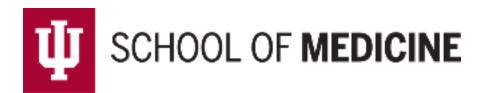
Regional Medical Campuses

Leveraging Our Structure

Deb Birnbaum, MBA; Emily Walvoord, MD and Elizabeth R. Ryan EdD

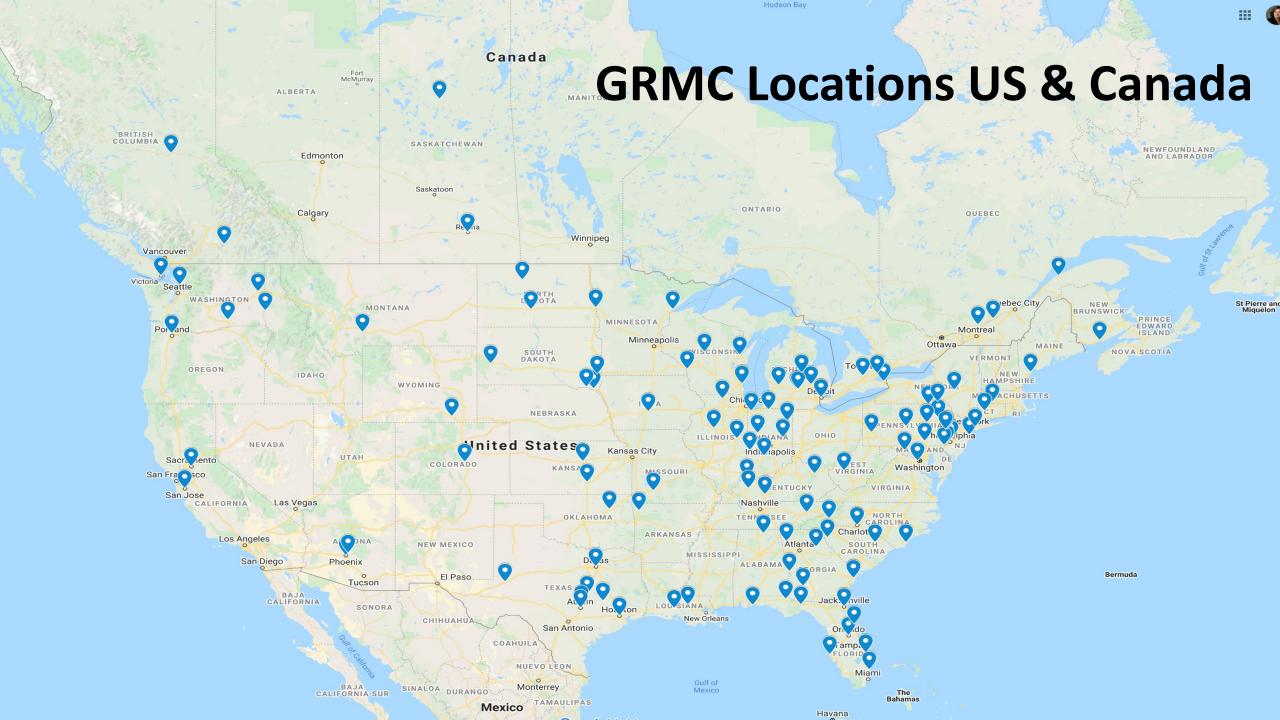


Conflict of Interest

- We have any conflict of interest to disclose.
 - Deb Birnbaum, MBA
 - Emily C. Walvoord, MD
 - Elizabeth R. Ryan, EdD

Session Objectives

- Discuss Regional Medical Campus Model & Definitions
- Discuss IUSM Scholarship Examples
- Discuss Leveraging our Structure to Increase Medical Education Scholarship
- Questions and Answers



Article

Regional Medical Campuses: A New Classification System

Craig E. Cheifetz, MD, Katherine S. McOwen, Pierre Gagne, MD, MSc, and Jennifer L. Wong

Abstract

There is burgeoning belief that regional medical campuses (RMCs) are a significant part of the narrative about medical education and the health care workforce in the United States and Canada. Although RMCs are not new, in the recent years of medical education enrollment expansion, they have seen their numbers increase. Class expansion explains the rapid growth of RMCs in the past 10 years, but it does not adequately describe their function. Often, RMCs

have missions that differ from their main campus, especially in the areas of rural and community medicine. The absence of an easy-to-use classification system has led to a lack of current research about RMCs as evidenced by the small number of articles in the current literature. The authors describe the process of the Group on Regional Medical Campuses used to develop attributes of a campus separate from the main campus that constitute a "classification" of a campus

as an RMC. The system is broken into four models—basic science, clinical, longitudinal, and combined—and is linked to Liaison Committee on Medical Education standards. It is applicable to all schools and can be applied by any medical school dean or medical education researcher. The classification system paves the way for stakeholders to agree on a denominator of RMCs and conduct future research about their impact on medical education.

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Acad Med. 2014;89:1140–1143. First published online May 13, 2014

Basic Science Model

- Basic Science Year 1 only
- Basic Science Year 2 only
- Basic Science Years 1 and 2 in entirety

Clinical Model

- Clinical Year 3 in full
- Clinical Years 3 and 4 in entirety
- Clinical Year 3 in part-greater than 50% of required third year rotations occur at RMC (Clerkship must be
 offered in their entirety and be managed directly by the RMC)

Longitudinal/Distributive Model

 Basic science and/or clinical experiences span a period greater than 12 weeks in one or more courses of study or core areas. There must be continuous assignment of learners to the site over repeated cycles and administrative mechanisms to coordinate the academic experience, student affairs, and faculty oversight.

Combined Model

Basic Science and Clinical years offered in some combination

GRMC in Brief - Four Priorities

Education:

To facilitate educational innovation and connect with new populations.

Community Health:

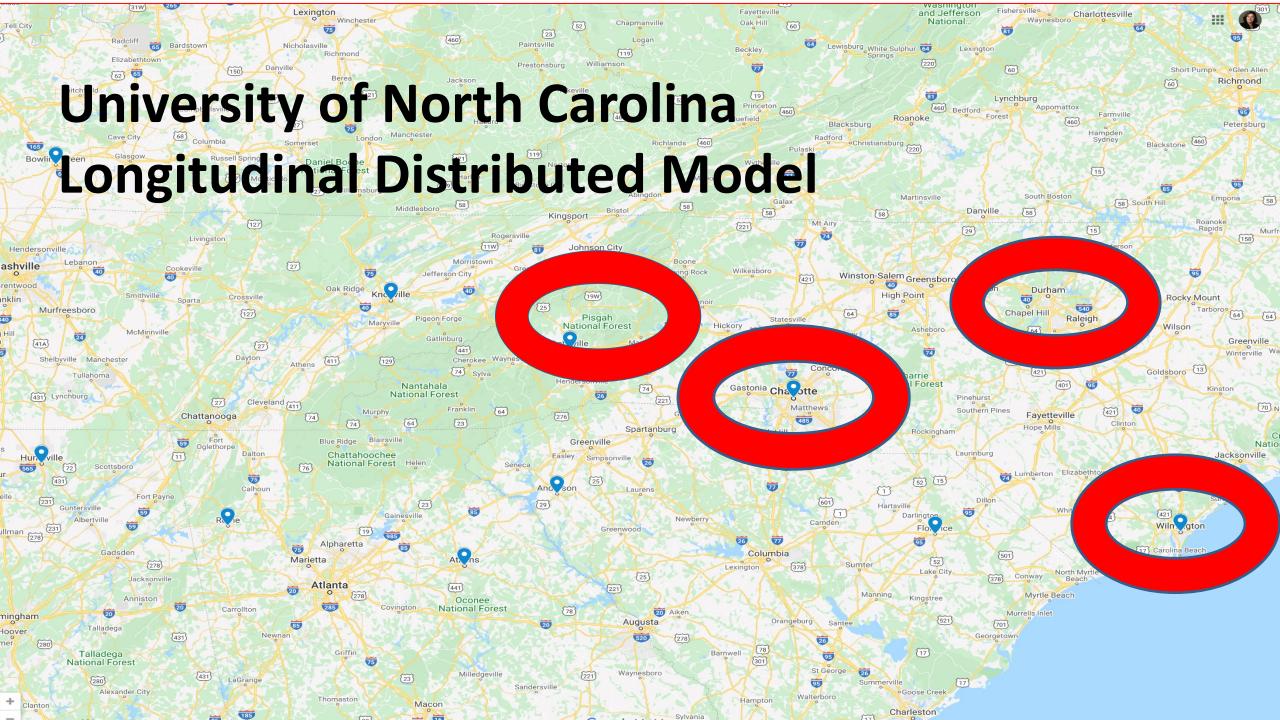
 To engage the diverse communities in which we serve in order to improve health.

Workforce:

Develop the health care workforce to meet the community's needs.

Research:

 In the area of the social determinants of health and distributed medical education.





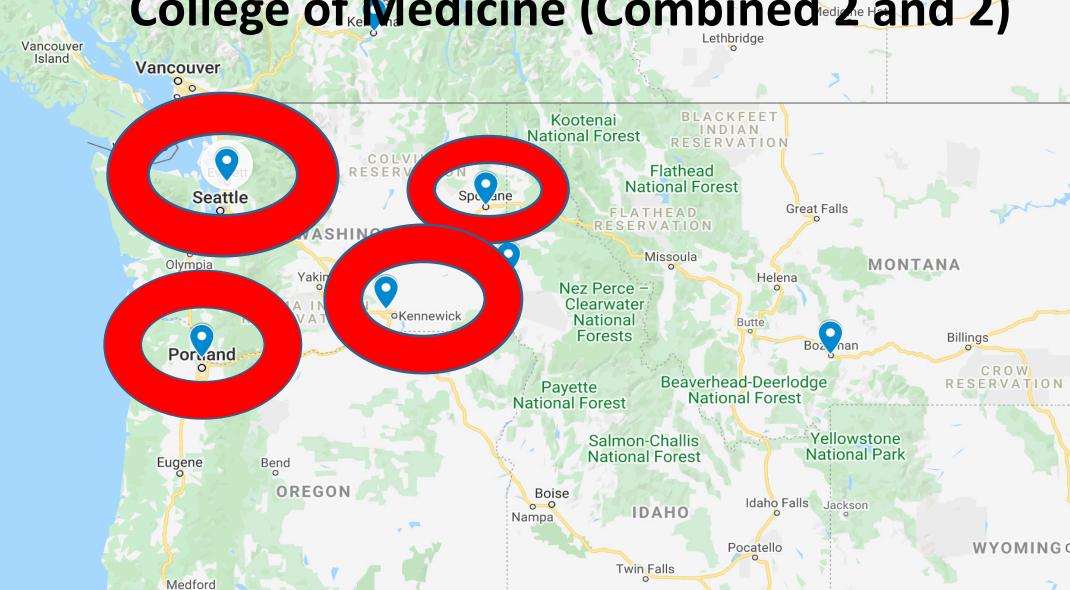
Washington State University Elson S. Floyd College of Medicine (Combined 2 and 2)

Drumheller

Kindersley

Bantt

National Park



Scholarship Examples

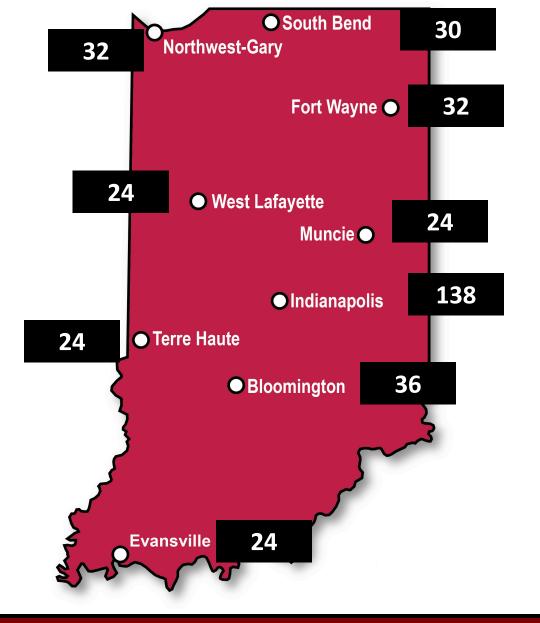


Match Outcomes of Students who attend a Regional Medical Campus vs. the Main Medical Campus: Is There Any Difference?

Emily C Walvoord, MD



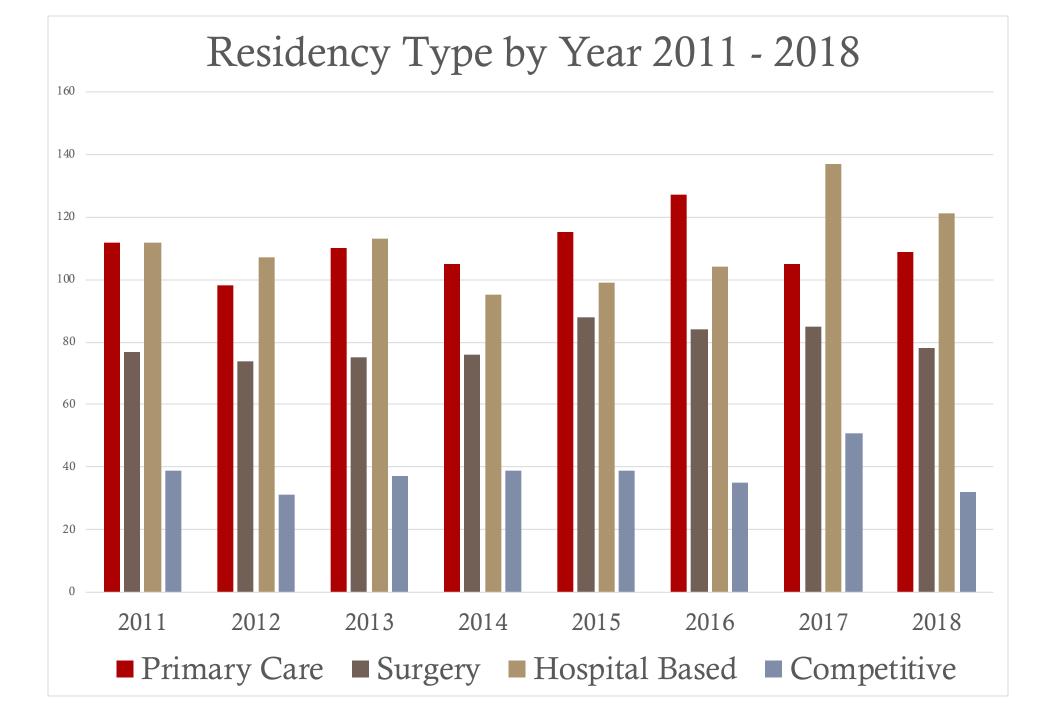








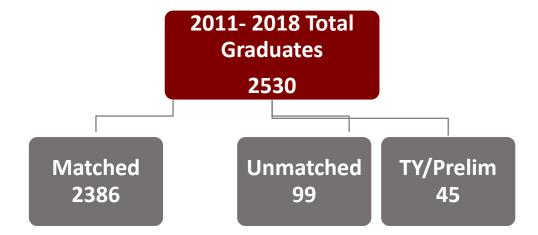


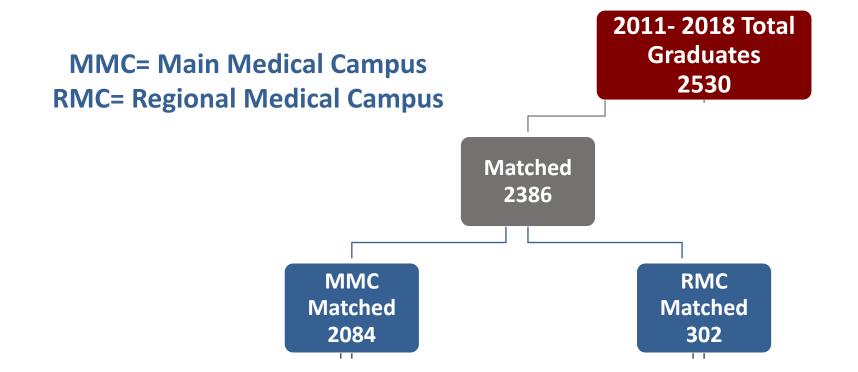


Highly Competitive Specialties

- Dermatology
- Emergency Medicine
- Emergency Medicine-Pediatrics
- Neurosurgery
- Orthopedic Surgery

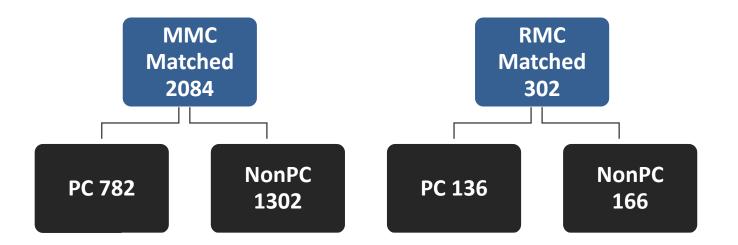
- Otolaryngology
- Ophthalmology
- Plastic Surgery
- Urology
- Thoracic Surgery
- Vascular Surgery





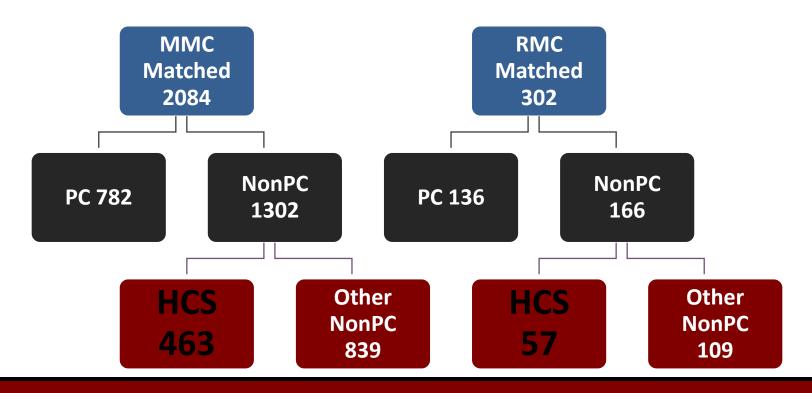
MMC= Main Medical Campus RMC= Regional Medical Campus

PC= Primary Care
NonPC= Non-Primary Care



MMC= Main Medical Campus
RMC= Regional Medical Campus
PC= Primary Care
HCS= Highly Competitive

HCS= Highly CompetitiveSpecialty



2011- 2018 Match Results

Location	Primary Care
MMC	38%
RMC	*45%

*P< 0.05

2011- 2018 Match Results

Location	Primary Care	Non-Primary Care		
		Highly Competitive Specialty	Other Non- Primary Care	
MMC	38%	22%	40%	
RMC	*45%	19%	36%	

*P< 0.05



Conclusions

 Students from RMCs are more likely to enter Primary Care specialties.

 Students from RMCs match into highly competitive residencies at the same rates as students from the MMC.



Scholarly Concentrations Example

Deb Birnbaum, MBA



Scholarly Concentrations



Sample Scholarly Concentration

Fundamentals of Research & Scholarship

Topic-Specific Course 1

Topic-Specific Course 2

Scholarly Concentration Project

Scholarly
Concentration
Product
(manuscript strongly

(manuscript strongly encouraged, poster)

Sample Pathways

Health Integration and Healthy Aging

Phase 1 Phase 1 Year 1 Summer 1 Phase 2 Phase 3 Year 2 Health System Integration in the Context Scholarly Journal Introduction to Public Health of Healthy Aging Club Concentration Product Fundamentals of Research and Journal Club Scholarship Scholarly Concentration Project

Quality and Innovation in Health Care

Phase 1	Summer 1	Phase 1 Year 2	Phase 2	Phase 3
Year 1				
	Introduction to Healthcare			
	Innovation and Implementation			
	Lean Six Sigma for Healthcare			
	Professionals			
		Fundamentals of		
		Research and		
		Scholarship		
	Scholarly Concentration Project		-	
		Scholarly Concentration		entration
			Product	

Fundamentals offered twice yearly: Summer and mid-Dec to mid-Feb

SCHOLARLY CONCENTRATIONS





BLOOMINGTON

- Human Sexuality and Health
 - Kinsey Institute
- Medical Education



EVANSVILLE

- Quality and Innovation in Health Care
- local health care systems



FORT WAYNE

- Health Integration and Healthy Aging
- regional health care systems



INDIANAPOLIS

- Biomedical Research
- Genetics in Medicine
- Health Information Technology
- Regenstrief Institute



MUNCIE

- Health Promotion and Disease Prevention
- BSU Clinical Exercise Physiology Program



NORTHWEST-GARY

- Urban Medicine and Health Care Disparities
- community partners



SOUTH BEND

- Ethics, Equity and Justice
- University of Notre Dame



TERRE HAUTE

- Rural Health
- rural health systems



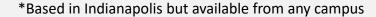
WEST LAFAYETTE

- Biomedical Engineering and Applied Medical Technology
- Weldon School of Biomedical Engineering
- Care of Hispanic/Latino Patients



STATEWIDE

- Business of Medicine*
- Kelley School of Business
- Public Health*
- Fairbanks School of Public Health
- Medical Humanities*
- Medical Humanities and Health Studies, School of Liberal Arts







Care of Hispanic/Latino Patients

- •Defining culturally-appropriate care for Hispanic/Latino patients
- Obstacles to seeking care by Hispanic/Latino patients

Urban Medicine & Health Care Disparities

- Role of nutrition education
- •Factors in racial gaps in infant mortality
- •Tobacco use within minority populations

Human Sexuality & Health

- •Romantic and sexual relationships
- •Human sexuality education
- •Condom use, misuse, errors

Health Promotion & Disease Prevention

- Increased access to primary care
- Maternal addiction programs
- •Infusion of lifestyle medicine into primary care

Rural Health

- •Rural patients' perception of local health care quality
- •Comparing cardiovascular risk perception in urban and rural family medicine clinics

Ethics, Equity & Justice

- Virtue ethics
- Clinical ethics
- •End of life care

Quality & Innovation in Health Care

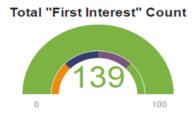
- •Readmission rates for hip and knee replacements
- •30-day mortality rates following a stroke
- Bed turnaround time

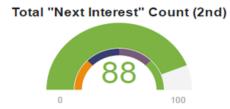
Health Integration and Healthy Aging

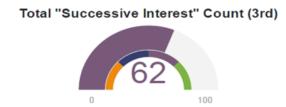
- •Population differences in the effect of aging on cardiovascular morbidity and mortality
- Aging and its impact on health policies and society
- •Aged population compliance issues in preventive health care

Phase 1 Launch Summer 2019

2019 Scholarly Concentrations Program Application Dashboard







Phase 2

Fall 2019 Scholarly Concentrations Program Application Dashboard









Phase 3 – Priority Placement to Regional Campus & SCP

- By invitation with 3.5 and 506
- Attend 4 yrs on regional campus
- Notified in January
- 49 offers

Scholarship



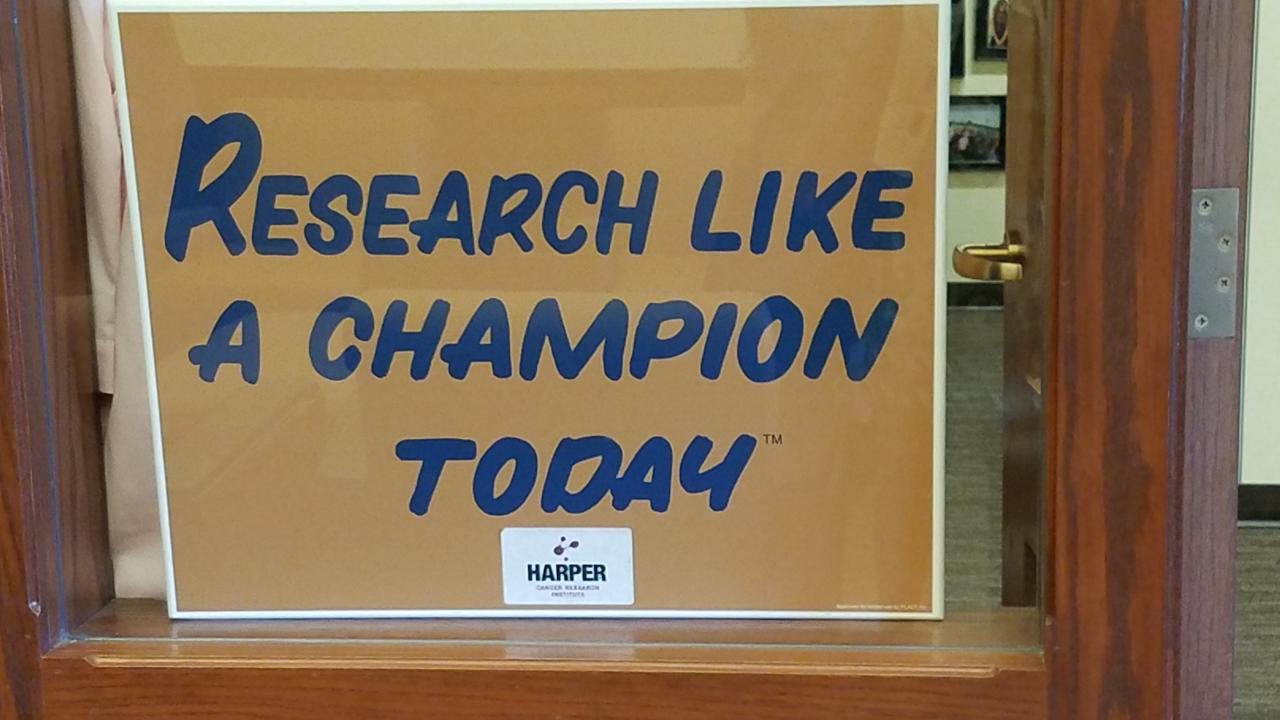
1st Annual IU School of Medicine Education Day: **Bringing Fresh Perspectives to Medical Education**







JRMC Journal of Regional Medical Campuses



Leveraging our Structure



2020 GRMC Meeting Call Topics

- Curricular innovations and delivery
- Community faculty recruitment, retention, and development
- Community engagement
- Distance learning methods
- Scholarship programs
- Campus infrastructure models
- Intra-institutional dynamics
- Delivering education in varied clinical settings
- Regional Medical Education and the LCME

GRMC Star Awards

The Star of Educational Innovation

Awarded to a regional medical campus which has achieved a sustainable and measurable educational impact within the nominated student, resident, or faculty development program.

The Star of Community Achievement

Awarded to a campus that has developed a program which has positively impacted the community it serves.



Types of publications:

- Editorials
- Research
- Reflective/Humanities
- Short Communications
- Tips How we do it!
- Faculty development

- GRMC news
- Starting a campus
- Medical student submissions
- LIC's
- LCME/ACGME

JRMC Journal of Regional Medical Campuses

- Submit Your Community Engagement:
 - Title of Regional Campus Community Engagement Program Hosting Institution
 - Goal of Program
 - Target Community
 - Description of Program
 - Date of Inception
 - Is/Was Program One-Off, Cyclical, Continuous, or in Pilot Phase?
 - Length/Cycle of Program (Hours? Days? Months? Academic years?)
 - How/Is the Program Integrated into the Curriculum?
 - Resources Required (Financial and otherwise. Optional to include how they were acquired.)
 - Outcomes of Community Engagement Program
 - Contact Information for Program (Name, degree, title, institution, phone number, email address, mailing address)

Summary

 Leverage our Strength (RMC Model) to Increase our Medical Education Scholarship!

Thank You

