

PARTNERS in A REPORT TO THE COMMUNITY MEDICAL EDUCATION

UW School of Medicine-Gonzaga University Regional Health Partnership



2019 White Coat Ceremony, Photo: Gonzaga University

GROWING OUR PARTNERSHIP, IMPACT

The past year was full of achievements by our students and faculty, and milestones for the partnership between our two universities. From the latest class of medical school graduates and our first joint faculty hire to the announcement of a new center for medical education, every day we are adding to the ways we improve health and well-being across the region.

In the four years of our partnership, we've welcomed 240 medical students, and our recent classes have all selected Spokane as their first choice location — a reflection of their belief in the excellence of our medical school in Spokane and of the quality of life they'll find here.

The first students to complete all four years of medical school on the Gonzaga campus will graduate this spring. Soon they will join the hundreds of physicians who studied at UW School of Medicine in Spokane, as well as the many physician assistants, dentists and nurses who also launched their careers after studying at UW and Gonzaga.

And, of course, the September announcement of our new center for medical education, health sciences research and innovation stands as a true milestone. When complete in 2022, it will enhance our ability to educate the health professionals our region sorely needs.

What you are about to read in the following pages would not be possible without the greater Spokane community — from physicians and business leaders, to policymakers and philanthropists, to the community at large. The impact that, together, we're having on our region is constantly growing, and we, our students and the patients they will care for are forever grateful for your support.

Thank you.

Ana Mari Cauce
Ana Mari Cauce
President
University
of Washington

Thayne McCulloh
Thayne McCulloh
President
Gonzaga University

UW MEDICAL STUDENTS CONTRIBUTE TO THE HEALTH OF EASTERN WASHINGTON

As the next generation of physicians is trained through the UW School of Medicine-Gonzaga University Regional Health Partnership, they gain first-hand experience caring for rural communities across eastern Washington. Through community-based research projects, patient interaction, and collaboration with an extensive network of community partners and healthcare providers, students training in rural communities gain the experience necessary to impact the region's health.

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A welcoming learning environment is a powerful and often overlooked component of a medical education. The addition of a new medical school building will enhance our experiences through the gift of cutting-edge anatomy lab facilities, state-of-the-art learning technology, the integration of clinical tools in the classroom and the addition of extra study spaces to work with our peers to master our didactic coursework.



Virkamal K. Dhaliwal, MHS
First-year UW Spokane medical student

500+ UW School of Medicine graduates are currently practicing in communities throughout eastern Washington

100% of the 60 first-year students applying to UW School of Medicine in Washington selected Spokane as their top choice

19 - the number of counties where UW medical students train in central and eastern Washington

120 first- and second-year UW medical students train in Spokane before moving on to clinical rotations throughout the region

850+ clinical faculty teach UW medical students at more than 48 clerkship sites in Spokane and at 84 in total throughout eastern and central Washington

SHARED MISSION, SHARED HOME FOR HEALTH SCIENCES EDUCATION, RESEARCH AND INNOVATION



Future home of the UW School of Medicine-Gonzaga University Regional Health Partnership. Conceptual rendering courtesy of McKinstry.

Educating the next generation of health professionals to address critical workforce issues is necessary for the health of Spokane, eastern Washington, and beyond, and later this year UW School of Medicine and Gonzaga University will take their successful partnership to an exciting new level when they, in partnership with McKinstry, break ground on a new facility for health sciences education, research and healthcare innovation in Spokane.

Students will enjoy state-of-the-art teaching classrooms, an anatomy lab, research and innovation centers, offices and study spaces. There will be room to develop and grow additional education programs and research projects.

This privately funded project leverages and expands the public-private UW-Gonzaga partnership to reduce risk, expedite completion of the facility and save taxpayer dollars. Seattle-based McKinstry, a national leader in the construction of high performing buildings

will develop, design, build, operate and maintain the new facility.

“This new health sciences center will showcase the strength of the Regional Health Partnership,” said Paul Ramsey, MD, CEO of UW Medicine. “Along with more space for our medical students and room to expand, we are excited about the integrated education possibilities with other health sciences disciplines. We are grateful to McKinstry for helping to make this vision a reality.”

LEADING THE WAY

Physicians graduating from medical school are amply equipped to treat patients, diagnose disease, interpret lab data and make high-stakes patient care decisions; but they sometimes feel less confident leading patient care teams or assuming community leadership roles.

Enter the Leadership Pathway, an innovative new option for UW School of Medicine students studying in Spokane.

Four years in the making, this dynamic collaboration between UW School of Medicine and Gonzaga University’s School of Leadership Studies was developed to help future physicians more easily step into roles that are often expected of them by strengthening and honing their leadership skills.

The coursework begins with self-leadership.

Rachelle Strawther, director of Gonzaga’s Leadership Training and Development,



Darryl Potyk, MD

said the students will learn to identify their strengths and weaknesses, and see how that fits with doctor-patient relationships and with their peers.

“They’re going to be more effective in team environments, better equipped to respond to situations and have a greater ability to manage stress,” she said.

“We are so excited about this new pathway,” said Darryl Potyk, MD, chief of Medical Education for UW School of Medicine-Gonzaga University Regional Health



Rachelle Strawther, MA

Partnership, and UW School of Medicine associate dean for Eastern Washington. “This new pathway takes the leadership training they already receive to a much higher level. We are the first medical school that I’m aware of to partner with a School of Leadership Studies and give students an opportunity to emphasize leadership in their medical training.”

Because this is the Leadership Pathway’s inaugural year, the decision was made to keep the class size small; 15 UW medical students were accepted into the program.

“McKinstry particularly likes projects that are important — that really make a difference in the community — and we think this is one of those projects,” said Dean Allen, McKinstry CEO. “This facility will be built with space for enterprise to grow.”



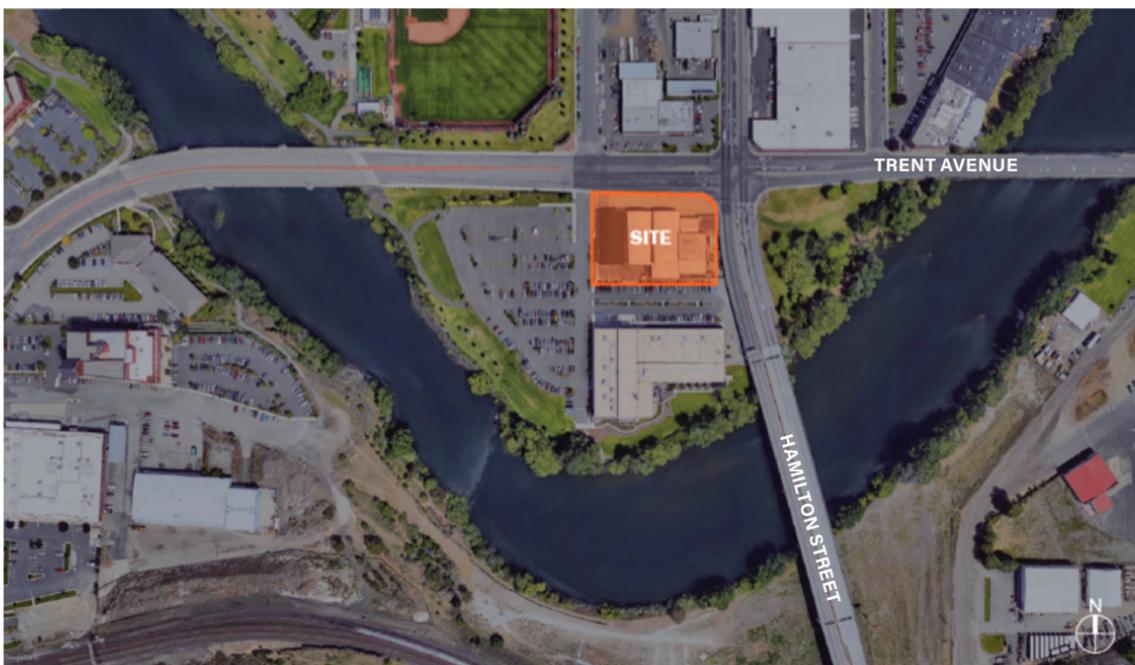
“As a partnership, we value innovation, and we’re excited about the creative collaboration that our institutions have forged with Dean Allen and McKinstry to make this project a reality,” said Thayne McCulloh, president of Gonzaga University. “It is a privilege to work with both UW School of Medicine and McKinstry on this extraordinary opportunity to renew our commitment to the greater good of the people of Spokane and the Inland Northwest.”

BUILDING PROJECT AT A GLANCE

Location:	840 E. Spokane Falls Blvd., Spokane, Washington Corner of Hamilton & Spokane Falls Blvd.
Size:	80,000 square feet over four floors
Occupants:	120 first- and second-year UW medical students, 32 MEDEX Northwest physician assistant students, 210 Gonzaga University human physiology students and over 100 Gonzaga biology, chemistry and nursing students studying anatomy and physiology will be the first occupants of the new facility
Features Include:	Classrooms, faculty/staff offices, anatomy lab and other teaching and research labs
Cost Estimate:	\$60 million
Ground-breaking:	Late 2020
Anticipated Completion:	June 2022

The building site is adjacent to McKinstry’s historic and award-winning Spokane Inland Empire Railroad (SIERR) building and Gonzaga’s Trent Avenue property. The SIERR building will become part of

the healthcare innovation cluster, offering an additional 57,000 square feet for health sciences and medical industry leaders, startups and nonprofits.



Conceptual rendering courtesy of McKinstry.

“The timing of this new center could not be more key in creating opportunities for students and increased capacity to address workforce shortages.”



Senator Shelly Short, District 7, Republican Floor Leader

“This new facility certainly adds to the thriving education and healthcare ecosystem in the University District and in Spokane as a whole. At the heart of the program is the partnership between Gonzaga and the University of Washington and now we’ve added McKinstry. That public-private collaboration has made this project possible. It’s a hallmark of Spokane to come together in collaboration — I just love to see that.”



Senator Andy Billig, District 3, Democrat Majority Leader

“The new UW-Gonzaga medical school facility will provide our students with a state-of-the-art learning environment while also providing dedicated research facilities for medical advancement worldwide. University of Washington and Gonzaga University faculty, medical students, and dedicated researchers in one facility is an economic boon for Spokane and rural medicine.”



Stephanie H. Aden, Friends of the UW School of Medicine

“I got into politics because I went to Gonzaga for business school and got involved in community service. Then I went to grad school at UW and I cut my teeth lobbying in Olympia around student issues. These two institutions helped me to become a better public servant. This next step in the evolution of medical education in Spokane will instill those same qualities and core values into students for generations to come.”



Representative Marcus Riccelli, District 3, Democrat Majority Whip

STUDENTS, (cont.)

Anna May Explored Suicide Rates on Spokane Indian Reservation

Anna May has wanted to be a physician for as long as she can remember.

“I had a little doctor kit as a child,” she recalled. “My dream was to attend the University of Washington School of Medicine and become a pediatrician.”



Part of her dream has already come true. After earning her undergraduate degree in biology from Gonzaga University, May was accepted into the UW’s medical school.

“While in high school I worked at the Seattle Indian Health Board clinic, shadowing a family medicine physician,” she said. “I’d never been in an Indian Health Services (IHS) clinic. I saw how cultural competency was very important to the native community.”

That experience so resonated with her that she applied to the UW School of Medicine’s Indian Health Pathway. “Growing up I always had to explain being an Indian, as many people have never met a Native American person, so they have stereotypical ideas of Natives living in teepees, passing peace pipes, wearing buckskin and headdresses, and living on reservations,” she said.

May received more firsthand experience this past summer while doing her RUOP* project in Wellpinit, a town of approximately 700, located 50 miles northwest of Spokane on the Spokane Indian Reservation.

“I looked at how to decrease the suicide rate on the Spokane Indian Reservation through culturally competent, community-oriented prevention,” May said. “I know about the high suicide rates in the Indian community. I have friends who live on reservations, and I’ve struggled as an urban Indian with my own cultural identity.”

During her time in Wellpinit, May learned that Stevens County, where the Spokane Indian Reservation is located, has the second highest suicide rate in Washington.

May evaluated the assets in the community and assessed how they could be used to address the issue. She found that substance use prevention closely aligns with suicide prevention as both focus on the development of life skills and promote awareness, community relationships and a strong cultural identity. Her time on the Spokane Indian Reservation furthered her desire to

practice family medicine in a native community.

Chelsea Denney Found Mental Health Needs in Ellensburg

The lure of rural medicine is compelling to Chelsea Denney, a second-year UW medical student in Spokane. She grew up in Goldendale, Washington, a town of 3,500.



“Growing up in a small community made rural medicine appealing to me,” she said. “The people in Goldendale helped shape and guide my life. I want the opportunity to pay that forward and feel that sense of community in my profession.”

So, she applied to the UW School of Medicine’s TRUST program — the long-standing award-winning program to train medical students in rural settings for future rural practice.

Denney’s TRUST site was Ellensburg working with preceptor Dr. Mark Larson, a primary care physician with deep roots in the community. And, so far, her immersive experience as a TRUST student has been defining, and it is keeping her very focused on rural medicine.

“I cut an umbilical cord before I even started medical school,” she said. “It was awesome! It was a ‘this is why you’re in medical school’ moment.”

Denney’s RUOP project last summer focused on youth mental health, and the mental health provider shortage in Ellensburg.

“I found worsening rates of depression, anxiety and suicidal ideation among high school students. I also learned there’s no psychiatrist in Kittitas County and that the closest mental health care is a nurse practitioner in Cle Elum. Primary care providers end up having to address mental health issues,” Denney said.

She said it was fortunate that she had the opportunity to attend multiple Kittitas County Health Network meetings during her stay. In addition to a few grant-paid employees, the Health Network includes a wide representation of professionals including doctors, nurses, school administrators, law enforcement, fire and the business community.

“It was valuable for me to see the process they work through to make change, and to be reminded how invested members of a rural community are in that community’s success,” said Denney.

Erin Boland Made Rural Return

Teaching. That’s what lights Erin Boland’s fire. And the study of anatomy fueled it. So much so, she planned to get her PhD and teach anatomy at a medical school. But while earning her master’s degree at Tulane University, many of her classmates were medical students, and their experience proved inspiring for Boland and prompted her to reconsider her career path.



“I worked in research for several years, but I became more interested in people than in

statistics, figures and data. I wanted to use that information — not just create it,” said Boland.

That desire led her to UW School of Medicine and the TRUST program.

Boland had hoped to return to her hometown of Ephrata, Washington, to practice, thus she was intentionally assigned to Grand Coulee, not far from where she grew up. You might say she’s understood the value of rural medicine since birth. “My father, a trained EMT, delivered me at Ephrata Community Hospital,” she said.

A physician couldn’t get to the hospital in time, so Boland’s dad, with the help of an experienced nurse, ensured her safe delivery. “You can’t expect doctors to always be available in a rural place,” she explained. “And there’s tremendous need for OB care.”

TRUST students also participate in other rural programs in their designated communities, including RUOP* and WRITE*. Currently, she’s in Grand Coulee for several months for her WRITE*.

“Our students develop a profound appreciation of what life is like for physicians practicing rural medicine,” said John McCarthy, MD, assistant dean for Rural Programs at the UW School of Medicine.

That’s certainly been Boland’s experience — especially during her extended stay in Grand Coulee. She said while her classmates are rotating every six weeks to a new specialty that might be at a different location, she’s been able to stay there.

Her time in Grand Coulee has cemented her passion for rural medicine. “I feel more connected to medicine here than in a big city,” Boland said. “It’s really satisfying and it’s given me confidence that rural medicine is the right choice for me.”

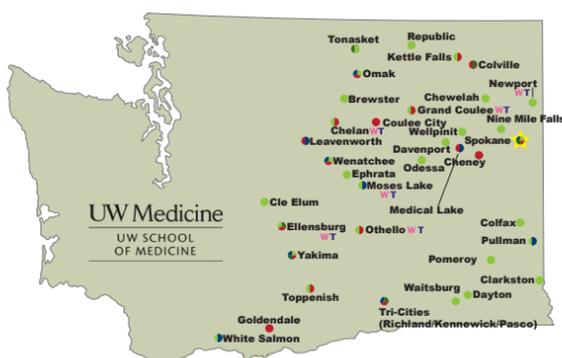
*About UW School Of Medicine Rural Programs

RUOP: Rural Underserved Opportunities Program
Since its inception in 1989, more than 1,200 RUOP public health projects have been completed by students in communities across the WWAMI region (Washington, Wyoming, Alaska, Montana, Idaho). These projects require students to partner with community organizations to address a spectrum of community health issues, including childhood obesity, anti-violence campaigns and senior exercise programs.

TRUST: Targeted Rural Underserved Track
TRUST prepares UW medical students for careers working in underserved rural communities and underserved small cities. Through this program, students are matched with one rural community where they spend a significant amount of time throughout four years of medical school.

WRITE: WWAMI Rural Integrated Training Experience
WRITE is a clinical medical education program designed to help meet the need for more rural primary care physicians in the WWAMI region by expanding clinical training experiences.

UW School of Medicine Clerkships and Residencies in Central and Eastern Washington



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uwmedicine.org/school-of-medicine

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