# Creating a Residency Program at a Critical Access Hospital

#### Washington State University | Pullman Regional Hospital

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#### Family Medicine Residency Program - Pullman

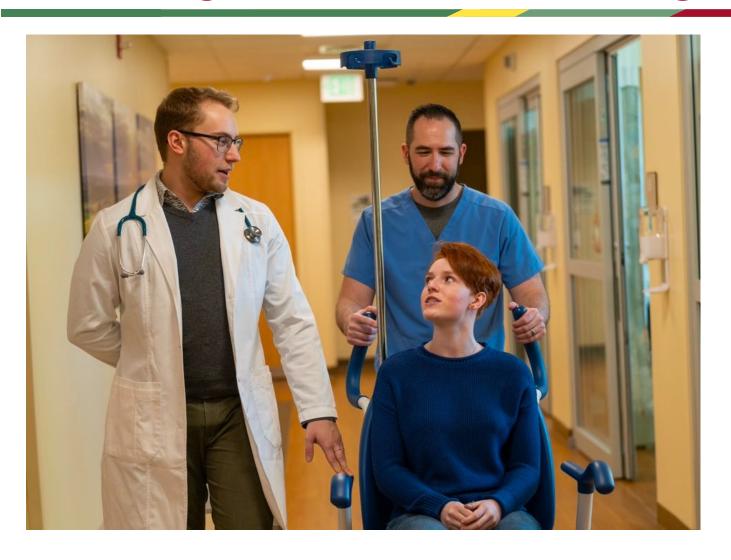
- 3/3/3 program
- All three years at a critical access hospital
- Received accreditation May
  3, 2021
- First Match 2023







#### Advantages of a Stand-Alone Program



- More autonomy
- Training
- Local development of teaching
- Creating a teaching center





#### Challenges of a Stand-Alone Program

- Fewer resources
- Responsible for all academic elements
- Uncharted territory
- Recruitment





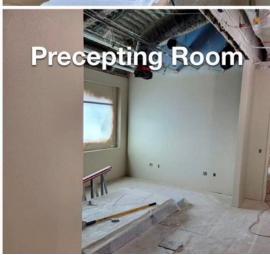


#### Assessing feasibility









- Know the ACGME "must" requirements
- Look at teaching resources
- Faculty/preceptors
- Patient volumes (inpatient and outpatient)





## What is (and is *not*) your end product?



- What kind of physician can you do a really good job training?
  - Hospitalist
  - outpatient only
  - OB/no OB
- You can't do it all!





## Learning from Our Mistakes

- Taking on too much at once
- Building new instead of using existing resources
- Not formalizing relationships early enough







#### Selecting a Sponsoring Institution

 Should a College of Medicine / University be your Sponsoring Institution?

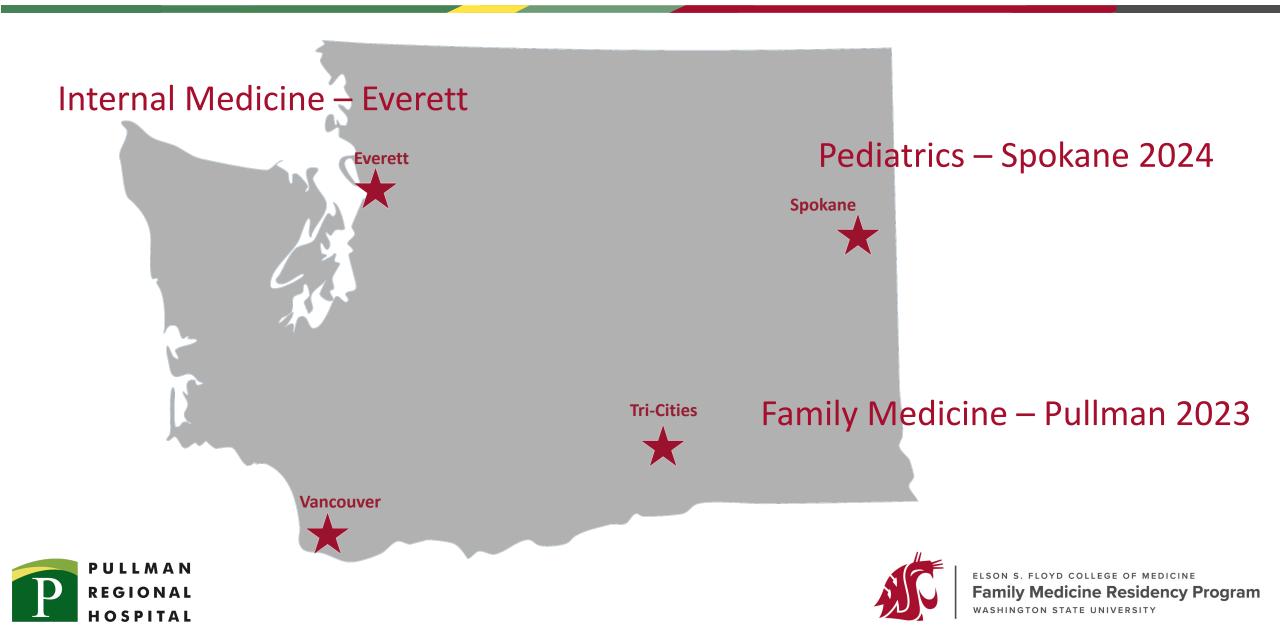
• Importance of 10-year financial planning







#### Washington State University GME



#### Impact of Sponsoring Institution

- Brand Recognition
- Infrastructure and support
- Accreditation
- Funding and philanthropy







# **10 Year Financial Planning**



# Keys to our Success – Support of:



- community physicians
- hospital leadership
- sponsoring institution





#### Motivation



• Why would a critical access hospital want to get onboard with such a big ask?





## Questions



