



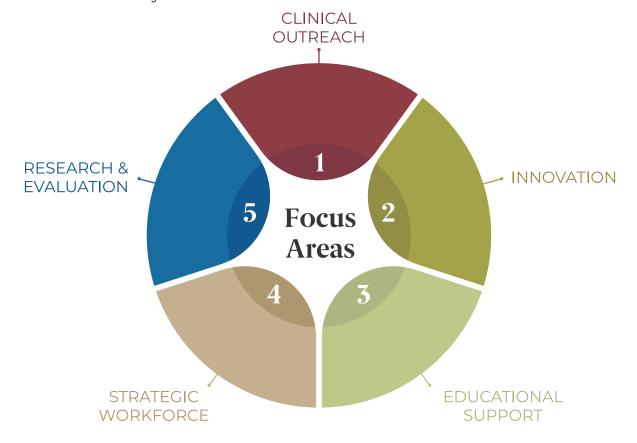
SC Center for Rural and Primary Healthcare Staff: Kevin Bennett, Samantha Renaud, Alanti McGill, Michele Stanek, Brittany Wesley, and Chuck Carter.

Our Mission

Support and develop rural and primary care education, delivery, and sustainability in South Carolina through clinical practice, training and research.

Our Vision

All South Carolinians will have access to high quality and high value healthcare regardless of where they live.



Director's Letter

We are pleased to share the many ways our Center is impacting the health and well-being of rural South

Carolinians. Our overall strategy includes: 1) identifying gaps in healthcare services; 2) supporting education and training; 3) supporting innovative approaches to common challenges; and 4) providing critical evidence needed to guide solutions for rural communities.

We work with partners throughout our state to identify, coordinate and test solutions to pressing problems. This may involve providing immediate support for a program, provider, or organization or providing critical investment to identify, generate, or evaluate potential solutions. Regardless, we use a data driven approach to measure and better understand the impact our interventions have.

Our Center has positively impacted rural health in several ways this year. The ICARED program continues to deliver essential medical specialists to rural communities, and we've been excited to grow this program in the Midlands, Pee Dee, and Upstate. These include pediatric subspecialties (including cardiology, pulmonology, and endocrinology); infectious disease; psychiatry; and primary care. These programs have allowed over 3,000 patients to receive care in their own communities and prevented 300,000 miles of excess travel to receive care.

The second year of our statewide Rural Innovations program supported 7 additional innovative projects focused on enhancing access to quality health care and improving health outcomes in rural communities.

We continue to invest in the future rural healthcare workforce. This year, the Center supported 15 new health professional students through our Rural Practice Loan Forgiveness program. These future physicians, physician-assistants and nurse practitioners are committed to practicing in rural South Carolina.

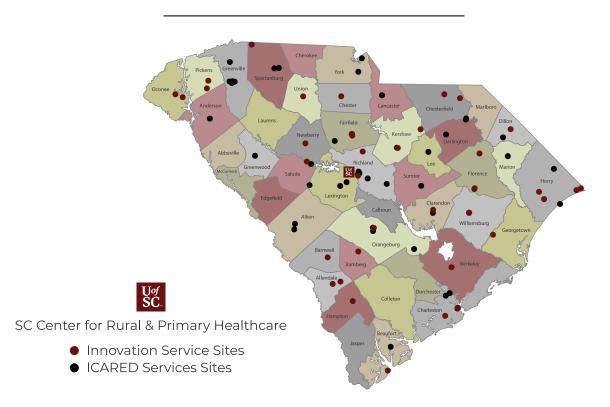
We've collaborated with Prisma Health to expand rural primary care physician residency training in SC by opening two new training programs: the new Family Medicine residency in Sumter, SC, and an expanded rural track in Winnsboro, SC. These programs both expand clinical training in rural SC and also immediately improve access to quality healthcare in underserved areas.

Chuck Carter, MD



- ullet 17 committed rural practitioners in the Rural Loan Forgiveness Program for MD's, PA's, and APRN's
- Over 3,000 patients served through the ICARED program in 2018-2019
- 342,126 miles avoided in 2018-2019 by providing healthcare services in rural areas
- ullet 150 medical students and resident gained rural health experience in our various programs
- 7 Additional Rural Innovation projects funded (# total since 2017)

Our Service Sites



Our Programs



The SC Center for Rural and Primary Healthcare is improving the quality of life in rural South Carolina by providing high quality health care services and by expanding health professions training in rural areas. We are grateful that this investment is helping to build a healthier state while improving the pipeline of health professionals with an interest in practicing in rural South Carolina settings.

LES HALL, MDExective Dean, UofSC School of Medicine

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The Improved Care and provision of Rural access to Eliminate health Disparities (ICARED) program supports rural clinical practice through onsite primary care, subspecialty support, and telemedicine.

Transportation barriers can be an impediment for rural residents with specialty care needs. Through ICARED support, specialists travel to rural health practices to serve patients in their own community. This program supports subspecialists, including pediatric subspecialists, maternal fetal medicine specialists, psychiatrists and adult cardiologists to augment the care in the rural communities.

Keeping Care Local: Pediatric Subspecialties

Pediatric subspecialists, supported by the ICARED program, provide vital services to children and families living in rural communities.

In FY 18-19, ICARED clinics conducted 3,108 encounters, allowing rural patients to avoid nearly 250,000 miles of travel.

This expansion has also given UofSC medical students and residents the opportunity to practice in a rural community: 35 medical students and 17 residents have been involved in these patient care visits.

I see a baby boy who is now 7 months old at our Orangeburg outreach clinic. He has a history of a life-threatening arrhythmia that requires frequent office visits and medication adjustment. His family has very limited resources and does not have the transportation capabilities to come to Columbia for every visit, so we see him in Orangeburg. His family has been able to come to these closer appointments much more easily and as a result he has remained in a normal heart rhythm for over 4 months now.

MARGARET GRAY, MD Pediatric Cardiologist





Rural Innovations Cooperative Agreement Program

Proactive, innovative approaches to improving care for rural patients are imperative in the dynamic, ever-changing healthcare landscape. Our Rural Innovations Cooperative Agreement Program identifies and supports programs and strategies that address unmet needs to improve rural health.

The program serves as a launchpad for novel ideas to transform health outcomes in rural communities. Beyond that, it also provides opportunities for successful programs tested in other settings to be replicated and scaled in a rural South Carolina.

Pee Dee	Upstate	Lowcountry	Midlands	Statewide
Region	Region	Region	Region	
Chesterfield Health Equity Project Chesterfield Working Well HIV PrEP Implementation Toolkit Rural Primary Care Resident Procedural Training Initiative Increasing HIV Screening and Linkage to Care for HIV PrEP or HIV Treatment Health Education and Active Living	Pharmacy Advancement in Rural Experiential Development with the Palmetto Experiential Education Partnership (PAIRED with PEEP) Expansion of a Collaborative Care Behavioral Health	Foodshare SC Healthy Tri-County Diabetes Prevention Program Expansion	Medically Supervised Weight-Loss Program in a Rural Health Clinic Community Health Worker Pilot Program	Improving South Carolina Rural Behavioral Health Workforce Recruitment and Retention Coordinating Healthcare for Correctional Agencies in Rural Setting Rural Practice Enhancement Micro-grants Implementation of Evidence-based Cancer Screenings in Rural Health Clinics

A 2018 Innovations awardee, PAIRED with PEEP was funded to increase experiential learning opportunities for pharmacy student in targeted rural areas through preceptor development. The ultimate goal of the program is to enhance rural healthcare engagement of students and pharmacists, including professional integration of students in rural areas with the aim to increase retention or pharmacists and recruitment of students for future career placement.

Funds from the Innovations award have been used to incentivize students to participate in rural externships. Additionally, preceptor stipends have been successfully used to increase both the number of sites and opportunities in rural South Carolina.

Over 80% of PAIRED with PEEP participants are interested in practicing in a rural area after graduation



During [my] rotation, I was also a part of the PAIRED with PEEP Scholars Program, which focused on the providing patient-centered healthcare in a rural setting. This is an area of pharmacy that I would very much like to incorporate into my career going forward. Chronic disease states seem to be very prevalent in rural populations and I feel that this is where pharmacists can make lasting impacts on healthcare.

PHARMD STUDENT IN RURAL INNOVATIONS PROJECT Paired with PEEP



[The Center's] investment in our rural outreach coordinator has truly paid off. In five months, we've added hubs in Kershaw, Bamberg, and Orangeburg. Lee, Barnwell, and Marion will launch in the next couple of months...

BEVERLY WILSONDirector of FoodShare SC







The SC Center for Rural and Primary Healthcare collaborates with partners throughout the state to provide experiential learning and clinical training for healthcare students. To increase medical student and resident interest in rural practice we've helped expand rural clinical training sites. We also support programs developing critical skills for rural practice.

Training the Future of Rural Medicine

The Prisma Heath Family Medicine Residency Program established a rural clinical track at the John A. Martin Primary Health Care Center, and the first resident, Dr. Andre Patterson (MD, UofSC School of Medicine, 2018) begins his work there this summer.

When Patterson heard about the new residency program, he knew the program could

help him achieve his rural practice goals. "I think this is a terrific opportunity, because I can work with families in providing continuity of care in an area where there are few specialists," Patterson says.

The site director, Dr. Mark Shaffer, a Clinical Assistant Professor of Family and Preventive Medicine at the UofSC School of Medicine, says the new residency program will serve several purposes, including a focused real-world experience for residents. "This is an investment between community partners and patients in developing an ongoing relationship and the provision of the highest level of quality care," he says.

Beyond residency programs, the Center supports other rural-focused training, including a statewide initiative to train rural primary care providers to use point-of-care

ultrasonography and a program at McLeod Health to leverage medical technology and simulation training devices to improve rural primary care physician recruitment and retention.



South Carolina Rural Practice Loan Forgiveness

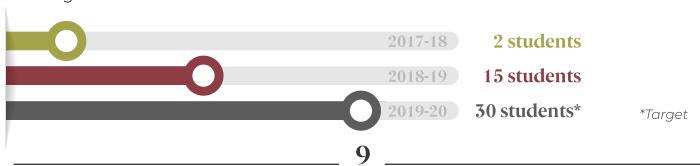
The Rural Practice Loan Forgiveness Program will enter its third year in 2020 and has seen substantially increased participation. Loan recipients are required to commit to rural South Carolina practice in a primary care or a critical need specialty. This vital tool for increasing the rural primary care workforce pipeline enrolls medical, physician assistant, and advanced practice nursing students from all publicly affiliated South Carolina medical and health professions schools. Since its launch, seventeen students

have received forgivable loans toward their education.

Coen Hasenkamp was part of the first cohort in the Rural Loan Forgiveness Program. Coen is currently a second-year medical student at the USC School of Medicine - Greenville and credits the forgivable loan for helping him pursue his interest in Obstetrical and Gynecological medicine in underserved South Carolina. Outside of the financial impact, he remarks, "it's helped me narrow down what specialty I want to pursue early on." Coen's early experiences have been a huge driver of his interest in rural practice. He is originally from Mackay, Australia, a remote part of the country, and recalls needing surgery when he was younger, "I had to get on a plane to see a specialist in the state capital 12 hours away." He completed his undergraduate degree at

Francis Marion University and shadowed at a Florence area FQHC.

From that experience he learned, "Rural practice requires creative solutions and thinking outside of the exam room."



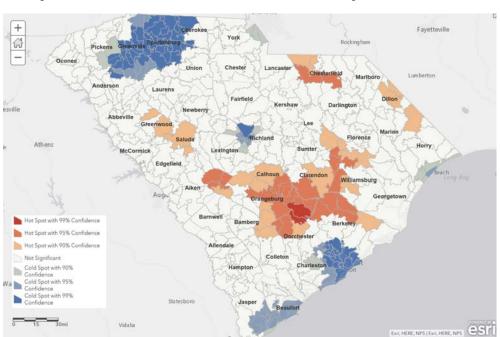


We ground our work in evidence and outcomes data, and our Research & Evaluation division supports this mission in several ways.

Programs we fund have detailed evaluation plans to measure impact on communities and the state. These may include outcomes assessment, program evaluation, economic impact, and community-level indicators.

As part of our ongoing commitment to identify and fill gaps in rural SC healthcare, our team is conducting a comprehensive analysis of South Carolina's rural health care resources. Each rural community is different and interventions that may work in one

county or community may not be viable in another. That is why we've created a publicly available database communities can use to learn more about their healthcare resources. This allows them to obtain data about topics such as health care providers and facilities, health care utilization, health related behaviors. disease prevalence, and socio-economic indicators.



Using this database, the

Center developed a Need Index for both Primary care and Obstetrics care. This goes beyond looking at the number of providers in an area; this index also includes other factors, such as the distance to the next nearest provider and proportion of the community with a need (e.g. women of child-bearing age). The Need Index is available at both the county and zip code level, allowing for a more targeted way to know where our state needs services.



Improving rural health includes generating increased attention to both the issues we face as well as the vibrancy of our rural areas. The Growing Rural podcast offers a diverse and authentic depiction of the issues facing rural South Carolinians and celebrates their successes. Through interviews with community leaders, policy makers, and researchers, we learn about the powerful work happening in every day throughout our state. Episodes cover topics such as health care, education, and the arts.





2019 Guest Interviews:

- Jan Probst, Rural and Minority Health Research Center
- Yvette McDaniel, Denmark Technical College
- Amy Martin, Medical University of South Carolina
- Susan DuPlessis, SC Arts Commission
- · Graham Adams, SC Office of Rural Health
- Ann Lefebvre, SC Area Health Education Consortium
- Henry Tran, Talent-Centered Education Leadership Initiative
- Jan Eberth, Rural and Minority Health Research Center
- Elizabeth Crouch, Rural and Minority Health Research Center



2019 saw substantial growth for our Center and increased our impact tremendously. Our guiding theme is to "grow rural" and as we've planted seeds since the Center's inception in 2017, we've seen a multitude of promising program take root. We look forward to continuing and expanding these efforts to transform the landscape of rural health in South Carolina. Our work would not be possible without the support of the South Carolina Department of Health and Human Services and the University of South Carolina School of Medicine as well as our many collaborating partners throughout our state. We all succeed through collaboration and a shared vision of a healthy, thriving state.

OUR STATEWIDE PARTNERS INCLUDE:

SC Area Health Education Consortium, SC Office of Rural Health, Institute for Medicine and Public Health, Research Center for Transforming Health, Antimicrobial Stewardship Collaborative – SC, University of South Carolina, McLeod Health, Tri-County United Way, SC Center for Fathers and Families, Prisma Health, Palmetto Health / USC Medical Group, SC Telehealth Alliance, Tandem Health, John A. Martin Primary Healthcare Center, FoodShare SC, SC Department of Health and Human Services, Medical University of South Carolina, Rural and Minority Health Research Center, and the SC Arts Commission.

The Center continues to provide the vehicle to leverage, connect and successfully coordinate the combined expertise of various agencies, community leaders and stakeholders to enhance the delivery of healthcare in rural South Carolina. The Center has enhanced its capability to mine and analyze data in support of the strategic deployment of local health care resources as well as the support of research and collaboration within our health sciences schools. We celebrate its success thus far and look to enhance its impact in 2020.

BILL ANDERSON, MD

Chief Medical Officer, UofSC Palmetto Health Medical Group



