

FROM PIPELINES TO PATHWAYS: THE MEMORIAL EXPERIENCE IN EDUCATING DOCTORS FOR RURAL GENERALIST PRACTICE

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ABSTRACT: Oral Presentation

- Purpose:** The aim of this project is to describe Memorial's "pathways to rural practice" approach which is comprised of a targeted pre-admissions process, rural focused medical school experiences/postgraduate (PG) training, as well as additional post PG training support for physicians practicing in rural and remote areas. The pathways approach has allowed Memorial to contribute toward the province's rural generalist workforce which is a primary component of its social accountability mandate.
- Methods:** There are four components included in Memorial's "pathways to rural practice" approach: (1) pre-admissions process (aboriginal initiative, MedQuest, geographic/minority selection) (2) MD placements (rural based experiences) (3) PG vocational residency training (Longer periods of rural training, deeper community integration) (4) after PG vocational residency training (opportunities for professional and faculty development). Memorial's pathways approach was assessed using data from *Learners and Locations*; a longitudinal study which collects information on Memorial's medical students.
- Results:** Out of 617 Memorial medical students (2011-2019), 90% completed their Year 1 Community Health placement weeks in a rural town or rural community. For Year 2 placements for the same graduating classes, 73% of placement weeks were spent in a rural community or rural town. For the graduating classes of 2011 to 2018 (N = 537), 89% completed their Year 3 Family Medicine placement weeks in a rural community and 8% completed them in a rural town. All Memorial MD graduates who graduated between 2011 and 2013 who also went on to complete Memorial's Family Medicine vocational training residencies (N=49) completed some rural training. The same 49 Family medicine vocational training residents spent an average of 52 weeks (55%) out of a total average of 95 weeks in rural areas).
- Conclusion:** The pathways approach has allowed Memorial to produce rural generalists for NL and Canada and under the right circumstances could be used in other demographic/geographic settings. In order for the province of NL and Canada to improve the quality and access of healthcare in rural and remote areas, collaboration at all levels of the healthcare system (e.g. government, health authority, community, and physicians) on an ongoing basis will be required.