

Three Big Questions for the Community Engagement Process for Hospital Transformation

The facilitation team will start with the three questions below. Below, if it's helpful, we offer suggestions on how you might approach answering these questions, and we share some general thoughts on issues that Vermont-NEA is focused on. ***As always, trust what you know, what you've experienced, what you (and your students and their families) need and speak from the heart.***

Is the health care system serving you and your family well?

- Do you feel the health care system listens to and respects you, and gives you the support you need to stay healthy and productive?
- What makes you and your family the most insecure and vulnerable when it comes to getting and paying for medical care?
- What kinds of health care do you wish was more available or easier to access in your local community?
- If you are comfortable doing so, talk about any experience(s) of discrimination that you have faced in the health care system and its effects on your life.

Are you able to access and afford the care you need?

- What kinds of medical care are the most difficult for you to get and to pay for?
- What is the impact of rising premiums and out-of-pocket costs on your health and financial security?
- If you are comfortable talking about it, have you experienced medical debt? If so, what has this debt meant to your health and financial security.
- Have you or a family member faced unusually long or inconvenient wait times for care, and has this impacted your health?

What do you want to see more of in your community in the way of care services?

- Vermont-NEA has heard from a lot of union members about how difficult it is to find a primary care doctor or mental health counselor. In some regions, getting medical care needed specifically by girls and women is also an issue. Clearly, Vermont needs more primary care/family medicine doctors, mental health counselors, and nurses – and they need to be paid better and treated with more respect (sound familiar?).

Union members also tell us that health care should begin in our local communities, close to home. In other words, we should be able to get most routine health care and wellness

services – like primary care, mental health care, and for managing chronic conditions – close to where we live and work, and from caregivers we know and trust.

- We must rebuild, expand, and strengthen community care centers and practices, and that includes independent care practices as well as those associated with hospitals, especially in our rural areas.

Union members want a bigger focus on prevention and wellness to keep folks out of hospital beds and emergency rooms if they don't need to be there. Our hospitals should play a big role in this, too.

- We need a health care plan for the state and a way to enforce it so we can save community care and rebalance the health care system. We should determine what our hospitals need to operate at a high level, but also put more emphasis and resources into community care.