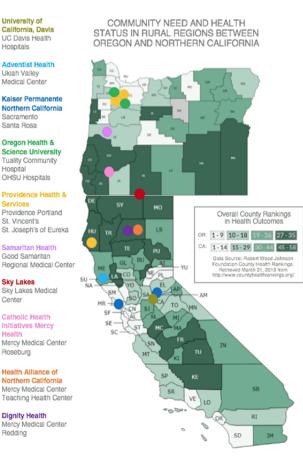
## COMPADRE: California Oregon Medical Partnership to Address Disparities in Rural Education and Health

Oregon Health & Science University (OHSU) and University of California Davis (UC Davis) are assembling a robust collaborative of health care systems, GME programs and Federally Qualified Health Centers (FQHCs) to address workforce shortages in rural, tribal, urban and under-resourced communities between Sacramento and Portland. COMPADRE aims to reduce health disparities by creating a physician workforce that is better prepared, more equitably distributed and more deeply connected to underserved communities. COMPADRE aims to:

- (A) Redesign the UME to GME transition so learners focus on skills development rather than GME selection;
  - a. Your interns may experience a smoother transition
  - b. Create a pathway for capable, pre-vetted interns who will enter residency familiar with your health care system
- (B) Design and deploy a curriculum for practice in under-resourced communities;
  - Share best practices for preparing residents for underresourced communities
  - b. Benefit from curricular toolkits and shared resources that can be implemented in your program
- (C) Establish a thriving learning community to enhance wellness and joy in practice;
  - a. Participate in a community to support learners and faculty
- (D) Innovate admissions practices to transform the composition and distribution of the physician workforce;
  - a. Have a voice in the admissions at OHSU and UC Davis to select students most likely to thrive in your community
- (E) Measure impact on workforce needs, e.g., practice location, specialty choice and community health outcomes.
  - a. Have the opportunity to participate in workforce outcomes research for your community
  - b. Show accountability, impact, and value of your program to your institution, stakeholders and community partners



COMPADRE includes 31 existing and planned GME programs across seven specialties and sponsors. Members of local tribal, rural and urban communities will participate in: selection; designing learner engagement activities in their communities; informing curriculum, faculty development and wellness plans; and defining workforce outcomes. Our plan is to select 15 students from each school each year who will spend a minimum of 14 weeks in a partner GME site: prior to matriculation, during first year, and > 12 weeks on clinical rotations. Current medical students and residents will be recruited as the first cohort. By Year 5 of the project, COMPADRE will have *120 students and 90 residents* (one resident/GME site/year). Activities include:

- Targeting recruitment with existing pathways, community colleges and FQHCs for students who intend to practice EM, FM, general surgery, GIM, OB/GYN, pediatrics or psychiatry in low resource settings.
  - Seeking an NRMP waiver to permit students to seamlessly enter GME. Students will retain an opt-out option.
- Expanding health systems science by adding eight new competency domains: agency, adaptability, communityresponsiveness, comprehensiveness, integrity, abundance in the face of scarcity, reflective practice and resilience.
  - Incorporating indigenous competencies: humility, indigenous knowledge, region-specific ways of being and healing.
  - o Learners will conduct a QI project with GME partners and OHSU's PC Transformation curriculum.
  - ILPs and community coaches to assist learners in understanding the assets, social opportunities and culture of their patients. Supporting directors, faculty and preceptors as mentors and coaches.
- Establishing wellness as a key quality indicator and actively monitoring well-being by administering the Mayo Well Being
  Index to all. Team-based training, learner support and a learning community will decrease isolation and prevent burnout.
- Focus on regional workforce needs: Datamart to link graduates to practice sites, specialty choice and population health outcomes; and to guide project development using a data-driven process.
- An Advisory Board to monitor GME site and specialty recruitment matches needs of target communities.

### **COMPADRE: GME Partner Program Frequently Asked Questions**

### 1. How will Residency Programs benefit from participation in COMPADRE?

Residency programs will:

- Develop a dedicated pipeline for OHSU and UC Davis medical students to enter your program
- Develop a Diversity Plan that improves community health, attracts diverse learners, graduates residents who will serve and meet your mission, and is accountable to your community, health system and elected officials
- Acquire and develop new resources to attract committed learners
- Be provided with Wellness and Faculty Development resources and ongoing support
- Join a Community of Practice with others serving in under-resourced settings
- Increase Engagement with patients and communities
- Address CLER focus areas, including Healthcare Disparities, through the COMPADRE curriculum

## 2. How will COMPADRE students be selected for medical school and how will program directors be involved?

Interested COMPADRE UME applicants will be admitted to the OHSU or UC Davis Medical School by their respective Admissions Committees. GME Program Directors will then participate in a secondary COMPADRE selection process. CAGMEP members (COMPADRE Alliance of GME Partners) will develop guidelines for GME expectations and commitment, as well as opt-in/opt-out policies that are responsive to both GME program and learner needs.

## 3. When will COMPADRE Medical Students begin experiences at the GME Partner sites?

Each site will take 1-2 students per year for 1 week prior to matriculation, 1 week during First-Year, and > 12 weeks on Clinical Rotations. Programs will be asked to give assignment priority to COMPADRE learners.

## 4. What is the purpose of Pre-matriculation experiences and Preclinical Rotations at GME Partner sites?

Early and longitudinal experiences allow students to connect with communities, populations, and GME programs. The opportunity to see students early in their professional development will help the program to assess whether a student's character is a fit that aligns with the mission of the Program and Site. This will also facilitate recruitment of qualified applicants to each GME Partner program.

### 5. Will sites be obligated to host students for these rotations and experiences? What resources will need to be allocated?

Resources for Travel and Housing will **not** be the responsibility of the site; However, shared community resources are desirable.

# 6. Will Program Directors have input on student progress/advancement during Medical School?

Program Directors or their designee(s) will participate in the *assessment and grading* of students rotating at their site. Evaluation processes will be those of the respective medical school. Each Medical School per their respective processes/policies will determine progress/advancement of individual students.

# 7. Are COMPADRE medical students evaluated differently than other medical students?

No. COMPADRE students will be evaluated using the same processes and criteria for advancement as other medical students within their respective school.

### 8. How will residency selection work and what is our obligation as a program?

Partner Residency programs will select students according to a process developed as part of the grant. CAGMEP members will design a system that works for all partner programs; Program Directors will have ultimate control of selection. While programs will be expected to make a commitment to specific students by a deadline to be defined through CAGMEP, the Clinical Experiences at the designated site should permit each student and site to inform their decision-making early enough that a decision not to proceed is not harmful to either the student or the program. The experiences of UC Davis and OHSU's integrated fourth year medical student program in Klamath Falls will further inform this process.

## 9. What is the curriculum being proposed for COMPADRE? What is the timeline for review and implementation?

The first year of the COMPADRE grant will be used for curriculum development. The curriculum will be organized as an expanded Health Systems Science curriculum that adds new competency domains designed to address the needs of the GME Partner communities (*eg, Agency, Adaptability, Community-Responsiveness, Reflective Practice, and Resilience*) and Indigenous Health Competencies (*Humility, Indigenous knowledge, Region-specific ways of Being and Healing*). Some programs plan to implement the curriculum for all of their learners.

## 10. Will additional educational support be provided for COMPADRE Learners?

Individualized Learning Plans will be developed and monitored for all learners. Coaches will support each medical student learner.

## 11. Who is responsible for the "Transition" to GME?

Each GME Partner Program will define the timing and orientation process that best fits their program. Best practices and toolkits for this transition will be shared through CAGMEP.

## 12. How will the GME programs handle a "struggling resident"? Centrally or by individual program?

Programs will handle struggling residents and learners according to the policies and processes of their individual program and sponsoring institution. COMPADRE will assist with Remediation by broadening the availability of resources, community support, professional development tools and by creating and supporting a strong Community of Practice across programs. The two medical schools will address issues related to medical students through mechanisms that both schools have in place.

# **13.** How are residency programs intended to use the grant funds that come to them? How will programs find the resources to accomplish the added workload of COMPADRE activities/requirements?

Programs will have broad latitude for using the grant funds, as long as they are able to demonstrate that the use of funds will help achieve the learner, program or community outcomes. It is understood that GME Partner programs may use funds for administrative time or infrastructure needed to support participation in COMPADRE. Helping programs build this infrastructure is one of the central goals of the grant.

# 14. Are programs obligated to matriculate residents in an accelerated or off-cycle manner?

No. However, GME Partner residency programs will have the opportunity to learn from programs with experience in onboarding residents in an accelerated or off-cycle manner. Programs are welcome to consider new timelines for GME transitions once they have started working with COMPADRE learners. Programs may find that creative transitions into GME can attract ambitious learners and may enhance recruitment into their programs.