



The RTT Collaborative

in rural health professions education and training
Growing our own...together

QUARTLERLY NEWSLETTER - June 2018

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Photo courtesy of: R Longenecker

Though sometimes life moves faster than we can keep up with, the predictability and beauty of the changing of seasons remains a steady reminder of what is important. It's the season to renew your participation, or to join if you haven't yet.

We welcome you to join this important cooperative as a participating program. See **Page 6**, or visit our website at <https://rttcollaborative.net/join-the-movement/>.

CONNECT WITH US!



www.RTTcollaborative.net

Message from the Executive Director



We Need Everyone!

RTT Collaborative Newsletter – June 2018

Although the exact number is not known, there are a significant number of rural-ly-focused or engaged programs that do not meet the RTT Collaborative definition of a rural program, and yet produce many rural physicians and deserve recognition for doing so.[1] Aware of the need to highlight and expand the visibility of the rural physician training community and wishing to provide students with information relevant to their training for rural practice, the RTT Collaborative Board has decided to recognize in a special way both rurally-located and rurally-focused programs in any specialty who have a history of placing graduates in rural community practice.

Any program can be recognized for the percentage of graduates who, on a 3-year rolling average, have established an initial place of practice in a rural community and/or who are in rural practice 3 years following graduation. Programs will be listed if this percentage is \geq to 35% in the rolling three years ending in the year prior to recognition, or if there were greater than 3 graduates per year in that same time-frame.[2] Documentation, excluding graduates' names, must include year of graduation, total number of program graduates in that year, and practice location at one or up to three years post-graduation for each of the prior 3 years.

To calculate a rate of graduation or average number of residents per year The RTT Collaborative uses the following definition and method:

- Definition of rural practice location: Using the "[Am I Rural?](#)" tool, programs enter the primary ambulatory practice location for each graduate (may enter street address or zip code). A location is rural if it is rural by FORHP - Grant Programs, and/or by RUCA code of 4 or greater.
- Calculation of graduation rate: A rolling three-year percentage and average annual number of the three graduation years ending with the year prior to current listing year.

For example, for the 2018 list, a program can list placements for the 2015, 2016, and 2017 graduating classes.

The application for recognition is a protected EXCEL workbook with open cells for entering data and formulas that will automatically calculate the percentages. To apply, programs should download an application on the Rural Programs/Overview page of our website: <https://rttcollaborative.net/rural-programs/>.

All accredited residency programs – urban and rural, in any specialty – are encouraged to apply.

Each year RTTC staff will generate the recognition list from the program responses received by June 30 and distribute the list to attendees at each year's AAFP National Conference in Kansas City. Only programs who make the list will be recognized as high producers (i.e. above the average for rural programs established in recent literature). Programs who do not make the list will not be named, so that students will not know if a program is not listed because they did not make the cut-off or because they did not report. The list will be placed on The RTT Collaborative website each year after the National Conference.

As of July 1, 2018, rural programs in family medicine account for 387 accredited positions, less than 8% of all positions in family medicine. We need all hands on-deck if we are going to even come close to meeting the well-documented and urgent need for more rural primary care physicians and for rural physicians in the specialties of primary need to rural communities – general surgery, obstetrics and gynecology, and psychiatry.



Randall Longenecker MD
Executive Director

1. Longenecker R. Rural Medical Education Programs: A Proposed Nomenclature. Journal of Graduate Medical Education June 2017;9(3):283-286. <https://doi.org/10.4300/JGME-D-16-00550.1> (Accessed 3-28-2018)
2. Derived from: Patterson DG, Andrilla CHA, Schmitz D, Longenecker R, Evans DV. Outcomes of Rural-Centric Residency Training to Prepare Family Medicine Physicians for Rural Practice. Policy Brief #158. Seattle. WA: WWAMI Rural Health Center, University of Washington, Mar 2016. http://depts.washington.edu/fammed/rhrc/wp-content/uploads/sites/4/2016/03/RHRC_PB158_Patterson.pdf (Accessed 3-28-2018)

Highlights from the 2018 RTT Collaborative Annual Meeting

Celebrating Complexity in the Emerging Diversity of Rural Medical Education April 11-13, 2018

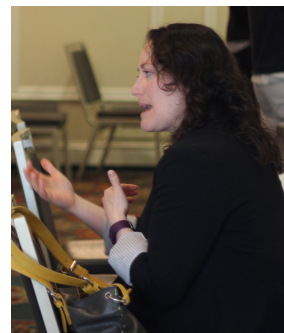
Hosted by: Spokane Teaching Health Center and Rural Program, Colville RTT, Spokane and Colville, Washington; Presentation downloads are available on our [website](#).

Since the RTT in Colville, Washington, was granted accreditation as an “experimental” program 30 years ago, rural medical education in the United States has never stopped innovating! From a simple rule, the “1-2 format,” creative educators in RTTs have elaborated a wonderful diversity of programs, each uniquely adapted to its rural community.

All rural programs, including free-standing programs located in a rural place, have adapted to address the needs of their communities, meet the standards of accreditation and negotiate the complexities of medical education finance in a glorious variety of ways.

Our community of practice in rural medical education now includes rural tracks in medical school and in residency, rurally-located programs and rurally-centric urban programs, programs in specialties other than family medicine, even other health professions, all of them essential to rural communities.

A Rural PREP Design and Dissemination Studio pre-conference focused on Evaluating Rural/Urban Underserved Medical School Programs and Measuring the Commitment of Health Professions Schools to Rural Primary Care.



Legislative and Rural Residency Grant Update

The rural alternative payment mechanism for graduate medical education (“RAP-GME” or “rural GME bill”) has been introduced in the Senate by Senator Cory Gardner (R) of Colorado as the “[Rural Physician Workforce Production Act of 2018](#).” The text of the bill is available from the [Library of Congress](#), and by creating an account you can register for updates. For a two-page description of this rural GME innovation, please visit: <https://www.aafp.org/dam/AAFP/documents/events/fmas/BKG-RuralGraduateMedEdInnovation.pdf>

The Rural Residency Development Grant program (\$15 million) was discussed at the NRHA meeting in New Orleans, but a call for proposals has not yet been released. The initial call will be for a cooperative agreement with HRSA for technical assistance. In FY19, they hope to fund 14 developing rural programs.

More to follow!

Mark your calendars to join us in 2019!

2019 RTT Collaborative Annual Meeting
Lewiston and Rumford, Maine
May 15-17, 2019



2018 AAFP National Conference

3RNet and RTT Collaborative Partner in Kansas City

For the third year in a row, 3RNet and The RTT Collaborative will collaborate to make a rural splash with Family Medicine students and medical residents at the 2018 American Academy of Family Physicians (AAFP) National Conference for Family Medicine Residents and Medical Students.

The AAFP National Conference is an annual event where, according to AAFP's website, future Family Medicine physicians gather "to learn more about family medicine, explore residency programs, and connect with potential employers".

3RNet and The RTT Collaborative again worked together to coordinate booth locations, together with a third partner, the Collaborative for Rural Primary Care Research, Education, and Practice (Rural PREP). Questions about one group are often asked at the other's booth. Being in close proximity to one another has produced mutual benefits for staff and attendees alike. Together they represent a continuum in preparation, placement, and sustained success in rural practice.

"This is our biggest exhibiting event each year. Not only does it make good sense for us to work with our friends at The RTT Collaborative on this event, but we've heard good feedback from attendees, too. We're looking forward to again working with the RTT Collaborative and seeing them in Kansas City!" said Mike Shimmens, 3RNet Executive Director and RTT Collaborative Board Member.

The RTT Collaborative, Rural PREP, and 3RNet will also provide support for the AAFP's Rural Health Interest Group meeting, which is an opportunity for those who have an interest in family medicine and rural health to ask questions and learn more.

To learn more about the 2018 National Conference, you can visit <https://www.aafp.org/events/national-conference.html>.

Questions regarding 3RNet and The RTT Collaborative presence at this meeting can be directed to Kristine Morin (morin@3rnet.org) or Dawn Mollica (mollicd1@ohio.edu).



The RTT Collaborative



Become a Participating Program

Join the Movement!

Become a Participating Program! The RTT Collaborative functions as a cooperative of rurally focused health professions education and training programs from around the United States. Formal participation in The RTTC through an annual fee of \$2,500* supports an important infrastructure in addition to the following benefits and more:

- Reduced conference fees
- Unlimited brief technical assistance by phone or email, and a 50% reduction in fee-based services
- Promotion of participating program on RTTC website and at the AAFP National Conference each year
- Assistance with accreditation appeals
- Advocacy at the national level

The participation fee is intended to apply to a single organization, to a single medical school, or to a single accredited training program. Some participants, however, may be part of a formal or informal network of accredited programs (e.g. multiple programs under a single consortium sponsor, or a State association of programs). In an effort to encourage consortia formation within a single State, an aggregating entity can be invoiced directly for all programs within the same State, and the fee for each additional accredited program after the first will decrease to \$1,000 per program.

Visit The RTT Collaborative website to view participation requirements and to download a Participating Program application. Please contact Dawn Mollica with questions.

*Programs-in-development should contact Dr. Randall Longenecker regarding their particular circumstances, adapting your participation and fees to your fit your program



If you have items you would like to be included in the next edition of this newsletter, please submit these ideas to Dawn Mollica at mollicd1@ohio.edu.

Participating Program Spotlight

Providence Hood River Family Medicine Residency Rural Training Program

We are an innovative Family Medicine Rural Training Program located in beautiful Hood River, Oregon. We are a multidisciplinary team of Physicians, Nurses, Hospital and Clinic staff, administrative professionals and educators who are dedicated to training our resident physicians to care for the needs of rural underserved communities in Oregon.

At Providence Oregon Family Medicine Residency, we promote lifelong learning of the knowledge, skills and attitudes needed to provide high-quality care, especially to those most in need.

Rural communities depend on clinicians with a broad scope of skills to care for them and their families. Modern rural family physicians still require a breadth of training, experiences and mentorship that may not be available or easily supported in urban communities. We are a rural residency program that aims to incorporate the rigors of academic based training with a real world experience in a small community away from urban academic centers. We expect that our RTP graduates will practice in small, rural communities and have the skills to care for a diverse patient population, maintain life balance and enjoy life-long learning.

For more information, contact Elisabeth Jex (elisabeth.jex@providence.org) or visit our website [here!](#)



Other Information

Need Travel and Meeting Support?

In case you missed it, if you are making a research or scholarly presentation at a health professions education related conference this year, visit www.ruralprep.org regarding a travel and meeting allowance of \$1,000. You or one of your faculty, students or trainees may qualify!

Upcoming Meetings and Events:

AAFP National Conference, Kansas City, MO
August 2-4, 2018

3RNet Annual Conference, Philadelphia, PA
September 11-13, 2018

RTT Collaborative Annual Meeting,
Lewiston, ME
May 15-17, 2019

Students & Residents: [Apply](#) for microresearch funding

Microresearch



The application process for the July 2018-June 2019 academic year is now open.

Priority consideration will be given to applications received by June 18, 2018!

[APPLY](#)

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