

WCRGME Rural and Community Medical Educators Faculty Development Conference: Joy in practice **and teaching**

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“The best places to learn are not always the most convenient places to teach”

- Helen McIlvain, PhD

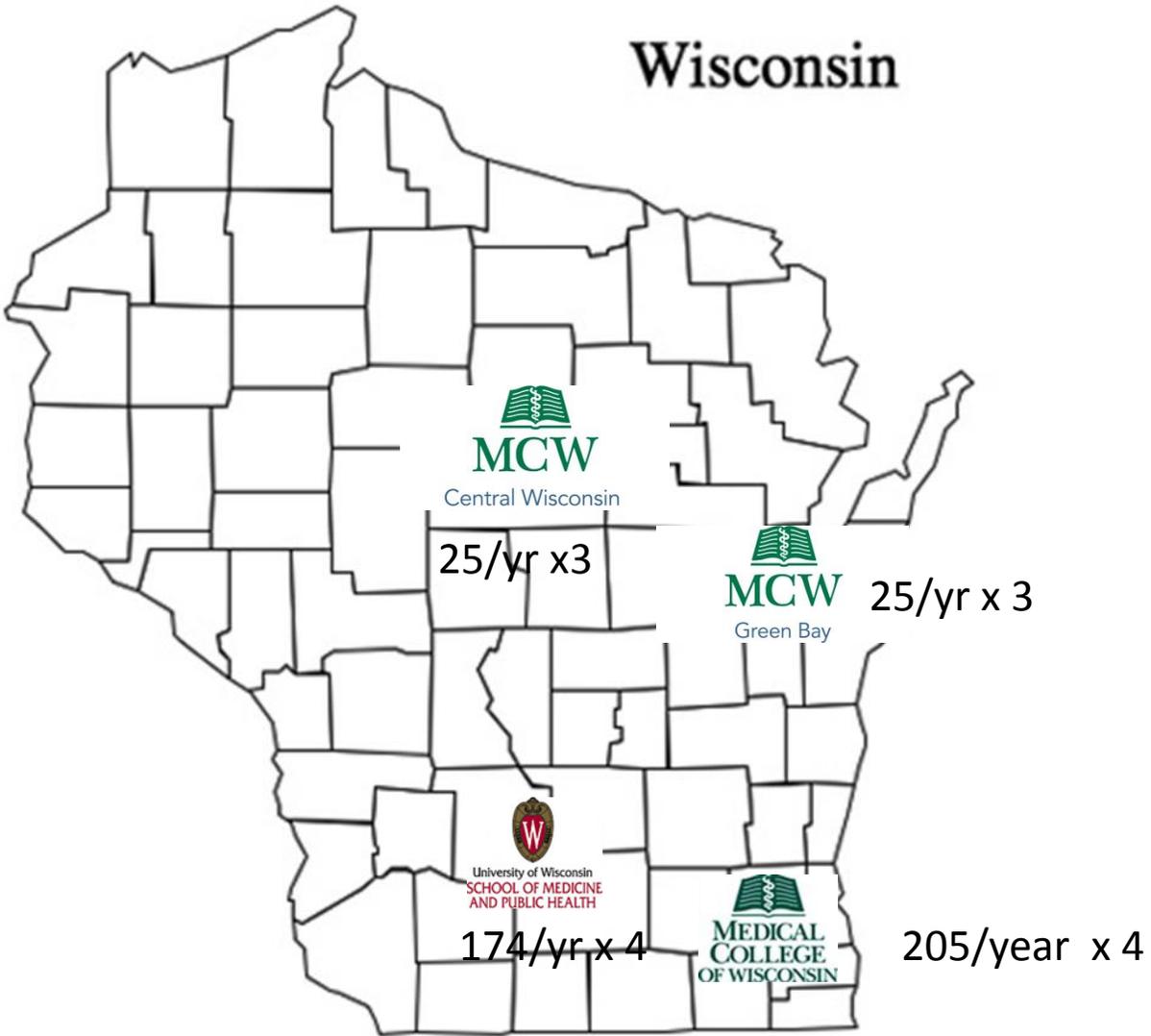
Why do/should doctors teach?

- Doctor: from the Latin “Docere” (to teach)
- Our Oaths:
 - Hippocratic Oath: Classical Version: ...to teach them this art—if they desire to learn it—without fee and covenant; to give a share of precepts and oral instruction and all the other learning to my sons and to the sons of him who has instructed me and to pupils who have signed the covenant and have taken an oath according to the medical law...
- Our own education: “No one learns as much about a subject as one who is forced to teach it” Peter F. Drucker
- Joy: “Share your knowledge. It is a way to achieve immortality.”
— [Dalai Lama XIV](#)

Reality

- 87% of Wisconsin doctors are employed **PLUS**
- Many doctors are 100% “eat what you kill”(100% RVU/production)
PLUS
- Doctors are time-crunched (EHR, work life balance) **PLUS**
- Health systems do not always see medical education (UME or GME) as their job **PLUS**
- LCME and ACGME (accreditors) have inflexible (? outmoded) requirements **EQUALS**
- **Regional and National community faculty shortage (in “ability” & “willingness”)**

Medical Students: State-wide Training Need



Wisconsin UME
429/yr
1666 total

Non-urban GME in Wisconsin

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- Health Partners FM residency
- Mayo Eau Claire FM residency
- UW rural OB rural training track
- MCW GS rural training track
- Northern-Central GME consortium (WiNC GME)
 - 2 new psychiatry residencies (Central Wisconsin and Green Bay)
 - Proposed FM residency Ascension (St Michael's, Stevens Point) with RTT

Meeting faculty need

- Strategies to fund, support, reward, and prevent burnout in community faculty
 - All payers system—those who benefit from med ed should help pay
 - Insurers, health systems, government, communities
 - Promote and pay for medical education as recruitment and retention
 - Include teaching/education as a metric
 - Academic Value Units (equivalent to RVUs)
 - Tax credits or other public incentives for teachers
 - Involve the community in selection of med students and residents
 - Enhance flexibility by accreditors—evidence based
 - Increase pay, stature and sustainability of primary care/psychiatry

Your thoughts and ideas...

- What makes you want to teach?
- What are the barriers to recruiting additional teachers?
- Who are our allies?
- What are other creative approaches to this problem?