

THE CONTINUUM OF RURAL MEDICAL EDUCATION

RTT COLLABORATIVE ANNUAL MEETING 2018

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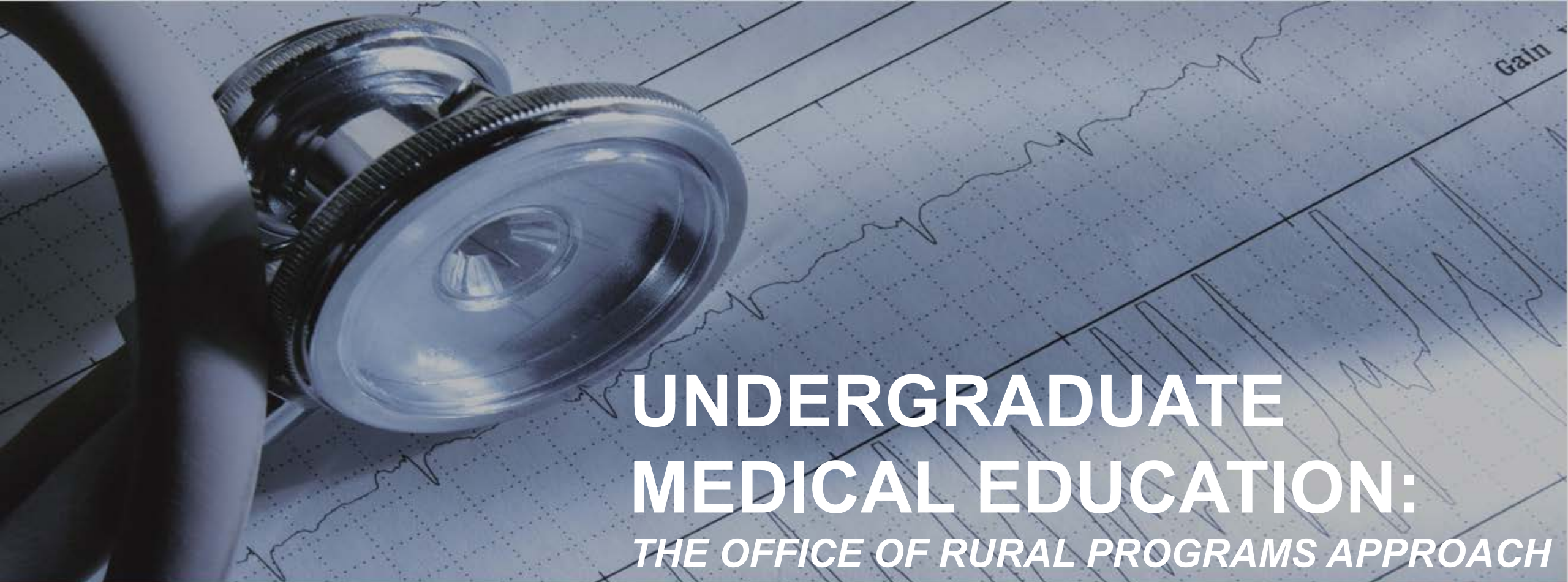
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UNDERGRADUATE MEDICAL EDUCATION:

THE OFFICE OF RURAL PROGRAMS APPROACH

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UNIVERSITY OF WASHINGTON, SCHOOL OF MEDICINE
RTT COLLABORATIVE ANNUAL MEETING 2018



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OFFICE OF RURAL PROGRAMS

WHY RURAL MEDICINE?



Tonasket , Washington



Leaving Tonasket....



U.S. NEWS AND WORLD REPORT RANKING



- #1 in Rural Medicine for 26 years

- #1 in Family Medicine for 26 years

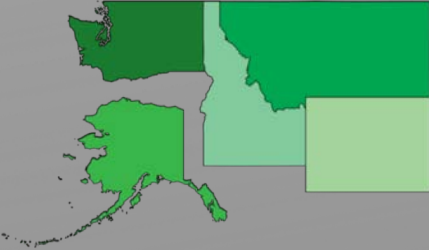
Finding Elizabeth Stuhlmiller



OFFICE OF RURAL PROGRAMS



- Provides medical students with education and training for careers in rural and underserved healthcare in the northwest region of the U.S.



- Partnership with WWAMI campuses
- Acts as central hub for all WWAMI campuses



- 3 programs under one leadership: RUOP, TRUST, and WRITE

RURAL UNDERSERVED OPPORTUNITIES PROGRAM (RUOP)

- 6 week curriculum
- Clinical immersion
- Community medicine project
- Over 2200 students completed RUOP



WWAMI Rural Integrated Training Experience (WRITE)

- 22 or 24 week clinical clerkship
- Provides both ambulatory and hospital experience
- 36 WRITE sites
- 67% of WRITE graduates match into primary care (FM, IM, Peds)

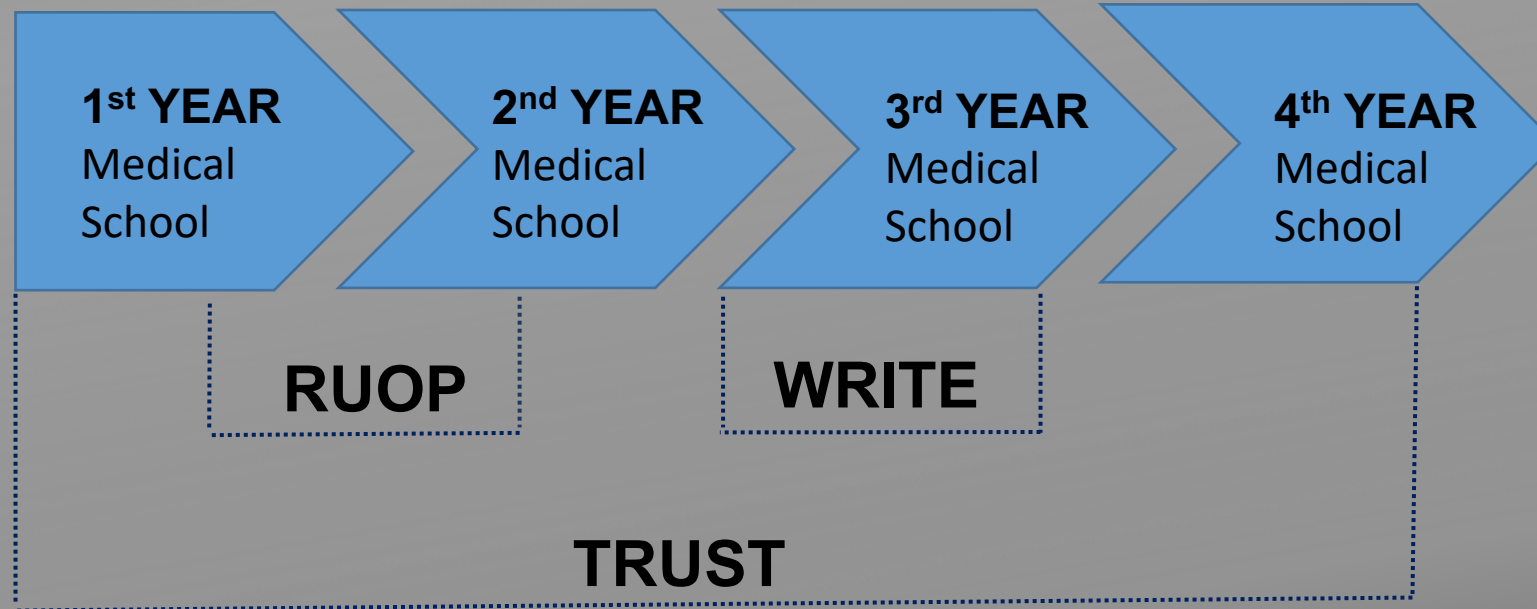


Targeted Rural Underserved Track (TRUST)

- Targeted separate admissions process
- Links other UWSOM programs such as Underserved Pathway, RUOP and WRITE
- Key clinical programs occur in continuity community
- Works with communities to identify and promote their needs and resources

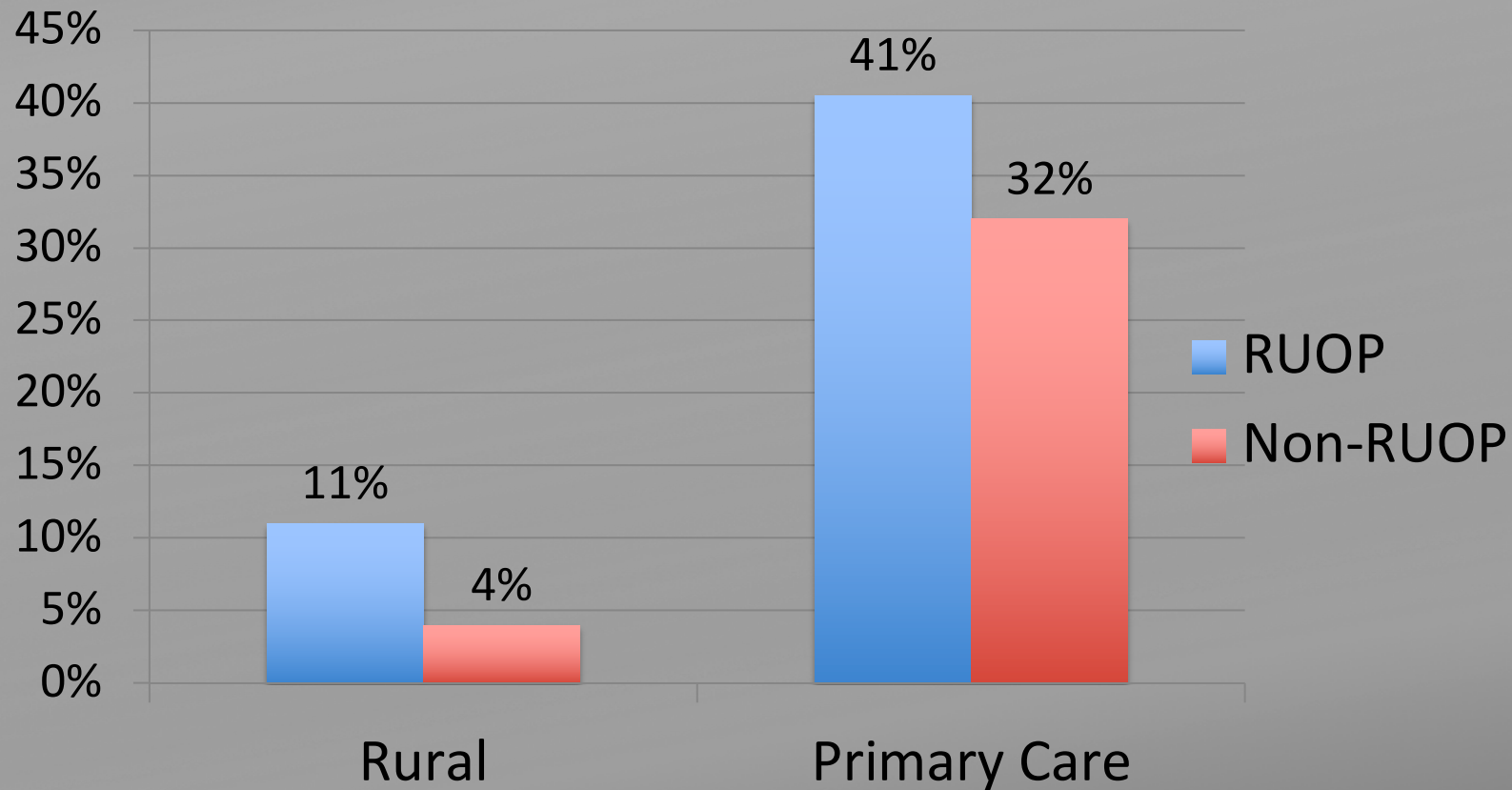


RURAL PROGRAMS TIMELINE



RUOP WORKFORCE OUTCOMES

UWSOM Graduates from 2004 - 2013



2016 WRITE Graduate Practice Outcomes

190

Total WRITE graduates
that have matched into residencies

67%

Selected **Primary care** residencies

42%

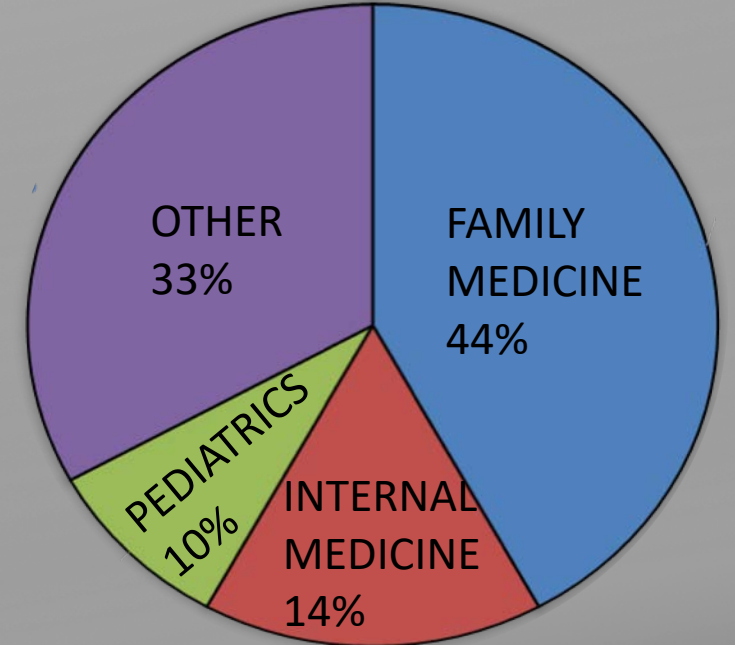
Family Medicine

16%

Internal Medicine

9%

Pediatrics



2016 WRITE Graduate Practice Outcomes

101

WRITE graduate physicians in the workforce

68%

WRITE graduates practicing **Primary Care Specialty**

35%

Returned to **Rural Areas** to practice

66%

WRITE graduates in rural practice are **Family Medicine Physicians**

15%

WRITE graduates practicing in WRITE communities and are teaching the next generation of WRITE students

*****Note*****

- Rural is defined as an area with a Rural Urban Commuting Area (RUCA) score of 4 or greater*



2017 TRUST OUTCOMES

64

- TRUST students have graduated

72%

- Primary Care (FM, IM, & Peds)

41%

- Family Medicine

9.5%

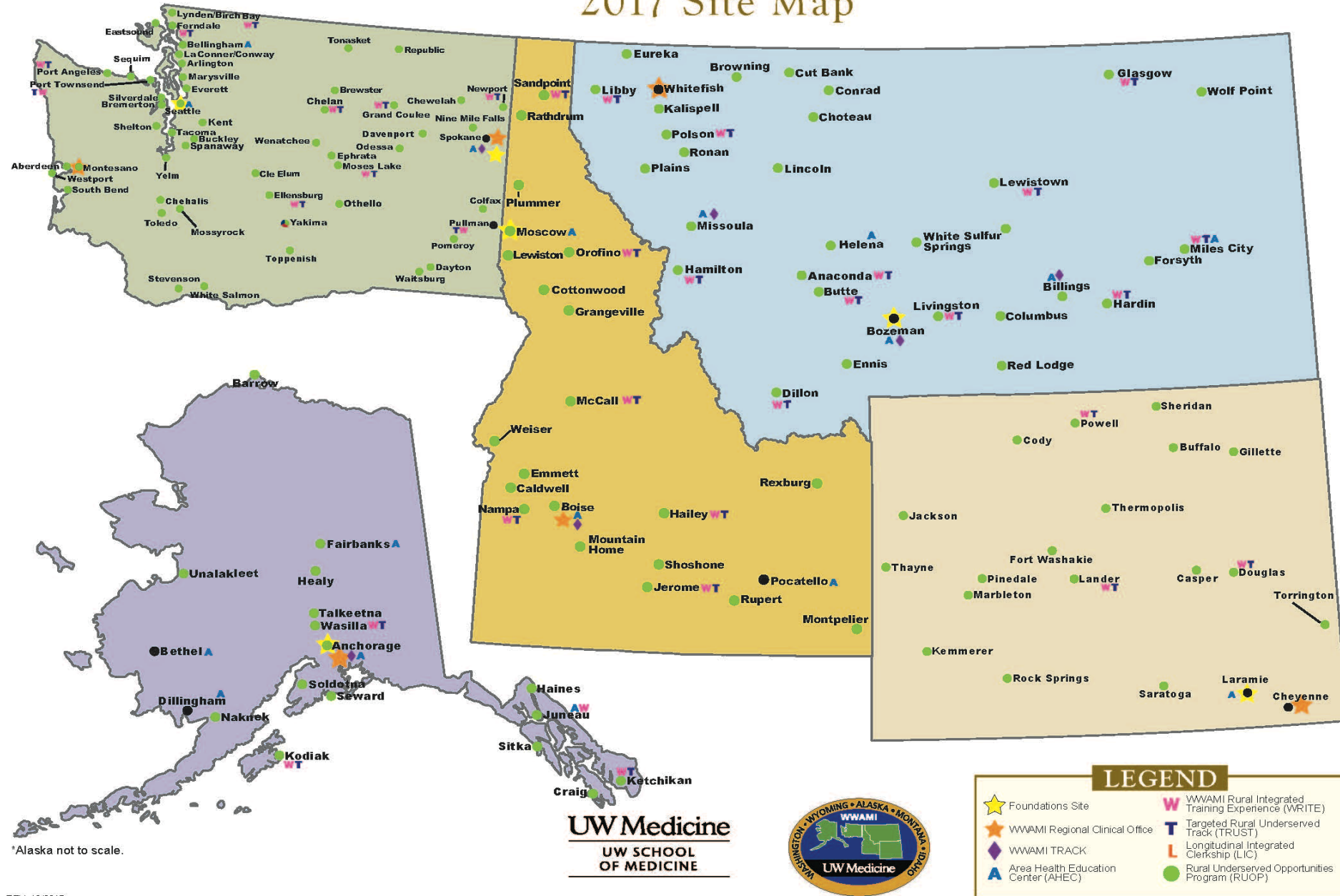
- General Surgery

28%

- Non primary care specialties
• (OBGYN, Psych, Gen Surg, Ortho)

RURAL PROGRAMS

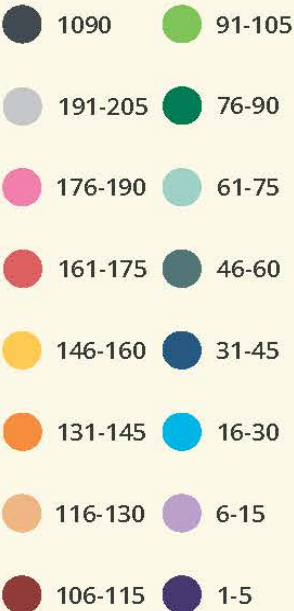
2017 Site Map



Graduates from the University of Washington School of Medicine Practicing in Washington

UW School of Medicine graduates provide medical care to communities across Washington state. This map shows the number of UW-trained physicians practicing in Washington communities.

*Numbers of UW-trained
physicians in practice
per community*



Where are they now?



RURAL-BASED GRADUATE MEDICAL EDUCATION in EASTERN WASHINGTON from 1985-2018

RTT Collaborative Annual Meeting 2018

Robert K. Maudlin, Pharm.D.

Designated Institutional Official

Associate Director of Medical Education

Providence Sacred Heart Medical Center

Spokane Teaching Health Center



FAMILY MEDICINE GME from 1985 - 1990

- **Family Medicine Residency Spokane (6-7 residents/yr)**
 - **Goal was to train, place and maintain graduates in rural communities throughout the Northwest**
 - **Curriculum emphasized OB, Emergency Medicine, Acute Care Medicine, Surgery, Procedures and 2 months in rural sites**
 - **50+% of graduates practiced in rural communities in WWAMIO**
 - **Why only 50%?**
 - **Training was conducted in urban Spokane**
 - **Non-Family Physicians were the primary teachers and role models**
 - **Residents & families became comfortable living in Spokane**
 - **Became established within the urban medical community**



FAMILY MEDICINE GME from 1985 - 1990

► WHAT TO DO TO ENSURE PROGRAM'S GOALS

- **Conduct residency training largely in a rural community**
- **Utilize the 1-2 model and get the ACGME to approve an “RTT”**
- **Rural Family Physicians became the primary faculty & role models**
- **Base residency in an established rural clinic and utilize a rural hospital for inpatient training**
- **Four RTTs were established from among 17 sites visited:**
 - **Colville, Goldendale, Ellensburg and Omak WA began training residents in the RTT in 1987**
 - **Subsequently, three sites were closed and Colville remains a model for rural-based GME**



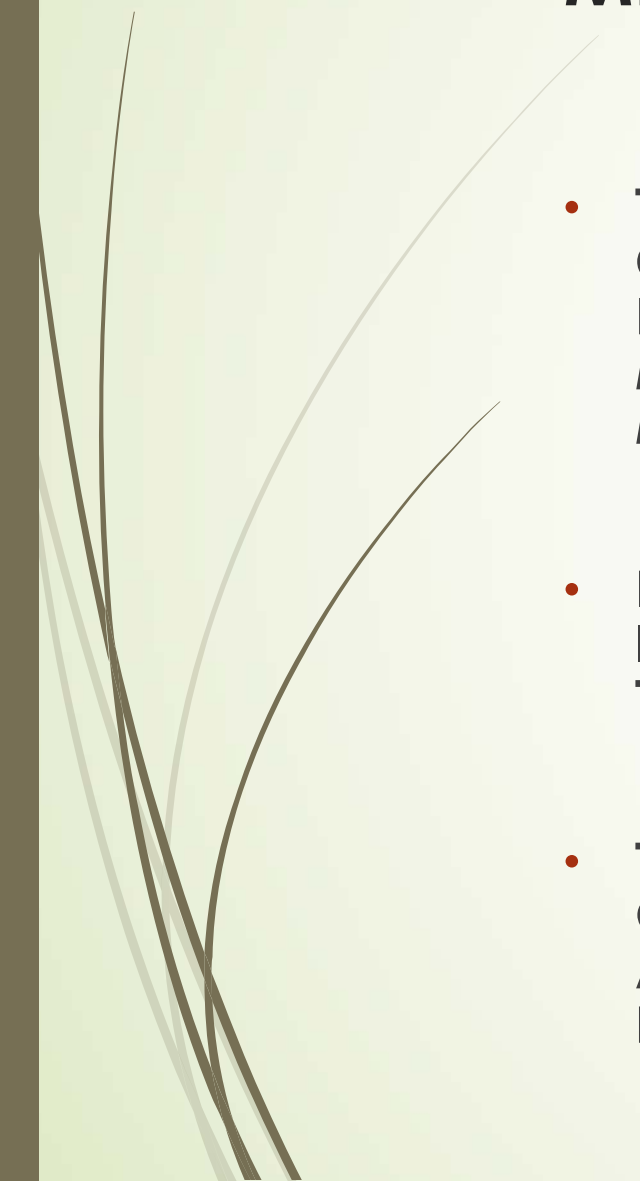
FAMILY MEDICINE SPOKANE RURAL TRAINING TRACK (1987-2018)

➤ GRADUATE OUTCOMES:

- **44 Graduates: Colville (29), Goldendale (10), Omak (3) and Ellensburg (2)**
- **39 Graduates (88.6%) Practice in WWAMIO: WA (24), OR (8), AK (3), ID (2), MT (2), WY (0) and Other (5)**
- **34 Graduates (77.3%) Practice in Rural Communities (10 in Colville)**



HRSA TEACHING HEALTH CENTER GRADUATE MEDICAL EDUCATION PROGRAM (2014-present)

- THE SPOKANE TEACHING HEALTH CENTER (STHC) IS AN EDUCATIONAL CONSORTIUM (PROVIDENCE HEALTHCARE, WSU, and the EMPIRE HEALTH FOUNDATION) BECAME THE SPONSORING INSTITUTION FOR THE FAMILY MEDICINE, RTT, INTERNAL MEDICINE, TRANSITIONAL YEAR AND SPORTS MEDICINE RESIDENCY AND FELLOWSHIP PROGRAMS
 - ENABLED BOTH FAMILY MEDICINE & INTERNAL MEDICINE PROGRAMS TO INCREASE THE NUMBER OF RESIDENTS FROM 7/YEAR TO 10/YEAR. A TOTAL OF 18 NEW RESIDENTS AFTER 3 YEARS.
 - THE STHC CLINIC IS AN INTEGRATED COLLABORATIVE CARE CLINIC AND GME MODEL FOR FAMILY MEDICINE, INTERNAL MEDICINE, PSYCHIATRY AND SPORTS MEDICINE PROGRAMS AND INCLUDES MEDICAL, NURSING, PHARMACY, SOCIAL WORK AND PT/OT STUDENTS
- 



5-YEAR GME PLAN (2015-present)

- **EVALUATE & REVISE OUR GME BASED ON REGIONAL PHYSICIAN WORKFORCE NEEDS WITH FISCAL RESPONSIBILITY A PRIORITY:**
 - **ESTABLISH A NEW FAMILY MEDICINE RESIDENCY BASED IN A HOSPITAL WITH NO PRIOR GME HISTORY WITH THE GOAL OF STARTING IN JULY 2019,**
 - **ESTABLISH A NEW RURAL TRAINING PATHWAY AS A PART OF THE NEW FAMILY MEDICINE RESIDENCY NOTED ABOVE IN PULLMAN WA,**
 - **ESTABLISH A NEW PEDIATRICS RESIDENCY WITH THE GOAL OF A 2020 START-UP AT THE EARLIEST,**
 - **INCREASE THE RESIDENT ENROLLMENT IN THE PSYCHIATRY RESIDENCY FROM 3 PER YEAR TO 4 PER YEAR, AND**
 - **START A CHILD & ADOLESCENT PSYCHIATRY FELLOWSHIP IN 2019 WITH 2 FELLOWS PER YEAR.**



GRADUATE MEDICAL EDUCATION ADVOCACY

- WE ARE FORTUNATE TO HAVE ESTABLISHED RELATIONSHIPS WITH:
 - CATHY McMORRIS RODGERS (HOUSE OF REPRESENTATIVES, 5TH DISTRICT)
 - PATTY MURRAY AND MARIA CANTWELL (SENATE)
 - OTHER MEMBERS OF THE HOUSE OF REPRESENTATIVES AND STRONG SUPPORTIVE HEALTH CARE LEGISLATIVE ADVISORS
 - HOPE WITTENBERG (GOVERNMENT RELATIONS, COUNCIL OF ACADEMIC FM)
 - AMERICAN ASSOCIATION OF TEACHING HEALTH CENTERS LEADERSHIP
 - PROFESSIONAL and EXPERIENCED LOBBYISTS
 - UWSOM and WSU GME & UME LEADERS
- HRSA THCGME REAUTHORIZATION and IMPLEMENTATION FY18/FY19/?
- RURAL PHYSICIAN WORKFORCE PRODUCTION ACT

COUNTRY DOCTOR RACKS UP MILES MAKING HIS ROUNDS (Spokesman Review 2/25/2018)





UWSOM FAMILY MEDICINE RESIDENCY NETWORK

Frederick Chen, M.D., MPH

*UNIVERSITY OF WASHINGTON SCHOOL OF MEDICINE
RTT COLLABORATIVE ANNUAL MEETING 2018*



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The WWAMI Network comprises 29 family medicine residency programs in Washington, Wyoming, Alaska, Montana and Idaho. The Network exists to promote excellence in family medicine residency education, provide academic leadership, and to respond to societal needs for family physicians.

WWAMI Programs Growth to Date

From the mid-1990s to 2010, the number of family medicine residency programs in WWAMI was a constant 16. These “original” WWAMI programs opened between 1969 and 1997.

Since 2010 we have added 6 core programs as well as 4 rural training tracks, a 40 percent increase in programs.

Planned Expansion

Five programs in the region that were started as osteopathic-only programs are now working toward ACGME accreditation.

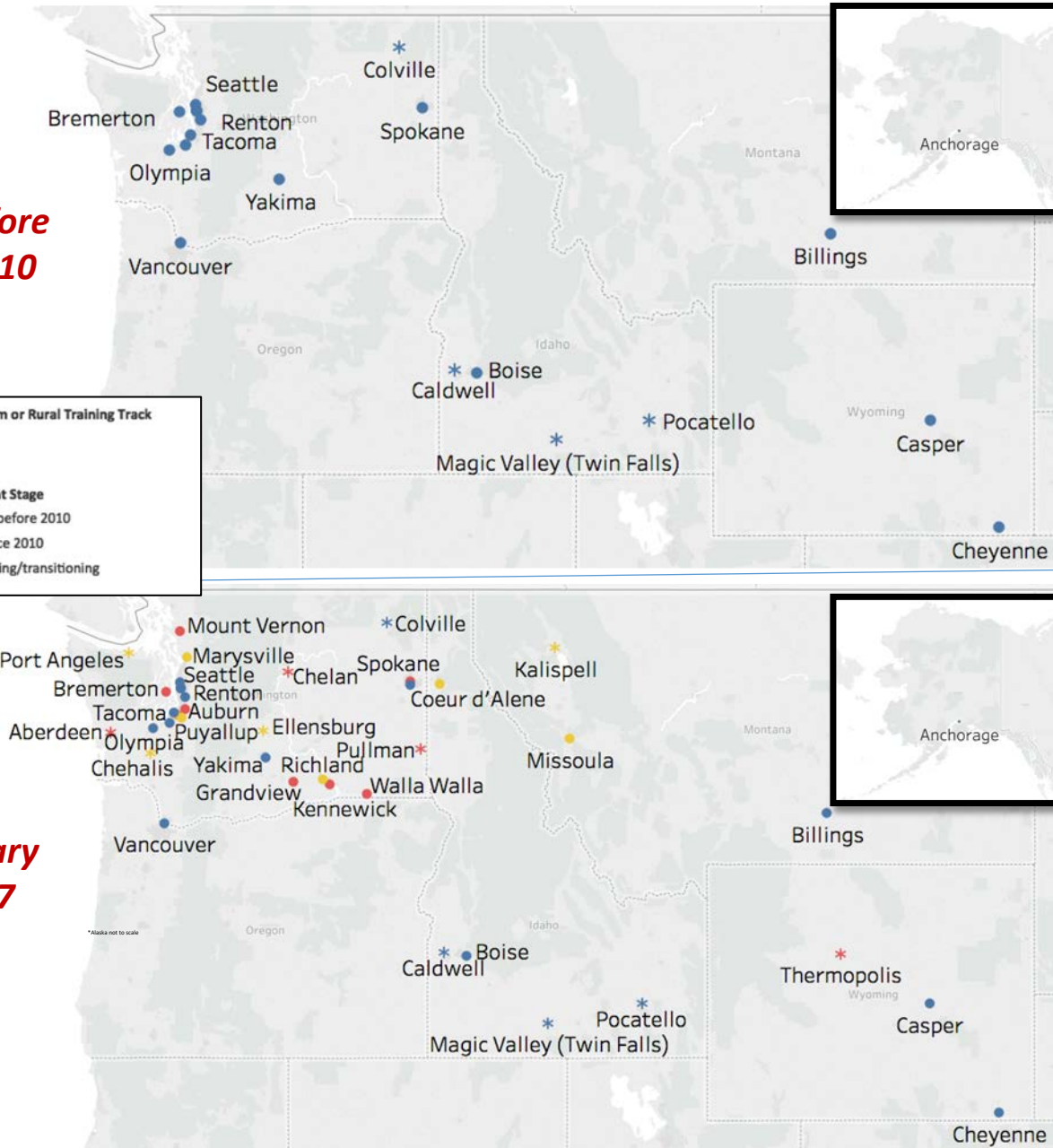
There are also plans to start at least 7 more programs and rural training tracks in communities across WWAMI.

EXPANSION OF THE WWAMI NETWORK

*Before
2010*



*January
2017*



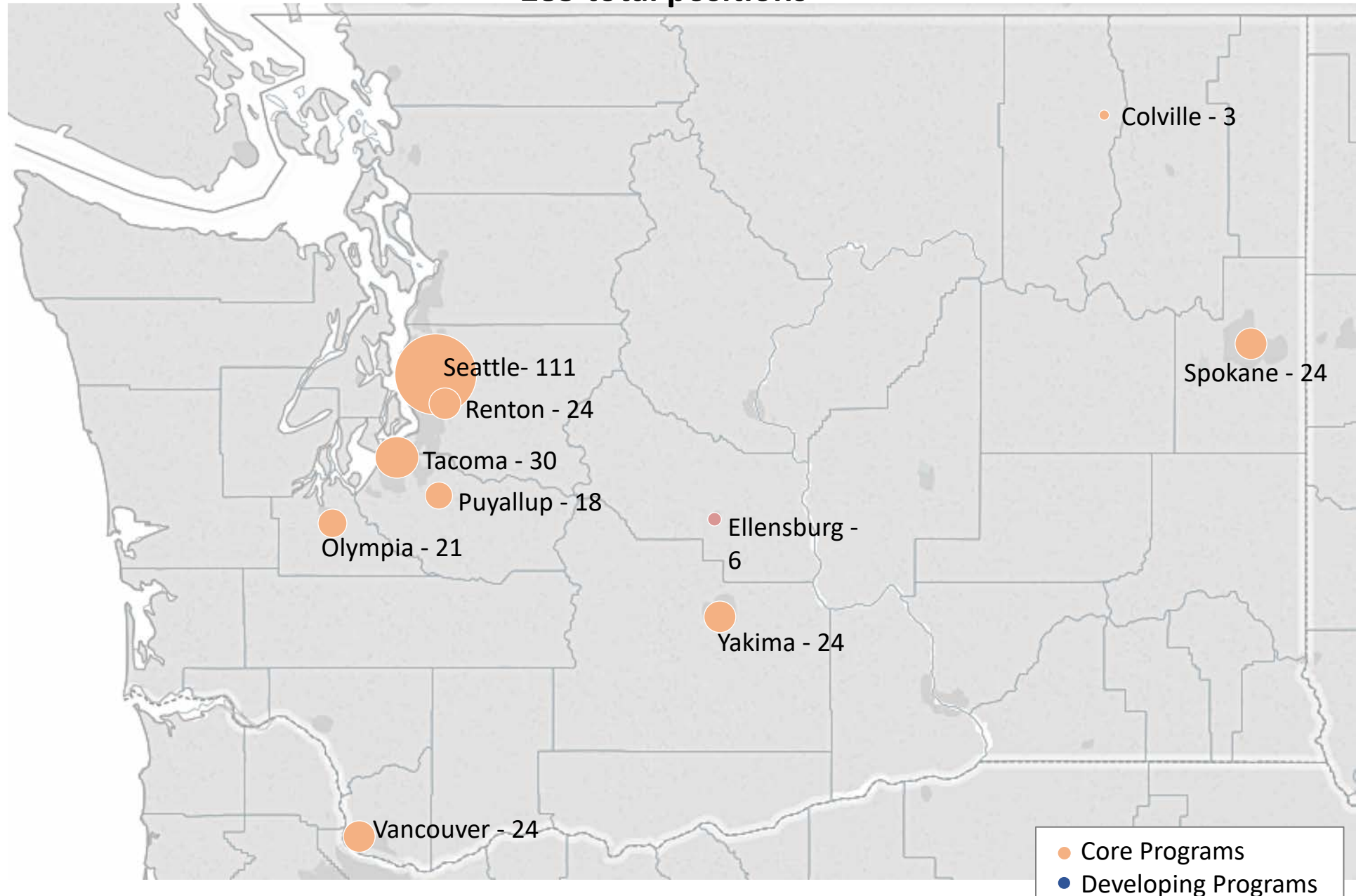
*Alaska not to scale

Washington State Family Medicine Residency Expansion: 2015 to 2022

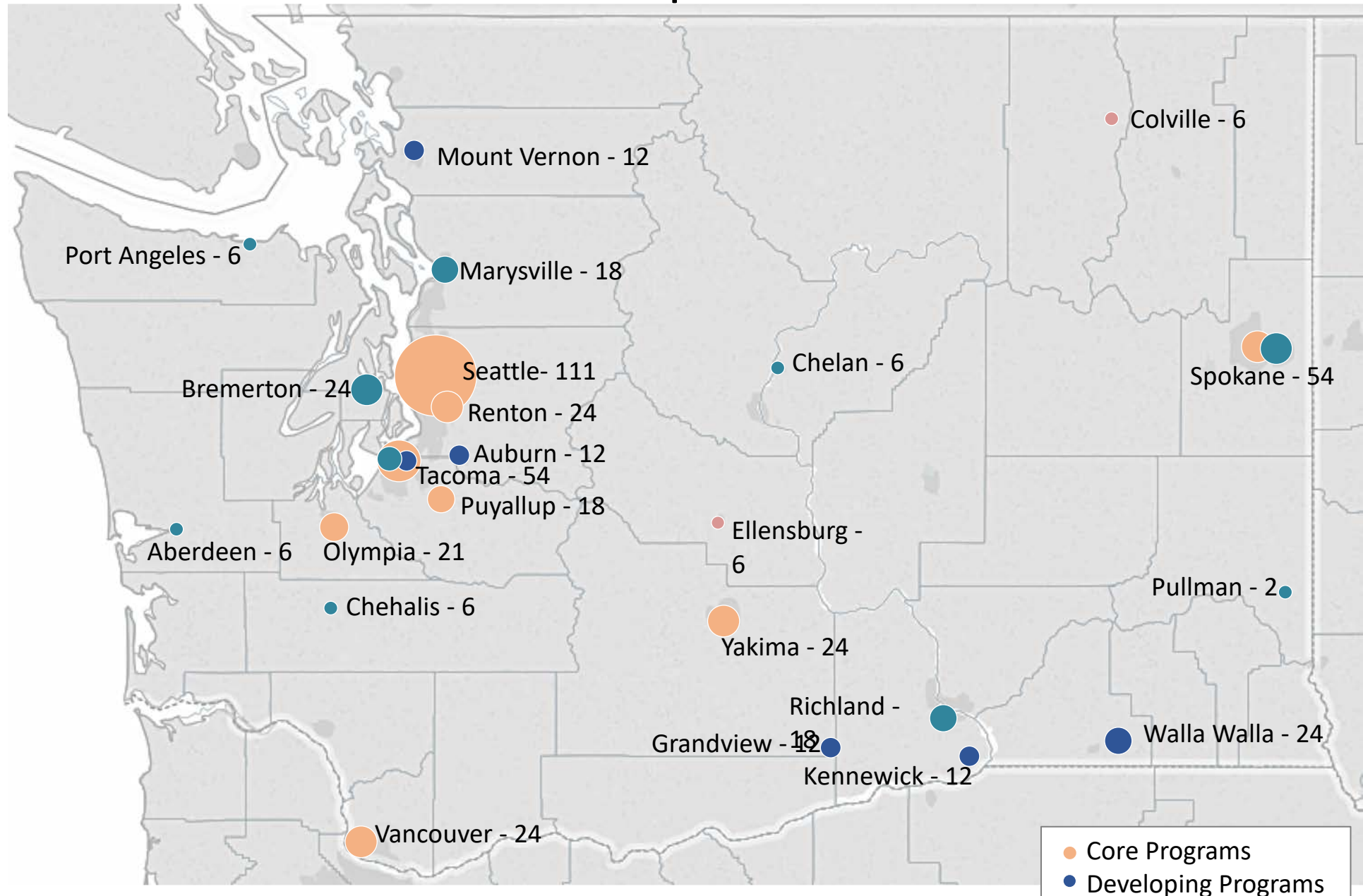
- In 2015 (before ESSHB1485), there were **285** Family Medicine residency positions receiving state funding.
- As of 2022, we will increase to **500** positions receiving state funding
- This is an increase of **215** new residency positions— a 75% increase assisted by new funding provided by the State Legislature in the 2015 Session (8 million in General Funds (SB6052) & 8.1 million in Hosp. Safety Net Funds (HB 2151 for the biennium).
- The total number of new family physicians graduating and entering practice between 2015 and 2022 will be **1,019**.



ACGME Family Medicine Residency Positions Prior to State Funding (FY15): 285 total positions

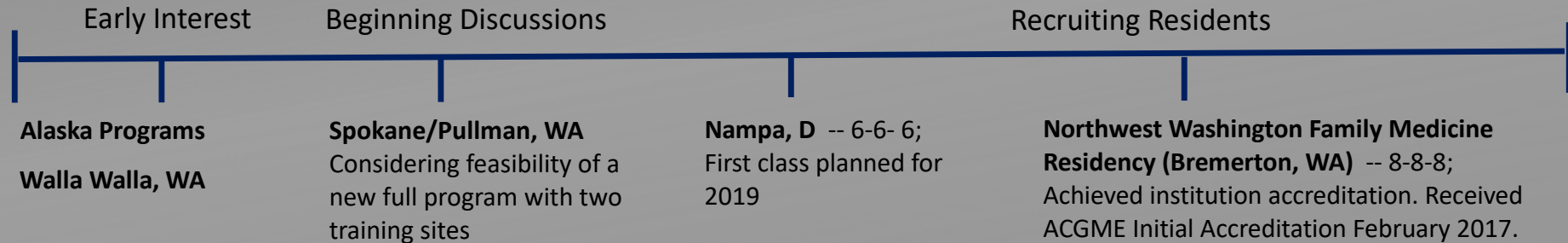


Projected ACGME Family Medicine Residency Positions by FY22: 500 total positions



Programs in Development & Osteopathic Transition

Current Progress, 2016



Newly ACGME-Accredited Programs and RTTs:

- **Sea Mar CHC** (Marysville, WA) -- 6-6-6, will start first class in July 2017. Received ACGME Initial Accreditation March 2016.
- **Port Angeles, WA RTT-1+2** RTT for 2 residents/yr, with the R1 year based at Swedish-Cherry Hill. Received initial ACGME accreditation April 2016. First class planned for July 2017.
- **Centralia/Chehalis, WA RTT- 1+2** RTT for 2 residents/year, with R1 year based at Providence St. Peter in Olympia. Received ACGME Initial Accreditation; started first class in 2016.



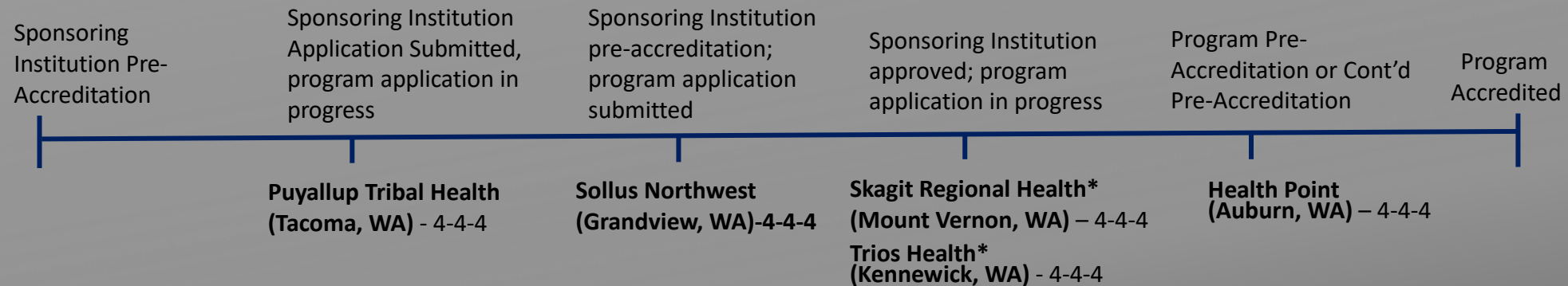
Rural Training Tracks in Development:

Aberdeen, WA – Early exploration for an RTT with the R1 year based at Tacoma Family Medicine.

Chelan, WA – Active exploration for an RTT with the R1 year based at UWFSMR.

Thermopolis, WY – Active exploration for an RTT with core program in Casper.

AOA FM Residencies in the WWAMI Region



New Program Participation in FMRN Offerings

Programs:

New

CHC Tacoma
Kadlec

Developing

Northwest WA
SeaMar
Spokane (Expansion)
Walla Walla

Transitioning
Accreditation

HealthPoint
Puyallup THA
Trios
Skagit
Sollus

Rural Training
Tracks (RTTs)

Chehalis
Chelan
Grays Harbor
Port Angeles

Resources:

Faculty Development Fellowship

CHC Tacoma
Kadlec
SeaMar
Spokane
Puyallup THA

NEW

Faculty Development Certificate Program

Chehalis
Puyallup THA

Monthly Webinars

Kadlec
Spokane
HealthPoint
Trios | Skagit
Sollus
Chehalis

Quarterly Director Development Sessions

All

NEW

Quarterly Accreditation Transition Workshops

HealthPoint
Puyallup THA
Trios | Skagit | Sollus

Chief Resident Leadership Conference

CHC Tacoma
Spokane
HealthPoint
Puyallup THA
Trios | Skagit | Sollus

NEW

RTT Affinity Group

Chehalis
Chelan
Grays Harbor
Port Angeles

NEW

RTT National Collaborative Conference and WWAMI FMRN Meeting

Chehalis | Chelan
Grays Harbor

NEW

RTT Conference Call Meeting: Resident Recruitment

Behavioral Scientist Meeting

CHC Tacoma
Spokane
HealthPoint

Residency Administrators/Coordinators Meeting

CHC Tacoma | Kadlec
SeaMar | Spokane
Chehalis

Residency Administrators/Coordinators Webinars

Kadlec
SeaMar
HealthPoint
Trios | Skagit | Sollus
Chehalis

New Innovations Conference

CHC Tacoma | Kadlec
SeaMar | Spokane
Puyallup THA | Sollus
Chehalis

NEW

FPIN (Scholarship)

Kadlec
HealthPoint
Puyallup THA
Trio
Skagit
Sollus

NEW

Simulation Road Shows

Kadlec
(currently scheduling)

NEW

Osteopathic Road Show

Skagit
Kadlec
CHC Tacoma
(Scheduled)

HRSA Geriatric Grant: Project ECHO, QI (Quality Improvement)

Puyallup THA
Trios | Skagit
Sollus

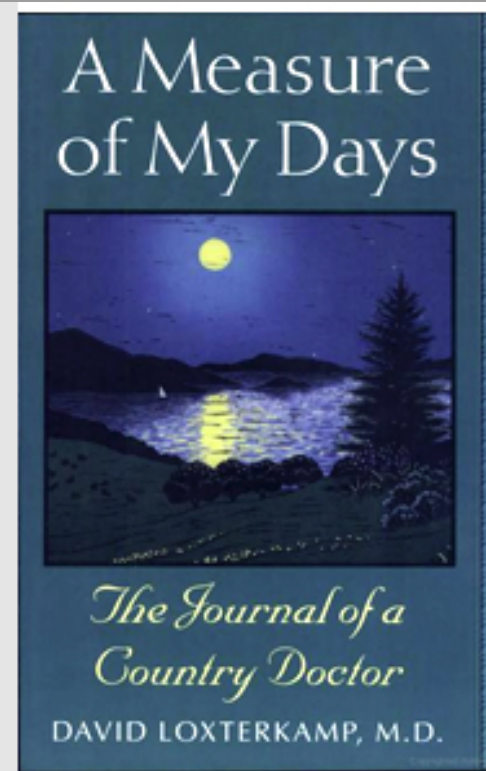
Network Digital Resource Library (NDRL)



- 20 percent Americans in rural
- But less than 10% doctors in rural
- Predominantly family physicians
- Comprehensiveness and scope of care







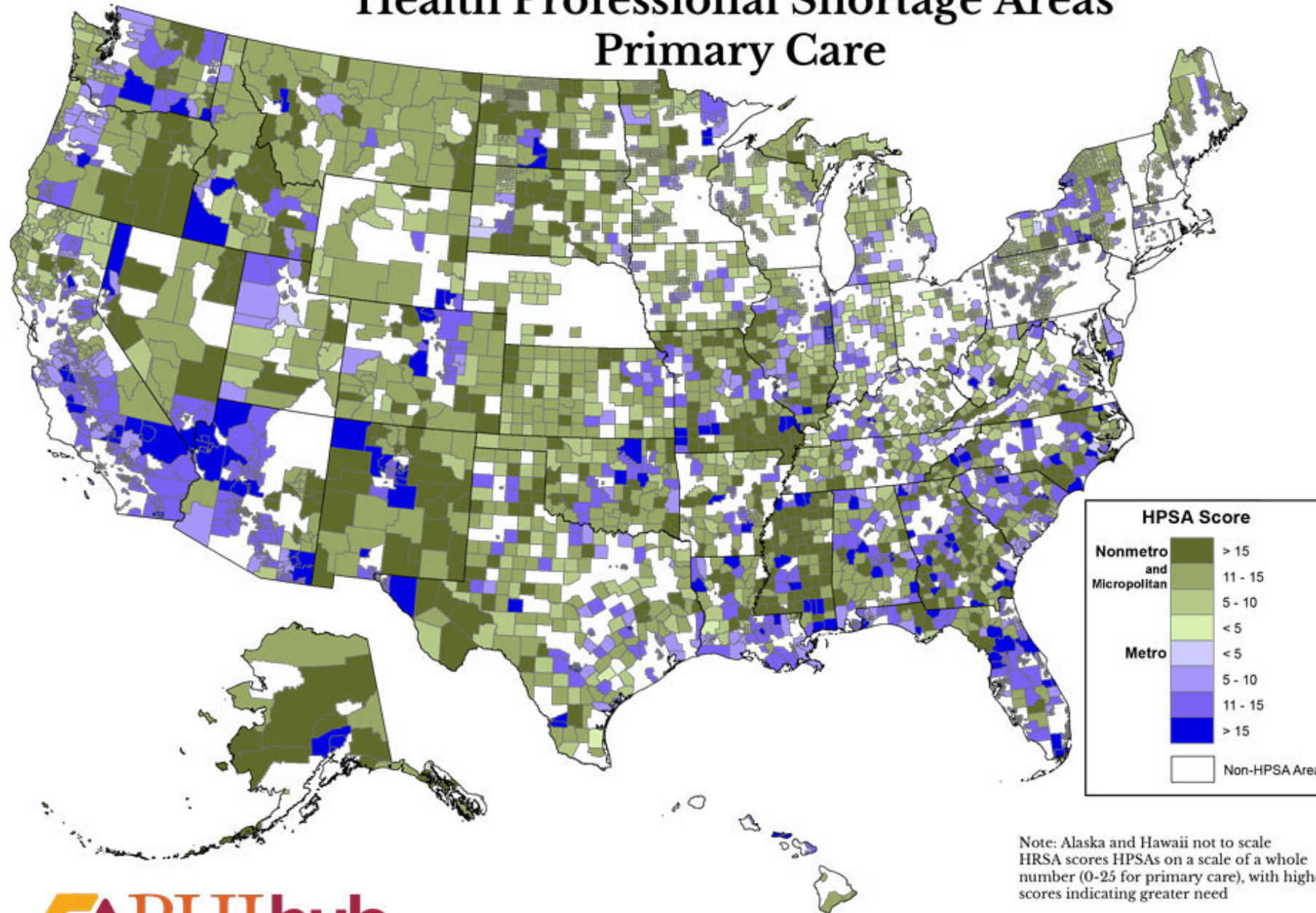
Family Medicine and Rural

- Person – relationships
- Place – geography and community
- Time - continuity
- Geographic access
- Isolation
- Economic decline
- Meth and opioid epidemics

Special populations in rural health



Health Professional Shortage Areas Primary Care



Note: Alaska and Hawaii not to scale
HPSA scores on a scale of a whole number (0-25 for primary care), with higher scores indicating greater need

Source(s): HPSA Data Warehouse, U.S. Department of Health and Human Services, November 2016

Frequency	Percentage
Daily	65%
Weekly	25%
Monthly	10%

TRUMP
306

BUSINESS INSIDER
ELECTION ★ 2016

Family Medicine and Rural

- Finding common ground
- First world problems in second world settings
- Policy issues
- Workforce
- H1B Visa
- GME fixes
- CAH

QUESTIONS?



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