Monroe Clinic Becomes First US FM Residency Accredited by AOA

Monroe Clinic has achieved another important milestone in its development sprint toward new opportunities in rural GME. It received ACOFP (American College of Osteopathic Family Physicians) and AOA (American Osteopathic Association) accreditation on July 31st to become the first new Family Medicine Residency in Wisconsin in more than 20 years. The culmination of a two-year planning process led to approval for the first family medicine residency in the nation under new RTT criteria established by AOA.

The planning process was supported by an early development WRPRAP grant including consultations with UIC Rockford’s Dr. Farion Williams who engaged the medical staff throughout the planning process. CJ Smith, DO, Chief of Staff at Monroe Clinic and active in teaching both allopathic and osteopathic medical students for over 5 years there, will serve as Director of Medical Education and Osteopathic Program Director. AOA’s fast tracking of the application will allow the program to start next year with a capacity for six residents. Recruiting will begin immediately for two residents to begin July 2015, initially focusing on osteopathic medical students. The program is affiliated with both HEARTLAND OPTI/Des Moines University and UIC Rockford. Residents will spend the first year in Rockford at Swedish American Hospital and the remaining two in Monroe, WI.

Osteopaths are not new to Monroe Clinic. More than 10 percent of the medical staff currently are DO’s in family medicine, pediatrics, general surgery, orthopedics and pain management/rehabilitation. With limited osteopathic student rotation sites in Wisconsin, Monroe Clinic is hoping to fill a need for these students to return to the area to train and ultimately, practice.

Last year Monroe Clinic became a rotation site for Des Moines University students from Wisconsin and northern Illinois. Discussions are under way to add rotations for AT Still/Kirksville (MO) College of Medicine medical students.
Our Mission:
Wisconsin Rural Physician Residency Assistance Program is committed to collaborating with rural health advocates, community clinicians, and residency educators throughout Wisconsin to develop educational experiences that prepare new physicians for rural practice.

CONTACT US:
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Newsletter
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Wisconsin Prepares to Host Fourth Annual RTT Meeting
With a new name and a challenging theme, the RTT Collaborative will convene in Madison and Baraboo on May 27-29, 2015 to explore “Moving Forward in the Face of Chaos.” Formerly the RTT Conclave, this year’s annual meeting is open to a wider audience. An RFP has been posted to invite contributions to the program and an announcement and proposal form are accessible at RTT Collaborative.

The program committee is sketching out a program that will point toward strategies for negotiating the current uncertain climate of unprecedented change. We will look to future solutions as well as lessons from the past, and highlight the considerable GME development Wisconsin has achieved through the WCRGME coalition, new funding from the State and a willingness to explore genuine collaboration.

WCRGME members are especially encouraged to take advantage of this gathering to learn from a growing national network of individuals and organizations dealing with common complexities of GME development. If you have an idea for a session you would like to present, you can obtain a proposal form from Wilda.Nilsestuen@fammed.wisc.edu.

The RTT Annual Meeting is co-sponsored by the RTT Technical Assistance Program, the Federal Office of Rural Health Policy and locally by WRPRAP and WCRGME.

Group to Explore GME in Rural NW Wisconsin
A paucity of GME occurring in the more rural, less populated northwestern sector of the state has spurred a growing conversation about how to address the current and future consequences of a GME training deficit. Several organizations motivated to address this issue, including WHA, WCMEW, MCW, WRPRAP, RWHC and WCRGME and led by DHS are taking a first step to gauge interest in and capacity for action in NW Wisconsin.

On October 29, an exploratory meeting will be held in Chippewa Falls for a small representative group of invited leaders from a range of health care systems, academic centers, and community leaders to share ideas and questions and learn about available resources to address longstanding roadblocks to rural GME in northwest communities. DHS will convene the meeting and depending on outcomes perhaps plan a larger meeting for next spring or establish working groups to pursue these issues with vigor.

New DHS Funding Opportunities
DHS has announced two new funding opportunities for graduate medical education. Both are available at the link below under “Grants.” The deadline for both applications is 2:00 p.m. CDT, on Thursday, October 16, 2014.

http://www.dhs.wisconsin.gov/rfp
RFA #G-368-OPIB-15 – DHS GME Residency Grant
RFA #G-368-OPIB-15 – DHS GME Residency Grant

CONGRATULATIONS!
WRPRAP and WCRGME extend congratulations and admiration to Monroe Clinic for your exemplary pursuit of GME development – and for the energy and optimism with which it has been so competently pursued. We are grateful for your willingness to share lessons learned as we continue to benefit from your example. We know you will continue to forge ahead and we wish you continued success in our shared mission of growing the pipeline of rural physicians for Wisconsin.
Grant Regional Health Center in Lancaster becomes Rural Rotation Site

July 2014 was an exciting month for Grant Regional Health Center (GRHC) in Lancaster, WI. After much planning and scheduling, GRHC welcomed their first resident, Dr. Anna Veach, a 3rd year resident from the University of Wisconsin School of Medicine and Public Health Department of Family Medicine residency program (UWSMPH DFM).

In order to make this rotation experience happen, GRHC received an Early Development grant from WRPRAP (Wisconsin Rural Physician Residency Assistance Program) to determine if they had the capacity to develop a rural rotation site to offer residents experiences in family practice, obstetrics, and the emergency department. This grant, along with the support of hospital leadership and physicians, set the foundation for hosting residents.

Similar to many rural hospitals, GRHC has a wealth of clinical opportunities to offer residents which is one of the reasons they pursued becoming a rural rotation site. In addition, Dr. Eric Stader and Dr. Jessica Varnum, both of High Point Family Medicine Clinic, have an interest in teaching residents and could see that working side by side with residents would stimulate them to learn and to improve their practice.

According to Jennifer Rutkowski, VP of Physician Services, the month of July turned out to be a great month to host a resident as they had high volumes in OB, in-patient, and the clinics which gave Dr. Veach many opportunities for hands-on learning. When describing their first experience of working with a resident Dr. Stader reflects, “Dr. Veach came eager to learn and ready to work. The importance of a teachable, flexible attitude cannot be over-emphasized. It makes the difference between an average experience and a great one.”

As for advice to other rural clinics and hospitals considering becoming a rotation site, Dr. Stader puts it simply, “Go for it!” Which is exactly what GRHC is doing as they prepare to host another resident in January, 2015.

23rd ANNUAL $2,500 RURAL HEALTH PRIZE – June 1, 2015 Deadline

The Hermes Monato, Jr. Prize of $2,500 is awarded annually for the best rural health paper. It is open to all students of the University of Wisconsin (any campus) as well as those who will be recent graduates at the time of submission.

Students are encouraged to write on a rural health topic for a regular class and then to submit a copy to the Rural Wisconsin Health Cooperative as an entry by June 1st.

Previous award winners as well as judging criteria and submission information are available at http://www.rwhc.com/Awards/AnnualMonatoEssay.aspx.
UPCOMING MEETINGS & EVENTS

Family Medicine Midwest Conference
October 10-12
Location: Radisson Plaza Hotel, Minneapolis, MN
http://www.iafp.com/fmm/

Wisconsin Council on Medical Education Workforce (WCMEW)
Building a Culture for Patient-Centered Team Based Care
November 12
Location: Glacier Canyon Lodge at The Wilderness Resort
WCMEW

RTT Annual Meeting
May 27-29, 2015
Location: Pyle Center, Madison, WI

WCRGME Meetings
November 19
January 14
March 11
May 20 (on-site RWHC)

GME Coordinators Roundtable
October 20
February 16

Medicare GME Cap Adjustment Tool Available
WCRGME has developed a tool to assist hospitals in determining if they might be able to raise their Medicare GME FTE General Cap. The tool leads users down the path towards answering the question, “Can a PPS Hospital Adjust Its Medicare GME FTE Cap?” It includes choices based upon a hospital’s status as urban or rural, whether the program in question is new or an expansion, whether a single sponsor has other existing GME programs (including Rural Training Tracks), implications of the Rural Track FTE Limit, and more. Besides answering the GME FTE Cap question, we hope the tool will spotlight barriers which state and federal GME initiatives could address. Please contact WCRGME for assistance in using the tool. Link to GME Tool.

Because of the complex and changing nature of these issues, WCRGME recommends communicating early and frequently with the regional CMS intermediary, as well as with legal counsel, about plans for implementing any new residency program.

Resident & Medical Student Interest in Rural GME Up At AAFP
Responses from the surveys completed by medical students and residents at the WCRGME booth at this year’s American Academy of Family Physicians (AAFP) National Conference in early August indicate a growing interest and awareness of rural graduate medical education opportunities. Mark Thompson, MD, and Lori Rodefeld from Monroe Clinic joined Kara and Jennifer at the WCRGME booth, sharing both the benefits of training in rural locations and the rural WCRGME sites which offer GME opportunities.

Figure 1 demonstrates the medical students and residents who responded with either “definite” or “some” when asked about their interest in rural rotations, residencies, and fellowships. In all categories interest increased over last year’s survey.

Other highlights include the convenience of pointing out the Baraboo RTT booth, which due to a new booth location this year, was only a few feet away. Also, new this year, there were conference-goers who approached the booth saying, “I’m interested in rural.” We were happy to tell them more!

[Figure 1]