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Title

Recruitment of Residents to Rural Programs: Early Outcomes of RRPD Cohort 1

Priority 1 (Research Category)

Healthcare Services, Delivery, and Financing

Presenters

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Abstract

Context: Rural America has fewer physicians leading to poorer health outcomes. In an attempt to bolster the rural physician workforce, the Health Resources and Services Administration (HRSA) funded a series of Rural Residency Planning and Development (RRPD) awards to develop rural residency programs in needed specialties. These 3-year program start-up grants were awarded to the initial cohort of RRPD grantees in 2019.

Objective: Explore early workforce outcomes of the RRPD grants program, using resident recruitment data

Study Design & Analysis: cross-sectional, descriptive analysis of qualitative and quantitative evaluation data

Setting: new rural residency training programs across the U.S.

Intervention/instrument: grantee exit survey, administered at the conclusion of their RRPD award

Population studied: Cohort 1 RRPD grantees: 25 newly developing residency programs in Family Medicine (n=20), Psychiatry (n=4) and Internal Medicine (n=1) across the US

Outcome measures: Median total and eligible applications per available position; median interviews offered and completed per position; positions filled in the main residency Match vs the Supplemental Offer and Acceptance Program (SOAP); residents from the state where program is located

Results: The 25 Cohort 1 RRPD programs range in size from 2 to 8 residents per year. Most programs (16 or 64%) were considered rural training tracks and anticipate that residents will spend on average 73% of their time at rural training sites (50% min to 100% max). Of the 25 sites, 17 (68%) were far enough along in development to participate in the 2022 Match. These programs received a median of 152 (range 25-349) total applications per position, 22 (range 5-122) of which were considered eligible. They offered a median of 15 (range 5-45) interviews per position and completed 15 (range 5-33) of these. Most of the 68 total positions were filled in the main NRMP Match (79% average) though some (19% average) were

filled in the SOAP. Approximately 1 in 3 (34%) of residents currently enrolled in Cohort 1 RRPD programs are from the state in which the program is located, though this ranged from 0 to 79% by program.

Conclusions: Early resident recruitment outcomes suggest the RRPD model is successful in creating and supporting new physician workforce training in rural communities. A strong main Match fill rate (79%) may indicate student interest in rural training, including those who are local to the area.