

**Addressing The Bystanders: An Integrated Marketing Plan for Launching a Satellite
Clinic in Rural Sullivan County, New York**

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December 2025

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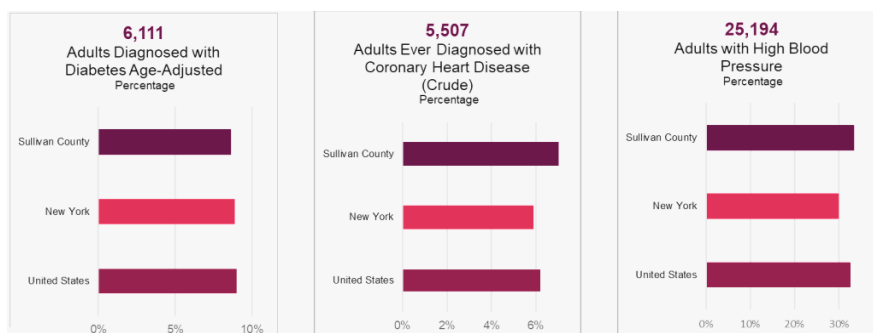
Executive Summary

This comprehensive plan outlines the strategy for an established, affluent, for-profit hospital to open its first satellite clinic in the underserved rural area of Sullivan County, New York. The plan addresses the unique health needs and challenges faced by the community, focusing on improving access to quality preventive care and chronic disease management services. By targeting Segment 4 of the Bloem-Stalpers model and the “Bystanders” segment identified in the Deloitte report "Attract, engage, and build loyalty: How actionable segmentation can provide valuable insights about your health care customers" and applying constructs from Social Cognitive Theory, the campaign aims to empower patients, build trust, and ultimately improve health outcomes in the region.

Situation Analysis

Sullivan County faces significant health challenges, with a high prevalence of chronic diseases, substance abuse problems, and limited access to healthcare services. According to Garnet Health's 2022 Community Health Needs Assessment (CHNA), over 33% of adults in the county have high blood pressure, and the prevalence of diabetes and coronary heart disease is high. Additionally, opioid overdose deaths are very high at 45.9 per 100,000 population, and 18.7% of adults are current smokers. The county also faces shortages of primary care providers, dentists, and mental health professionals, with 34.41% living in a Health Professional Shortage Area. The ratio of residents to primary care physicians is 2,898:1, much higher than the state ratio of 1,180:1. Transportation and affordability are significant barriers to accessing care, with 6% of the population being uninsured.

Addressing these chronic diseases through preventive care and disease management



programs is crucial

Figure 1. Table of Adults Diagnosed with Chronic

Illnesses in Sullivan County (Garnet Health, 2022) for improving health outcomes in the county (Centers for Disease Control and Prevention [CDC], 2021). Comprehensive substance abuse prevention and treatment programs are needed to address the public health crisis (National Institute on Drug Abuse, 2017). Attracting and retaining healthcare providers in rural areas is a critical challenge that must be addressed to improve access to care (Rural Health Information Hub, 2019). Improving access to care through insurance coverage, transportation assistance, and telemedicine can also help address these barriers (Kaiser Family Foundation, 2019; Syed et al., 2013).

Several factors influence these health issues, including socioeconomic challenges, low education levels, limited healthcare infrastructure, and a diverse population with cultural and language barriers. Sullivan County faces high rates of poverty, unemployment, and food insecurity compared to state averages (Dutchess County Government, 2022). These social determinants of health have a significant impact on health outcomes, as individuals with lower socioeconomic status are more likely to experience chronic diseases, mental health issues, and barriers to accessing care (Healthy People 2030, n.d.). Sullivan County also has the lowest high school graduation rate in the Mid-Hudson Region at 82% (Dutchess County Government, 2022). Education is a key determinant of health, as individuals with higher levels of education are more likely to have better health outcomes, engage in healthy behaviors, and have higher health literacy (Zimmerman et al., 2015).



Figure 2. Community Overview Infographic (Garnet Health, 2022)

The rural nature of the county limits access to providers and health resources. Rural areas often face challenges in attracting and retaining healthcare providers, maintaining healthcare facilities, and accessing specialty care services (Rural Health Information Hub, 2019). The county has a growing Hispanic/Latino population (17.4%) and a 10.2% Black population, with 15.8% speaking a language other than English as their primary language (U.S. Census Bureau, 2021). Culturally and linguistically diverse populations may face additional barriers to accessing care, such as language barriers, cultural beliefs, and mistrust of the healthcare system (Betancourt et al., 2003). Addressing these underlying factors and providing culturally competent care and language assistance services are essential for improving health equity in the county.

Target Market

The target market for the new rural satellite clinic in Sullivan County is a blend of two similar segments: Segment 4 from the Bloem-Stalpers model and the "Bystanders" segment identified in the Deloitte report "Attract, engage, and build loyalty: How actionable segmentation can provide valuable insights about your health care customers" (Read & Korenda, 2021). This blended target market, is characterized by individuals who:

1. Are predominantly older, low-income women with limited educational attainment. Both segments are described as having lower socioeconomic status, with Bystanders being the "oldest segment" and having the "lowest income group," and Segment 4 consisting mainly of women facing socio economic challenges (Bloem et al., 2020; Read & Korenda, 2021).
2. Face significant barriers to accessing healthcare services and engaging in health-promoting behaviors. These barriers may include transportation issues, financial

constraints, limited health literacy, and a lack of perceived control over their health (Bloem et al., 2020; Read & Korenda, 2021).

3. Have a higher prevalence of chronic diseases and risk factors, such as obesity, smoking, and substance abuse. The Garnet Health CHNA data shows high rates of these health issues in Segment 4, while the Deloitte report states that Bystanders are "most likely to be in poor health."
4. Are less engaged in their health and wellness, with a tendency to be "complacent, tech-averse, resistant to change, and not engaged in wellness/prevention" (Read & Korenda, 2021). Segment 4 individuals also struggle to navigate the complex healthcare system and may require more hands-on support (Bloem et al., 2020).

Segment 4 and the Bystanders represents an ideal target market for a new rural satellite clinic in Sullivan County for several reasons:

1. High need for healthcare services: Segment 4 individuals are at a higher risk for chronic diseases due to their health behaviors and limited access to preventive care and disease management services. The Garnet Health CHNA data highlights the high prevalence of obesity, smoking, substance abuse, and chronic disease mortality in Sullivan County, which disproportionately affects this segment. By targeting this market, the clinic can address the most pressing needs of the community and have a significant impact on improving outcomes.

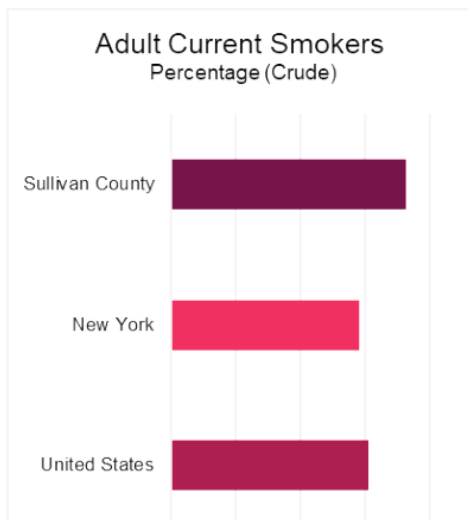


Figure 3. Table of Current Smokers in Sullivan County (Garnet Health, 2022)

- **Lack of access to care:** Segment 4 faces significant barriers to accessing healthcare services, including limited transportation options, financial constraints, and a shortage of healthcare providers in the area (Bloem et al., 2020). Transportation has been listed as a major barrier to accessing services in Sullivan County.



Figure 4. Garnet Health Community Survey (Garnet Health, 2022)

- **Opportunity to build trust and loyalty:** Bystander individuals, particularly those with lower socioeconomic status and education levels, may have had negative experiences with the healthcare system in the past, leading to mistrust and reluctance to seek care (Read & Korenda, 2021). Sullivan County has the lowest high school graduation rate in the Mid-Hudson Region at 82% (Dutchess County Government, 2022). Sullivan County also faces socioeconomic challenges, including high rates of poverty, unemployment, and food insecurity compared to state averages (Dutchess County Government, 2022).

Campaign Goals and Objectives

The overarching goal of this campaign is to improve health outcomes for Sullivan County residents by increasing access to quality preventive care and chronic disease management services.

The main objectives are:

Increase clinic visits and program enrollment by our target market by 20% in Year 1: Engaging our target market and encouraging them to seek preventive care and participate in chronic disease management programs is a major objective for improving health outcomes. Achieving a 20% increase in clinic visits and program enrollment within the first year will demonstrate the campaign's effectiveness in reaching and motivating this target market.

Achieve 90% patient satisfaction rating and 25% referrals from current patients: Providing high-quality, patient-centered care is essential for building trust and loyalty among the target market. Aiming for a 90% patient satisfaction rating will ensure that the clinic is meeting the needs and expectations of its patients. Encouraging current patients to refer friends and family, with a goal of 25% referrals, will help expand the clinic's reach and establish a positive reputation within the community.

Reduce the prevalence of obesity and smoking among our target market by 10% within two years: Obesity and smoking are two significant risk factors for chronic diseases that disproportionately affect our target market segments in Sullivan County. The Garnet Health CHNA data shows that 34% of adults in Sullivan County are obese, and 18.7% are current smokers, both higher than state and national averages (Garnet Health, 2022). By targeting these risk factors through interventions, education, and support, the clinic aims to reduce the prevalence of obesity and smoking among our target market by 10% within two years.

Behavior Change Strategy

Apply Social Cognitive Theory Constructs by (Parvanta et al., 2011):

Building Self-Efficacy: Enhance self-efficacy among patients by offering skills training programs and peer support groups. These programs help patients learn to manage their chronic conditions, adopt healthier behaviors, and navigate the healthcare system (Farley, 2019).

Promoting Observational Learning: Promote observational learning by showcasing patient success stories and using community health workers as role models. This approach can demonstrate the benefits of managing health effectively and can provide guidance and support from trusted figures (Islam et al., 2023).

Providing Reinforcement: Encourage desirable health behaviors through incentive programs that reward activities such as attending preventive care appointments and participating in disease management programs. Rewards can include items like gift cards, service discounts, or public recognition in clinic communications (Green & Murphy, 2014).

Marketing Mix

Product: The satellite clinic will offer comprehensive primary care and specialty services tailored for the rural population, including telemedicine, mobile health, chronic disease management programs, and substance abuse treatment. These services are designed to meet the specific needs of the rural Sullivan County population and our target market, as identified in the Garnet Health CHNA (2022) and other research (Rural Health Information Hub, 2019).

Price: To ensure that healthcare services are affordable and accessible for the target market, the clinic will implement sliding scale fees based on patients' income and ability to pay, payment assistance, and contracts with Medicaid and Medicare Advantage plans (Dubois & Morone, 2019; Reschovsky et al., 2020).

Place: The clinic will prioritize convenience and accessibility in its location and services, with a central, easily accessible location, extended and weekend hours, transportation assistance, and on-site pharmacy, labs, and imaging (Patwardhan et al., 2020; Patel & Dolan, 2016).

Promotion: Targeted marketing to Segment 4 and Bystanders will involve community outreach, partnerships with faith-based organizations, culturally relevant advertising, and provider-patient engagement tools (Betancourt et al., 2003).

Positioning and Branding

The satellite clinic will be positioned as a trusted, accessible, and culturally competent healthcare partner invested in the wellbeing of the Sullivan County community. The clinic's brand identity will emphasize patient-centered care, advanced expertise, use of technology, and a focus on prevention and holistic health (Epstein & Street, 2011).

Positioning:

The clinic will position itself as a healthcare provider that:

- Understands and addresses the unique health needs and challenges faced by the rural Sullivan County community (Garnet Health, 2022).
- Provides high-quality, evidence-based care that is culturally sensitive and responsive to the patients' preferences and values (Saha, Beach, & Cooper, 2008).
- Prioritizes accessibility and convenience, offering flexible appointment options, transportation assistance, and telemedicine services to overcome barriers to care (Rural Health Information Hub, 2019).
- Is committed to building long-term, trusting relationships with patients and the community, working collaboratively to improve health outcomes and quality of life (Galiatsatos et al., 2021).

Branding:

The clinic will create a brand identity that emphasizes:

- Patient-centered care: prioritizing patients' needs, preferences, and values, involving them in decision-making and tailoring plans to their unique circumstances (Epstein & Street, 2011).

- Advanced expertise: highlighting the expertise and qualifications of its healthcare providers, emphasizing their specialized training in rural health, chronic disease management, and substance abuse treatment (Garnet Health, 2022).
- Use of technology: showcasing its use of telemedicine, mobile health, and other innovative technologies to improve access to care and patient outcomes (Rural Health Information Hub, 2019).

Promotional Channels

Community outreach and events: Participate in health fairs, farmers markets, and community festivals; collaborate with schools and senior centers (Garnet Health, 2022; Galiatsatos et al., 2021).

Targeted direct mail and print advertising: Distribute brochures, flyers, and postcards; place advertisements in local media (Parvanta et al., 2011).

Digital marketing: Create a user-friendly website; develop a strong social media presence; optimize online listings (Ukoha, 2020).

Public relations: Seek earned media opportunities; sponsored local health-related events (Parvanta et al., 2011).

Internal marketing: Implement a patient referral program; encourage personalized interactions; utilize patient satisfaction surveys (Epstein & Street, 2011).

Implementation Plan

- Conduct a community health needs assessment and focus groups to finalize service offerings and marketing strategies (Pennel et al., 2015).
- Develop culturally and linguistically appropriate marketing and clinic materials (Betancourt et al., 2003; Garnet Health, 2022).

- Implement patient education and engagement programs to support behavior change (Parvanta et al., 2011).
- Build relationships with community partners for outreach and referrals (Galiatsatos et al., 2021; Garnet Health, 2022).

Campaign Evaluation

Process Measures:

- Marketing Distribution: Track the total number and reach of brochures, flyers, and other materials (Parvanta et al., 2011).
- Digital Engagement: Monitor website traffic, click-through rates, and conversions (Ukoha, 2020).
- Social Media Engagement: Measure growth in followers, reach, and conversion rates (Ukoha, 2020).
- Media Exposure: Count media placements and total impressions.
- Community Engagement: Record the number of community events and attendees (Galiatsatos et al., 2021).

Outcome Measures:

- New Patients: Track exposure reach by demographics, referrals and appointments booked (Parvanta et al., 2011).
- Program Enrollments: Measure enrollments in chronic disease and substance abuse programs (Garnet Health, 2022).
- Patient Satisfaction: Analyze patient satisfaction survey results (Al-Abri & Al-Balushi, 2014).
- Financial Performance: Monitor revenue and market share (Reschovsky et al., 2020).

Impact Measures:

- Obesity and Smoking Reduction: Track changes in the prevalence of obesity and smoking among the Bystanders segment (Garnet Health, 2022).
- Healthcare Utilization: Monitor changes in emergency department visits, hospitalizations, and primary care utilization among the Bystanders segment (Greene et al., 2019; Parvanta et al., 2011).
- Patient Satisfaction and Referrals: Track patient satisfaction ratings and referral rates to gauge the clinic's success in providing quality, patient-centered care (Parvanta et al., 2011).

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