

THE UNIVERSITY OF ARIZONA


# Center for Rural Health

ANNUAL REPORT FY 2020-21



THE UNIVERSITY OF ARIZONA  
MEL & ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH

Center for Rural Health



The Center for Rural Health housed a **new record of more than \$15 million** in federal and state funded rural programs awarded in FY 2021. AzCRH provided subawards, services, webinars, conferences, continuing education, technical assistance, data, analyses, evaluations, and reports to inform and support Arizonans, providers and policymakers on rural health services, best practices, legislation and regulation. These are detailed in this 2021 AzCRH Annual Report.

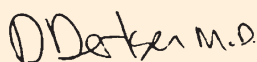
## Executive Summary FY 2021

The University of Arizona (UArizona) Center for Rural Health (AzCRH) FY 2021 annual report summarizes activities from 07/01/20 to 06/30/21 related to its mission to *improve the health & wellness of Arizona's rural & vulnerable populations*.

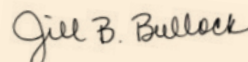
### Some of the FY'21 highlights:

- AzCRH received a \$4.47 million, five-year competing continuation award from the Health Resources and Services Administration (HRSA) building on our 32-years as the state and federal funded and designated Arizona State Office of Rural Health (AzSORH).
- HRSA also funded COVID-19 initiatives to get much needed support to Arizona's rural and critical access hospitals (CAHs) through our Medicare Rural Hospital Flexibility Program (AzFLEX) and the Small Rural Hospital Improvement Program's (AzSHIP's) 18-month, \$4.1 million award for COVID Testing & Mitigation passed through to eligible CAHs and other rural hospitals.
- AzCRH provided technical assistance and conduits between federal funding and rural providers including Arizona's 15 critical access hospitals (CAHs) and 38 rural health clinics (RHCs) from the 2021 American Rescue Plan Act (ARPA), HRSA, SAMHSA and CDC.
- The Arizona Department of Health Services (ADHS) continued inter-agency service agreements (ISAs) with AzCRH via federal subawards from the Substance Abuse and Mental Health Services Administration (SAMHSA) First Responders and the Medication Assisted Treatment (MAT) Mentor initiatives, and the Centers for Disease Control and Prevention (CDC) Overdose Data to Action (OD2A) program.
- AzCRH and its AzSORH Program collaborated with ADHS on their \$34 million two-year CDC COVID Disparities proposal awarded in June. An ADHS ISA with AzCRH for \$8.1 million supports the Mobile Outreach Vaccination & Education for Underserved Populations (MOVE UP) led by Dr. Rosales and other initiatives to reduce rural COVID disparities.
- The Arizona Health Care Cost Containment System (AHCCCS) worked with UArizona, NAU, ASU and others on a CMS proposal to expand training of Direct Care Workers (DCWs) to deliver Home & Community Based Services for Arizona Long Term Care Assistance (ALTCS) enrollees.
- AzCRH convened its 47th Annual Rural Health Conference at the NAU Flagstaff campus June 15-16 for 100 in person and 70 virtual attendees. It was terrific to see our many colleagues and collaborators and share our collective knowledge, successes and challenges.

On behalf of the AzCRH faculty, staff, students, and partners across Arizona, we thank you for your collaboration in these times of great challenge and promising opportunity. We look forward to working with you in 2022!



Daniel Derksen, MD  
Director, AzCRH



Jill Bullock  
Associate Director

Since 1990, AzCRH has been the state and federally funded and designated Arizona State Office of Rural Health (AzSORH) that helps rural communities address health issues and expand health services with partners across the state. The State of Arizona provides AzSORH a 3:1 state to federal match for the HRSA Federal Office of Rural Health Policy (FORHP) support. In June 2021, we received HRSA Notice of Award for AzSORH competing continuation of \$4.47M for 2021-2026. We received the National Organization of State Offices of Rural Health (NOSORH) prestigious State Office of Rural Health Award of Excellence.

AzSORH focuses on improving access to quality rural healthcare services and is deeply committed to social justice and health equity, in recognition of the historical and contemporary structural, economic and social landscapes that are the root causes of disparities. In the past year, these disparities were magnified and exacerbated by the COVID-19 pandemic. AzSORH worked to address the ongoing public health crisis in a variety of ways – from support for local testing sites to statewide collaborations addressing equity and access to health care.

Rural Arizona has disparities in health outcomes, insurance coverage and access to quality health care by race and ethnicity, socio-economic status, geography and social determinants. Its population is diverse, it has the 6th highest number (1.9 million) and 4th highest percentage of Hispanic/Latino population (AZ 29.7% vs. US 16.4%), the 3rd highest number (300,000) and 6th highest % of American Indians (AZ 4.5% vs. US 1.7%), and the 5th highest number (250,000) and 2nd highest % of uninsured children (AZ 14% vs. US 8%).

Through July 2021, COVID-19 infected 35 million Americans and caused over 600,000 deaths. Certain groups – African Americans, American Indians (AI), Hispanics/Latinos, older adults, those living with chronic health conditions or disabilities, and those living in rural areas – have been disproportionately affected by COVID-19 infections, hospitalizations, and deaths.

In FY'21 Arizona had more than 900,000 cases and 18,000 COVID-19 deaths. There is no one-size-fits-all “solution” to improving the health and wellness of Arizona’s rural and vulnerable populations. AzSORH delivered support and acted as a conduit for federal assistance to rural communities, providers, and care systems. Despite the challenges, rural communities can leverage strategic partnerships to be places of great vitality, innovation, and resilience. Through outreach and collaboration, AzSORH works to disseminate federal, state, and local resources, coordinate statewide rural health activities, and provide direct assistance to communities.



**AzSORH links our diverse staff and faculty with state agencies, rural communities, organizations, stakeholders, state and federal resources to:**

- Collect & disseminate rural health information and convene events.
- Provide technical assistance to rural communities and organizations.
- Develop and support rural health networks and partnerships.
- Support and expand the health workforce pipeline to practice in rural and underserved areas.
- Collect and analyze rural health data, produce actionable reports, and publish data visualizations.
- Identify and address factors that create disparities in rural and underserved communities.
- Promote affordable coverage.
- Assure accessible, culturally effective healthcare for all Arizonans.

#### AzSORH Five-Year Summary: July 1 to June 30 Fiscal Year (FY)

AzSORH Activity	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
Total Technical Assistance	3,902	4,858	4,236	5,210	5,189
In-Person Contacts	2,016	2,633	2,620	2,631	279
Phone / Emails	798	536	545	484	474
Webinar Participation	760	1,241	749	1,343	1,196
Teleconference	116	125	106	134	148
Other Modes (Media, Surveys, Website, Etc.)*	212	323	216	553	3,092
Newsletter Distribution	3,235	6,098	9,792	10,164	10,070
Web Page Visits	31,807	37,000	40,696	46,143	44,601

\*Previously labeled as “Assistance to researchers, others”

**The AzCRH Annual Arizona Rural Health Conference** – is the longest running rural health conference in the nation. The 47th Annual Arizona Rural Health Conference “*Resiliency Amid a Pandemic: Rural Arizona Challenges and Successes*” was held June 15-16, 2021 in Flagstaff. It was our first ‘hybrid’ statewide conference with 100 in-person and 70 virtual attendees.

Presenters reflected on the resiliency of Arizona’s rural and tribal communities and reinforced our collective commitment to assure that the health needs of rural, border, tribal and underserved communities are identified and addressed.

Attendees gained insights to emerging challenges, successful strategies, best practices and the resiliency of Arizona’s rural and tribal communities during the pandemic.

Sponsors included the: Arizona Hospital and Healthcare Association; Arizona Rural Health Association; Community Medical Services; Regional Center for Border Health; Solari Crisis & Human Services; and the Western Region Public Health Training Center.



Jimis Shukri (left); Timian Godfrey, DNP, APRN, FNP (right)



Anna Landau, MD (left)



Charlie Alfero, MA



Dan Derksen MD, Director, AzCRH

**AzCRH Annual Rural and Public Health Policy Forum** – was held virtually February 1 & 2, 2021.

More than 150 attended the February 1-2, 2021 Rural & Public Health Policy Forum, the Center’s first completely virtual statewide forum. The Forum addressed contemporary health policy issues and their impact on Arizona’s rural, border and tribal communities; and shared information on priorities for Arizona’s 2021 legislative session.

**This year’s virtual AzCRH Rural & Public Health Policy Forum Topics included:**

- Proposition 208: Next Steps and How Do We Get There
- What’s Next for Telemedicine/Telehealth Services – A Federal Perspective
- COVID-19 Response and Vaccination Distribution Challenges
- How to Use the Request To Speak at the State Legislature; Arizona Proposition 207 – Update and Overview of Social Equity Licenses
- Arizona COVID-19 Legal & Ethical Preparedness Primer – Focus on Rural Health.

Conference presentations and recordings can be viewed on our website at: <https://crh.arizona.edu/calendar/arizona-rural-public-health-policy-forum-2>

Since 1999, Arizona's Medicare Rural Hospital Flexibility Program (AzFlex) has been funded by the Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration (HRSA) who extended funding through competing continuation through 2024.

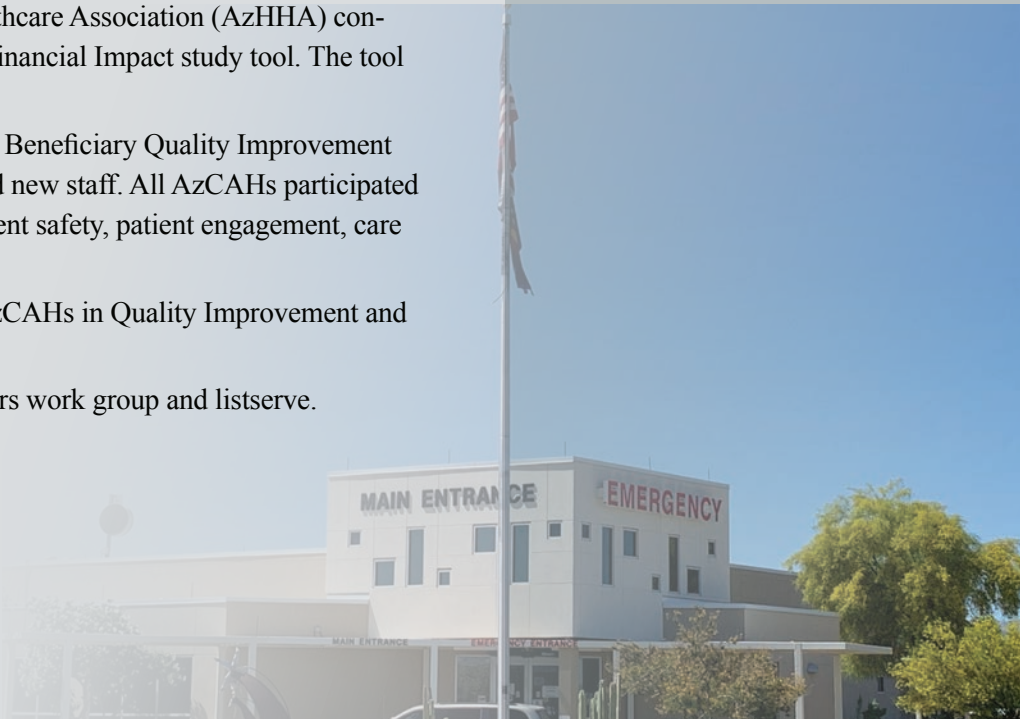
**Finance and Operations** – In February AzFlex convened the popular CAH Coding and Billing Certification Bootcamp course virtually. Ten of Arizona's 15 CAHs participated with a record of 70 participants, with 20 participants passing the exam as certified Critical Access Hospital Coding & Billing Specialists.

#### In FY 2021, AzFlex:

- Contracted with the Southern Arizona Hospital Alliance (SAHA) to develop a performance improvement network comprised of healthcare providers that serve Southern Arizona. The network supports hospitals, primary care practices, specialty clinics and healthcare professionals in the region's rural healthcare catchment area.
- Focused on Rural Health Clinic (RHC) COVID-19 federal funding and supported six clinic staff to become certified Rural Health Clinic Professionals (CRHCP).
- Supported and marketed the Practice Outcomes National Database (POND). Twelve of Arizona's 38 RHCs used POND data, analytics and performance measurement tools.
- Contracted with Stroudwater to develop a Swing Bed Directory. Swing beds are essential in helping rural hospitals assure access to care for rural patients and enhance operational efficiency. The Directory included a secure, web-based inventory of the Care Delivery Spectrum of inpatient post-acute skilled services. It helps hospital leaders market their services to regional referral partners and expand services where possible.
- Helped the Arizona Hospital and Healthcare Association (AzHHA) conduct an Economic Impact Study and Financial Impact study tool. The tool will be used by AzCAHs in 2021.
- Educated all 15 AzCAHs on Medicare Beneficiary Quality Improvement Project (MBQIP) changes and oriented new staff. All AzCAHs participated in one or more MBQIP measures: patient safety, patient engagement, care transitions and outpatient measures.
- Contracted with AzHHA to support AzCAHs in Quality Improvement and Activities.
- Managed the Arizona Trauma Managers work group and listserve.



**The Flex goal is to create and sustain rural health care networks and systems of care to maintain access to health care for rural residents, uniting critical access hospitals (CAHs), rural health clinics (RHCs), emergency medical service (EMS) providers, community health centers, and health practitioners to increase efficiencies and quality of care.** There are 15 rural Arizona hospitals federally designated as CAHs and two more applications undergoing CMS review for approval (Mt. Graham Regional Medical Center and San Carlos Apache Healthcare).



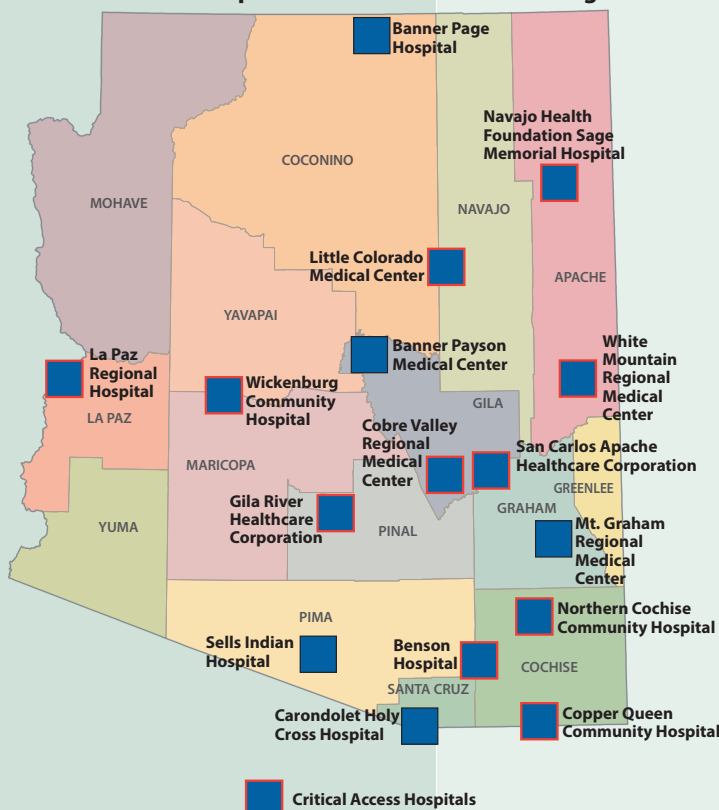


**AzSHIP supports rural hospitals of 49 beds or less to meet value-based payment and quality care goals; it is funded by the Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration (HRSA). In 2021, AzSHIP also served as a conduit to pass along federal funding to Arizona's rural and critical access hospitals (CAHs) in response to the pandemic.**

Rural hospitals face acute and long-standing economic and operational challenges that increase their risk of closure. Survival hinges on working collaboratively with partners, transforming service delivery, increasing access to quality care, and identifying and addressing the social determinants of health that drive rural health disparities and poor health outcomes.

AzSHIP acts primarily as a pass-through for targeted federal support for eligible hospitals to become or join an accountable care organization; participate in shared savings programs; purchase health information technology and training; and support quality improvement training and services. AzSHIP facilitates quality data collection training, Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey training, pharmacy disease registry training, telehealth equipment, and revenue cycle management training and implementation. In the 2020-2021 grant cycle, eleven rural Arizona hospitals participated in the program.

**Arizona Hospitals in the AzSHIP COVID Program**



In March 2020, AzSHIP received an additional \$1.35 million from the Coronavirus Aid, Relief and Economic Security (CARES) Act. HRSA deemed 16 of Arizona's rural & critical access hospitals eligible to receive \$71,670 over 18 months to support COVID-related activities. The American Rescue Plan Act (ARPA) allocated new funding to distribute to Arizona small rural hospitals of approximately \$4.14 million, which will support efforts to expand COVID testing and community-level COVID mitigation. Funds will be delivered to hospitals in fall 2021.

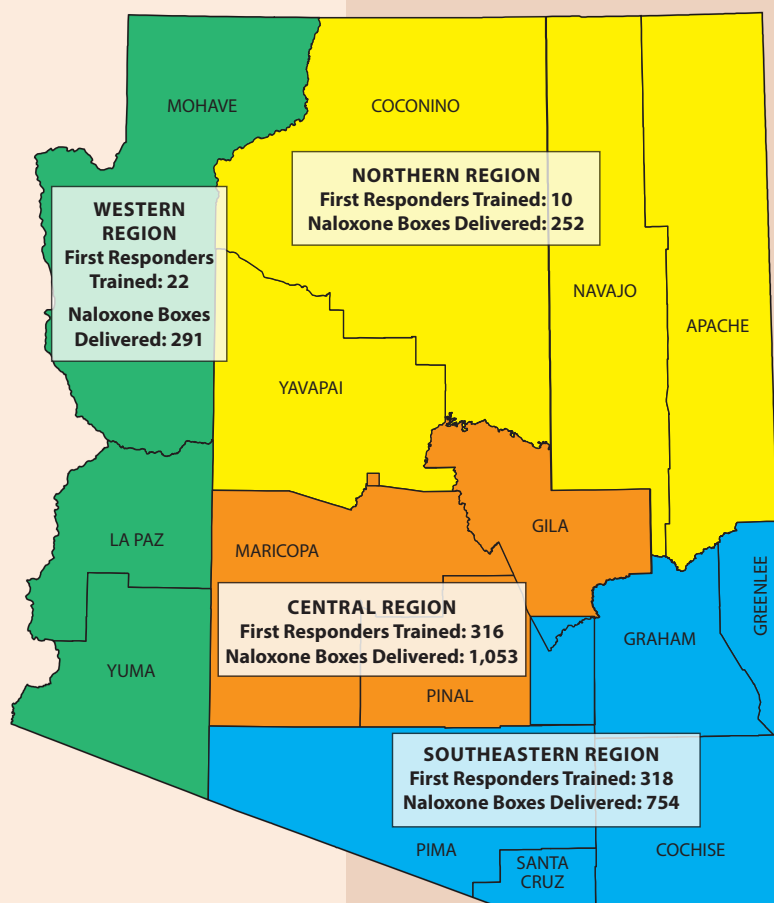
The Substance Abuse and Mental Health Services Administration (SAMHSA) Cooperative Agreement and the interagency services agreement (ISA) between the ADHS and AzCRH will complete the fourth and final year in 2021. The ADHS-AzCRH Arizona First Responders Initiative trained first responders across the state on how to recognize opioid overdose and administer naloxone to reverse the overdoses and save lives.

During FY 2021, 35 virtual naloxone trainings were held for 666 first responders. AzCRH also delivered 2,350 naloxone boxes (4,700 doses).

Organizations requesting training and needing naloxone have grown to include local Arizona Police Departments, EMS/Fire agencies, local community colleges, airports, state and national parks, Union Pacific Railroad, and Raytheon Technologies.

To meet a 4th year project deliverable, a free, online 17-minute training video was created entitled “Roadmap for First Responder Encounters of Patients with Potential Substance Use Disorders (SUDs).” The video and supporting documents help first responders recognize and intervene with those suspected of having a substance use disorder. For more information please email: [endtheepidemic@email.arizona.edu](mailto:endtheepidemic@email.arizona.edu).

First Responders Trained and Naloxone Boxes Delivered by Arizona EMS Region



**Total First Responders Trained = 666**  
**Total number of Naloxone Boxes delivered = 2,350**

## END THE EPIDEMIC

ARIZONA FIRST RESPONDERS INITIATIVE

### Roadmap for First Response Encounters of Patients with Potential Substance Use Disorders



**FREE** online training available to assist First Responders in recognizing and intervening with individuals suspected of having a substance use disorder.

#### Program Components/Supporting Materials:

- Free 17 minute [‘Roadmap’ Training Video](#)
- ‘Roadmap’ [Training Assessment](#)
- ‘Roadmap’ [Training PPT](#)
- [Order Form](#) – Free Substance Use Treatment Resources card by each Arizona rural county
- Visit <https://crh.arizona.edu/roadmap-training> for more resources

#### For for information, contact:

Joyce Hospodar at: [hospodar@arizona.edu](mailto:hospodar@arizona.edu)  
Manager, Arizona First Responders Initiative



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ARIZONA DEPARTMENT  
OF HEALTH SERVICES





CDC-ADHS funding will support targeted multimodal messaging on COVID-19 prevention, vaccination, treatment and follow up (lead: Dr. Nirav Merchant). The Arizona Telemedicine Program (ATP) platform will allow development and delivery of regular, interactive synchronous COVID-19 information targeted for specific audiences including the lay public, health providers, public health personnel and others, and asynchronous education and information that individuals can access at any time. Rural health providers can be overwhelmed by rapidly evolving COVID-19 health information and recommendations. A component to this strategy is to create rapid response brief messaging, Zoom and telehealth support from experts and specialists in Pulmonary, Infectious Disease and Allergy-Immunology (lead: Dr. Sai Parthasarathy).

In May 2021, ADHS received a two-year, \$34.6 million award for the CDC COVID-19 Disparities initiative. In addition to working with AzCRH, ADHS will partner with tribal-serving organizations, nine rural county health departments, the Arizona Community Health Workers Association and others. Maricopa (\$26.5M) and Pima Counties (\$6.5M) received separate CDC awards.

**The Arizona Center for Rural Health received a two-year, \$8 million award as part of the Arizona Department of Health Services ADHS-CDC National Initiative to Address COVID-19 Disparities among Populations at High Risk & Underserved, Including Racial & Ethnic Minority Populations and Rural Communities.**

The AzCRH has long track record of innovative collaboration with the Arizona Department of Health Services via federal subawards and interagency service agreements. In the ADHS-CDC initiative, the focus is on populations and communities disproportionately affected by the COVID-19 pandemic.

The Center will work closely with ADHS in conjunction with rural public health departments, the state's rural and Critical Access Hospitals, Rural Health Clinics, rural Community Health Centers and other rural health providers and stakeholders, including tribal-operated and IHS providers, and community health workers / representatives (CHW/Rs).

AzCRH will focus on two of the CDC-ADHS COVID-19 Disparities Initiative's overarching strategies:

1. Expand existing and/or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and underserved.
2. Mobilize partners to advance health equity & address social determinants of health related to COVID-19 health disparities among higher risk and underserved populations.



Dr. Cecilia Rosales (Photo: Stacy S Pigott)

AzCRH will collaborate with the Mobile Outreach Vaccination and Education for Underserved Populations (MOVE UP) Program (lead: Dr. Cecilia Rosales), the MAT Mentors Information Referral Network (lead: Dr. Ben Brady, Alyssa Padilla MPH) and rural partners to improve access to testing, vaccination, mitigation of public health issues exacerbated by the pandemic (i.e., suicides, opioid overdose deaths) and access to wrap around social services in rural communities.

AzCRH will develop education and training resources and toolkits to increase knowledge and awareness among the rural public health system partners and translate lessons learned from the pandemic to address social determinants of health and improve health outcomes.

AzCRH will collaborate with ADHS, serve on their Arizona Health Improvement Plan Pandemic Recovery and Resilience initiative, and work with local stakeholders and partners to develop community public health capacity through a Champions Program that engages local thought leaders on issues relevant to public health. This program will aim to enhance understanding and literacy of the public health system and build knowledgeable leaders who can serve on local community advisory councils and committees.

**AzMAT Mentors is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) via an Arizona Department of Health Services (ADHS) interagency services agreement (ISA) with AzCRH. The program aims to increase healthcare provider capacity to prescribe medication for opioid use disorder, an evidence-based, effective, and underutilized treatment. The program recruits physicians, physician assistants (PAs), and nurse practitioners (NPs) with buprenorphine waivers and matches experienced and less experienced providers for one-to-one collaborative consultations.**

The program trains experienced buprenorphine health providers in collaboration best practices and assists less experienced providers to set SMART goals based on professional needs and incorporate them into a collaboration plan. Matched providers then conduct up to five collaborative consultations to accomplish plan goals.

In piloting AzMAT Mentors last year, we received 21 interest forms from less experienced providers. This year we received over triple the number and we expect interest to grow. Participants practice in 14 of Arizona's 15 counties and may include telemedicine services.

The COVID-19 pandemic exacerbated substance use, mental health issues, opioid overdoses and suicides making it crucially important to improve access to care to reduce depression, anxiety, trauma, stress, substance use, suicidal ideation, and related morbidity and mortality. To ensure equitable access and representation of underrepresented individuals in our services, the AzMAT Mentors Program worked to enhance its cultural and linguistic responsiveness by:

1. Translating materials for providers who prefer learning in Spanish,
2. Enhancing materials for providers working in Indigenous communities, and
3. Ensuring accessibility for providers with visual or hearing impairments.

Cultural and trauma informed approaches create safe spaces for empowerment and affirm strengths and resiliency. These approaches support workforce health, highlight effective opioid use disorder treatments, and improve access to effective, evidence-based care.

Cultural, Linguistic Needs	Strategies	Outcomes
Providers who prefer learning in Spanish	<ul style="list-style-type: none"> <li>• A modified forward to back translation</li> <li>• Review by others proficient in Spanish</li> </ul>	<ul style="list-style-type: none"> <li>• Use Latiné for gender neutrality</li> <li>• Have training materials in Spanish</li> <li>• Include accessibility features</li> </ul>
Providers who work with Indigenous communities	<ul style="list-style-type: none"> <li>• Literature review, institutional resources</li> <li>• Collaboration with an experienced MAT provider who works in the community</li> </ul>	<ul style="list-style-type: none"> <li>• Assure cultural responsiveness</li> <li>• Acknowledge ancestral land</li> <li>• Use Two-Eyed Seeing framework</li> </ul>
Providers with visual or hearing impairments	<ul style="list-style-type: none"> <li>• Adding transcripts</li> <li>• Accessibility checking and correcting using software application features</li> </ul>	<ul style="list-style-type: none"> <li>• Have materials in English &amp; Spanish</li> <li>• Use alternative text for images</li> <li>• Color contrast acceptable</li> <li>• Verify reading order</li> </ul>

**AzMAT Mentors: Increasing capacity for evidence-based opioid use disorder treatment in Arizona**





In December 2020, Gallup Indian Medical Center (GIMC) reached out to us to help recruit health professional students to provide contact tracing and assistance with COVID-19 relief efforts for the Navajo Nation. Through collaboration with GIMC, UArizona College of Nursing (CON), UArizona Health Sciences, Central Arizona AHEC, and the AzaHEC Program, two one-week service-learning immersions with nine UArizona CON Doctor of Nursing Practice (DNP) students and four faculty were developed and piloted February and April 2021. Over 3,500 COVID-19 vaccinations were administered and clinical training provided. Students participated in direct experiential learning, interprofessionalism, clinical systems leadership, and cultural humility. An excerpt from a student reflection states:

*“This experience helped us grow as future health care providers. I especially enjoyed the nightly conversations with other students and faculty members. These interactions reinvigorated my passion for nursing at a time when it was waning. The talks were especially valuable to me at this time when we are all isolated and left to interact through technology. It was great to connect with my peers in a way that is not really possible in a zoom meeting. The conversations I had with faculty were a great reminder of how nursing separates itself from other health-care professions and highlighted the amazing promise of what nurse practitioners bring to healthcare.”*

**In 2019, American Indians comprised 5.3% of Arizona’s population, however only 1.1% of Arizona’s Registered Nurses (RN) and 1.0% of its medical students are American Indians. During the COVID-19 pandemic, tribal communities were disproportionately affected in terms of infection, hospitalization, morbidity and mortality rates and had challenges meeting the health care needs due to health professional shortages in rural and tribal communities.**

To strengthen the healthcare workforce, increase access to care in rural areas and improve the American Indian health care delivery system, we provided technical assistance to tribal communities to enhance, develop and support health professional pathway programs and services.

Support included the Office of Native American Initiatives, Office of the Provost Personal Protective Equipment (PPE) Donation Drive for the Tribal Nation July 25-26 to tribal communities combating the COVID-19 pandemic. Medical, household, and nonperishable food items were collected and transported to the Tohono O’odham Nation, Navajo Nation, and Hopi Tribe.



AzCRH convened stakeholders in response to bills (HB 2494, SB 1301) introduced in the 2021 legislative session to create a sixth AHEC Regional Center focused on the American Indian health system. Formal tribal consultation was held October 23, 2020 with 27 tribal leaders, council members, health directors, P.L. 638 Tribal-operated and Urban Indian health CEOs, the Inter-Tribal Council of Arizona (ITCA), the Arizona Advisory Council on Indian Health Care (AACIHC), and the Arizona Department of Health Services (ADHS). As a result, bill language was strengthened, passed by the legislature, and signed by the Arizona Governor March 26, 2021.

To increase the number of bachelor’s-prepared and advanced practice Native American nurses who practice in tribal facilities, the Indians in Nursing Career Advancement Transition Scholars (INCATS) program is a five-year project to create new pathways for careers in nursing. The INCATS project focuses on building new tribal-academic-practice collaborations that expand the Native American nursing workforce prepared to improve care of native populations. Thus far, the program has established 11 partnerships with tribal health and education organizations across the State of Arizona and has supported nine Indigenous scholars in their nursing education. Visit the INCATS Program at:

<https://www.nursing.arizona.edu/incats>

Education, training, retention, and support for the rural health workforce are essential to carrying out the AzCRH mission. Health workforce research and analysis inform decisions on policies and programs aimed at supporting health workforce pathways from education to practice.

With sustained support from the Arizona Area Health Education Center (AZAHEC) Program, we expanded the Arizona Health Workforce Data System (AzHWDS) project, transitioning from a database to a data warehouse system. The aim is to build a data system that provides timely and accurate information to the public, policymakers, and public health and healthcare stakeholders.

In FY 2021, AzHWDS completed and posted the following reports and briefs:

- [The Arizona Critical Care Workforce Brief](#)
- [The Arizona Behavioral Health Workforce Brief](#)
- [The Arizona Behavioral Health Workforce Report](#)

AzHWDS also published the following visualizations:

- [Arizona COVID-19 County Snapshots: Cases, Deaths, & Health Care Infrastructure](#)
- [Arizona County Coverage Profiles](#)
- [Arizona's Behavioral Health Workforce Report 2020](#)
- [Arizona County Level Rural Urban Classifications](#)
- [Arizona Frontier and Remote Areas](#)

You can visit the interactive data visualizations at: <https://crh.arizona.edu/interactive-data-visualizations>.

The AzHWDS team continued research collaboration on rural access to Medication Assisted Treatment (MAT) for Opioid Use Disorder (OUD) and on rural patterns of labor and delivery services for pregnant women. The project supported Master and Doctoral Public Health students with internship and research projects focusing on the rural health workforce. Dexter Gulick, MPH completed his internship with the Center for Rural Health on physician relocation patterns. Doctoral student Abidemi Okechukwu, M.B.B.S, MPH, is conducting research on the co-location and proximity of the behavioral health workforce.

### Arizona Health Workforce Profile: Critical Care

The purpose of this brief is to illustrate the distribution of the critical care infrastructure and critical care workforce in Arizona's 15 counties and compare the distribution between rural and non-rural counties.

**BACKGROUND**

- The COVID-19 pandemic strained the US hospital system infrastructure including workforce and other resources (e.g., ventilators).<sup>1</sup>
- Critical care infrastructure and the ability to increase capacity are essential to a public health pandemic response.<sup>2</sup>

**RURAL CRITICAL CARE CAPACITY**

- Health care infrastructure and workforce are concentrated in metro areas.<sup>3</sup>
- Populations in rural areas tend to be older. Rural communities tend to have higher poverty, unemployment, and increased mortality risk from certain health conditions.<sup>4,5</sup>
- Some small metro counties (e.g., Yuma) and rural counties (e.g., Apache, Navajo) in Arizona have higher COVID-19 cases per 100,000 population compared to larger metro counties (e.g., Pima, Maricopa), but fewer health care resources.<sup>6</sup>

**FINDINGS**

- Health care and critical care infrastructure and workforce are concentrated in Arizona's metro counties (Map, p. 2).
- The counties with the highest COVID-19 case rates (as of March 1, 2021) per 100,000 population are smaller rural counties (Navajo, Apache, Graham Counties) with less health care and critical care infrastructure and resources.
- Across Arizona's 15 counties, 14 have critical care physicians, 13 have critical care nurses, and 10 have respiratory therapists. The ratio of providers per 100,000 population varies across counties.

**Intensive Care Unit (ICU)**  
An ICU is an organized system for the provision of care to critically ill patients that provides intensive and specialized medical and nursing care.<sup>7,8</sup>

**Intensive Care Team**  
The ICU or Critical Care team may include multiple healthcare and allied health professionals including physicians, nurses, pharmacists, respiratory therapists, physical therapists, occupational therapists, and others.<sup>9</sup>

**The ADHS Surge Line**  
ADHS launched the Surge Line in April 2020. The purpose is to act as a central system to effectively manage patient care and hospital capacity by transferring patients to higher or lower levels of care as appropriate for the patient. All 15 counties have facilities participating in the Surge Line, representing 133 hospitals, the majority of Arizona hospitals.<sup>10</sup>

**ARIZONA'S CRITICAL CARE WORKFORCE**

Hospitals	ICU Beds	Physicians	Critical Care Nurses	Respiratory Therapists
99	1,533	1,353	1,275	268

Suggested citation: Koch B, Coates S, Drake C, and DeWitt D. (2021) Arizona Health Workforce Profile: Critical Care. For questions or comments about this brief contact: Bryna Koch bryna@crh.arizona.edu

### Arizona Health Workforce Profile: Occupational Therapists

The purpose of this brief is to understand the distribution of the Occupational Therapy workforce in Arizona's 15 counties and compare the distribution between rural and non-rural areas.

**BACKGROUND**

- In its simplest terms, occupational therapists and occupational therapy assistants help people across the lifespan participate in the things they want and need to do through the therapeutic use of everyday activities (occupational).<sup>1</sup>
- Arizona statute defines occupational therapy as "means the use of therapeutic activities or modalities to promote engagement in activities with individuals who are limited by physical or cognitive injury or illness, psychosocial dysfunction, developmental or learning disabilities, sensory processing or modulation deficits or the aging process in order to achieve optimum functional performance, maximize independence, prevent disability and maintain health."<sup>2</sup>
- The median annual pay in 2020 was \$61,280 and the Bureau of Labor Statistics (BLS) estimates the job outlook for occupational therapists (the projected change in employment between 2019 and 2029) is 16%, which is greater than average growth outlook at 4%.<sup>3</sup>

**POPULATION SERVED**  
Occupational Therapists assist people across the lifespan and those experiencing a disability, chronic health condition, or recovering from an accident like a fall or a health event like a stroke.<sup>4</sup>

**WORK SETTINGS**  
Occupational Therapists work in clinics, hospitals, nursing homes, for home health services, and in schools.<sup>5</sup>

**NEED**

- The US has a growing aging population and there is an increased focus on providing support to older adults so they can "age in place." Research estimates that Arizona will have among the largest shortages of OTs by 2030.<sup>6</sup>
- The Health Resources and Services Administration (HRSA) estimates that at a national level, the supply of occupational therapists will meet demand by 2030.<sup>7</sup>


**EDUCATION AND LICENSING**

- Master's level education is required for entry into the field. To be licensed as an OT in Arizona, you must be a graduate from an accredited occupational therapy program (including fieldwork), pass the licensing examination, and complete the license application and fees.
- Arizona does have a process for Universal License Recognition for occupational therapists who are licensed and in good standing in other states.<sup>8</sup>

Suggested citation: Koch B, Coates S, Drake C, and DeWitt D. (2021) Arizona Health Workforce Profile: Occupational Therapists. For questions or comments about this brief contact: Bryna Koch bryna@crh.arizona.edu

### The Arizona Behavioral Health Workforce

NOVEMBER 2020



THE UNIVERSITY OF ARIZONA  
MEL & END ZUCKERMAN COLLEGE OF PUBLIC HEALTH  
Center for Rural Health

AzCRH provided training to health providers and others to help individuals with substance use disorder access services in part by changing the way substance use is talked about and discussed. Role modeling appropriate words and phrases create inclusive spaces for community members with substance use disorders.

✗ Instead of these:	✓ Use these:
Clean	Negative Not currently using substances Sterile
Dirty	Positive A person who is currently using substances Not sterile
Addict	A person with substance use disorder
Alcoholic	A person with alcohol use disorder
Abuse	Substance Use Disorder
Former drug addict	A person in recovery

**Since 2014, AzCRH has worked collaboratively with the Arizona Department of Health Services (ADHS) to prevent opioid overdoses and related morbidity and mortality via state and federal grant initiatives.**

This year AzCRH implemented the Overdose Data to Action (OD2A) initiative funded by the Centers for Disease Control and Prevention (CDC). The ADHS-AzCRH interagency services agreements (ISAs) focus on community health workers and representatives (CHW/Rs) and partnerships with the Health Services Advisory Group, (HSAG), Arizona Community Health Workers Association (AzCHOW), the UArizona Comprehensive Pain and Addiction Center (CPAC), UArizona Office of Continuing Medical Education, Substance Misuse Prevention Coalitions and County Health Departments.



**Under the ADHS-CDC Overdose Data to Action ISA, AzCRH:**

1. Conducted a statewide needs assessment with healthcare organizations to identify their status in implementing opioid stewardship programs. Opioid stewardship programs include best-practice recommendations on preventing harm from opioid use, identifying at-risk patients, and providing or referring them to treatment when needed.
2. Provided opioid use disorder technical assistance services statewide to support Linkages to Care efforts and achieve statewide coordination of effective opioid prevention activities.
3. Trained community health workers/representatives and other community leaders on how to recognize and respond to an opioid overdose using naloxone to reverse opioid overdose and save lives.

For additional information and resources, please visit our website at:

<https://crh.arizona.edu/programs/prescription-drug-misuse-abuse-initiative>

## Az Rural Recruitment & Retention Network (Az3RNet)

Rebecca Ruiz  
crh.arizona.edu/programs/workforce



Coming up September 14-15, 2021 is the 3RNet National Conference in Bozeman, Montana. Additional information is available on their website at <https://conference.3rnet.org/>.

**AzCRH, the Arizona Department of Health Services, and the Arizona Alliance for Community Health Centers are members of the National 3RNet – a national leader for community-based health professional recruitment and retention.**

The Arizona 3RNet website posts for Arizona only. It provides information on the Arizona State Loan Repayment program, National Health Service Corps opportunities and the J-1 visa physicians program.

Rural health clinics (RHCs), rural, urban and critical access hospitals (CAHs), Federally Qualified Health Centers (FQHCs), behavioral health providers, and other healthcare organizations post jobs on the 3RNet website. Over 53,000 candidates are currently registered to view postings. Employers and candidates have access to resources and tools to recruit and retain health care providers, and much more.

Many Arizonans struggle with Opioid Use Disorder (OUD) and accidental opioid overdoses. Opioids include heroin, prescription drugs (like hydrocodone and oxycodone), and other drugs laced with illegally manufactured fentanyl (a strong and potentially lethal opioid). OUD is a medical condition that increases an individual's risk for fatal overdose. Naloxone is a life-saving opioid overdose reversal drug that can be used by anyone to save lives if used quickly and properly.

### In FY '21 the AzCRH the CHW/R Naloxone Training Program:

- Provided 13 naloxone trainings
- Trained 391 community health workers/representatives (CHW/R), CHW/R managers and undergraduate students
- Received 66 requests for naloxone trainings from various agencies and groups

Feedback received from post training surveys indicate that participants were very satisfied with the training. They report that it is informative, easy to follow, and practical. Our team asked participants to identify areas for improvement and made changes to ensure continued high-quality learning experiences. Below are some direct quotes from participants.

*"I have the knowledge now to use naloxone and feel confident with this training."* – CHW naloxone training participant

*"I will know what to look for and how to use naloxone if a patient overdoses in our clinic or at a home visit."*

– CHW naloxone training participant

In FY '20, AzCRH transitioned to online, interactive training which presented both challenges and opportunities. Connectivity was an issue for some in accessing the training and others had varying levels of comfort with technology. At the same time, going online enabled wider outreach to a broader audience.

## Get FREE Naloxone

<http://aznaloxone.org/>

### What is naloxone?

Naloxone (Narcan®, Evzio®) is a drug that can temporarily reverse an opioid overdose. Naloxone is safe and there are no adverse effects besides possible withdrawal. In Arizona, everyone can carry and buy naloxone to use in suspected opioid overdoses.

### Why carry naloxone?

When a person overdoses from an opioid, they have about 4 minutes before being at risk for death. Having naloxone ready can extend this time long enough to get the individual medical care. Opioid overdoses can happen to anyone using any kind of opioid.

### Where can I get naloxone?

Arizona has a standing order for naloxone; pharmacies sell it over the counter. Non-profits and county health departments offer naloxone. Licensed health providers can co-prescribe naloxone so that naloxone comes with the prescribed opioid. See: [spwaz.org/arizonanaloxone/](http://spwaz.org/arizonanaloxone/)

## Arizona Area Health Education Centers



The AzCRH Rural Health Professions Program (RHPP) at the Mel & Enid Zuckerman College of Public Health (MEZCOPH) is a partnership with the Arizona Area Health Education Center (AzaHEC) Program and its five AHEC Regional Centers (CAAHEC, EAHEC, NAHEC, SEAHEC, and WAHEC). Our RHPP program offers up to five graduate-level service-learning academic courses emphasizing active and experiential learning and reflection on health equity and eliminating health disparities.

The RHPP mission is to increase the number of public health students who graduate and serve rural and underserved Arizona communities and populations after graduation.

Of the students who participated in our RHPP programs, 76% are working in underserved areas or with organizations serving them in Arizona. Since 2018, our RHPP provided 125 students service-learning courses and activities, over more than 5,600 contact hours. Participants reflect the diversity of our state with 40% Hispanic, >15% mixed race, 4% black or African American, and 4% Asian. More than 40% of our participating students grew up in a rural area and 56% grew up in Arizona. In FY 2021, 45 MEZCOPH students participated in four service-learning courses and activities. As a result of COVID-19, the service-learning course with NAHEC was canceled and the four other courses were held virtually while continuing to incorporate community specific experiences and partner interactions.

Our RHPP administered the Interprofessional AHEC Scholars Program, with the other RHPPs in the University of Arizona's Colleges of Nursing, Medicine (Tucson and Phoenix), Public Health, and Pharmacy; Arizona State University's College of Nursing and Health Innovation; and Northern Arizona University's School of Nursing. This two-year interprofessional program provides students with community-based experiential training in rural or underserved Arizona communities. In FY 2021, the program saw one cohort graduate at the annual RHPP meeting, another cohort continued to engage with Arizona's communities through their first year, and the recruitment for the new MEZCOPH RHPP cohort FY 2022 will begin with the fall semester.

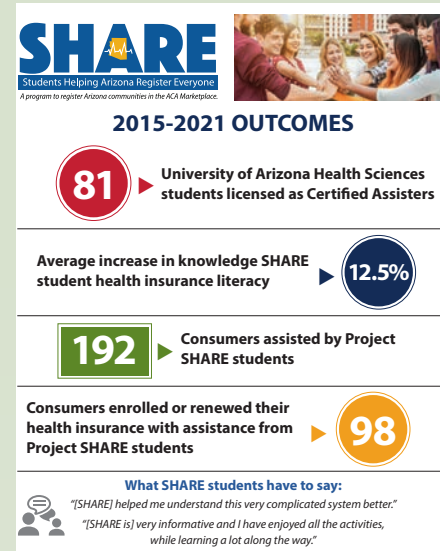
### The UArizona White House Healthy Campus Challenge winning program engages students in health insurance/coverage assistance, eligibility and enrollment.

AzCRH trains UArizona students as state and federally Certified Assistors. Students learn about the U.S. health system, public coverage – Medicaid - the Arizona Health Care Cost Containment System (AHCCCS), the Children's Health Insurance Program (CHIP is KidsCare in Arizona), the Arizona Long Term Care Services (ALTCS), Medicare and private health insurance including qualified health plans offered on Arizona's Affordable Care Act (ACA) Federally Facilitated Marketplace, and other private and employer sponsored health insurance.

The COVID-19 pandemic hit Arizona hard in 2020-21, with alarming infection and death rates particularly in the elderly and in American Indian, Hispanic/Latino, African American, and rural communities and populations. Many Arizonans lost their jobs and thus their employer sponsored insurance.

**Thank you** to our SHARE Leaders and student volunteers for offering services in Arizona: Kendra Marr MD/PhD, College of Medicine Student; Anna Ressel MD, College of Medicine Student; Heather Kenning MPH, College of Public Health Masters Student.

**Congratulations to our recent MPH graduates!** Jordan Flake, MPH, College of Public Health Masters 2021 Graduate; Patricia Monterrey, MPH, College of Public Health Masters 2020 Graduate.



Sign up for help at  
[coveraz.org/connector](https://coveraz.org/connector)

## AzCRH Navigator Initiative Arizona Alliance For Community Health Centers

Marc Verhougstraete PhD & Cody Welty

**The Arizona Center for Rural Health (AzCRH) Navigator Consortium will partner in FY 2022 with the Arizona Alliance for Community Health Centers (AACHC) to prioritize hard to reach rural and urban underserved consumers with historically low insurance participation rates (e.g. Latino, American Indian, African American / Black, rural, urban underserved, and special populations) across Arizona's 15 counties.**

AzCRH will inform consumers about open enrollment opportunities, encourage early enrollment, and educate consumers about enrollment requirement changes.

The AzCRH will train, certify, license, locate, and supervise Navigators to provide confidential, accurate, objective, impartial, and culturally and linguistically appropriate information to eligible uninsured consumers to enroll or re-enroll in Arizona's Federally Facilitated Marketplace qualified health plans, Medicaid (Arizona Health Care Cost Containment System, AHCCCS), and children's health insurance program (CHIP, KidsCare).

This is a statewide effort to address access to healthcare issues, especially for those struggling with the deleterious impacts of the global pandemic. The effort aims to enroll 400 individuals in the AHCCCS and KidsCare during the first twelve months and 125 individuals in Arizona's Federally Facilitated Marketplace during open enrollment period.

**Project SHARE and the Navigator program** provide trusted, timely assistance with eligibility determination and enrollment in Arizona's AHCCCS, KidsCare, ALTCS and ACA Marketplace plans that cover over 2 million of Arizona's 7 million total population.





Be a part of connecting  
**Arizona's service members,  
veterans & their families**  
to support and resources



### CALL

Support line available  
to everyone



### MATCH

Resource matching  
& navigation



### LEARN

Training to equip  
yourself to help

[www.BeConnectedAZ.org](http://www.BeConnectedAZ.org)  
1-866-4AZ-VETS (429-8387)

**The Rural Arizona Connects program is a partnered effort between AzCRH and the Arizona Coalition for Military Families (ACMF) Be Connected program to address the health and social needs of rural Arizona active military, veterans, and their families.**

Rural Arizona Connects focused on suicide prevention among veterans using an upstream approach. Risk of suicide in veterans is three to four times greater than the general population, and even higher for veterans living in rural communities.

Be Connected strengthens access to support services and resources for active military, veterans, families, and helpers. Services include: a support line; community-based navigators who connect active military, veterans, and family members with available services; and community training.

Since Rural Arizona Connects began in December 2019, AzCRH connected Arizona's 15 Critical Access Hospitals (CAHs), affiliated Rural Health Clinics (RHCs), and community organizations to Be Connected resources before the program's sunset in May 2021. Marketing reached over 100,000 rural Arizonans.

Through this program, AzCRH delivered marketing tools and resources to rural Arizona's active military, veterans, families, and helpers to reduce veteran suicide in rural Arizona, and connected those at risk with community resources by increasing awareness and access to the Be Connected program. Rural Arizona Connects activities will continue under the AzFlex program.

**Be Connected Support Line:** 1-866-4AZ-VETS (429-8387)

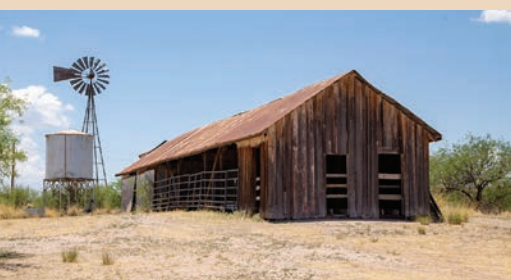
[www.BeConnectedAZ.org](http://www.BeConnectedAZ.org)

## Rural EMS Advanced Telemedicine Demonstration Initiative (AzREADI)

Joshua Gaither MD, Co-PI & Amber Rice MD, Co-PI

### Primary goals of AzREADI:

- Assure high quality and sustainable prehospital care
- Facilitate a decrease in the number of unnecessary air medical and long-distance ambulance transports
- Improve patient satisfaction with in-home telemedicine services through the implementation of an urgent care treat and refer program



**Now in its second year of a three-year effort, this demonstration links rural EMS providers with board certified emergency medicine physicians at the University of Arizona to address specific patient complaints in real-time using two-way video communication via a fully HIPAA compliant telemedicine platform.**

Rio Rico Medical and Fire District and Sonoita-Elgin Fire District collaborate with University of Arizona emergency medicine physicians to provide new and innovative approaches to rural prehospital care in southern Arizona with 24/7 real-time on-line medical direction via telemedicine.

### Expected outcomes:

- Develop a sustainable telemedical infrastructure that places rural EMS agencies at the cutting edge of medical care by reducing EMS transports to emergency departments for non-urgent complaints.
- Maintain available advanced life support services using real-time physician consultation.
- Measure system performance including primary outcomes, secondary outcomes, and sustainability performance markers

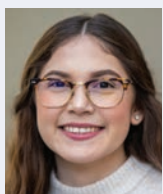
The AzCRH Internship Program provides opportunities for undergraduate and graduate student internship and dissertation community-based projects in Arizona's rural and urban underserved areas. Students worked on program design, implementation, evaluation, and other projects. Several graduates became AzCRH staff.

## 2021 Internship Highlights:



**Estefanía Mendivil** graduated from the UArizona in May 2021 with her B.A. in Psychology and Latin American studies. She focused on cultural and linguistic responsiveness and will continue this work and coordinate AzMAT Mentors Program and AzRORI grant activities as an AzCRH Community Outreach Professional with the Comprehensive Pain and Addiction Center.

**Jordan Flake, MPH** graduated from the Zuckerman College of Public Health (MEZCOPH) with an MPH in Applied Epidemiology in May 2021. He coordinated Project SHARE. He will attend medical school at Midwestern in Phoenix in the fall.



**Aimee Gutierrez**, received her B.A. in Economics in May 2021 from the UArizona. She coordinated naloxone trainings for Community Health Workers and will continue this work as an AzCRH Health Education and Promotion Professional.

Also, our thanks to the AzCRH student employees **Martin Caudillo**, **Eniola Idowu**, and **Bianca SantaMaria**. We so much appreciate your work on our federal and state funded projects! Mr. Caudillo is the Technical Assistant Coordinator supporting the Opioid Data to Action grant. Ms. Idowu is the Evaluation Coordinator for the AzMAT Mentors Program. Ms. SantaMaria is the Needs Assessment Coordinator for the Overdose Data to Action grant.

**Congratulations to our 2020-2021 AzCRH interns and graduates!**  
**Bear down!**

Check out internship updates at <https://crh.arizona.edu/programs/internships>



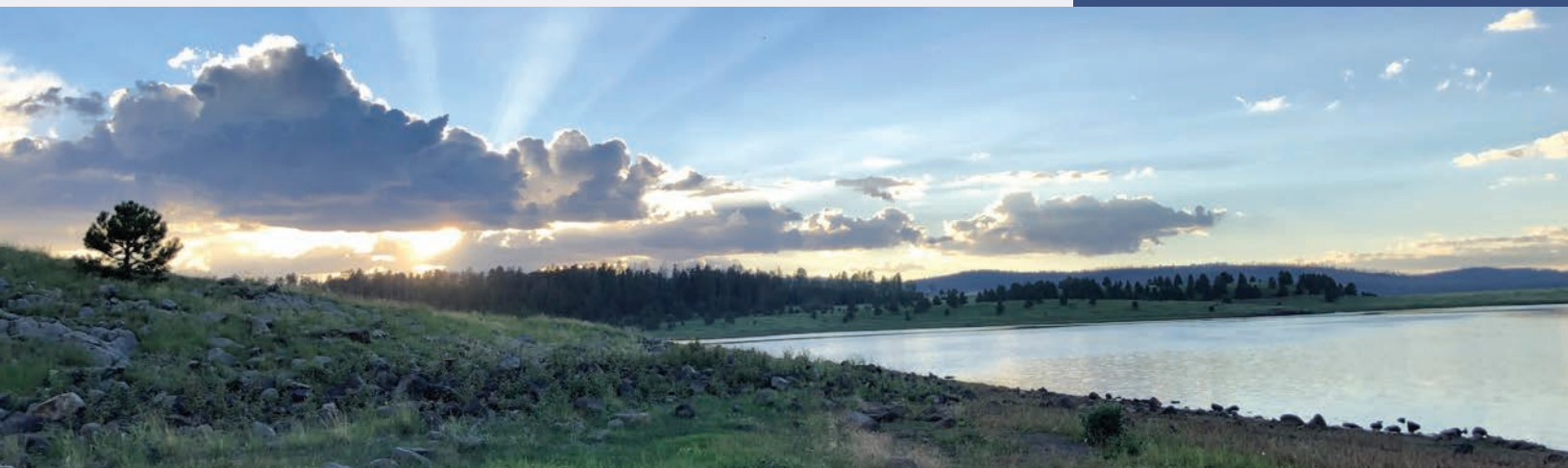
## CONGRATULATIONS & MILESTONES

**Jill Bullock** received the MBQIP Spirit Award from the Federal Office of Rural Health Policy.



Congratulations and thanks to AzCRH staff members for their service to AzCRH and the University of Arizona!

Jennifer Peters - 20 years of service  
Joyce Hospodar - 20 years of service  
Bryna Koch - 10 years of service  
Michelle Albert - 10 years of service



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## AzCRH Deliverables – FY21: July 1, 2021 to June 30, 2022

### FY 1st Quarter

#### Action Items:

- AzCRH Annual Report: August, Sept
- FR-CARA monthly reports: July, Aug, Sept
- SORH Grant Yr starts: Jul 1
- RHPP Grant Yr starts: Jul 1
- RHPP Border Health Course: August
- SORH PIMS Due: Aug 30
- Flex Grant Yr starts: Sept 1
- ADHS OD2A Grant Yr starts: Sept 1
- ADHS OD2A Qtrly/Annual Report: Aug 31
- ADHS OD2A Qtrly Report: Aug 31
- RHPP Annual Report: Sept 2
- ADHS AzMAT Mentors Qtrly/Annual Report: 9/29
- ADHS AzMAT Mentors Grant Yr starts: Sept 30
- FR CARA Award Year starts: Oct 1

### FY 4th Quarter

#### Action Items:

- ADHS CHW Monthly Report: April 1, May 1, June 1
- FR-CARA Monthly reports: April, May, June
- FR-CARA Progress report 5: April 30
- RHPP Rural Health and Tribal Health Service-Learning Courses: May
- AzCRH Rural Health Conference: June
- SHIP Grant Yr starts: June 1
- ADHS OD2A Drug Qtrly Report: May 31
- ADHS-CDC Award Year starts: June 1
- ADHS AzMAT Mentors Qtrly Report: June 30

\*UA Fiscal Year begins July 1

### FY 2nd Quarter

#### Action Items:

- ADHS Rx Drug Annual Report: Oct 30
- FR-CARA Monthly reports: Oct, Nov, Dec
- FR-CARA Progress report 4: Oct 31
- Flex Year End Report: Nov 15
- ADHS OD2A Qtrly Report: Nov 30
- Marketplace Open Enrollment: Oct 15 - Dec 7, 2020
- SHIP NCC Released: Dec 1 (est.)
- SORH CC Released: Dec 1 (est.)
- ADHS AzMAT Mentors Qtrly Report: Dec 31
- RHPP Semi-Annual Report: Dec 30

### FY 3rd Quarter

#### Action Items:

- ADHS AzMAT Mentors Qtrly Report: Mar 31
- RHPP Phoenix Service-Learning Course: January
- AzCRH Rural & Public Health Policy Forum: February
- RHPP FCH Tucson Service-Learning Course: February
- FR-CARA Monthly reports: Jan, Feb, Mar
- SHIP NCC Due: Mid-Feb
- SORH CC Due: Mid-Mar
- ADHS OD2A Qtrly Report: Feb 28
- Flex NCC released: Mid-Mar



# ARIZONA'S RURAL HEALTH SAFETY NET



THE UNIVERSITY OF ARIZONA  
MEL & ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH  
**Center for Rural Health**

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