

Bridging the Gaps: How North Colorado Family Medicine Collaborates Between Core and Rural Programs to Strengthen All

2024 RTT Collaborative Annual Meeting


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Quick Overview: North Colorado Family Medicine (NCFM)

- Under the NCFM umbrella, we are 5 programs & 3 sites
- 3 of the programs, including the Core program, are in Greeley, Colorado.
- Additionally, we have 2 rural training programs
 - Sterling is a 1-2 program where the first 12 months are done at the Core site in Greeley and the remaining 24 months are done in Sterling
 - Wray is a near 1-2 program where the first 15 months are done at the Core site in Greeley and the remaining 21 months are done in Wray



Objectives:

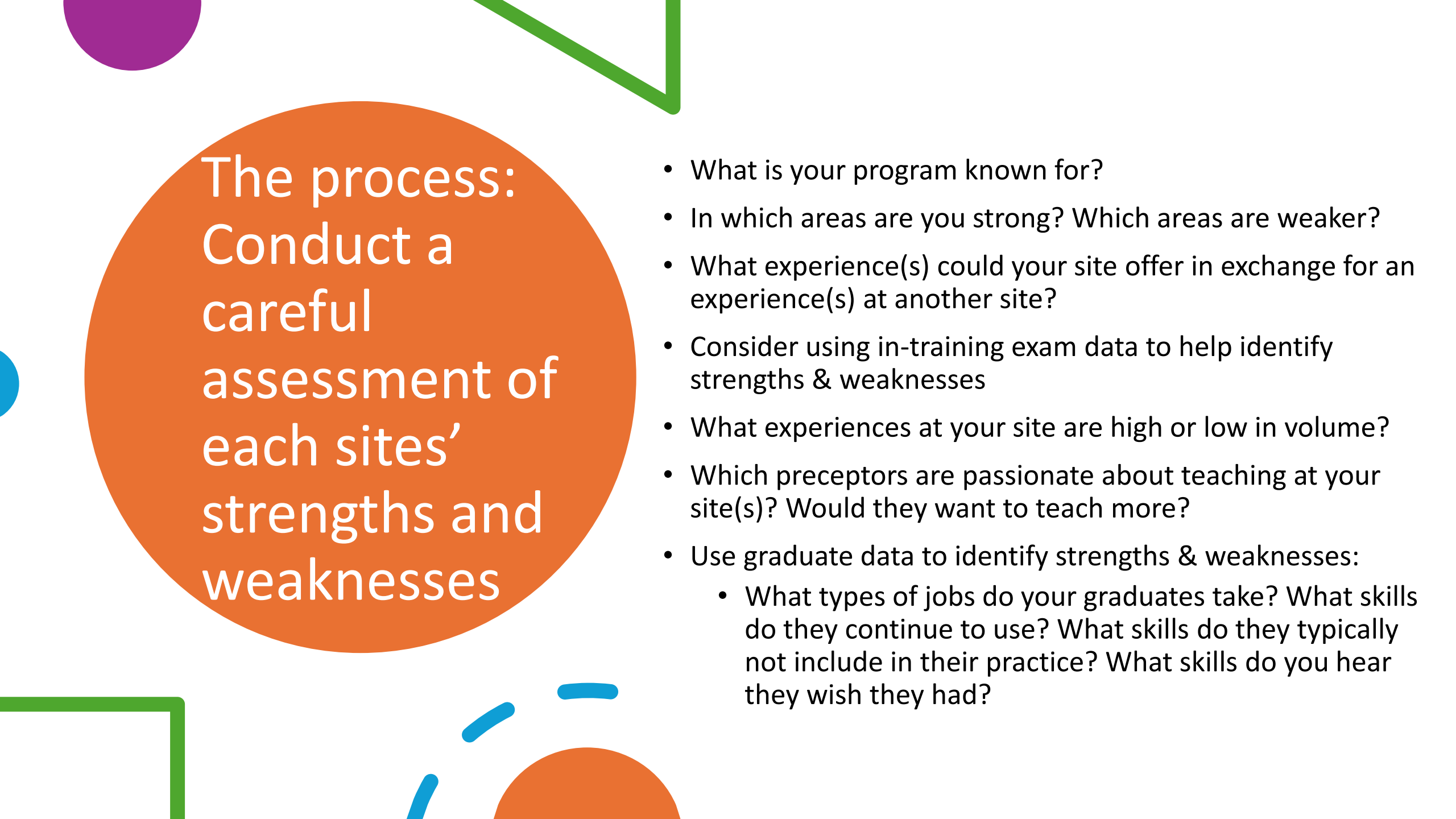
- Identify unique strengths and weaknesses among each of your educational sites.
 - Advocate for collaboration between your training sites.
 - Design curriculum(s) that takes advantage of strengths and improves weaknesses across your training sites.
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Some
examples:
NCFM's Core,
Sterling RTP,
& Wray RTP
experience
collaborations

- Obstetrics:
 - Some rural residents head to Greeley for extra OB
 - Tend to focus on C-sections, more exposure to high-risk pts, & more volume
 - Typically done as a 2 or 4 week experience during R3 year for rural residents. They serve as the senior resident on the OB service in Greeley and if pursuing surgical OB, get scheduled for more OR time.
- Elective time:
 - GI endoscopy in Sterling and/or Wray
 - Inpatient medicine in Greeley
 - Inpatient pediatrics in Greeley
 - ENT experience in Greeley
 - Ortho experience in Greeley and/or Sterling
 - Other specialty experiences in Greeley
- Track meetings:
 - NCFM runs several tracks (optional focused curriculum) in Greeley:
 - Advanced Maternity Track, Global Health Track, Leadership Track, Wholistic Care Track, Hospitalist Medicine, Sports Medicine Track
 - All tracks are open to rural residents and meetings often take place so they're able to join in person

More examples: NCFM's Core, Sterling RTP, & Wray RTP experience collaborations

- Required curriculum:
 - Rural Rotations:
 - The state of Colorado requires all FM residents to do a rural rotation.
 - Core residents do rural rotations in Sterling (& occasionally Wray)
 - Core residents are integrated into the rural resident schedule
 - ER Rotations:
 - Core residents do 2 weeks of ER in Sterling
 - Trained by ED docs for several shifts per week
 - Pediatrics:
 - All rural residents do inpatient pediatrics and NICU in Greeley
 - Rural residents do 10 weeks of inpatient pediatrics during their R1 year
 - Rural residents do 6 weeks of NICU during R1 and/or R2 year
 - Benefits are of course educational but there's also a great social benefit
- Didactics:
 - Didactics are held every Wednesday. Twice per month, they're all afternoon. Rural residents come to Greeley once per month for long didactics & join virtually the other times
 - Again, great educational benefit but also social benefits for the residents.
- Advanced Life Support in Obstetrics (ALSO) courses:
 - ALSO course held in each Sterling and Greeley annually.
 - Faculty & residents from rural programs help teach in Greeley & vice versa



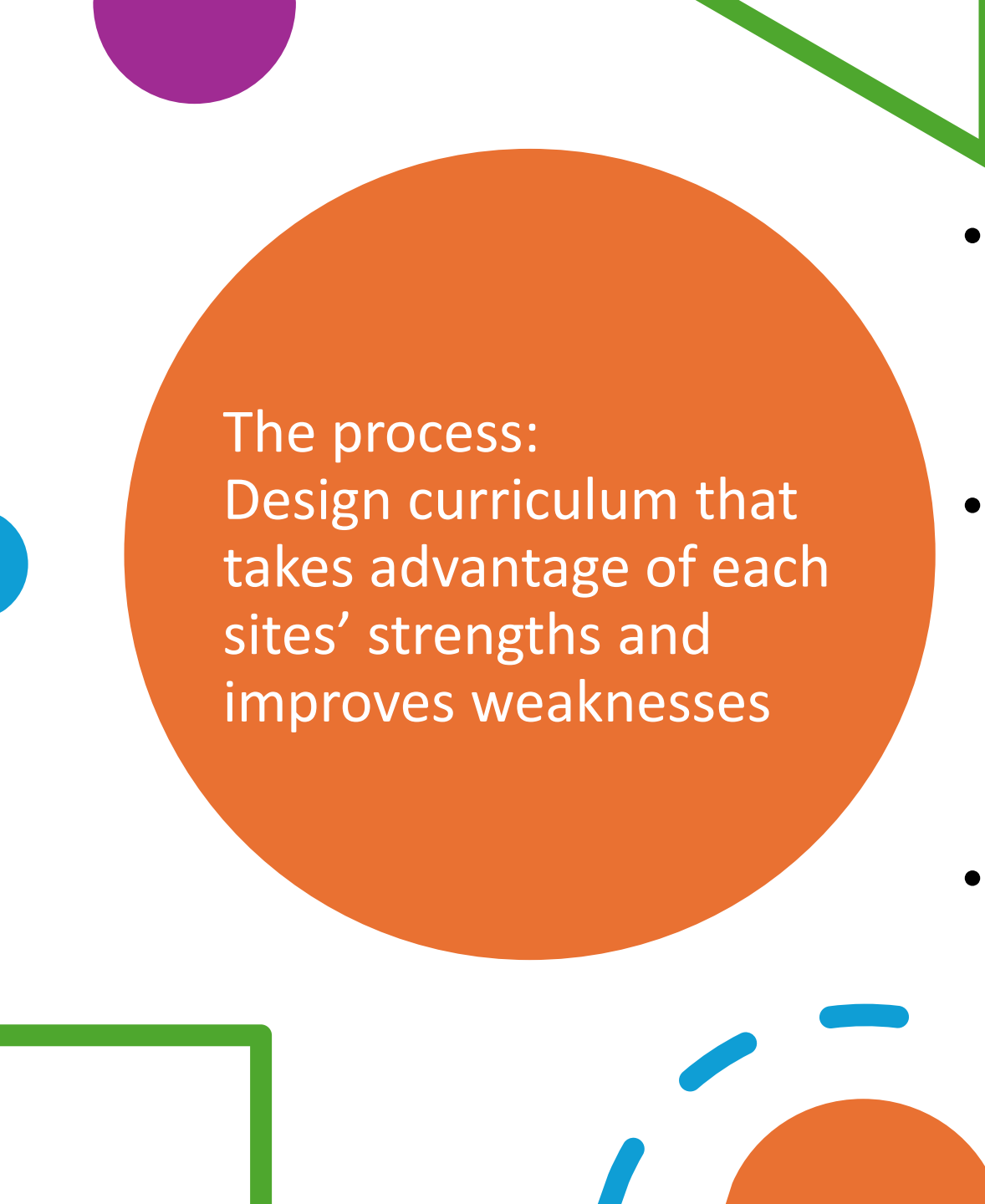
The process:
Conduct a
careful
assessment of
each sites'
strengths and
weaknesses

- What is your program known for?
- In which areas are you strong? Which areas are weaker?
- What experience(s) could your site offer in exchange for an experience(s) at another site?
- Consider using in-training exam data to help identify strengths & weaknesses
- What experiences at your site are high or low in volume?
- Which preceptors are passionate about teaching at your site(s)? Would they want to teach more?
- Use graduate data to identify strengths & weaknesses:
 - What types of jobs do your graduates take? What skills do they continue to use? What skills do they typically not include in their practice? What skills do you hear they wish they had?



The process:
Foster collaboration between
your training sites

- Visit each other
- Communicate often
- Build relationships between residents and faculty
- Consider having a faculty liaison to your program sites to foster this communication and collaboration
- Consider holding combined sessions (faculty development, training courses, didactics, etc.)



The process:
Design curriculum that
takes advantage of each
sites' strengths and
improves weaknesses

- Decide how the experience is done:
 - Elective?
 - Required rotation/curriculum?
 - Optional longitudinal track?
- Decide on the schedule:
 - Total hour requirement
 - Longitudinal—1 to 4 days per month for 3, 6, or 12 months
 - Block format—2 week experience vs. 4 week experience
- Other considerations:
 - Continuity clinic—which site to do it?
 - Housing



Small group brainstorming:
break into small groups & discuss
your specific sites' possibilities

Questions to consider:

- What is your program known for?
- In which areas are you strong? Which areas are weaker?
- What experience(s) could your site offer in exchange for an experience(s) at another site?
- Consider using in-training exam data to help identify strengths & weaknesses
- What experiences at your site are high or low in volume?
- Which preceptors are passionate about teaching at your site(s)? Would they want to teach more?
- Use graduate data to identify strengths & weaknesses:
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Share possibilities
with the large group



Conclusion

- **Assess your program for strengths and weaknesses**
- **Work with your various sites and help each other**
- **Develop curriculum that fills any gaps**
- **Leverage strengths across your sites to enhance all residents' training**



Thank you!

Questions?