

Needs Assessment for a Rural Family Medicine Training Program

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Introduction

Currently there is no rural family medicine residency track or program in Maine. Need for primary care physicians in rural Maine persists. Western Maine Health has multiple specialties and local physician interest in training family medicine residents. The Rural Internal Medicine Maine (RIMM) residency track was established in 2017 at Western Maine Health. Maine Health Maine Medical Center Family Medicine Residency is partnering with Western Maine Health to develop a rural residency concentration for 1-2 residents a year. Outcomes from this project will inform this effort.

Methods

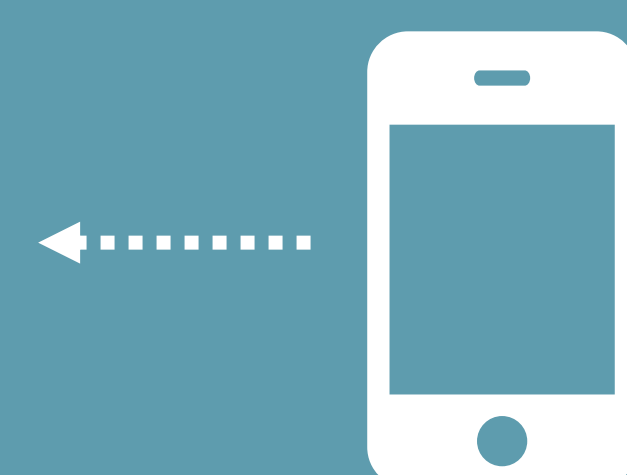
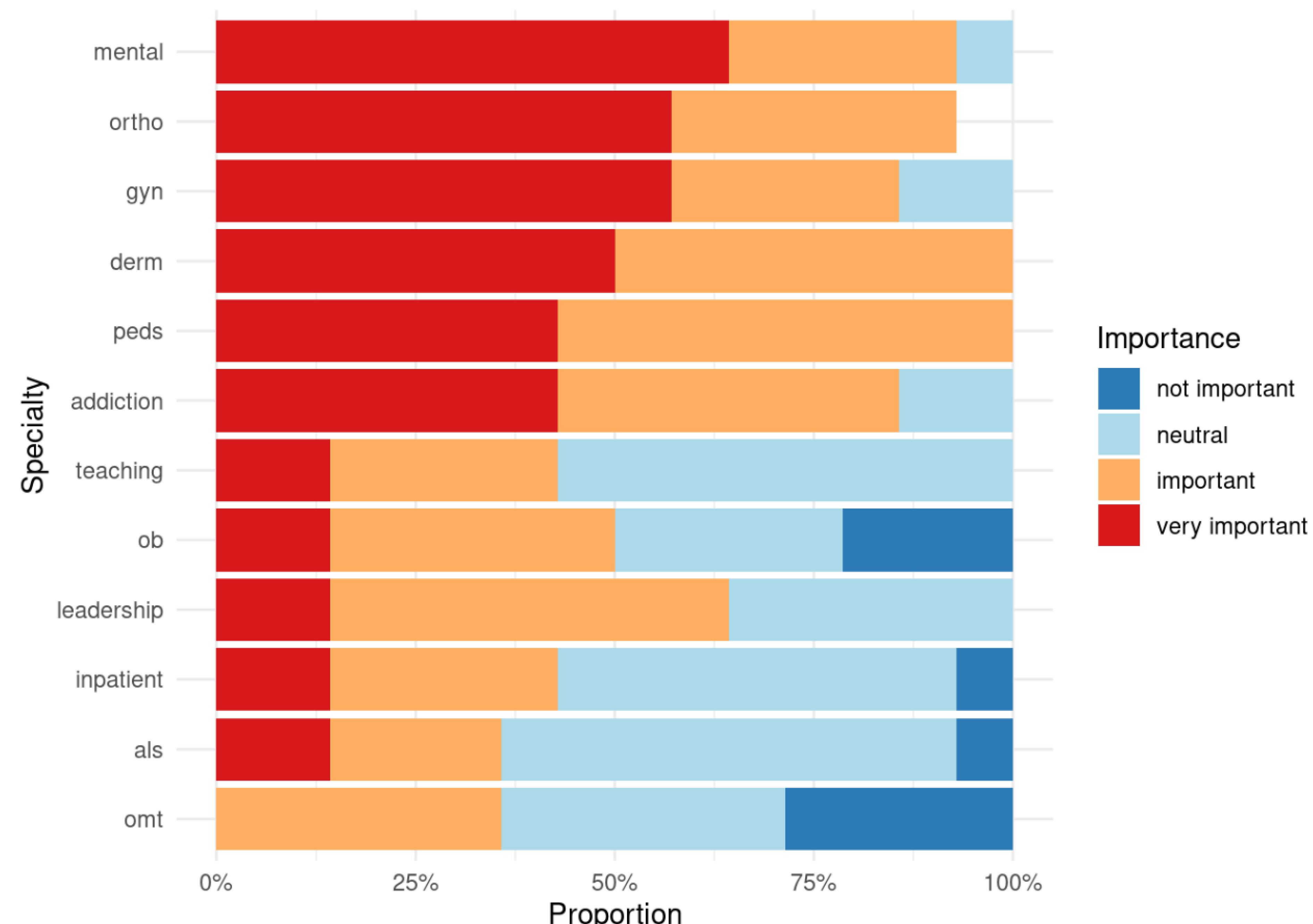
1. Cross-sectional survey designed to collect information on what educational goals would be a high priority in designing a rural residency program in Maine
2. Online survey built in REDCap and emailed to family medicine residents and physicians at Western Maine Primary Care, Maine Health Maine Medical Center Family Medicine Residency, Northern Light Family Medicine and Residency, and Central Maine Family Medicine Program
3. The 14 survey responses were analyzed and reviewed for themes and descriptive statistics using word and R-studio

Discussion

The study was limited by the small sample size (14 responses). Mental health diagnosis and treatment in the primary care setting (mental) educational objective had the highest proportion of 'very important' responses (64%) from the survey. This finding aligns with the 2022 Oxford County Community Health Needs Assessment (CHNA), where 58% of patients rated their mental health as their top health priority. In our survey, Musculoskeletal care (ortho) was second highest rated educational objective with 62% of responses indicating it as a 'very important' objective, Gynecologic (gyn) procedures was third highest rated at 57% and Dermatologic procedures (derm) as fourth highest priority at 50%. This survey, though small, provides some insight into what educational goals will be helpful in designing a rural residency concentration in Maine. A follow up study of various rural family medicine track or concentration designs and their success of placement of physicians in rural primary care jobs would be an interesting follow up study to consider.

Mental Health, Musculoskeletal Care, Gynecological and Dermatologic Procedures identified as highest education priorities in Rural Family Medicine Residency training

Rural family medicine residency educational objectives on a 1-4 scale of importance



Point camera at QR code to download full survey responses

Results

What are the highest priority outcomes residents would benefit from the most in a rural Maine Family residency training program?

- Broad scope of care, independent, ability to provide care with lack of local resources, ability to understand local social determinants of health

What knowledge/skills are most important for rural family medicine physicians to learn in residency to be able to practice independently in rural Maine?

- Independent lifelong learning skills, knowing resources in community, and breadth of ambulatory care knowledge
- 6/13 comments mention procedures as being important
- 4/13 comments mention addiction/IMAT skills as important
- "A good sense of independent learning, sound procedural skills, community and patient centered approaches to patients, understanding the social determinant of health make-up of the community"

For those in rural practice, what do you wish you had learned more about in your training?

- Communication, change evidence into action, push beyond barriers, psychiatry, more procedures, insurance coverage, quality metrics and value-based care

Any other important educational goals of a training program for family medicine residents to be successful in practicing in rural settings in Maine?

- Innovation, research, build networks, institutional knowledge, teaching medical students, broad variety of educational experiences
- "Ability to provide top of license full spectrum care, work professionally in a small town, understand the community you are caring for"

What are barriers to recruitment and retention of family medicine physicians in rural Maine?

- 9/13 surveys mention location/social isolation as barriers
- 4/13 surveys mention salary barrier
- 4/13 mention resources/support barrier

How can we help resolve barriers to recruitment and retention in rural family medicine practices?

- Compensation including overall salary, loan repayment, bonuses other sites don't offer, flexible schedule, more manageable work-load and work life balance are what respondents referred to as part of compensation.
- 7/12 responses indicate the theme of compensation being most important.

Main finding goes here. Emphasize important words.

Title

Author(s)

Introduction

- Bullet 1
- Bullet 2

Methods

1. How did you find this?
2. Collected [what] from [population]
3. How you tested it

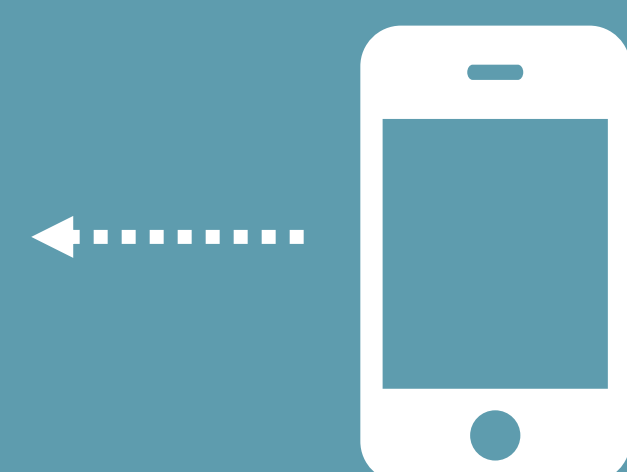
Results

- Graph/table with essential results only.
- All the other correlations in the ammo bar.

Discussion

- Peas and carrots

Graphs and Figures



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