingly broader mission as well as the diverse services offered by its members.

Initiated the "*Eye on Health*" newsletter and **www.RWHC.com** website.

- 1996** Received initial approval of a business advisory letter from the US Department of Justice allowing RWHC to develop RWHC Network as a related entity to work with health insurers.
- 1997** Community Health Network (Berlin), Monroe Clinic, and Divine Savior Healthcare (Portage) become the three newest voting members of RWHC.

Received a federal "Network Grant" to increase the effectiveness and utilization of its regional credentialing service as well as implement a model for providers, plans and direct purchasers to collaborate on quality data collection and customer satisfaction surveys.

A three-year grant award was received from the Federal Health Resources and Services Administration for "The Wisconsin Rural Zones of Collaboration Initiative."

RWHC's executive director served as President of the National Rural Health Association, as have two others from RWHC (Harold Brown and Bill Sexton) and Fred Moskol (the director of the Wisconsin Office of Rural Health for its first quarter century.)

- 1998** Shawano Medical Center and Door County Memorial Hospital (Sturgeon Bay) become the two newest voting members of RWHC.

RWHC became a Joint Commission certified OryX Vendor.

Established a non-voting Affiliate Membership to enhance its relationships with regional, tertiary based, provider systems.

- 1999** RWHC, along with the Wisconsin Department of Health & Family Services, the Wisconsin Hospital Association and the state Office of Rural Health wrote the Wisconsin Rural Health Plan, assuring that the “necessary provider” designation criteria to become a Critical Access Hospital reflected Wisconsin values.

After 20 years in 5 different rental properties, RWHC built its own 9,100 sq. ft. building in the Sauk City Business Park.

RWHC first achieves NCQA Certification as a Credentials Verification Organization.

Successfully renegotiated a second five-year joint venture to govern Unity Health Plans along with United Wisconsin Services and the University of Wisconsin.

RWHC’s executive director was appointed by the Governor to represent hospitals on the Employer Health Care Coverage Board and was subsequently elected to Chair the Board.

Following the departure of RWHC’s long serving deputy director, the leadership structure was restructured into a senior staff team.

- 2000** Medford Hospital & Clinics and Tomah Memorial Hospital become the two newest voting members of RWHC.

RWHC administered a Federal Outreach grant on behalf of three county health departments and five rural hospitals to address the health promotion and disease and injury prevention needs of the farmers and agricultural laborers.

A Premier Coding Consultation Service was initiated.

The RWHC Award of Excellence in Nursing Clinical Practice was launched.

In partnership with Albert Lanier and Ron Shaffer at the Center for Community Economic Development, University of Wisconsin-Extension, published the study “The Economic Value of the Health Care Industry in Sauk County, Wisconsin.”

- 2001** Developed alternative sources of blood products for rural hospitals in response to a series of unilateral changes by the then only regional source.

The RWHC Award of Excellence in Nursing Management was launched.

- 2002** RWHC implemented a shared data network that allowed for secure T1 connections between the member hospitals and a central data center.

National Rural Health Association gave its top honor, the Louis Gorin Award for Outstanding Achievement, to RWHC's executive director.

- 2003** The Wisconsin Nurse Residency Program was initiated at RWHC in partnership with Marquette University.

With the Wisconsin Office of Rural Health, RWHC initiated a health careers website with a focus on rural health opportunities, Rural Health Careers Wisconsin.

Received a research grant to address "How Can Rural Balanced Scorecards Best Incorporate Population Health Measures?" from the University of Wisconsin Health & Society Research Competition, funded by Robert Wood Johnson Foundation.

RWHC's executive director appointed to a rare repeat term on the National Advisory Committee on Rural Health & Human Services for the US Department Health & Human Services.

RWHC's executive director briefed US Senate Rural Health Caucus and House Rural Health Coalition.

- 2004** Tri-County Memorial Hospital (Whitehall) becomes the newest voting member of RWHC.

RWHC facilitated the rural owners of HMO of Wisconsin to exercise their right to buy back HMO of Wisconsin and then sell the company to University Health Care.

The Agency for Healthcare Research & Quality awarded RWHC a Transforming Healthcare Quality Through Health Information Technology one-year planning grant.

RWHC received a planning grant on behalf of a statewide collaborative for the "Wisconsin Academy of Rural Medicine," a medical school within a medical school, from the Wisconsin Partnership Fund for a Healthy Future.

The RWHC Rural Health Ambassadors recognition program was launched.

- 2005** RWHC hired a director of health information technology and began organizing a shared electronic health record (EHR) taskforce.

Received a research grant for "What Policies Encourage Local Collaboration for Population Health in Rural Communities?" from the University of Wisconsin Health & Society Research Competition, funded by Robert Wood Johnson Foundation.

- 2006** Langlade Memorial Hospital (Antigo), Fort HealthCare (Fort Atkinson) become the two newest voting members of RWHC.

RWHC, LLC was formed by the RWHC Network to operate as a PHO on behalf of participating members in contracting with Medicare Advantage (MA) plans.

RWHC became a certified HCAHPS Vendor.

Developed with members, Club Scrub was an interactive health careers program targeting middle school students.

Beginning of transition to the RWHC Office & Training Center with the purchase of Mediasite technology and other state of the art communication for long distance networking.

RWHC's submitted an affidavit to defend the work of nurse anesthetists before the Wisconsin Medical Examining Board.

Inauguration of the Hospital to Hospital Program (H2H)—a structured process for member CEOs to routinely seek out and visit other hospitals in order to gain additional insights to enhance their organization's performance.

RWHC, in collaboration with others, raised nearly a million dollars to support the Strong Rural Communities Initiative (SRCI)—a statewide collaboration among medical, business and public health sectors. (This was the first community based initiative to receive support from both of Wisconsin "BlueCross Conversion Foundations.")

**2007** Baldwin Area Medical Center becomes the newest voting member of RWHC.

RWHC Information Technology Network incorporated as a 501(c)3 organization dedicated to providing member hospitals with shared HIS/EHR services. Four RWHC facilities signed on as founding members. Helping to support the initiative, three grants were awarded to RWHC: (1) Health Resources and Services Administration's (HRSA) CAHHIT Network grant for \$1.6 million; (2) Federal Communications Commission's Rural Healthcare Pilot Program for up to \$1.5 million; and (3) a federal appropriation through Senator Herb Kohl's office for \$181,000.

RWHC Nurse Residency Program was highlighted in the December issue of *Hospital & Health Networks*—the retention statistics for the first and second years of the program were 89 percent and 87 percent of the 31 nurses in the program were retained.

RWHC hosts a two day "field visit" for the National Advisory Committee on Rural Health & Human Services.

A Corporate Sponsors program was initiated to formalize relationships with multiple companies/vendors/consultants that provide discounted services to member hospitals.

**2008** St. Joseph's Hospital (Chippewa Falls), St. Clare Memorial Hospital (Oconto Falls), and Spooner Health System become the three newest voting members of RWHC.

RWHC hired its first full-time director of advocacy.

RWHC's executive director was listed on *Modern Healthcare's* "100 Most Powerful People in Healthcare."

RWHC started contributing substantial "loaned executive time" to the Wisconsin Health Workforce Data Collaborative (WHWDC).

RWHC ITN became the first network in the country to implement telecommunications services as part of the FCC Rural Healthcare Pilot Program.

RWHC launched a well-received leadership series (primarily workshops and coaching sessions) focusing on core leadership behaviors, long-term goal/strategy development, performance management, talent management, culture surveys, and a 360-degree evaluation tool.

- 2009** Received from the National Cooperative of Health Networks Association its first "Annual Outstanding Health Network of the Year."

The Wisconsin Office of Rural Health partnered with RWHC's Director of Health Information Technology to develop an informational blog, *Rural Health IT*.

On behalf of the WHWDC, a three-year Impact grant was successfully pursued for the "Collaborative Response to the Growing Wisconsin Health Workforce Crisis" from the Healthier Wisconsin Partnership Program at the Medical College.

- 2010** *Leadership Insights* monthly newsletter and the *Rural Health Advocate* blog were launched.

Received a subcontract through WHITEC to provide meaningful use technical assistance to rural Wisconsin hospitals through the ARRA funded Regional Extension Center program.

Received an equipment training grant from HRSA to purchase computerized patient simulators to assist with training rural nurses.

- 2011** RWHC Proposed the Wisconsin Rural Training Track Collaborative to the Wisconsin Rural Physician Residency Assistance Program for start up funding.

RWHC filed amicus briefs in two separate cases challenging hospital property tax exemptions; the first was successful and the second is pending (as of 12/21/11).

Launched the Southern Wisconsin Immunization Coalition with generous support from Dean Healthcare, Unity Healthcare, the University of Wisconsin Partnership Program and the Wisconsin Office of Rural Health.

A “Mystery Shopper” Program (using phone and on site visits by and at all participating hospitals) was implemented with 11 members participating in the first round.

The Wisconsin Center for Nursing assisted by RWHC are designated by the Robert Wood Johnson Foundation and AARP as co-leads of the Future of Nursing: Campaign for Action in Wisconsin.

RWHC QI Program becomes one of the first modular EHR vendors to achieve meaningful use for clinical quality measures.

The Wipfli-RWHC Cost Champions Award was initiated.

The Wisconsin Partnership Program awarded a Development Grant of \$50,000 to RWHC for “Related Lower Extremity Injury Prevention in Rural High Schools.”

A 4,200 sq. ft. expansion to the Office & Training Center is completed.

**2012** Beaver Dam Community Hospitals, St. Croix Regional Medical Center (St. Croix Falls), and Cumberland Healthcare become the three newest voting members of RWHC.

RWHC launched the Document Assessment Service. This service assesses compliance with Conditions of Participation and Medicare manuals, core measure populations, accurate coding functions, and provides physician peer review. This approach includes a comprehensive review of documentation protocols and communicates inclusive recommendations to overcome documentation hurdles that will improve reimbursement.

RWHC receives a Distance Learning Grant from the USDA to expand the scope and efficiency of virtual meeting and educational offerings. The matching grant funds were used to improve teleconference, web-enabled video, and expand inter-connectivity between remote participants of RWHC programs.

The Wisconsin Collaborative for Rural Graduate Medical Education, WCRGME (formerly known as the Wisconsin Rural Training Track Collaborative, WRTTC) held its first formal meeting in February. Two new staff, the Development & Support Manager and the Rural Graduate Education Assistant, were hired to assist with the administration and accreditation of rural GME programs.

RWHC’s executive director receives the President’s Award at the NRHA’s Annual Conference in Denver, CO.

A “Lean Lab” led by Paul Frigoli, Ph.D. (c), Lean Six Sigma Master Black Belt, QI Director/Risk Manager at Grant Regional Health Center in Lancaster, WI, was developed and started in September. Consisting of six “lab” meetings, this workshop provides an excellent opportunity for participants to learn the basic Lean concepts and apply them to a facility specific project.



The RWHC Leadership Series offers the first regional outreach program, through a partnership with The National Rural Health Resource Center and the NE Minnesota AHEC in Duluth, MN. This four part series supported the work of more than 100 healthcare professionals in northwest Wisconsin and northeast Minnesota.

- 2013** Rusk County Memorial Hospital (Ladysmith), Bellin Health Oconto Hospital & Clinic (Oconto), and Memorial Medical Center (Ashland) become the three newest voting members of RWHC.

The original “shared service” which gave RWHC its start in 1979, continues to be an incredibly successful program. Clinical Staffing services (Physical Therapy, Occupational Therapy, Respiratory Therapy, Speech Pathology & Audiology) are now in place at more than 25 sites, and employ 26 co-op staff.

Along with four member hospitals (Adams, Boscobel, Monroe and Platteville), RWHC is awarded a Development Grant from the Healthier Wisconsin Partnership Program at the Medical College of Wisconsin. The \$200K, two-year grant, was one of the eight finalists selected from dozens of submissions, and will fund the development of a brief intervention program aimed to reduce binge drinking in rural Wisconsin.

The Wisconsin Collaborative for Rural Graduate Medical Education, WCRGME, now works with 17 healthcare organizations around the state developing and supporting rural graduate medical education, including two Rural Training Track residency programs in Monroe and Portage. It also hosted the first ever Rural Medical Educators Faculty Development Conference.

RWHC, with the Wisconsin Hospital Association started what may be the Country’s first residency program for new staff responsible for hospital quality improvement. The initiative is based on RWHC’s successful nurse residency program started in 2003.

RWHC directly hired 2 full time programmers to support the continued expansion of services with web-based functions for RWHC members and other clients.

RWHC ITN becomes one of the first networks in the country to be designated as a Healthcare Connect Fund (HCF) Consortium, helping 29 hospitals and nearly 70 sites apply for broadband funding through the new FCC HCF subsidy program.

RWHC’s Coding Consultant implemented comprehensive ICD-10 programs including; webinars, direct training sessions, and review modules to assist RWHC members and other WI hospitals with the October 2014 ICD-10 coding transition.

The 2013 legislative session saw some success as we helped others to shepherd Governor Walker’s Rural Access to Health Care Initiative through the biennial budget process. The initiative aims investment to train health care professionals for in-demand jobs of the current and future workforce in geographical areas of high need, such as rural and

impoverished urban areas. The initiative provides much-needed jobs and better access to primary health care for Wisconsinites in rural areas.

RWHC played a significant role nationally, along with many others, to push back against the DHHS Office of Inspector General's mischaracterization of the Critical Access Hospital Program.

**2014** Mayo Clinic Health System in Sparta becomes the newest voting member of RWHC.

RWHC was awarded a grant for \$70,000 from the Grace and Harold Sewell Memorial Fund to promote library and information services to improve access to information for RWHC members.

The RWHC QI Program achieved 2014 Edition Certification which gives hospitals a choice to meet both Stage One and/or Stage Two clinical quality measures reporting requirements regardless of their EHR vendor.

RWHC co-leads the Robert Wood Johnson grant with the Wisconsin Center for Nursing the SiP grant (State Implementation Program): "Taking the LEAD for Nursing in Wisconsin: Leadership, Education, Advancement and Diversity" to implement the IOM recommendations for nursing.

RWHC, in collaboration with WHA, launch the Quality Residency Program, which offers a combination of didactic and interactive learning with the adult learning principles in mind: Basic quality theory with content delivered by expert presenters, hands-on experience with tools for data-driven decision making, and building a network of sharing and support for professional development.

RWHC initiates efforts to pursue a long-term and constructive dialogue with the hospital leadership group at the Centers for Medicare and Medicaid Services (CMS) aimed at reducing rural bias in the regulatory process. The Executive Director lovingly refers to the initiative as Operation MASH (Mobile Army Surgical Hospital).

RWHC encourages and participates in WHA's Network Adequacy Council seeking to stem and resolve concerns members having experiencing with some health plans on guaranteeing local access to their communities.

RWHC received a \$900,000 grant through the Health Resources and Services Administration (HRSA) Network Development Grant Program to establish a Behavioral Telehealth Network that will provide much needed behavioral Telehealth services to underserved populations of Wisconsin.

RWHC ITN's shared PACS environment, established in 2013, grew from 3 to 6 participants.

The Wisconsin Collaborative for Rural Graduate Medical Education, WCRGME, now works with 28 healthcare organizations around the state developing and supporting rural graduate medical education, including a family medicine rural training track residency program in Monroe, a developing program in Elkhorn, and the addition of University of Wisconsin School of Medicine and Public Health rural tracks in general surgery, psychiatry, and future obstetrics/gynecology. In addition, it hosted its first Medical Education Administrators and Coordinators Workshop (MEAC) and its second Rural Medical Educators Faculty Development Conference.

To support the WCRGME's growth, a grant funded staff position of Rural GME Program Coordinator was added as a joint effort with the Northeast Wisconsin AHEC.

- 2015** Ascension St. Mary's Hospital (Rhineland) becomes the newest voting member of RWHC.

RWHC welcomes Sean Cavanaugh, deputy administrator and director for the Center for Medicare at CMS to Monroe Clinic and Grant Regional Health Center (Lancaster). Mr. Cavanaugh's trip highlighted efforts in Wisconsin related to graduate medical education (GME) and strengthening Wisconsin's healthcare workforce; and, how Wisconsin's rural hospitals have focused on quality improvement, patient satisfaction and cost-efficiency efforts that have made Wisconsin a leader in the healthcare value movement. Mr. Cavanaugh's visit reinforces the continued efforts of RWHC to engage CMS on important rural hospital and healthcare-related issues to the benefit of rural healthcare. Tim Size concluded his work on the National Quality Forum's Rural Measures Committee, which provided recommendations to CMS on rural-focused sociodemographic measures that should be used in evaluating and supporting rural healthcare. Ongoing growth of the Wisconsin Collaborative for Rural GME. Consolidation of various workforce development activities into the Wisconsin Council of Medical Education & Workforce (WCMEW) along with the central role we played with the Governor's Office and National Governor's Association workforce planning initiative.

University of Wisconsin Population Health Institute's agreement (reached after two years preparation) to move forward with a Healthy Community designation program as well as our successful collaboration with them and the Federal Reserve Bank of Chicago (to be repeated in northern Wisconsin in late 2016).

Ongoing stretch exercise with the Wisconsin Partners (an association of associations) initiative as part of a long-term strategy of building closer working relationships with a diverse array of statewide associations to support local initiatives across our members and across various sectors.

- 2016** For the first time in its history, RWHC creates a biennial organizational report to highlight our accomplishments and services. The *RWHCinReview* can be found at: [www.rwhc.com/Portals/0/papers/RWHC\\_Review\\_2015-16.pdf](http://www.rwhc.com/Portals/0/papers/RWHC_Review_2015-16.pdf)

RWHC went live with its behavioral telehealth program (funded by the HRSA Network Development grant), with two psychiatrists, one psychologist, and one psychiatric APNP providing telehealth services to three RWHC member hospitals.

Our Annual Employee Engagement survey, for the first time, had 100% responding as “extremely satisfied” or “satisfied” to work for RWHC, with three-quarters saying the former.

July 1 sees the long-awaited demise of Wisconsin’s outdated and duplicative 30-year old state hospital regulations. Previously passed legislation wisely reduces the additional burdens that the state places above and beyond federal Medicare Conditions of Participation (CoP) and state licensure requirements.

July marked another successful CMS recertification for the RWHC CAHPS Hospital Survey Program and November marked another successful recertification for the RWHC Credentials Verification Service with NCQA for all elements.

The Rural Wisconsin Initiative is introduced, signaling the Legislature’s awareness of needed cross-sector collaboration and initiatives to improve rural community economic and health status. The package of legislation is a broad set initiatives is expanded going in to the next legislative session to support Wisconsin’s rural communities.

Successful Senior Staff Team implementation of five exciting new shared services: (1) The Primary Care Outcomes Improvement Workgroup, (2) Captive Insurance Company for Workers Comp (and potential use for leveraging self-insured health programs), (3) the Behavioral Telehealth Program, (4) the Leadership Residency and (5) the “Orientation Portfolio,” a web-based training site for vendors, students and volunteers that is quickly gaining statewide support.

The CMS Rural Health Council initiated in 2016 was the direct outgrowth of a recommendation from RWHC (with subsequent assistance from NRHA).

**2017** RWHC releases its second biennial organizational report to highlight our accomplishments and services. The *RWHCinReview* can be found at: [http://www.rwhc.com/Portals/0/brochures/Year\\_in\\_review\\_2018\\_final\\_web.pdf](http://www.rwhc.com/Portals/0/brochures/Year_in_review_2018_final_web.pdf)

In March, the RWHC Board welcomed to our annual Board Retreat the co-chairs of the CMS Rural Health Council, an internal council that brings together experts from across the agency. The Rural Health Council has been focusing on three strategic areas –“first, ways to improve access to care for all Americans in rural settings; second, ways to support the unique economics of providing health care in rural America; and third, making sure the health care innovation agenda appropriately fits rural health care markets.”

Built on RWHC’s successful Nurse Residency program model, our year-long Leadership Residency brings together first year leaders in health care to increase—and expedite—the

likelihood of success in the leadership role. New leaders in health care often come from the ranks—employees with good potential for leadership and management but with little training or support.

Our web-based training site, Orientation Portfolio, for vendors, students and volunteers is now live and we are working with numerous colleges to promote the program in order for their students to have all training materials completed prior to arriving at sites.

The 25th Annual Monato Rural Health Essay Prize was awarded to Ian Jasso at the University of Wisconsin-Madison for his essay, “Mish ko Swen: To Be Strong and Healthy.”

The Wisconsin Healthy Community Designation is launched by the University of Wisconsin Population Health Institute after a two plus year collaborative development process with RWHC and Sauk Prairie Health.

Wisconsin Partners, a new “association of associations” and local community building initiative, hired its first community engagement manager and received tax-exempt status.

RWHC works with Competitive Wisconsin, a nonpartisan consortium of agriculture, business, education and labor leaders, to develop their Be Bold III initiative to support a more robust statewide vision for population health and workforce development.

Primary Care Outcomes Improvement Program is funded through a HRSA Network Development Grant. Ten RWHC Member hospitals that operate 26 primary care clinics are participating in this effort to improve quality, increase population health, and reduce costs associated with chronic disease management in rural primary care settings.

RWHC Executive Director receives Outstanding Network Leader Award from the National Cooperative of Health Networks.

**2018** Aspirus Riverview Hospital & Clinics (Wisconsin Rapids) and Hayward Area Memorial Hospital become the two newest voting members of RWHC.

RWHC’s Nursing Leadership Senior Manager receives the 2018 NRHA Educator of the Year Award.

RWHC launches a campaign, Champions of Health, on behalf of local rural health care to: Educate residents about the health care available in their communities. Dispel negative misconceptions about local care. Encourage patients to proactively choose their local health care providers. The campaign is implemented and branded locally using a toolkit of white-labeled templates by 11 RWHC members.

RWHC receives Wisconsin Health & Educational Facilities Award of Excellence.

**2019** Ascension Good Samaritan Hospital (Merrill) and Flambeau Hospital (Park Falls) become the two newest voting members of RWHC.

RWHC works with AARP's National Office to develop a toolkit of family caregiver resources for rural hospitals in Wisconsin and then all fifty states. The toolkit intends to help rural healthcare organizations better serve the unpaid family caregivers of rural community patients.

RWHC partners with HEAL (Healthy Embodied Agile Leadership) Program to create opportunities to reduce burnout in healthcare providers and leaders.

Wisconsin Northern & Central Graduate Medical Education Consortium (WiNC GME Consortium) forms to address the need for additional graduate medical education resources for the northernmost thirty-seven counties in Wisconsin. The population includes 27 counties with HPSA designation, and has an existing physician shortage that is expected to worsen. The WiNC GME Consortium is supported by a group of health systems, medical schools, residencies and healthcare advocacy groups. WiNC is awarded a Department of Health Services New Residency grant funds to establish WiNC.

RWHC initiates a year and a half long planning process to address the best role for RWHC in rural community and economic development--leading to a partnership with the University of Wisconsin Extension and University of Wisconsin Population Health Institute and pursuit of multiple funding opportunities still pending.

**2020** ThedaCare Medical Center Waupaca becomes the newest voting member of RWHC.

RWHC again participated in a Rural Measures Application Partnership with the National Quality Forum--a multistakeholder partnership that guides the U.S. Department of Health and Human Services (HHS) on the selection of performance measures for federal health programs.

RWHC creates the Rural Contract Consulting, LLC. The new service provides contract consulting services/support for any or all components of contracting or contract management -- including negotiation of financial terms.

RWHC's partnership with the University of Wisconsin's School of Nursing led to Jenn Kowalkoski being selected as the NRHA/John Snow Inc. Student Leadership Award, embodying a much needed bridge between rural and academic nursing.

RWHC Members and staff served on multiple State and regional committees in response to COVID-19. RWHC's Executive Director was featured in multiple media outlets re the impact of COVID-19 on rural hospitals.

RWHC successfully applies for the Payroll Protection Program (PPP) is providing a significant financial support during the COVID-19 pandemic. Without this program, RWHC would have furloughed approximately 40% of the staff.

Primary Care Outcomes Improvement Program expanded from 10 to 17 RWHC members and has been funded for a second three-year HRSA Rural Health Network Development Program grant.

RWHC and WHA restart the Wisconsin Quality Residency Program. The modules, focused on quality improvement concepts and essentials, are designed for new or novice quality leaders as well as experienced leaders looking for a “refresher” in a specific topic areas.

### **Membership Application Process**

While the emphasis of RWHC is to better serve existing members, new members are welcomed. The application process is informal—the Board engages in discussion to see if new membership will result in a mutually beneficial relationship.

### **For Additional Information**

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