

Montana Rural Health Association

Healthcare Labor Shortages and Potential Solutions

by William Connell, Economist



Montana Rural Health
Spring 2013

William Connell, Economist with the Montana Department of Labor and Industry, published an article exploring Montana's current healthcare workforce as well as examining projected needs given Montana's aging population.

This comprehensive article discusses the drivers of the healthcare industry and types of workforce

needed as well as barriers in fulfilling current healthcare jobs and how to build off the existing healthcare training infrastructure available in Montana.

To access the full report, please visit:

www.ourfactsyourfuture.org/admin/uploadedPublications/5104_art-0113.pdf

RUOP—Summer 2013

(WWAMI Rural & Underserved Opportunities Program)

The Rural/Underserved Opportunities Program (R/UOP) is one way Montana is trying to produce more primary care physicians. Part of the University of Washington WWAMI program, R/UOP is a four-week rotation for students between their first and second years of medical school. Students are placed with primary care preceptors in rural or urban underserved areas of Montana and are subsidized by Montana AHEC funds. This experience provides exposure to primary care practices and allows students their "first taste" of clinical life and, to some, their first opportunity to live in a rural setting. Past participants have enjoyed it so much, many opt to return to Montana for another rural rotation for a 3rd or 4th year track experience, for residency, or even to practice.

During the Summer of 2013, Montana facilities and providers will host 32 students across the state – reaching from Libby to Baker and Hamilton to Wolf Point. The students are from four different WWAMI campuses – 17 from Bozeman and the rest from Spokane, Pullman and Seattle – and will be hosted in 25 Montana communities. Local preceptors give their time and expertise to teach and mentor the next generation of providers. In most instances, the students are housed by community hosts that graciously open their homes to the students, ensure they are welcomed to the community, educate them regarding opportunities to attend local events, and make the personal R/UOP experience as fabulous as the clinical experience is!

For more information contact Lisa Benzel at:
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Family Medicine Residency Program of Western Montana

The Family Medicine Residency of Western Montana (FMRWM) announced that it has successfully filled all 10 resident positions for its first class, starting July 1, 2013.

Medical students apply for residency programs in their choice of specialty during their fourth year in medical school. Depending on the specialty, it will take anywhere from 3-5 years to complete the training required to become licensed for practice. Family Medicine is a primary care specialty that requires three years of residency training.



FMRWM is a University of Montana program that has strong partnerships with Community Medical Center, Providence St. Patrick Hospital, Kalispell Regional Medical Center, Partnership Health Center and Flathead Community Health Center. The residency “home base” will be located in the Partnership Health Center building at 401 Railroad W (the old Missoula Creamery).

The program has two tracks and a total of 10 residency positions will be offered each year with 7 of those

residents staying in Missoula and 3 moving to Kalispell for their second and third year.

FMRWM Incoming Class

Missoula

Harshida Chaudhari	Medical College Baroda, India
Claire Frost	University of Vermont College of Medicine
Benjamin Grass	Geisel School of Medicine at Dartmouth
Dan McCarthy	Ohio University Heritage College of Osteopathic Medicine
Saul Rivard	The Warren Alpert Medical School of Brown University
Megan Svec	University of Washington
Sarah Zuger	University of Washington

Kalispell

Kevin Kropp	Arizona College of Osteopathic Medicine of Midwestern University
TJ Sherry	Spartan Health Sciences University
Scot Swanson	University of Washington



For more information please visit:

<http://fmrwm.umt.edu/>

Granite County Dental Home— A Program Overview

As in many frontier communities, health care in Granite County is constrained, with critical shortages in primary, mental health, and dental providers. Residents must often travel 60-160 miles round trip for medical care, particularly specialty services. Access to healthcare is particularly challenging for the Granite County population, with high numbers of uninsured and underinsured, as well as the elderly and those in poverty.

In the Summer of 2010, it was clear that Granite County needed a dental home. For more than a decade, the county had gone without a dentist. Further, more than a third of the population had not seen a dentist in the last year. It was also clear that the community *wanted* dental services. From a 2007 community health assessment, 62% of the population had reported that they would use dental services if provided locally.

Due to the lack of available local services, it was found that 1) Patients were in a much more advanced state of oral disease; 2) Younger patients tended to be “drill and fill;” and 3) Older patients frequently needed oral surgeries, extractions and dentures. People were not yet on a routine to maintain what they had.



In the Spring of 2009, Granite County Medical Center received a Rural Health Care Services Outreach Grant from the Health Services and Resources Administration (HRSA). This was a three year award totaling \$371,000 to start a dental program. In the Summer of 2010, a mobile dental van was available to provide dental services to Drummond and Philipsburg. By the Winter of 2010 it became obvious that the mobile van was not going to be a viable option due to the severe weather. It was difficult to keep patients warm during the sometimes harsh, long winter months. Thus, a second Outreach Grant was obtained totaling \$450,000 over a three-year period to grow the clinic further towards long-term sustainability. In the Fall of 2012, Granite County Medical Center completed a permanent, fixed dental clinic with two chairs to allow the dentist and hygienist to work in tandem. The clinic is gradually growing from one day a week of service to three.

Since 2010, the Dental Clinic has provided yearly dental screenings at all public schools in the county as well as providing dental services to community members.

For further information please contact:
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NRHA Conference Calendar

July 17-19, 2013

Rural Quality and Clinical Conference
Chicago, IL

December 3-5, 2013

Rural Multiracial & Multicultural Health
Conference
San Antonio, TX

October 1-4, 2013

Rural Health Clinic & Critical Access
Hospital Conferences
Austin, TX

February 4-6, 2014

Rural Health Policy Institute
Washington, DC



Improving the Health of 62 Million Rural Americans
www.RuralHealthWeb.org



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