



Successes and Challenges to Network Sustainability: Perspectives of 2019-2020 Rural Health Network Development Planning Grantees

Katie Rydberg, MPH

Carrie Henning-Smith, PhD, MPH, MSW

Mariana Tuttle, MPH

Key Findings

- Grantees (n=18) from 2019-2020 described the successes and challenges to network sustainability, along with barriers to and facilitators of success in the Rural Health Network Development Planning Grant Program.
- The most commonly discussed sustainability factors were *strengthened relationships* (n=13) and additional funding (n=8). Of the grantees who have received *additional funding* to sustain their networks, funding has most commonly been received from *HRSA grants* (n=5) and *other federal, state, and local grant supports* (n=11).
- The most commonly described helpful factors in grant implementation were *collaboration and communication* (n=11), *grant process* (n=11), and *resources and supports* (n=11).

Purpose

The purpose of this brief is to examine the successes and challenges to network sustainability, as well as barriers to and facilitators of success among the 2019-2020 cohort grantees in the Rural Health Network Development Planning Grant Program.

Background

Rural areas face heightened challenges in health outcomes and access to care, relative to urban areas.¹⁻³ These challenges are shaped, in part, by structural barriers in rural areas, such as longer distances, transportation barriers, limited infrastructure, and inadequate funding and resources. In an attempt to address these issues and to strengthen the capacity of rural health care providers, the Health Resources and Services Administration (HRSA) provides grants to rural organizations to plan for the development of networks in order to build partnerships, foster collaboration, and improve access to quality care for rural residents. These grants, administered by the Federal Office of Rural Health Policy's (FORHP) Community-Based Division, provide up to \$100,000 over 12 months to rural grantees to provide support for a planning period to develop such a network. HRSA offers additional funding that grantees can apply for that support the implementation of rural health networks after the planning period.

Despite the novelty and importance of this grant mechanism, relatively little is known about how successful grantees are in planning for their network and whether they secure additional funding or resources to develop and sustain a network. This brief uses interview data from the most recent cohort of grantees to finish the program in order to assess successes and challenges related to funding and sustaining network planning efforts, as well as general barriers and facilitators of success during the grant year.

Methods

This study uses data from interviews of 18 grantees from the 2019-2020 grant cohort. FORHP's Community Based Division provided grant proposals from awarded applications in 2019. Contact information for all 27 grantees from that cohort were gathered from the proposals. Grantees were contacted via email to schedule interviews. Out of the 27 grantees from 2019, 18 grantees responded to the request to interview. Interviews were conducted by five members of the research team and were held via Zoom between January and April 2021, lasting approximately 30 minutes each.

Grantees were asked questions regarding the most helpful factors in the implementation of their grants, barriers to success, how their network has been sustained since the end of the funding period, and funding sources for their networks moving forward. Some grantees provided responses with answers that reflected multiple themes, so the number of responses do not reflect the number of grantees. Two members of the research team coded responses independently and came to consensus on the themes, with the approval of the remainder of the research team.

Results

When asked about how, if at all, their network planning efforts have been sustained beyond the grant period, grantees noted sustainability across three themes (Table 1): strengthened relationships, securing additional funding, and policy changes. *Strengthened relationships* was the most commonly endorsed theme. In this theme, respondents described ways in which they have continued collaboration, have deepened partnerships and integration, have improved communication, clarified partner roles, and have continued staffing and organizational support for the network across partners. The next most common theme under sustainability was related to securing additional funding, in which grantees noted that additional grant funding or funding from other sources was allowing them to continue work with the network. The last theme related to implementation of *policy changes*, such as institutional changes and adoption of strategic plans to continue the network work.

Of note, two respondents stated that they had *not sustained* the funding beyond the grant period. One grantee attributed much of their difficulty with

sustainability to the COVID-19 pandemic, as illustrated in the following quote:

"So sustaining, we haven't at this point right now... Towards the end of the planning grant we had applied for RCORP. I don't want to say all our eggs were in that basket but they were to an extent. We did have things in our strategic plan that were in-kind resources where if we didn't get that we could use. So we didn't get the grant, of course that took away a lot of our implementation there. Then with COVID, I feel like everybody is on hold because you're looking at hospitals, a mental health center, and us. It's small, I don't want to say it's [the network] kind of in the back burner, but it is. The thing about our strategic plan, our advisor, she really pushed us to put some in-kind things in there that we could do...and when COVID is over there are still a lot of things we can do. I just haven't pushed it because of the whole COVID thing. Our hospitals and clinics are over run. That's the focus right now."

Beyond asking about sustainability generally, we also asked about funding specifically. When asked specifically about additional funding for their network development efforts, grantees noted funding from a variety of sources. The most common was an additional *HRSA grant*; followed by *other grant support* (e.g., from other federal entities like SAMHSA or the CDC, from state agencies, or from academic institutions); and then *other types of financial support* (e.g., consultations, in-kind organizational support, membership dues, and partner contributions). Some respondents noted that they *did not have additional funding*. For some, this is because they had not applied for any additional funding for their network development efforts, while several others noted that they had applied for funding, but had not yet been awarded any funding. One respondent described this issue this way:

"We had submitted for a Program Development grant, but did not receive it. In all of those areas that we have listed if we had a grant the size of the Development grant we would indeed be able to enhance the infrastructure and we spoke at that at length in our grant application. It would have tripled things so much more could have been accomplished."

Table 1: Themes Related to Sustainability and Funding

Domain	Theme	Number (%)	Description
<i>Sustainability</i>	Strengthened relationships	13 (72)	Includes collaboration, integration, continued staffing, organizational support, expanding and strengthening partnerships, better communication, and clear roles for each partner
	Additional funding	8 (44)	Formal grant funding or formal funding from other sources
	Policy changes	3 (17)	Encompasses strategic plan and institutional changes
	No sustained work on network	2 (11)	No work on network beyond the grant period at the time of the interview
<i>Funding</i>	HRSA grant	5 (28)	Another HRSA grant, such as the Implementation Grant
	Other grant support	11 (18)	Additional grants funding for entities such as SAMHSA, CDC, state, or a university
	Other financial support	4 (21)	Financial support from consultations, in-kind organizational support, membership, or partner contributions
	No funding	4 (21)	Network not looking for funding or not able to obtain funding

Grantees described a number of barriers to and facilitators of success in implementing the Network Development Planning Grant. Table 2 summarizes the themes that emerged in these domains from the interviews.

Facilitators of Success

When asked about the most helpful factors in the implementation of the Network Development Planning Grant, responses fell into the following themes: *collaboration and communication, grant process, and resources and supports*. In communication and collaboration, grantees described how being able to collaborate and engage with network partners was extremely valuable in the implementation of their grant. This allowed for greater communication and an understanding of roles and services among network partners, which in turn led to a commitment to the network among partner organizations. For *grant process*, grantees described how the overall structure and activities of the Network Development Planning Grant Program was helpful in reaching network goals and deliverables. For example, the process of strategically working through network development and the timeline of grant deliverables helped keep grantees organized throughout the funding period. This process allowed for network partners to create common goals and utilize work groups to tackle

various aspects of the grant. This process also included flexibility, which was valued by grantees as things changed throughout the grant year, as illustrated in the following quote:

"The strategic plan gave us the opportunity to stand and say "this is how committed we are" and keep it relevant, keep it in front of people even during the [COVID-19] pandemic. The coordination of the network has given us opportunities to follow up with people and engage."

In terms of resources and supports, grantees described how support from the technical assistance provider and program officers was valuable throughout the grant. Several grantees also spoke positively about additional consultants, facilitators, and other professionals who were hired by their organizations to assist in the development of the networks. In addition, others spoke about having commitment from their organizational leadership regarding this grant and the development of the network. One grantee spoke of having good technological resources and structures at their organization, which was very helpful when the pandemic started during the funding period:

"The partnership with the TAs for the first year, having that monthly check-in was extraordinarily helpful, as well as all the materials they produced. That was really really good not only for myself but for having to go out and get our group to fill out the forms, etc. and having those forms already in a standard form, etc. was great. That really set us out in being able to articulate a lot of long-term goals that ended up making their way into the strategic plan. Having that structure, etc. was so helpful. The best part we got out of that! This was one of the most helpful grants I've ever been part of."

Barriers to Success

Grantees describe a number of issues that were barriers to successfully implementing their Network Development Planning Grants. These issues fell into the themes of *organizational capacity*, *COVID-19*, *community dynamics*, and *rural context*. Under organizational capacity, many grantees discussed how the Network Development Planning Grant was a large undertaking and difficult to balance among additional organizational demands. These organizational demands created

barriers for some in terms of the grantee's ability to take their network to the next level. Several spoke about how changes in staff and organizational leadership made it more difficult to complete the work of the grant. Others discussed how organizational and institutional bureaucracy made it challenging to gain support for the grant or to stay in compliance with grant requirements. One respondent described barriers this way:

"The demand on our partners; Even before COVID, they run a tight ship. They have limited staff, wear multiple hats so that presents a huge challenge. The commitment to community health helps us meet that challenge, but still is difficult. [We] have to weigh advantages of joining workgroups, attending meetings, etc."

Unlike any other barrier faced by previous grantees in the Network Development Planning Grant Program, grantees in the 2019 cohort faced unique barriers due to COVID-19.⁴ The COVID-19 pandemic presented many challenges to grantees, including preventing partners from meeting in-person and shifting organizational and network priorities. In community dynamics, grantees spoke about issues in collaboration with their network partners that hindered progress in grant activities

Table 2. Themes Related to Helpful Factors and Barriers

Domain	Theme	Number (%)	Description
<i>Facilitators of Success in Grant Implementation</i>	Collaboration and communication	11 (61)	Encompasses collaboration, engagement, commitment, communication, and understanding roles
	Grant process	11 (61)	Includes flexibility, process of the grant, common goals, working groups, and timeline of the grant deliverables
	Resources and supports	11 (61)	Includes TA provider, HRSA PO, consultants, outside facilitators, commitment from leadership, support from other professional organizations, and technological resources
<i>Barriers to Success</i>	Organizational capacity	8 (44)	Grant was a lot to take on, not sure how to take network to the next step, staffing and leadership changes, other organizational demands, and bureaucracy
	COVID-19	7 (38)	Challenges presented by the pandemic, including working remotely
	Community dynamics	6 (33)	Competing for funding, collaboration issues, working within a certain model, moving beyond the past, some perspectives not valued, trouble with buy-in
	Rural context	4 (22)	Factors such as geography, transportation, and internet access

and network development. This included trouble with buy-in, some perspectives not being valued by all partners, moving beyond what had been done in the past, and struggles with moving beyond working within a certain model. Some partners within the networks already compete for funding, which also created tension for some grantees.

Within the *rural context*, some grantees faced barriers related to being in a rural environment, including the geographical spread of network partners, transportation issues, and limited Internet access. One grantee described these issues in the following quote:

“One barrier that will continue to be there - this is a rural and expansive space. Limited transportation. Rural and low income folks don't do well with technology, this takes a lot of reliance on other people in the home like children of the older folks. While we have technology and broadband the capacity to use it effectively is not always there. Lack of public transportation impacts people's ability to get care.”

Discussion and Implications

This study identified a number of successes and challenges to network implementation and sustainability among the 2019-2020 Network Development Planning Grant cohort. Most grantees have been able to continue the work of their networks. This was aided by a number of factors, including maintaining strengthened relationships, gaining additional funding, and implementing policy changes. The Network Development Planning Grant Program offers a space for building relationships across community partners and collaborating on issues specific to the community. These relationships surpass the funding period and have continued for the majority of organizations in this cohort as they build on the work of their grant or move onto addressing other community issues. Continuing these relationships also has put grantees in the position to apply and receive additional funding to continue the work of their networks.

The majority of grantees in the 2019-2020 cohort of the Network Development Planning Grant Program have received additional funding to continue the work of their networks. Of the grantees who have received funding, only five had received additional funding from HRSA, such as the Rural Health Network Development Program. The Rural Health Network Development Pro-

gram focuses on advancing the work of existing, mature networks.⁵ However, most have received it through other funding sources, such as through SAMHSA, the CDC, state, or university funding. This may be due to the need to use funding sources that are more specifically aimed at addressing the community issue at hand now that partners are established, rather than funding directed at building the network further. Other grantees were able to maintain financial sustainability of their networks through organizational support, in-kind support, and partner contributions, which speaks to the power of the relationship building that the Network Development Planning Grant Program can foster.

Collaboration and communication were valued as facilitators of success among grantees. Having an opportunity to communicate and engage with other organizations in their network continues to be valuable for understanding the services that each partner organization provides in their community and establishing roles in their network. This opportunity for communication and collaboration also increased commitment among partners to stay engaged in the work of the network beyond the initial funding period.

The overall grant process of the Network Development Planning Grant Program was helpful for grantees as they established their networks. This process gave grantees time to develop common goals with their partners as they began to develop their networks, along with providing time and resources to utilize working groups to complete grant activities and deliverables. Grantees also appreciated the flexibility of the grant process, especially due to the changes that had to be made in network development and planning due to the COVID-19 pandemic. Continued flexibility in the grant process is important going forward with future cohorts of grantees as local, state, and national needs continue to shift.

Grantees also cited resources and supports, particularly their technical assistance provider and HRSA project officer, as helpful throughout the funding period. The support from the technical assistance provider and project officer, as well as other hired consultants and professionals, offers a framework in network development for grantees. Gaining this funding also created support from their organizational leadership, which in turn created a greater commitment to the network across community partners. As a result, the Network Development Planning Grant offers an opportunity for collaboration and coordination and a framework for improving health outcomes in rural communities.

Grantees also named barriers to success, including limited organizational capacity and challenges arising from the COVID-19 pandemic. For example, grantees noted issues such as staff and leadership turnover as a barrier to being able to smoothly carry on the work of the grant over the course of the funding period. The COVID-19 pandemic additionally impacted organizational capacity as many grantees and their network partners had to assist with COVID-19 response in their communities, making it more challenging for their staff to dedicate time to network meetings and activities. Due to COVID-19, grantees had to suddenly re-evaluate their network goals in order to meet new needs in the community. Grantees also had to switch to remote working platforms, which may have created barriers to conversation and relationship building. Despite the barriers that COVID-19 posed, the Network Development Planning Grant Program continued to offer flexibility and support to grantees as they navigated the new challenges and changes in their communities.

Conclusion

Networks continue to be a vessel of collaboration to address community health issues across partners. Having the resources to convene partners and strategically build a network has been valuable for participants in the Rural Network Development Planning Grant Program. The momentum of the network development work completed by the 2019-2020 cohort of the Rural Network Development Planning Grant Program has continued through various forms of network sustainability past the completion of the funding period. Despite the barriers of the COVID-19 pandemic and organizational capacity, most grantees continued to find success in their network development through collaboration and communication, grant process, and resources and supports.

Acknowledgements

The authors would like to acknowledge Mary Gilbertson, MPH and Jill Tanem, MPH for their assistance with interviews for this study. And, the authors would like to acknowledge interview participants for sharing their time and expertise with us.

References

1. Garcia MC. Reducing Potentially Excess Deaths from the Five Leading Causes of Death in the Rural United States. *MMWR Surveill Summ.* 2017;66. doi:10.15585/MMWR.SS6602A1
2. Henning-Smith C, Hernandez A, Neprash H, Lahr M. Differences by Rurality in Satisfaction with Care Among Medicare Beneficiaries. *J Rural Heal.* 2020. doi:10.1111/jrh.12423
3. Douthit N, Kiv S, Dwolatzky T, Biswas S. Exposing some important barriers to health care access in the rural USA. *Public Health.* 2015;129(6):611-620. doi:10.1016/j.puhe.2015.04.001 [doi]
4. Tuttle M, Rydberg K, & Henning-Smith, C. Success among Rural Health Network Development Planning Grant Awardees: Barriers and Facilitators. *UMN Rural Health Research Center Policy Brief.* May 2021.
5. Rural Community Programs. Official web site of the U.S. Health Resources & Services Administration. Published April 2021. Accessed May 25, 2021. <https://www.hrsa.gov/rural-health/community/index.html>

Suggested Citation

Rydberg K, Henning-Smith C, and Tuttle M. Successes and Challenges to Network Sustainability: Perspectives of 2019-2020 Rural Health Network Development Planning Grantees. *UMN Rural Health Research Center Policy Brief.* August 2021. <https://rhrc.umn.edu/publication/successes-and-challenges-to-network-sustainability/>

This policy brief was revised in June 2025.



Rural Health Research & Policy Centers

Funded by the Federal Office of Rural Health Policy
www.ruralhealthresearch.org

Support for this study was provided by the Federal Office of Rural Health Policy, Health Resources and Services Administration, Cooperative Agreement U1CRH03717-13-00. The information, conclusions, and opinions expressed are those of the authors, and no endorsement by FORHP, HRSA, or HHS is intended or should be inferred.

For more information, contact Katie Rydberg (reedx472@umn.edu)

University of Minnesota Rural Health Research Center
Division of Health Policy and Management, School of Public Health
2221 University Avenue SE, #350 Minneapolis, MN, 55414