Models of Success in Rural Maternity Care: Kearny County Hospital

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Key Findings

• Kearny County Hospital is a government-owned, rural Critical Access Hospital that delivers approximately 300 babies annually, drawing from a large, multi-county area.

• We found that a combination of staff recruitment and retention focused on mission-based work with strong team communication leads to a thriving obstetrics practice at this remote, rural location.

Introduction

Rural, hospital-based obstetrics units continue to close across the nation. Between 2014 and 2018, 52 rural counties lost hospital-based obstetric services, continuing a trend of declining access that has been occurring since at least 2004.¹ As a result of these closures, rural residents are more likely to give birth in an emergency room, or to give birth prematurely – a leading cause of infant mortality.² While the current COVID-19 pandemic has already catalyzed additional closures, little literature has attempted to capture models of success or best practices used in rural hospitals that have maintained successful obstetrics units. In an effort to explore this, a key informant interview was conducted by phone with an obstetric care provider at Kearny County Hospital in Lakin, Kansas in March, 2020. Additional email communication with two additional providers at Kearny County Hospital was conducted to validate identified themes in this case study in June, 2020.

Overview

Lakin, Kansas is the county seat of Kearny County in western Kansas. As of the 2010 Census, the town population was just over 2,000.³ The county as a whole is a rural, micropolitan county with health professional shortage designations in both dental care and mental health. The county population is approximately 1/3 Hispanic and has a median household income of nearly $57,000, although poverty rates for children are higher than the state or national average.³ Kearny County Hospital is a 25-bed Critical Access Hospital owned by the local county government.

Kearny County Hospital typically delivers 300 infants a year, with 340 in 2018 and 298 in 2019. Kearny County Hospital staff pride themselves on providing a range of options to pregnant patients for giving birth, with a relatively recent addition (in 2014) of the option to have a vaginal birth after cesarean section (provided that the pregnant person has only had one prior cesarean). Providers and staff have taken active measures to reduce the primary cesarean section rate, and to use induction only when the patient has completed 39 weeks gestation, unless medically indicated.

Kearny County Hospital has an annual cesarean section rate of 11.5 - 12.6%, well below the national average of 25.7%. Clinicians and staff at Kearny County Hospital have cultivated a successful maternity care practice that attracts people not just from the county, but from a much larger, multi-county area. The success of the maternity care unit
at Kearny County Hospital in rural Lakin, Kansas is an exemplar for maintaining and growing successful, high-quality rural maternity care across the country.

Key Features

Mission-based recruitment and retention

Kearny County Hospital’s mission statement reads as follows: “Provide quality, compassionate healthcare services for our community, to enrich the lives of our families, friends and neighbors.” Compassion is a central theme throughout the hospital, and also central to the success of Kearny County Hospital’s maternity care program. This value is integrated into Kearny County Hospital’s recruitment and retention of providers. As of March 2020, the obstetrics unit has 7 physicians, 13 clinic nurses, and 1 physician assistant providing care to patients. In recruiting providers, hospital leadership focuses on identifying mission-driven providers who truly want to make a difference and provide care in an underserved area. Many of those providers have rural experience themselves, although others simply see providing care in a rural area as being in line with the values and goals that they had going into this line of work.

Dr. Drew Miller, a family medicine physician at Kearny County Hospital, describes some of the benefits of practicing in a rural Critical Access Hospital this way: “Practicing medicine in a rural setting is rewarding because it is built on relationships. You develop relationships with people in the community. You get to take care of whole families, starting with obstetrical care of a new mother. In that, you get to build a practice of generations, caring for this mother’s child and subsequent children as they grow up, managing chronic conditions for the older generations of the family, and even being present for end-of-life care at the other end of the spectrum. In caring for these families, you build relationships and build trust, and are hopefully able to provide quality medical care across generations.” He also emphasized the importance of having colleagues who are similarly mission-driven and interested in practicing in a rural environment, “In Lakin, it’s important to practice with a group of people with a similar mindset.”

Dr. Miller went on to describe the benefits of a mission-driven, service-oriented mindset in recruitment, retention, and practice. These benefits include not only attracting high-quality staff who can deliver excellent care, but also driving trust and interest among community members. He said, “the key for it is the service-oriented mindset that the physicians have and then that filters down to the rest of the staff as well. In that, I really do believe that we provide compassionate care to our friends, family, and neighbors, which is part of our mission statement. In a small community, if you provide good care, people are going to tell other people about it. That’s the driver that brings people from 11 counties to come here for OB care. We haven’t done a lot of marketing – just a lot of word of mouth. … In some ways, you recruit likeminded people to come and work with you.” He also cautions that, “That culture takes time to build, for sure.”

Strong communication

The other key to success emphasized in this case study was the importance of strong, team-based communication. For example, in the case that a pregnancy is deemed high risk, the entire maternity care provider group reviews the case around 34 weeks gestation. This is done by the providing clinician sending out the plan of care to the entire group, then giving the group an opportunity to submit feedback on how that plan of care could be improved.

Perinatal nurse Becky Chappel attributes the hospital’s low cesarean section rate to strong team-based communication. She states, “Responsibility for intra-
partum outcomes is shared, nurses are vital members of
the team who are constantly present throughout labor
and birth and provide much of the direct patient care
during the entire hospital stay. Our labor nurses and
the attending physician collaborate and communicate
frequently on labor management decisions.”

In addition to team-based communication, the hos-
pital works with a perinatologist who comes to the hos-
pital approximately once a month to provide additional
consultation on high-risk pregnancies. By having these
plans in place to increase communication, especially
around high-risk cases, the hospital has seen a decrease
in their transfer rate for pregnancy patients. These pro-
cesses have also had the additional benefit of helping to
lower the costs of care. Such processes require a high
level of transparency and trust among staff, and also
between clinicians and hospital administration.

Recommendations from Kearny County Hospital

Kearny County Hospital sees providing high-quality
maternity care to the surrounding area as central to its
mission. Here are some ways in which Kearny County
Hospital built their model and recommendations that
can be emulated elsewhere:

• Mission-based recruitment and retention. “From
the top down, people are committed to serving
each other and serving patients,” remarked Dr.
Drew Miller. There is a strong “mission to the
surrounding community.” This service-oriented,
mission-driven mindset is evident in the care
provided to the community by Kearny County
Hospital, and is also the key to which it attrib-
utes most of its success in identifying, recruit-
ing, and retaining providers and staff committed
to providing high-quality, compassionate care.

• Strong and open communication. The other key to
success at Kearny County Hospital is a sense of
trust and transparency, evident in the open lines
of communication across providers, staff, and
administration. All of that communication is in
the service of providing the best possible out-
comes for patients. But, having such commu-
nication requires processes, such as those with
which maternity care providers review high-risk
pregnancy plans of care.

It is well worth noting that this key informant inter-
view took place during the COVID-19 pandemic.
Our team thanks Kearny County Hospital workers
for all that they are doing now, and in the future,
to make maternity care more than work, but also
transform to better serve pregnant patients, infants,
and their families.
References


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