



Where are they now? A Study of UMass Medical School Rural Health Pathway Graduates

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Background

- UMass Medical School initiates Optional Enrichment Elective Pathway in 2000 for students who think they might like to practice medicine in a rural or small town community.
- Rural Health Scholars Pathway program (RHSP) offers enrichment for students interested in exploring a career in a rural/small town area.
- WHY? Because students with more exposure are more likely to practice in rural and small town communities.
- UMass Worcester Graduate School of Nursing advanced practice nursing students join and the program fosters inter-professional learning and collaboration.
- Student experiences include and augment curriculum requirements.

Objectives

- To identify RHS medical graduates' residency, specialty, and practice locations.
- To determine proportion of graduates practicing in rural/small towns.
- To determine proportion of graduates practicing in Medically Underserved Areas (MUA)/Medically Underserved Populations (MUP) and in Health Professions Shortage Areas (HPSA).

Methods

Developed mixed-methods study design

Quantitative Data

- Obtained list of graduates and residencies
- Used HRSA database to determine practice locations
- Entered data into Excel spread sheet

Qualitative Data

- Based on literature review and consultation with state officials, developed list of guided interview questions

Analyses

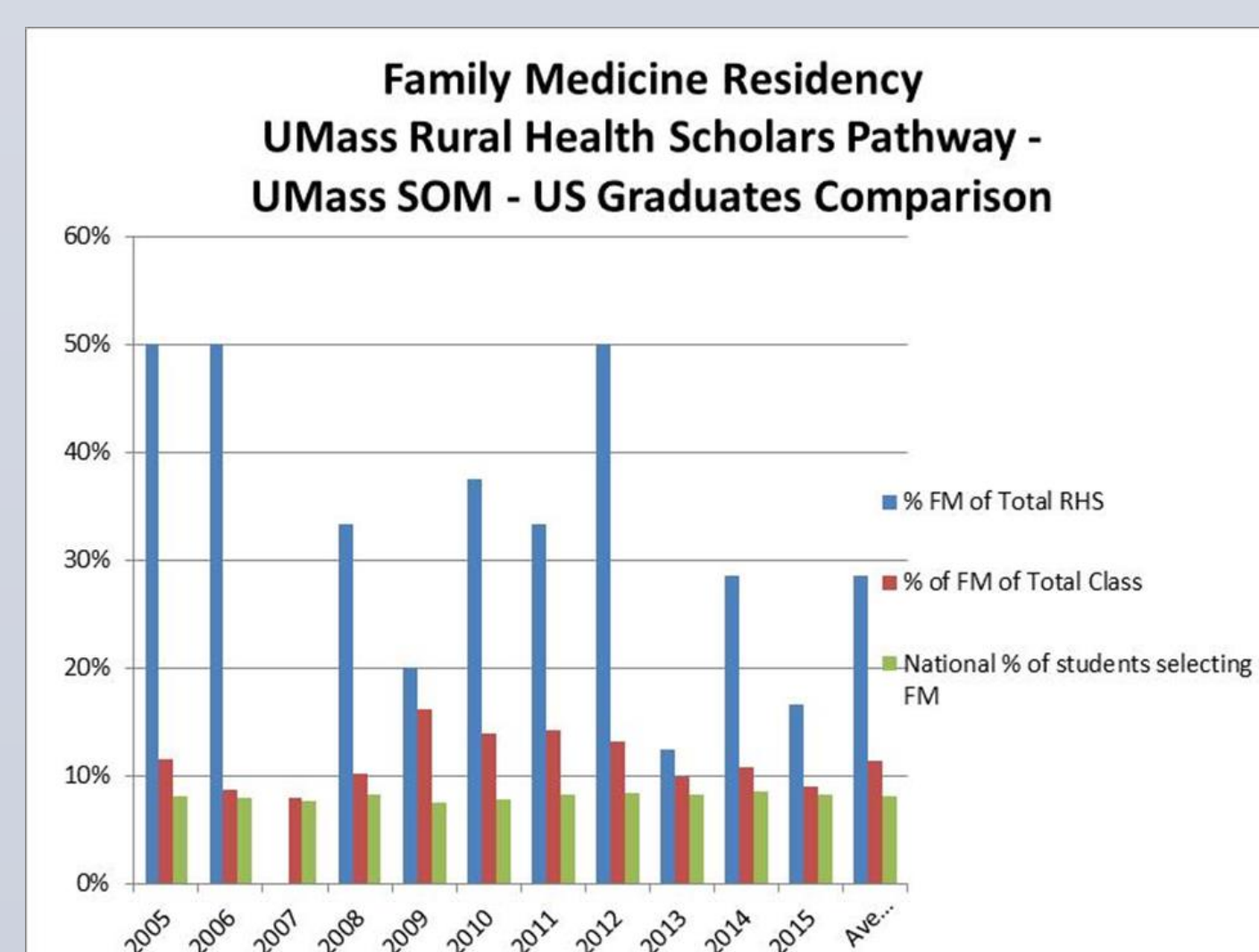
- Quantitative Data: descriptive statistics
- Qualitative Data: summarized themes

We:

- worked from the list of 36 medical school graduates in practice and 26 in residency,
- identified residency and practice location for all,
- interviewed 10 graduates.

Results

For the past 10 years, Pathway graduates have preferentially selected Family Medicine residencies (29%); this compares to 11% for the entire UMass graduating class and 8.1% nationally. They also disproportionately go into primary care.



Results

Where do UMMS Rural Health Scholar Pathway Graduates Go?

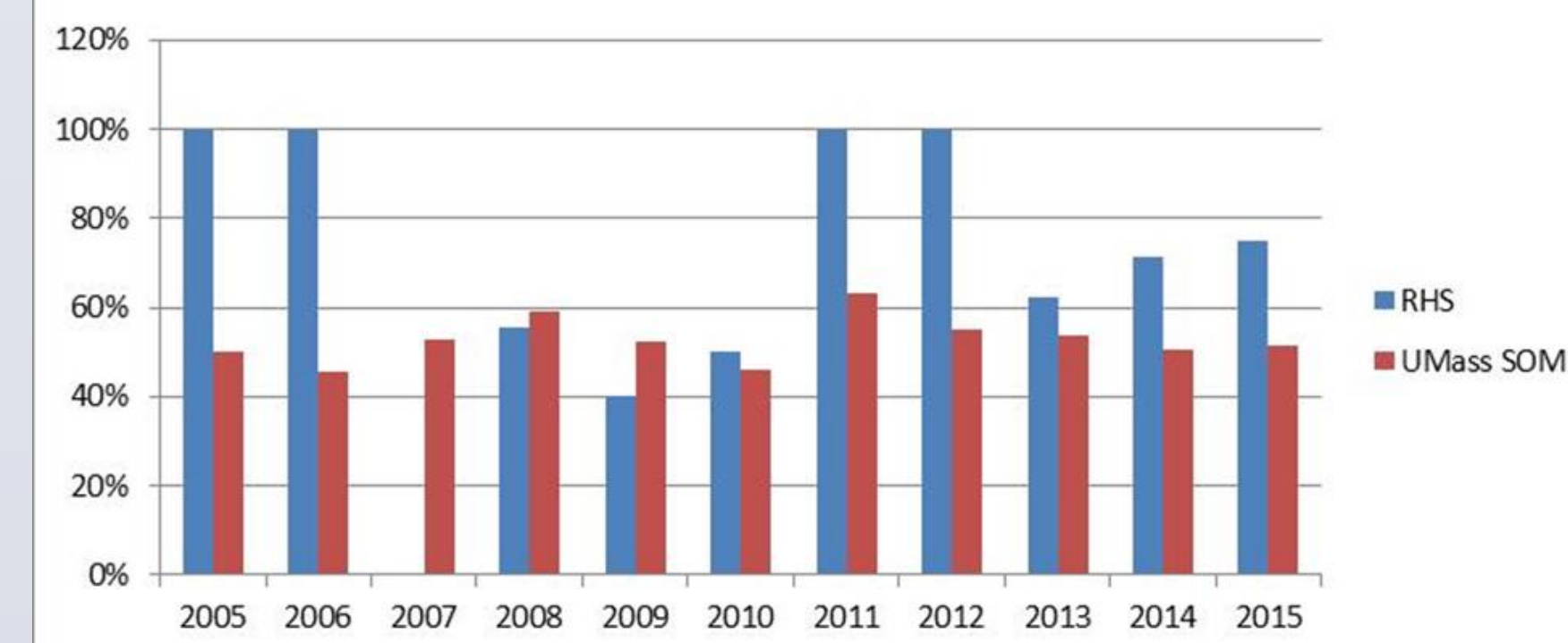
Since the first graduating class in 2005, Rural Health Scholar School of Medicine graduates have gone on to many different residencies with a significant proportion going into primary care.

Family Medicine	Peds	Medicine Primary	Med/Peds	Medicine	Ob/GYN	Psych	Emergency Medicine	Other Specialties	Total
18	14	2	3	5	3	2	6	10	63
29%	22%	3%	5%	8%	5%	3%	10%	16%	100%

20 Medical students went to residencies in states that have significant rural town areas. 20 went to residencies in Massachusetts, 8 to Maine, 1 to VT, 3 to NH, 6 to RI, 3 in CT, 17 to the West Coast outside of New England and 8 to other parts of the country.

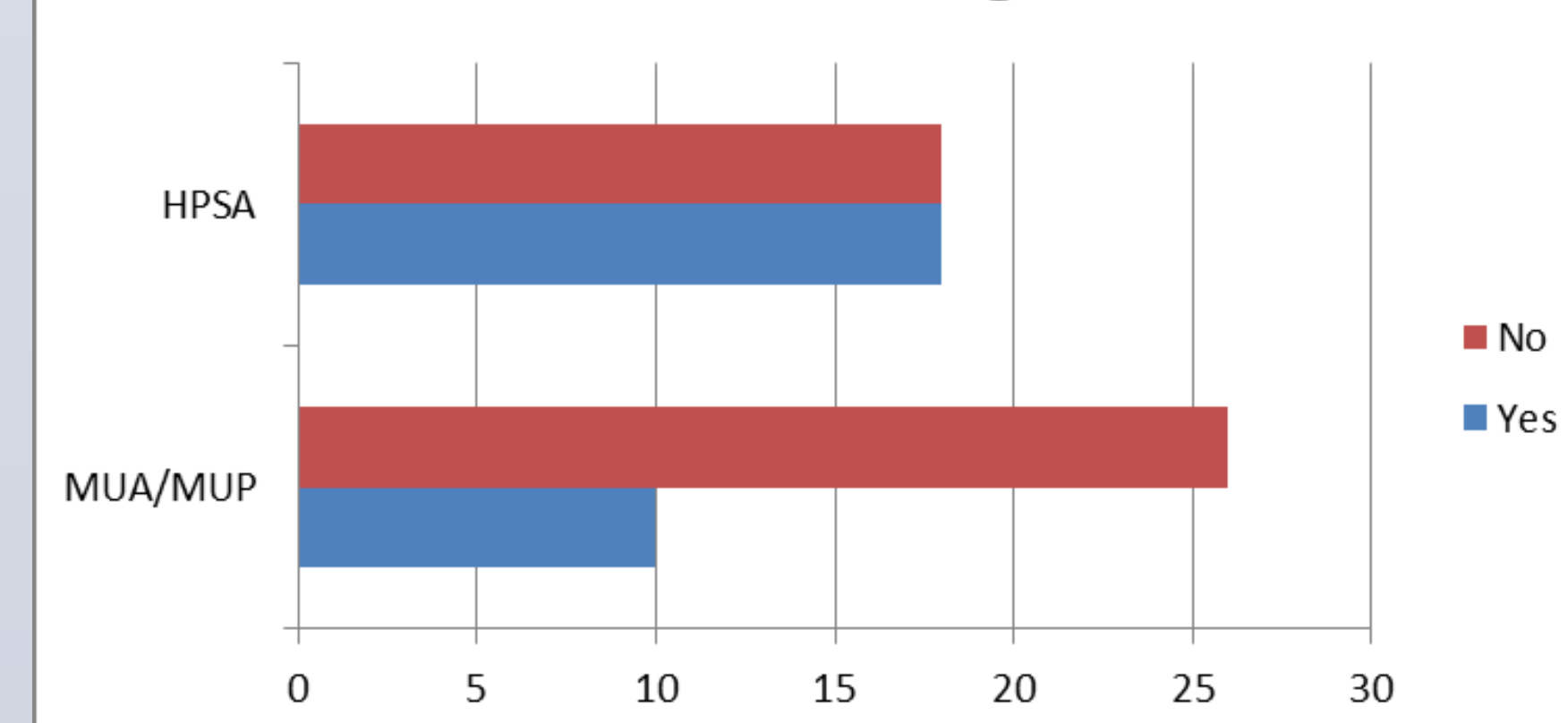
Compared to their UMass peers, a higher proportion of Pathway participants pursue a primary care residency (family medicine, pediatrics, internal medicine, medicine/pediatrics).

Primary Care Residency Choice: Rural Health Scholars Pathway and UMass SOM Graduates



While one-half of Pathway graduates are practicing in a HPSA, less than one-third are in an MUA/MUP.

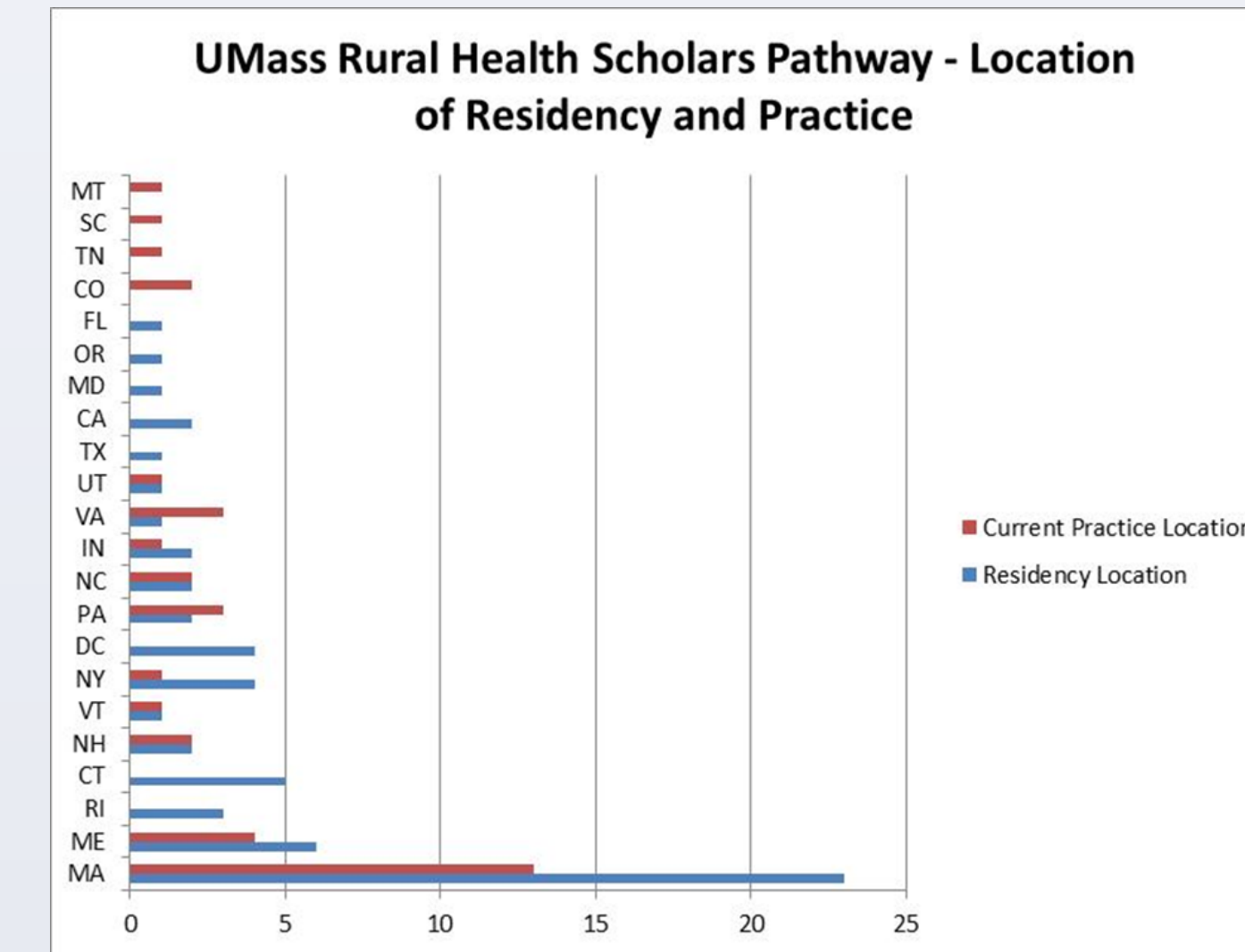
Location of Current Practice by Underserved Designation



In addition, 14% are also currently practicing in a rural area by RUCA or census bureau definition.

Results

Pathway graduates (n=62) have selected residency programs and/or are practicing in states that have significant rural areas.



33% of graduates are practicing in an urban area of a rural county or state.

Pathway's Influence:

"I always planned to work in a rural region; the Pathway helped foster that."

"I learned I liked rural places and the life there."

"The Pathway helped me to be more cognizant of rural health disparities."

"...I had the amazing opportunity to travel to Hamilton, Montana to work at Marcus Daly Memorial Hospital – a critical access hospital.... I worked in the ER with Dr. Josh Pacheco, a UMass RHSP graduate. The major difference I noted between working in a rural, critical access hospital and an urban, academic tertiary care center was access to resources. The providers in Hamilton are often on their own when it comes to making decisions – consultations for many specialties are simply not an option. When the ED gets a call from EMS about a chest pain case, the doctors must make a split-second decision about whether they will be able to care for the patient, or if they should redirect the ambulance to the closest cath lab, 45 minutes away in Missoula! More specialized care required transfer to Spokane, Washington, 4 hours away."

-Kelli Paice, UMMS Class of 2016



Rural practice location decision:

- Better work/life balance
- Shorter commute
- Slower pace of life
- Opportunity for outdoor activities

Conclusions

Students who join the UMass Rural Health Scholars Pathway are more likely than their peers to select a primary care residency.

Almost one-quarter of Pathway graduates match with a residency in Massachusetts; approximately 12% practice in the state.

Reasons for rural practice include practice content and context and, especially if family physician, connection to patients and place.

Pathway graduates are more likely to be practicing in a community designated as a HPSA than in one designated as MUA/MUP.

Limitations

Small numbers.

Nursing graduate decisions and practice locations remain to be analyzed.

Interviewed graduates who had been most involved; we knew them well.



References

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