



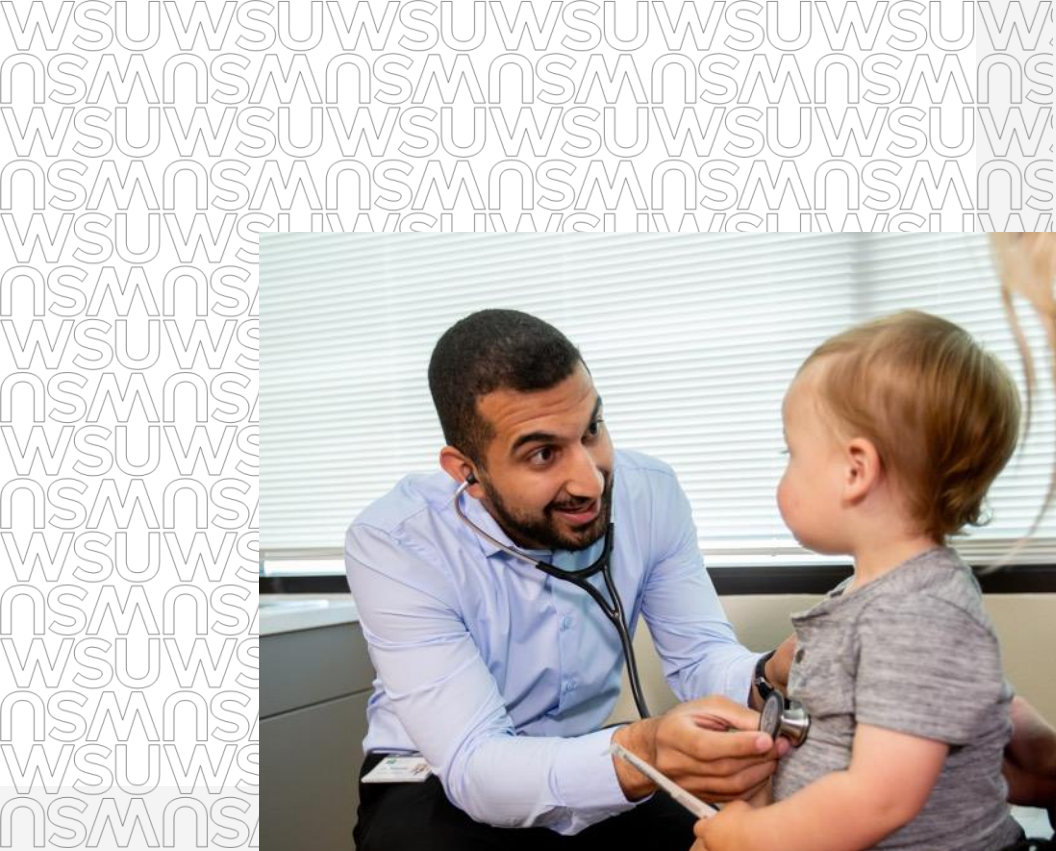
Meeting the Needs of Washingtonians

Training Residents in Rural Washington through Program Development and Rural Rotations

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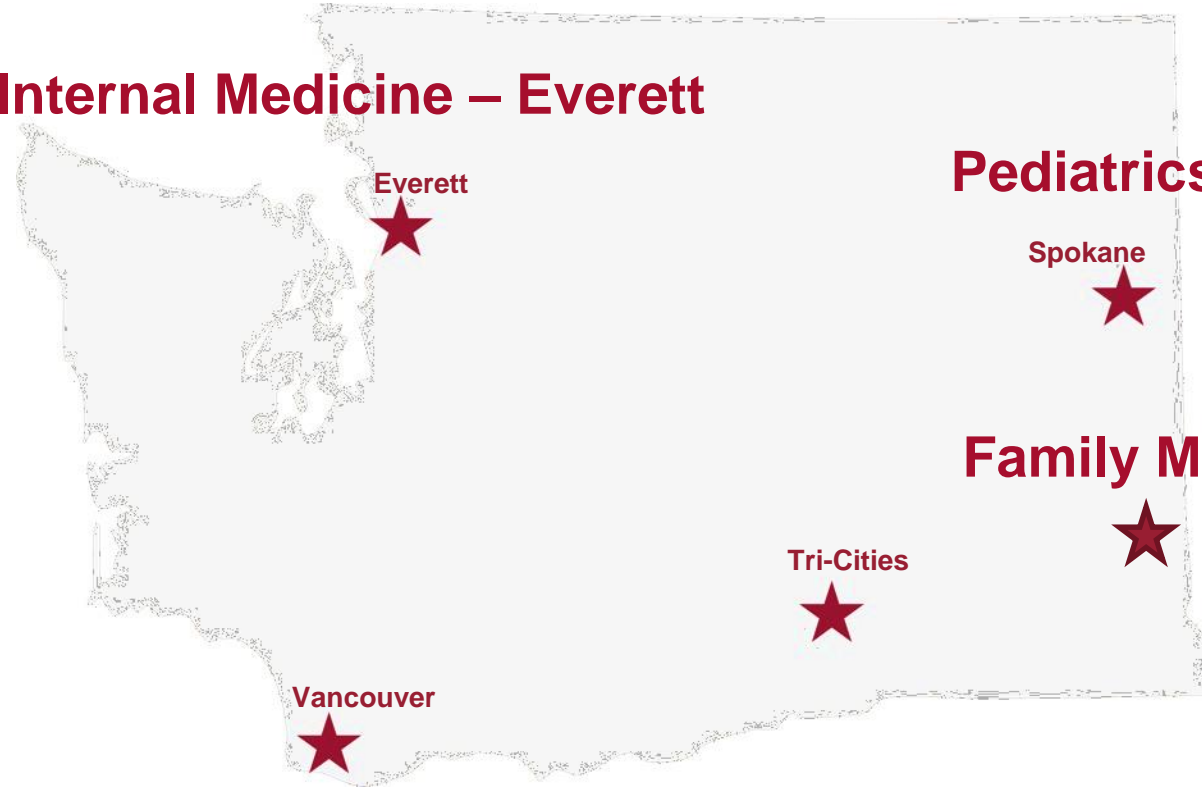


Why are we here?



Washington State University College of Medicine

Internal Medicine – Everett



Pediatrics – Spokane 2024

Family Medicine – Pullman



**But really,
why are we
here?**



One more birthday





Rural Access

The Internal Medicine residency of WSU started in 2021 with a primary mission:

- **to prepare highly skilled general internists for the underserved and rural communities of Washington.**



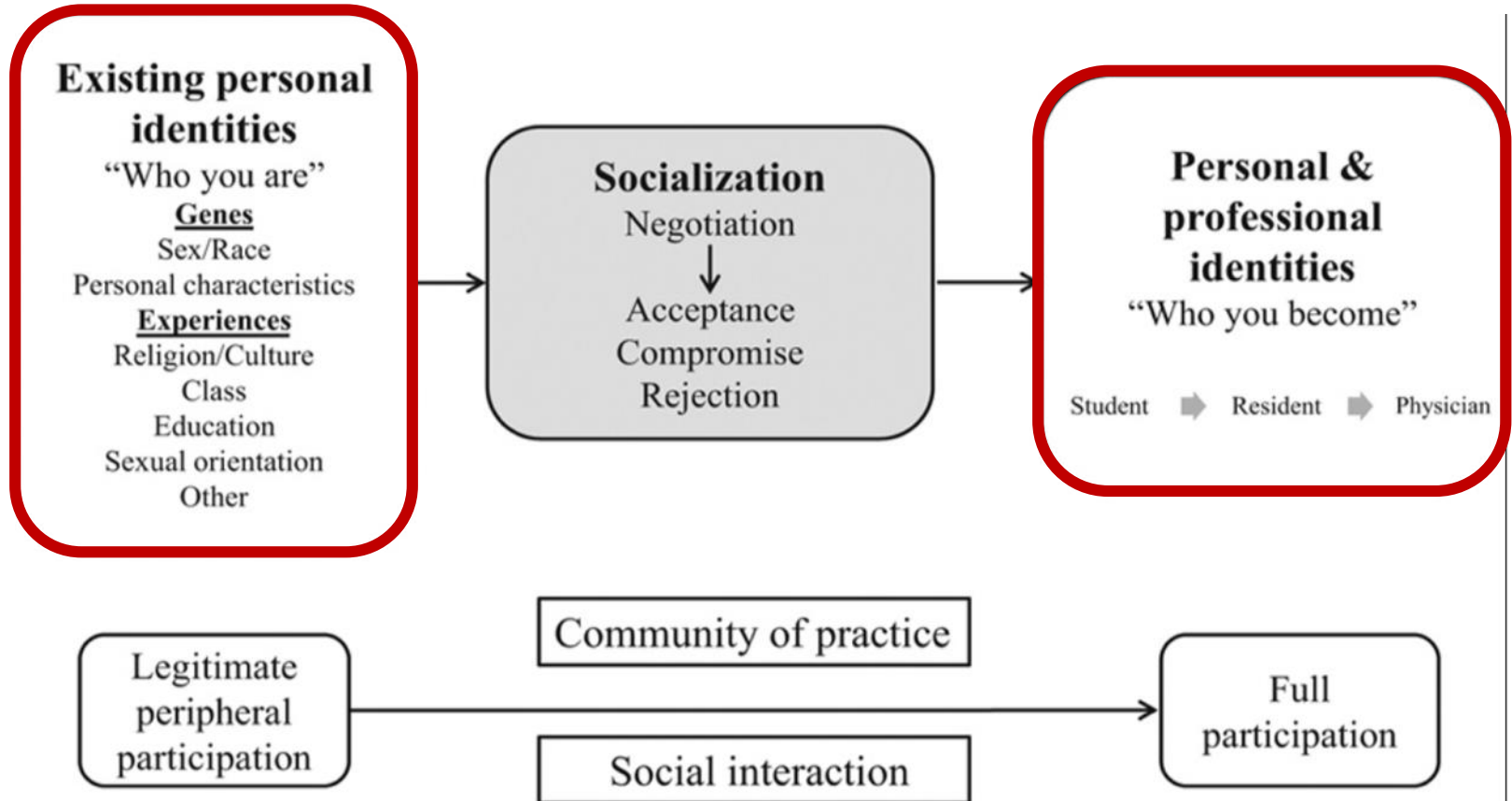
Professional Identity Formation

- Professionalism in Medicine = a set of values, behaviors and relationships that underpins the trust the public has in doctors
- Professional Identity = A physician's identity is a representation of self, achieved in stages over time during which the characteristics, values, and norms of the medical profession are internalized, resulting in an individual thinking, acting, and feeling like a physician.
- The desired educational goal is the development of a value system and a unique perception of self, including personal attributes and roles, that culminate in expressions of specific behaviors or pursuits within a social community.



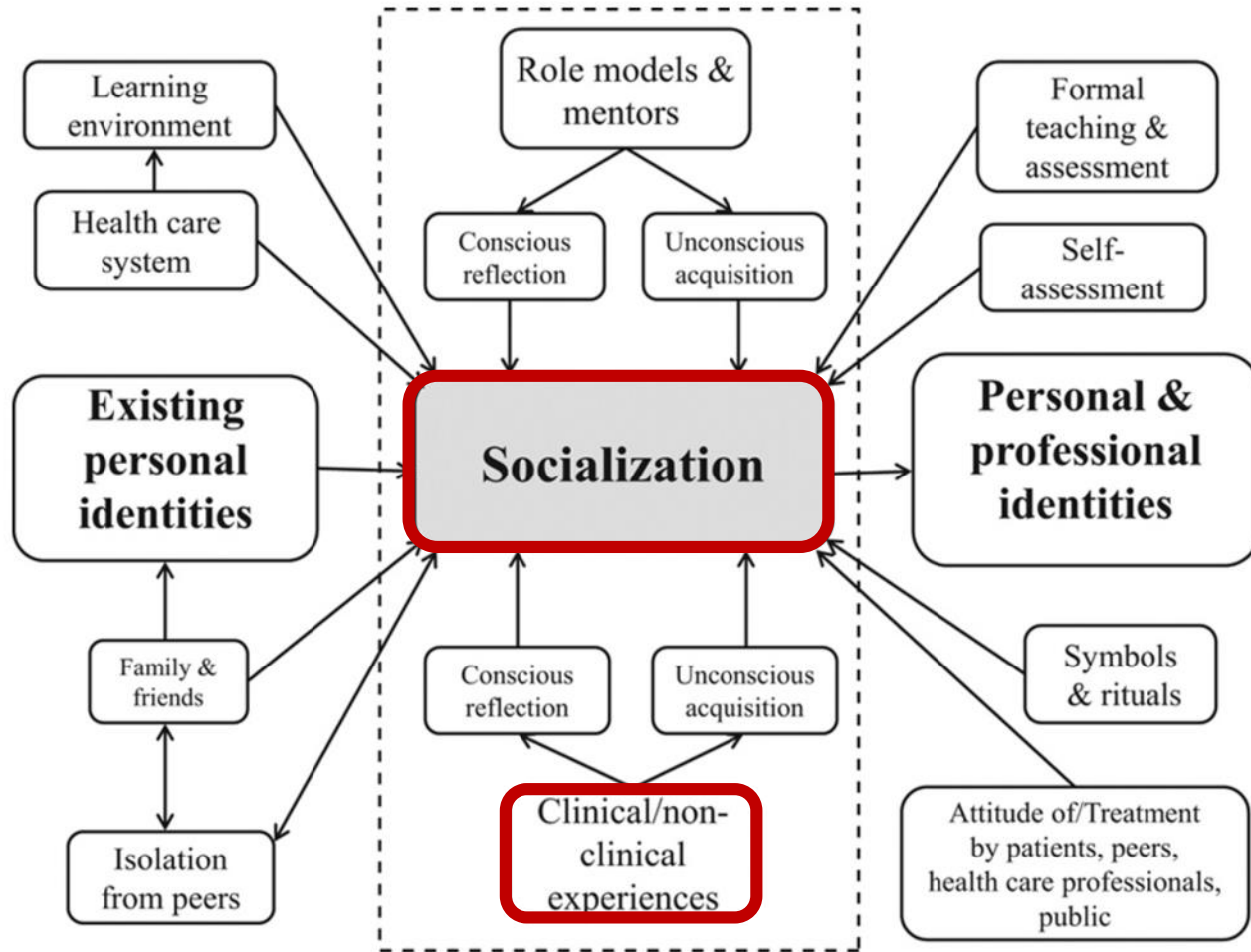


Professional Identity Formation





Professional Identity Formation





Professional Identity Formation

- Professionalism in healthcare is not only acquisition and application of a body of knowledge and technical skills, but also involves developing moral and ethical values towards a shared commitment to healing.
- Engaging with and outreach to the community at the grassroots level is invaluable to developing professional identity.



WSU Internal Medicine approach to Professional Identity Formation

- Structured Outreach
- Advocacy Curriculum
- Service events
- Rural and Underserved Experience



Integrated Community Outreach



- VA homeless outreach
- Everett Gospel Mission
- Lahai Health
- Mercy Watch street medicine
- Residency run food and clothing drives, meal distribution
- Hygiene Kits





RURAL EXPERIENCES

- Rotations during the 2nd and 3rd years
- Network to support rural physicians
- Residents rotate in outpatient clinics and critical access hospitals
- Experience what it is like to live and work in a rural environment





Ilwaco, WA



**Rural community
on the water**



2

Outreach
clinics

4

Weeks
during the
second
year

1

Resident
per
block



Furnished housing
next to the hospital

Opportunity for
alternative
experience if
unable to travel



Pullman, WA



- Rural College Town, surrounded by endless farmland.



Pullman Regional Medical Center

- Critical Access Hospital
- Supervise Family Medicine 1st years





Whitman Hospital and Clinics

Colfax, WA

Tekoa, WA





Tulalip Health Center



Split Continuity Clinic Model





Key Considerations

- GME Funding
- Developing Partnerships and assessing the goals of the site
- Feasibility of rotation: preceptor pool and number, structure of the rotation (inpatient/outpatient/ER)
- Hospitality: “Moth-gate”
- RTT vs Selective Experience: delivering on your goal/promise
- Cultural Sensitivity: both ways. Perception vs Reality.
- Residents who can't travel, developing alternative experiences





Feedback from Learners

- “Pullman was a good experience overall. The ancillary staff at the hospital was excellent and showed how functional ancillary staff can make a big difference in patient care beyond what the physician can do.”
- “It was good to see how a hospitalist practices in a more rural environment.”
- “Nice to teach FM interns, some interesting cases, wonderful team at hospital / clinic, very welcoming”
- “Provided a good understanding of the resources available at rural hospitals.”
- “The ability to get differing perspectives of medicine and see and understand the triage and planning that is needed to work in a CAH.”



Next Steps

- Rural elective in Yakima
- Outreach rotation
- Rural Training Tract

