

OUTSTANDING RURAL HEALTH CAREER



Brad Gibbens





















Dakota
Conference
on Rural and Public Health







Dakota
Conference
on Rural and Public Health













FOCUS

ON RURAL HEALTH • FALL, 1985

A PUBLICATION OF THE OFFICE OF RURAL HEALTH OF THE UNIVERSITY OF NORTH DAKOTA SCHOOL OF MEDICINE

Staff Profile:



Brad P. Gibbens, is a Program Assistant for the Health Manpower Placement Program of the Office of Rural Health, University of North Dakota School of Medicine, Grand Forks. A native North Dakotan who grew up on a farm near Cando, Brad has completed his master's degree in public administration at the University of North Dakota.

Prior to joining the UND School of Medicine, Office of Rural Health, he served as research associate for the Bureau of Governmental Affairs at UND and as a graduate teaching assistant with the Political Science Department of UND. His background in research and governmental policy, and his understanding of rural economics and lifestyle adds to the breadth of knowledge of the Office of Rural Health.

DIRECTION

By Kevin Fickenscher, M.D., Director, Office of Rural Health

Several months ago, a rural physician and I were sharing notes on the many changes occurring in health care. When the discussion shifted to "marketing" my friend said:

"We don't want to market by advertising. We're not Campbell's Soup, MasterCard or McDonald's. What we need is a better sense of the people in the community and how we can be more responsive. We need help in looking at the services and planning at the local level to implement the needed services. We don't want to be everything for everybody but we do have an obligation to provide the best to our community."

Too often we in the health field view marketing as advertising and the panacea for all of our ills. It is neither.

It is a new world in health care. The change in health public policy toward a more competitive environment is radically altering the face of American health care. To effectively meet the challenges, physicians and administrators are adopting a business orientation of which marketing is a major element.

For many health providers, even the discussion of marketing leaves a bad taste. The "bad

taste" comes from a misunderstanding of marketing and a misapplication of marketing to health care.

My friend, in defining what he did not want (ie. advertising), defined many of the critical approaches to marketing.

The health care field has always used "marketing" for fundraising events, publications efforts and community relations. These are but a few examples of where marketing has been applied in health care over the years.

The new cost-controlled, competitive environment however dictates that rural physicians and hospitals consider all of the various elements of marketing. William J. Winston, Dean of the School of Health Services Management at Golden Gate University in San Francisco suggests that health care providers and administrators must "... use the wider scope of marketing for better understanding of consumer and medical provider behavior, new service development, pricing of services, performing marketing research, developing marketing and strategic plans, identifying specific niches in the marketplace, creating better communication among their employees and between the consumer and the hospital, and for establishing more efficient marketing strategies and programs for specific target groups." We agree.

Marketing will "save" no one, but without an effective marketing program the abilities of rural physicians and hospitals (continued, next page)



U.S. Senate Forms Rural Health Caucus

The Senate Rural Health Caucus has been formed to focus attention on rural health issues and to offer a united voice on those issues in Congress.

The bipartisan group, which to date includes senators from 22 states, will grapple with issues affecting rural health care such as:

- the shortage of medical personnel in rural communities;
- the disproportionate number of poor and elderly in rural America (both groups

which require more medical care than the general population);

- the growing concern over new Medicare regulations and their effect on the financial health of rural hospitals, and
- the high cost of rural health care.

The caucus was formed in June by Senators Quentin Burdick (D-ND) and Mark Andrews (R-ND) upon encouragement by the University of North Dakota School of Medicine, Office of Rural Health. (continued, next page)

VOL. 2, NO. 4 FOCUS ON RURAL HEALTH is published quarterly in January, April, July and October by the Office of Rural Health at the University of North Dakota School of Medicine; offices at 801 N. Columbia Road, Grand Forks, ND 58802; phone (701) 777-8848. Editorial Assistance by Pamela D. Knudsen, Medical School Information Officer.

Dakota
Conference
on Rural and Public Health





