



# The RTT Collaborative

in rural health professions education and training  
*Growing our own...together*

## QUARTLERLY NEWSLETTER - December 2019

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Photo Courtesy of Randall Longenecker, M.D.

As the winter holiday seasons begins and the year comes to a close, we hope you enjoy our updates and exciting opportunities that the RTT Collaborative has to share.

For those wanting to join as a participating program, we want to welcome you to join this important cooperative. Visit our [website to learn more](http://www.rttcollaborative.net).

### CONNECT WITH US!



[www.rttcollaborative.net](http://www.rttcollaborative.net)





# Message from the Executive Director



## The Cost of Justice and Health Equity

RTT Collaborative Newsletter - December 2019

Randall Longenecker, M.D.

There is no questioning the disparities in health status and the maldistribution of the rural health professional workforce across our nation. “Health equity” has become the new catchphrase and an urgent call to action.

I had the incredible opportunity at the AAMC Learn, Serve, Lead meeting in Phoenix, AZ, this past month to hear Bryan Stevenson JD, founder and executive director of the Equal Justice Initiative (<https://justmercy.eji.org>). A widely acclaimed public interest lawyer who has dedicated his career to helping the poor, the incarcerated, and the condemned, he has won numerous awards, including the prestigious MacArthur Foundation “Genius” Prize and the ACLU’s National Medal of Liberty. His plenary was entitled, “American Injustice: Mercy, Humanity and Making a Difference.” Just Mercy is the title of a book he has written and a movie that is scheduled for release in December (<https://www.youtube.com/watch?v=fb-WiCPx99rs>). He noted three things – proximity, narrative (truth-telling), and hope – essential to achieving health equity. But to those he added his most important directive, “Do the things that are uncomfortable and difficult.”



[Video of Bryan Stevenson's presentation is available for AAMC members](#)

Justice does not come easily, and it comes at a cost to us. As I think of my colleagues in rural medical education and training, I can think of one example after another of what I like to call “eyes wide open” optimism, as my peers accept and bring hope to the difficult task they have been given. I admire their persistence in the face of disappointment and failure. For the sacrifices they’ve made in pursuit of justice and equity for their rural communities I am deeply grateful.

Fortunately, we are not left to bear the cost alone. The RTT Collaborative, the Rural Medical Educators, and other networks in a community of practice around rural health professions education are there to sustain us. It is the resilience of our community that gives me courage. Let’s stay close to the communities we serve, change the narrative around our challenges by sharing stories, and remain hopeful, as we bear the cost together.



Randall Longenecker MD  
Executive Director



# Photo Contest

## What does rural health education look like?

Share your experience with us by entering the RTT Collaborative Photo Contest with a photo and short written submission about the story behind your photo. These photos should depict health care education and training in a rural location. Additionally, your written submission should be a story, poem, or reflection that describes how the image depicts rural education or training. The written submission should be 500 words or less and is an important part of your overall submission about your experience with rural education and training.

## Submission Guidelines:

- Must be original work by entrant
- Photo must be .jpeg format, resolution at least 1200 x 600 pixels
- May submit up to 5 photos
- Photos and entry form must be submitted together using [this link](#)
- If a person is portrayed, a signed release form must be submitted.
- By submitting a photo and consent form, entrant acknowledges that we acquire the rights to use photos both printed and electronically.



## Prizes:

- First Place: \$250.00
- Second Place: \$125.00
- Third Place: \$75.00
- Fourth Place: Two awards for \$25.00

**Deadline: Saturday February 15, 2020**

**[Submit your entry here!](#)**

## Alternative Payment for Rural GME

The Rural Physician Workforce Production Act of 2019, introduced as S289 in late January, now has 6 co-sponsors in the Senate and a companion bill is developing in the House. Here is a link to the text of the bill as well as a 2-page summary prepared by the GME Initiative.

S289 – Congress.gov

<https://www.congress.gov/bills/116/congress/senate-bill/289?q=%7B%22search%22%3A%5B%22S289%22%5D%7D&s=1&r=1>

Please encourage your Senators to sign on as co-sponsors! And ask if your Congressperson wants to sponsor a bill in the House.





# Annual Meeting & Year-End Giving

## 2020 RTT Collaborative Annual Meeting

### **The Continuum of Rural Health Professions Education: Across time, place, and discipline**

*Skamania Lodge*

*1131 SW Skamania Lodge Way, Stevenson, WA 98648*

*April 15-17, 2020*



This year's Annual Meeting promises to be an exciting event! Hosted by three participating rural residency programs in Oregon – a new expanded precedent in hosting for [The RTT Collaborative](#) – the Collaborative is enjoying its seventh year of existence as a nationwide cooperative of rural programs. The meeting also welcomes the [Rural Medical Educators](#) (a special interest group within the National Rural Health Association) and the [Rural Residency Planning and Development](#) grantees and technical assistance center staff for 2019-2021 (RRPD).



Join other rural medical educators from rural training programs around the nation. We will discuss the ability to describe a continuum of rural health professions education and training across time, place, and discipline. Implementing at least one strategy or tool in bridging the gaps in transitions of professional development, across training sites in urban and rural locations, and among multiple disciplines and professions. Share at least two novel ideas for program development, finance, governance, and curriculum design. Adapt at least one innovation implemented by others to their own program. Become part of a growing network of individuals and organizations engaged in the education and training of health professionals, both undergraduate and graduate programs, from around the nation.

Registration coming January 2. Please visit our [Annual Meeting page](#) for updates. The first five Residency Coordinators to register are eligible to receive free registration.

## **Donate to the RTT Collaborative**

Looking for a place to give year end gifts? We Invite you to donate to the RTT Collaborative where we're making a difference one charitable donation at a time. The role of sponsors is to financially support The RTT Collaborative in its mission through program expansion, increased member benefits, and additional or lower cost services. The RTT Collaborative (RTTC) is committed to sustaining health professions education of all types in rural places, with an initial focus on physician education. This restricted fund within The RTT Collaborative will be used to prepare Family Medicine faculty who live, clinically work, and teach in a rural place (using any federally accepted definition of "rural") to become even better educators and, preferably, program directors of residency programs located in rural communities.

[Donate by clicking here](#)





# Rural Tracks and Pathways

## Rural Tracks and Pathways

Of the forty-one (41) rural track or pathway programs in allopathic and osteopathic medical schools across the nation, five (5) soon to be six (6) are participating programs in The RTT Collaborative. Here is what they have to say about the benefits of their participation.

**Stacy Abraham, MPH, Research Assistant Director, Office of Rural Medical Education, University of North Texas Health Science Center, Fort Worth, Texas.**

“We have found the RTT Collaborative to be a valuable resource to help us understand the best methods to recruit and train osteopathic medical students to become rural physicians. We have structured much of our curriculum based on findings disseminated by the RTT.

The founder of TCOM’s Rural Track, John Bowling, DO, was an active member with the RTT Collaborative since the beginning, and we look forward to continued use of this valuable resource. One of the biggest advantages of participating in the RTT Collaborative is the opportunity to share the research that other members of the collaborative have found effective with the rural physicians who precept our third-year medical students. Being a member allows our program to stay up to date on innovative ideas to help motivate and prepare our osteopathic medical students for rural medicine.”

<https://www.unthsc.edu/texas-college-of-osteopathic-medicine/office-of-ruralmedical-education/>

**Sharron M. DiMario, MHA, Center Director, University of Cincinnati Area Health Education Center (AHEC), UC College of Medicine, Cincinnati, Ohio.**

“We are just now researching our rural track. I think the biggest value of participating in the RTT Collaborative will be the chance to learn from others who have already ‘plowed the path!’”

[web page of rural program under development]

<http://www.med.uc.edu/AHEC>

**Lori Martensen MS, Director, Wright State University, Boonshoft School of Medicine, Wright Rural Health Initiative, Dayton, Ohio**

“Access to Randy Longenecker, with his vast knowledge and experience in rural medical education, has been the biggest advantage for participating in the RTT Collaborative! I was new to rural medical education when I started my current position, and Randy is the person I have regularly gone to for advice and feedback. I learn something new every time I speak with him, and his patient and approachable nature make it easy to ask what I know are sometimes naïve questions. I know I can count on him to be honest with me, even if the answer is not what I wanted to hear!”

<https://medicine.wright.edu/wrhi>

**Lisa Benzel, Program Director, Montana WWAMI TRUST Program, Bozeman, Montana.**

“The Montana TRUST (Targeted Rural and Underserved Track) program is pleased to join the RTTC. The Montana TRUST program and its TRUST scholars is all about training a workforce for rural and underserved areas. The RTTC allows our students and faculty to join the collaborative

and learn from the variety of undergraduate and GME programs that participate in the RTTC. We look forward to contributing to this robust discussion on training a physician workforce for rural and underserved America.”

<https://depts.washington.edu/fammed/education/programs/trust/>



Participants learn about rural training at the Idoc workshop. Photo courtesy of the Heritage College of Osteopathic Medicine



# Rural Tracks Cont.

**Sharon Casapulla, EdD, MPH, Director, Rural and Urban Scholars Pathways (RUSP) Program, Heritage College of Osteopathic Medicine, Ohio University.**

The Office of Rural and Underserved Programs at Ohio University Heritage College of Osteopathic Medicine is fortunate to be the anchor for The RTT Collaborative (RTTC) located in Athens, Ohio. The Rural and Urban Scholars Pathway program was the first medical school program to join RTTC. Participation has provided resources and helped to guide our program to ensure that students are properly prepared to enter the rural medical workforce. “Being a part of the RTTC has connected me with leaders in other medical schools and residency programs across the country who are passionate about preparing future physicians for rural practice.”

<https://www.ohio.edu/medicine/about/offices/rural-underserved-programs/>

**Kathleen Quinn, PhD, Associate Dean for Rural Health, Associate Teaching Professor, University of Missouri School of Medicine**

“The biggest advantage of the University of Missouri School of Medicine participating in the RTT Collaborative is having one on one relationships with the personnel. When we wanted to start researching and determining how best to move forward with establishing a Rural Training Track, we had personalized service from Dawn Mollica and Dr. Longenecker. Our process was advised and organized by the Collaborative and we were able to make informed decisions with our partnering hospital. It is comforting to know, the RTT experts are only a phone call away when we have questions. We will welcome residents into our RTT in July 2022. The RTT Collaborative will also help us over the next four years as we implement Longitudinal Integrated Clerkships at three of our rural clinical training sites. We are so grateful.”

A description of the landscape of undergraduate rural programs written by Dr. Longenecker and the Rural PREP team is currently under review and hopefully will be published in the spring.



## Annual Report: 2018-2019

Be sure to check out our [Annual Report for 2018-2019](#). Inside we include a message from the Executive Director about the Challenges and Luxuries of Growth. As well as information about participating programs, our year of newsletter highlights, our yearly dashboard and board members.



# Other Information

## Need Travel and Meeting Support?

Individuals planning to attend the Rural PREP Design and Dissemination Studio as a preconference to The RTT Collaborative Annual Meeting may apply for a limited number of travel allowances on registration, which opens January 2.



## Upcoming Meetings and Events:

**The GME Initiative 2020: Changing the Rules**, Denver, CO; January 26 - 28, 2020

**STFM Medical Student Education**, Portland, OR; January 30- February 2, 2020

**Rural Health Policy Institute**, Washington, DC; February 11-13, 2020

**ACGME Annual Conference**, San Diego, CA; February 27-29, 2020

**The RTT Collaborative Annual Meeting**, Stevenson, WA; April 15 - 17, 2020

If you have items you would like to be included in the next edition of this newsletter, please submit ideas to Dawn Mollica at [mollicd1@ohio.edu](mailto:mollicd1@ohio.edu)

## The RTT Collaborative Board of Directors

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