

RURAL TRACK PIPELINE PROGRAM

MU School of Medicine Recognizes National Rural Health Day



■he University of Missouri School of Medicine joins health care organizations across the country to honor the thousands of health care students and professionals serving the unique health needs of an estimated 57 million rural Americans.

Today marks the 10th anniversary of National Rural Health Day, an annual observance by the National Organization of State Offices of Rural Health (NOSORH) every third Thursday of November. Its mission is to "promote the 'Power of Rural,' bringing much needed attention to the ongoing efforts to communicate, educate, collaborate and innovate to improve the health

of an estimated 57 million rural Americans."

The MU School of Medicine received an official proclamation of Missouri's recognition of National Rural Health Day this year from Gov. Mike Parson.

Rural health care is an essential and immediate need for Missourians. While 37% of Missourians live in rural communities, only 18% of Missouri physicians practice there. As the Baby Boom generation ages and needs more care, the crisis will worsen in rural Missouri, where a greater percentage of the population is over the age of 65.

"More Missouri doctors receive their medical degree from MU than from any

other institution, so we feel an urgency and an obligation to address this growing health care crisis in our state year-round," said Steven Zweig, MD, dean of the MU School of Medicine. "We already have several unique programs designed to offer our medical students encounters and training in rural and underserved areas."

The medical school took a step to address the physician shortage with its class expansion project, which included the founding of the Springfield Clinical Campus in 2016. That allowed MU to increase its class sizes from 96 to as many as 128.

Another key initiative is the Rural Track Pipeline Program, which is designed to find and train students to practice medicine in small towns. It recruits students from rural areas through the Bryant Scholars Pre-Admissions Program and gives students clinical experience in rural health care settings during medical school. Of the Rural Track program graduates, 48% practice in rural areas and 32% practice in rural Missouri. For Bryant Scholar graduates,

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Kathleen Quinn, PhD Associate Dean for Rural Health

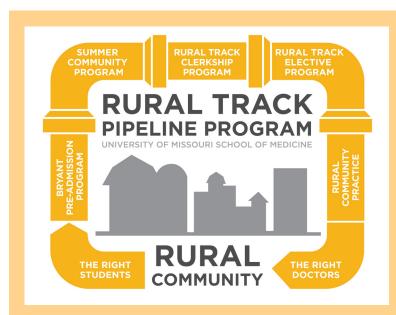
2020. What a year! In January, the Center for Health Policy, the Missouri Telehealth Network, Continuing Medical Education and Community Health Engagement and Outreach came under my direction along with the Rural Track Pipeline Program. This collaboration will result in

a cumulative impact on the health of Missourians as we synergistically work together. Coincidentally, the HRSA grant awarded to us in 2019 was supplemented with additional funds allowing us to initiate or expand current work in all of these departments in addition to the Russell D. and Mary B. Shelden Clinical Simulation Center. Please read details in this edition regarding these exciting new projects.

2020 marks the 25th Anniversary of the Rural Track Pipeline Program! We looked forward to a celebratory year and we did celebrate but we faced challenges as everyone did due to COVID-19. We persevered holding both our new Clinical Rural Immersion Program in a hybrid way and the Bryant Scholars Retreat completely online. We recognized an outstanding student and community-based faculty members in unconventional, virtual ways but with the same accolades and gratitude.

Rather than holding an event for National Rural Health Day, we asked students to answer, Why I Wear a Mask? and Why is Rural Health Important to You? Please read the students' inspiring answers. Lastly, please help me in congratulating the 24 newly accepted Bryant Scholars. We hope in a few years they are practicing with you to care for rural Missourians.

Warmest regards, Kathleen Quinn, PhD



Make a Gift

Help celebrate 25 years of the Rural Track Program! Make a gift to support the program and student scholarships.

To donate online, visit: medicine.missouri.edu/education/rural-track-pipeline-program/alumni/

Update Us

To update your information, visit: medicine.missouri.edu/education/rural-trackpipeline-program/share-your-ahec-alumni-news

Having accurate practice information on Rural Track participants will assist us in illustrating program outcomes to stakeholders.

Program Outcomes

Program participants are more likely to choose a primary care specialty and twice as likely to choose family medicine as their specialty when compared to non-participants.

- 57.1% of participants practice in a rural location
- 56.1% of participants practice in Missouri
- 50.8% entered a primary care residency program

Rural Track Exemplary Student Award

ach year, the
Rural Track
Management
Group chooses an
M4 to recognize
for the Rural Track
Exemplary Student
Award. The award
recognizes MU
Rural Track students
who consistently
demonstrate a high



level of commitment and passion for learning.

These students are recognized by patients, preceptors, and staff as providing outstanding patient care and demonstrating an exemplary level of professionalism. They show a high level of interest in rural medicine and actively participate in rural track-related activities. They seek out opportunities to become involved in the community and participate in service activities where available.

This year, Dalton Lohsandt, MD '20, was the recipient of the award. Lohsandt completed his Rural Track Clerkship rotations in Sedalia during his third year and was nominated by Dr. Donald Allcorn.

Dr. Allcorn, a family medicine physician from Lincoln Family Medicine, wrote: "Mr. Lohsandt's field of knowledge is exceptional for his level of training and he relates better than most residents to my patients. I think most of this comes from being from a small town with a solid work ethic, high ethical standards and a genuine interest in Family Medicine. He is continually reading and improving his quality of patient care and safety. He has proven that he is committed to a life of continuing education."

Dr. Lohsandt is a first-year family medicine resident at the University of Missouri.

Outstanding Community-Based Faculty Preceptor Award



Juan Dominguez, MD, middle, receives his Outstanding Community-Based Faculty Preceptor Award from Mosaic Life Care Administrators Tony Claycomb, left, and Davin Turner, right.

uan Dominguez, MD, received this year's Outstanding Community-Based Faculty Preceptor Award. Dr. Dominguez is a family medicine physician from St. Joseph. Since 2001, Dr. Dominguez has taught 43 MU medical students as well as students from multiple institutions and health professions.

Recipients of this award must demonstrate commitment to fostering those factors determined to be critical to the sucess of the University of Missouri School of Medicine graduates as defined by the key characteristics.

Dr. Molly Bliss, a recent graduate of MU School of Medicine and a Bryant Scholar said, "When reflecting upon all of the experiences I shared with physicians who worked with me during my rural clinical rotations, I can't think of a better recipient of the Outstanding Community-Based Faculty Preceptor Award. Dr. Dominguez is the ultimate role model for student doctors to try and emulate. His friendly personality, compassionate demeanor, and ability to talk openly facilitates the development of a trusting relationship between not only him and his patients, but also between him and his colleagues."

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For Bryant Scholar graduates, 59% practice in rural areas and 49% practice in rural Missouri.

"MU's Rural Track program, which this year celebrates its 25th anniversary, received grants in 2019 and 2020 totaling nearly \$8 million from the Health Resources and Services Administration (HRSA). The money is being used to expand the Rural Track Pipeline Program and created a Rural Track residency in Sedalia, Missouri. Funding also supports:

- Summer Community
 Program: a summer session
 for second-year medical
 students that exposes them
 to different rural medicine
 opportunities
- Rural Clerkship Program: an opportunity for third-year medical students to complete up to three clerkships at rural hospitals
- Rural Track Elective
 Program: an opportunity for
 fourth-year medical students
 to complete electives in
 rural, community-based
 settings
- Medical Simulation
 Experiences: the Russell
 D. and Mary B. Shelden
 Clinical Simulation Center's
 mobile simulation vans take
 the simulation center on
 the road and will now have
 top-of-the-line equipment to
 deliver training and improve
 the skills of rural learners
 and providers throughout

Missouri

Health Care Workforce
 Project: a project that
 analyzes the characteristics
 of Missouri's health care
 workforce by surveying
 members of health care
 occupations and professions
 about characteristics of their
 professional experience,
 current jobs and future plans

Investing in rural health education involves established physicians as well as students in training. The Continuing Medical Education and Physician Lifelong Learning programs educate providers on patient-centered care. Through these programs, providers can participate in the Missouri Telehealth Network and Show-Me Echo, initiatives that create a collaborative network of shared medical knowledge. Show-Me Echo has educated 4,486 professionals from 108 of the 114 counties in Missouri about a range of topics including autism, opioids and COVID-19.

MU's rural health expertise has not gone unnoticed. The Rural Medical Educator group of the National Rural Health Association released "Profiles of Rural Medical Educators" in 2020. The e-book compiles conversations with experts from across the nation on reversing rural physician shortages and Kathleen Quinn, PhD, associate dean for rural health at the medical school, was invited to participate in the project.

Quinn has led the medical school's rural health programs for almost 20 years and earlier this year was named senior program director for community health engagement and outreach for the University of Missouri. This joint position between the medical school and the University of Missouri Office of Extension and Engagement is a collaborative role that demonstrates MU's integrated approach to community health as well as its commitment as a land-grant institution to improve the health and well-being of all Missourians.

Quinn is using her relationships across the state to help close the health care gap by prioritizing approaches that will bring new technology and expertise to rural communities, a key aim of the UM System's NextGen Precision Health initiative. UM System researchers, clinicians and MU Extension community specialists are addressing health care disparities from multiple angles.

"NextGen is not just a building in Columbia," Quinn said. "This is research, this is partnerships, this is collaboration between the university and communities working together to solve real challenges rural Missourians face."

— Article provided by MU Medicine Magazine



School of Medicine Launches Clinical Rural Immersion Program



he first annual Clinical Rural Immersion Program gave 25 health care students real-world experience in rural Missouri. This year, students spent two weeks studying rural medicine in Sedalia. To protect students and the Sedalia community against the potential spread of COVID-19, the program was held virtually with modified in-person visits.

"I'm from an itty-bitty town called Millersville," said Jessica Lier, who recently completed her first year at MU School of Medicine. "I have two little brothers that have special needs, and we had to travel often for them to see specialists. I recognized pretty early on that even in semi-rural areas there is a lack of medical resources that people need. I want to be able to help people like my little brothers and maybe practice in those areas."

The project was made possible by the Health Resources and Services Administration

(HRSA) funding the MU School of Medicine's rural medicine programs received last September. This program is one of many ways that the MU School of Medicine is exposing future health care leaders such as Lier to learn about rural medicine in the hope of combatting Missouri's ongoing rural doctor shortage.

"There are several programs in our pipeline that give students an opportunity to experience rural communities and potentially practice in these areas in the future," said Victoria McGhee, program and project coordinator for MU's Rural Track Pipeline Program. "The research shows that the more exposure medical students have with a rural practice, the more likely they are to return to a rural practice."

From June 1-12, the students learned through live online sessions, assigned readings, preand post-work activities, reflection assignments and other group work. Pharmacy students were

able to complete their clinical rotations on-site in Sedalia. The curriculum was adjusted for the other students with limited on-site interaction through an online learning platform. To meet their clinical requirements, students participated in telehealth visits with health care professionals based in Sedalia to expand their understanding of the community.

"The community benefits through sharing the unique aspects of their region to recruit professionals," said Kathleen Quinn, PhD, associate dean for rural health. "This program is an academic and community partnership at its best. The students also benefit from experiencing interprofessional team care through an understanding of each discipline's unique role contributing to patient centered care."

Students got to know Sedalia by doing virtual farm tours via guided drone footage and completing a windshield survey by driving through the area and taking notes about population demographics and the availability of public services and health care.

"Each rural community is so different," McGhee said. "In this case, we want students to understand what makes Sedalia different and why that community runs the way that it does. As a rural provider, you're more than just a doctor. You are part of the community."

— Article provided by MU Medicine Magazine

Nearly \$3 million in Additional Funding Awarded to Rural Medical Education



he MU School of
Medicine has received
a \$2.8 million grant
from the Health Resources
and Services Administration
(HRSA). This award is in
addition to grants totaling
nearly \$5 million issued by
HRSA last year, which was the
largest award for rural medicine
in the school's history.

"This funding will contribute significantly to a long-term, state-wide impact in Missouri" said Kathleen Quinn, PhD, associate dean for rural health at the medical school and principal investigator of the grant.

The supplemental money will enable multiple departments and centers at the School of Medicine and MU Extension to support their ongoing commitment

to increase the number of doctors in Missouri and address the physician shortages in rural parts of the state. The additional funding will be used throughout the year to develop new rural programs and upgrade equipment and software used in existing programs.

More Missouri doctors receive their medical degrees from MU than from any other institution, so we feel an urgency and an obligation to address physician shortages in rural parts of our state," said Steven Zweig, MD, MSPH, Hugh E. and Sarah D. Stephenson Dean at the University of Missouri School of Medicine. "Our existing programs uniquely prepare our medical students with training in rural and underserved areas;

this grant will enhance those initiatives as well as help us identify additional needed resources for supporting current rural health care providers."

Enhancing simulation experiences for rural learners

One of the ways the supplemental dollars will be used is to enhance the medical school's mobile simulation vans. These vans take the simulation center on the road and will now have top-of-the-line equipment to deliver training and improve the skills of rural learners and providers throughout Missouri. The vans will either replicate scenarios commonly seen in that region or provide more rare scenarios to help fill educational gaps. There will also be collaboration with the Missouri Telehealth Network to provide additional opportunities to use telemedicine to educate more learners and reach more patients efficiently.

"The new van we will add to our fleet with this funding will have more training space and provide more capabilities when we're on the road for training," said Dena Higbee, executive director of simulation.



"This year, the new van will primarily provide simulation resources to our rural track locations where students are practicing."

Identifying health care workforce needs

Supplemental funding also will be used to support a robust implementation of the MU Health Care Workforce Project according to Tracy Greever-Rice, PhD, MS, director for the MU Center for Health Policy.

The workforce project analyzes the characteristics of Missouri's health care workforce by surveying members of health care occupations and professions about characteristics of their professional experience, current jobs and future plans. The results of these surveys support local and state policymakers in identifying current workforce needs as well as to project future shortages with precision and nuance.

Investing in telebealth

The importance of telehealth has become clear during the COVID-19 pandemic. The new funding will provide incentives for participation in Show-Me Extension for Community Healthcare Outcomes (ECHO). ECHO connects

community primary care providers and students with interdisciplinary teams of experts who can help them learn. Since 2015, ECHO has grown from two projects to 24 current ECHO projects. Topics include kidney disease, diabetes, hypertension, child psychiatry, asthma, dermatology, opioid use disorder and COVID-19.

These projects are only the beginning. Supplemental funding also will support continuing medical education and physician lifelong learning, develop online training modules for learners and faculty, create a community-based faculty development course and more.

The additional HRSA grant runs through 2021, the initial 2019 HRSA grants run through 2023 and plans are already in place to sustain them after they expire.

— Article provided by MU Medicine Magazine

Bryant Scholars Pre-Admissions Program Update

The Bryant Scholars Pre-Admissions Program began in 1995 as part of the Rural Track Pipeline Program at the MU School of Medicine to address the shortage of physicians in Missouri.

The Program encourages young people from rural backgrounds to pursue a medical education.

- 59% of Bryant Scholars practice in a rural location
- 67% of Bryant Scholars practice in Missouri

CONGRATULATIONS TO THE NEW BRYANT SCHOLARS ENTERING CLASS OF 2022!

Quin Blankenship, Lenox Collin Breckenridge, King Civ Amory Carter, Caruthersville Ashwin Garlapaty, Eureka Angelina Hein, Boonville Dylan Hood, Fefferson City Tara Hull, Maryville Dagen Jones, West Plains Mattaline Killingsworth, Lawson Kobe Kisling, Sarcoxie Nash Kolb, Kearney Barley Kozlowski, Troy Jaycee Mudd, Napoleon Adam Orf, Troy Kristen Reese, Festus Shelby Salisbury, Centralia Erika Shock, Gideon Courtney Shubert, Gallatin Shannon Stice, Mexico Bailee Van Deren, *Bolivar* Ethan Weiss, Park Hills Maggie White, Green Castle Madyson Williams, Laredo Haris Zahoor, Rolla



Rural Scholar Elizabeth Blanton, MD '23 candidate, with her physician mentor, Bryant Scholar Fallan Mayabb, MD '11.



Dr. Stuart Braverman, MD, received the Rural Track-Distinguished Community Based Faculty Award at the 2020 Awards Convocation.



Rural Scholar Brittney Corcoran, MD '23 candidate, participated in the "Why I Wear a Mask" social media campaign. She said, "I wear a mask so I can keep those around me safe while still supporting local businesses."



Rural Track staff participate in the "Why I Wear a Mask" social media campaign.

Why Rural Health is Important

In honor of National Rural Health Day, Rural Track students were asked, "Why is rural health important to you?"

"Rural health is important to me because, from personal experience, I know the challenges that people of rural areas face regarding getting adequate and efficient health care. Rural health is something that is overlooked in many parts of Missouri and nationwide, but the people of those areas are just like any other. They also deserve the healthcare experience that can be seen in more urban areas and this is why Rural Health is important to me."

- Leon Cheng, MD '24 Candidate Caruthersville, MO "Rural health is important to me because of my rural roots and my plans to serve a rural community in the future."

- Eliza Owens, MD '21 Candidate Goodman, MO

"Rural health is important to me because where you live shouldn't determine the quality of your healthcare."

- Sam Holt McNair, MD '22 Candidate Glencoe, MO

"Rural health is important to me because the health of the backbone of American should never be neglected; especially, if we want to continue to live and prosper in this great nation."

Chase Pitchford, MD '22 Candidate Ozark, MO

"Rural health is important to me because I've spent my whole life in a rural town and I've seen how much of an impact quality rural health care can have."

-Wyatt Whitman, MD '22 Candidate Lake Ozark, MO "Rural health is important to me because I want to give back to rural communities like the one that I grew up in."

- Sam Cheng, MD '24 Candidate Caruthersville, MO

"I support rural health by.... learning about health disparities in rural, underserved areas so that I may better serve this population in my future career."

- Kirstie Holtermann, MD '21 Candidate Labadie, MO

"One reason rural health is important to me is most of my family lives in rural areas, and I want them and people like them to receive the care they deserve."

- Jacob Dunlap, MD '24 Candidate Poplar Bluff, MO

"I support Rural Health by being an advocate for my family and my patients!"

- Kelly Dougherty, MD '22 Candidate Craig, MO

Where Are They Now?

Rural Track graduates were asked, "What is your favorite part of rural practice?"

Andrea Schuster. MD '14

Family Medicine
Mercy Family Medicine
Cuba and Owensville, MO

My favorite part of rural practice is providing care to patients in small communities who have not previously had access to regular health care, usually due to transportation or financial issues. Helping them make lifestyle changes and start necessary medications, and then following their progress over time is very rewarding. Primary care docs also see a wide variety of conditions in rural areas due to lack of access to specialists. In the same day we see patients for chronic conditions, mental health concerns, prenatal and postpartum visits, and routine wellness exams, which makes rural practice interesting and challenging. Finally, I like caring for multiple family members that live in the same area; family dynamics are always entertaining and help me understand the patient's unique perspective and health goals.

Andrew Valleroy, MD '13

Family Medicine Phoenix Family Medicine Washington, MO

My practice is located in Washington, MO where we also live. We see patients from all walks of life and it is very gratifying to practice in your home community. Being able to be involved in the community in ways outside of the office is one of most enjoyable parts of my job. Having been involved in the Rural Track Program and practicing in a rural community during residency not only made sure I was fully prepared for this role but I can't imagine doing anything else.



SHOW-ME ECHO LEARNING COLLABORATIVE SUPPORT PROGRAM

MU School of Medicine community-based faculty can receive compensation by joining Show-Me ECHO's new learning collaborative support program for select ECHOs. Participants will receive compensation of \$100 per

session attended through June 30, 2021, with maximum compensation totaling \$2,000. Applicants will receive an email confirming approval for participation within a week of applying. Participants should select their ECHOs of interest when registering. They also must complete a survey in May 2021. For more information visit: http://showmeecho.org/lcspfaculty/.



Students Learn About Rural Medicine in Virtual Summer Retreat

ural Missouri students gathered virtually this summer at the annual MU School of Medicine Bryant Scholars Summer Retreat. This program is just one of many programs that reflect the School of Medicine's ongoing commitment to training future medical professionals to help fill the national and local shortage of rural physicians.

The retreat would usually take place on campus, but this summer it happened virtually to protect the health of all involved due to the COVID-19 pandemic. The facilitators used group video calls and online platforms to connect with students.

"Rural Track faculty and staff did an amazing job researching and implementing curriculum usually done hands-on to online," said Kathleen Quinn, PhD, associate dean for rural health. "It was a challenge but their enthusiasm was contagious. The students had fun adapting to the new innovative and creative ways of learning and working together."

Retreat leaders and speakers used the pandemic as an opportunity to discuss the importance of telehealth and how public health crises can affect rural and urban communities disproportionately. Students also learned important skills to carry into medical school, such as how to write a personal statement and build effective study habits.

"We have some amazing

community-based faculty in our rural areas and at Mizzou that are involved that were past students," said Allison Fuemmeler, student service coordinator for the Bryant Scholars Pre-admissions Program and the Rural Scholars Program. "The beauty of the Bryant Scholars Program is that students also have a built-in family with their cohort."

The Lester R. Bryant Scholars **Pre-Admissions Program** encourages young people from rural backgrounds to pursue a medical education. Students have the chance to learn from rural physicians and Bryant Scholars further along in the program who act as mentors. Sixteen of the participating students are beginning medical school this fall, and 24 of the students are getting ready to start their senior year of undergrad at colleges and universities throughout the state. Students accepted into the preadmissions program are offered acceptance into the MU School of Medicine on the condition they achieve certain academic standards, demonstrate ongoing professionalism and participate in required activities.

Emily Hinkle, an MU School of Medicine student from Morrisville, joined the Bryant Scholars Pre-Admissions Program while a student at Drury University. Hinkle experienced the challenges of seeking medical care in a rural area growing up and saw how the lack of access affected health outcomes for her community. This was her second time participating in a Bryant Scholars retreat. She plans to practice medicine in a rural area.

"I would encourage any student to try this program. It is a great way to get to know people who have done a lot in the field and learn a lot about the rural health team at Mizzou," Hinkle said. "The programs they put on are such great experiences in learning to better help patients."

Rebecka Ernst, a medical student from Savannah discovered the Bryant Scholars program through the Area Health Education Center (AHEC), a national program that focuses on bringing health care to medically underserved areas, and being mentored by a Bryant Scholar.

"I was always interested in rural medicine and improving access to care," Ernst said. "The Bryant Scholars Program has strengthened that commitment and passion. ... One of the things I enjoy about the retreat is that it connects you to other students who are passionate about the same things you are. It feels easier to start medical school when I know that I can talk to someone who has done it before. I'm very thankful to be a part of the program."

— Article provided by MU Medicine Magazine



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Return Service Requested

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Thank you for your continued support of MU-AHEC and the Rural Track Pipeline Program

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