# What is the Value of Rural Residency Training?

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## Background

Preparing for rural practice

- Residency location is a strong determinant of eventual practice location.
- Family medicine programs training residents in rural communities are more successful at producing rural physicians.
- Programs are often smaller (<4 residents/year), with fewer resources (vs. urban): questions about quality.</p>
- The Federal Office of Rural Health Policy is investing in rural residencies (Rural Residency Planning and Development Program)
- Anecdotal evidence: rural training offers equal or better value (more individual attention, broader scope).

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- 2. Examine the relevance of ACGME minimum program size (resident complement) to quality.
- 3. Use findings to inform
  - ACGME policy and initiatives related to rural training
  - Future federal investments in rural training
  - Areas where programs can improve
  - Tracking of changes over time



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- How do practicing physicians from small rural family medicine residencies compare with other physicians in their assessments of residency preparation for practice and their actual scope of practice after residency?
- How do practicing graduates of small rural versus other residencies compare on aspects of practice organization, Patient-Centered Medical Home (PCMH) certification, location in rural and underserved settings, and use of electronic health records (EHRs)?



#### Methods

**Data**: Partner with American Board of Family Medicine for data access

- Resident data:
  - Ratings of residents on competency and medical knowledge, including milestones (20+ competencies in 6 domains, available from 2014-15)
  - In-training examination (ITE) scores, which assess medical knowledge
  - Registrants for ABFM certification exam: intentions related to scope of practice and practice site (if known).



#### Methods

- **Early-career physician** data (National Graduate Survey of ABFM-certified physicians):
  - Residency preparation for practice, scope of practice, practice organization, and location
- ➤ **Mid- to late-career physician** data (Recertification Examination Registration Questionnaire):
  - Scope of practice, practice organization, location, use of EHRs, and PCMH features.



#### Methods

**Analysis:** Compare graduates of small rural residencies with graduates of other (urban) programs

 Adjust for physician age, sex, MD vs. DO degree type, U.S. vs. international medical graduate





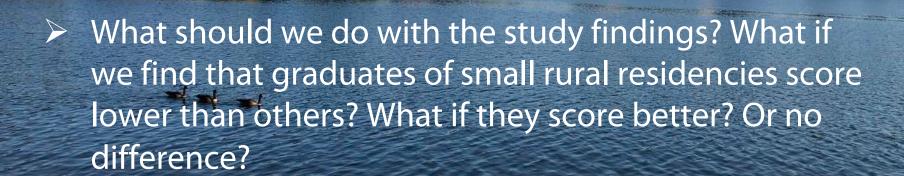
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- How do you recommend we define "value" in rural training?
- Are the data and methods appropriate? What are meaningful measures of value or quality?
- What should we do with the study findings? What if we find that graduates of small rural residencies score lower than others? What if they score better? Or no difference?



## Clarifying Questions?

