

RESIDENCY REACHES MILESTONE

RESIDENCY PROGRAM CELEBRATES 20 YEARS OF TRAINING PHYSICIANS

BETH DE BONA, *Times-News*, July 30, 2016



Dr. Maggie Hayes helps patient Samantha Wyre at the 7th Avenue Health Center on Thursday.
Photo from Times-News by Patrick Sullivan

Hendersonville – From delivering babies to managing critical care patients, the Hendersonville Rural Family Medicine Residency Program gives fledging doctors a wide spectrum of hands-on training to serve them in future practice.

The program, now in its 20th year, has developed into a highly competitive residency experience that prides itself on being a smaller “rural track” program.

“I think it’s a great opportunity overall,” said Bryan Hodge, DO, program director. “The program really prides itself on being innovative.”

The program, which accepted its first residents in 1996, is recognized by UNC as a premier program, according to Hodge. Four residents are accepted into the program each year from the 1,200 medical school graduates who apply.

“Most have some connection to the area,” said Hodge. “I think they’re drawn to get involved in community health.”

Launched in 1992 by Dr. Steven Crane, a grassroots effort worked to establish the program as a rural track for MAHEC’s Asheville family medicine residency program to attract physicians to rural areas of Western North Carolina.

The program now exists as a collaborative effort between Pardee Hospital, Blue Ridge Community Health Center and MAHEC (Mountain Area Health Education Center in Asheville). The program is at the heart of a teaching health center, of which the Hendersonville Family Health Center, an arm of BRCHS, is a part.

The 12 residents active at any one time in the three-year program complete one-month rotations in a variety of clinic settings, and even spend up to one month of each year outside the country to complete medical work with a non-governmental organization, if desired.

A recent graduate now practicing in Wisconsin, Dr. Aaron J. Beck traveled with Dr. Geoff Jones, the then program director, to Honduras with two other residents to participate in a “rural international medical experience.”

“We delivered babies, set bones and treated a host of disease in addition to providing screening and population health in rural southern Honduras,” he said.

Beck was initially attracted to the program because of the “excellent” faculty, the opportunity to serve overseas and the fact that the program was located in “absolutely pristine mountain bike country.”

A healthy number of residents stay to practice in the area, said Hodge, including Dr. Evan Beasley, a recent graduate practicing at BRCHS, where he has leadership roles in cancer screening and substance abuse.

Another recent graduate of the program, Dr. Brian Kaderli — who now practices as program faculty — created some innovative educational videos for residents with Pardee’s Dr. Gail Clary.

“Basically we have created a resource for anyone interested in rural healthcare,” said Kaderli, adding that the new “The Black Bag” videos can be found on YouTube. A podcast is planned to come out later this year.

“Our program is relatively small, compared to other residency programs in the nation, because we are a ‘rural track,’ but this is our best feature, because we are small enough that we have close relationships with our community, but big enough that we have the exposure to higher levels of care at our community hospital,” said Kaderli.

Leadership and advocacy are big pieces of the residency program, with residents jumping right in as leaders in the program’s mission to serve vulnerable populations.

El Campo, the Migrant Health Outreach of BRCHS, is led by current resident Robyn Restrepo, who also serves as resident medical director at BRCHS’s Seventh Avenue Health Center “homeless clinic” and at Safelight, a nonprofit serving those affected by interpersonal violence.

Hodge sees strength in the small size of the program, which allows for one-on-one training and the ability for residents to custom-tailor a curriculum.

“I think we’re producing graduates that are well-rounded,” said Hodge.

A big facet of the program, both for the fledgling doctors and for the area, is the community project each resident completes in the second and third years of training.

Faculty member Diana Curran, medical director at the Henderson County Department of Public Health, oversees the need-focused projects, which have ranged from a community garden and a gun safety program to assisting with a grant to improve the care of depression among seniors.

“(The projects) have taught residents more about their community and helped them to gain the skills that physicians of the future need to integrate and care for populations, not just one person, one disease,” said Curran.

Vivian Sachs, MD, another recent graduate, piloted a pregnancy prenatal card to improve care for underserved pregnant women.

A project from one of the program’s first graduates helped to create a clinic to serve homeless populations, which exists as the 7th Avenue Health Center, where resident physicians continue to provide regular medical care with faculty physicians.

“Over the years, the resident projects have contributed positively to Hendersonville and Henderson County,” Curran said.

During his residency, Beck worked to develop improved safety measures for Pardee Hospital to tackle bacterial infections caused by *C. difficile*. He credits faculty members with inspiring his interest in preventing bacteria-associated disease at Pardee, and his efforts were successful even in the short time period he was given to complete the project.

To celebrate the evolution and the ongoing positive impact of the program over the last two decades, Hodge said a reunion of graduates is being planned.

To learn more about the Hendersonville Rural Family Medicine Residency Program, visit mahec.net/residency-and-student-info/residency-programs/family-medicine-hendersonville.