



# Community Engaged Residency Education

**Randall Longenecker MD**

Professor of Family Medicine and Assistant Dean,  
Rural and Underserved Programs

Ohio University Heritage College of Osteopathic  
Medicine

Executive Director, The RTT Collaborative

[www.rttcollaborative.net](http://www.rttcollaborative.net)



# **The RTT Collaborative**

*Growing our own...together*

---

A Global Context


A Distributed Peer Network of Rural Medical Educators

A Regional Academic Partner, Health System,  
and Participating Hospitals

A FM  
Practice

**A Rural Community**

Community Engaged Residency Education




# Community Engaged Medical Education (CEME)<sup>1</sup>

- Community-oriented – a body of knowledge to be taught about practicing in communities (about)
- Community-based – a place for residency education (in)
- Community-engaged – a way to address a specific community's needs, for the mutual benefit of community and academia (with)



# Place-based health professions education


- Starts with a rural place and its assets
- **It's "all about the place"**
- Uses various models, options for program design, modified rather than applied to the local context (organic medical education)
- Follows a developmental process that is community engaged, i.e. Community Engaged Residency Education (CERE)



# Community Engaged Residency Education (CERE)

- Engage the Community – Coalition building, following “rules of engagement” (like motivational interviewing in patient care)
  - Stages of change:
    - Pre-contemplation
    - Contemplation
    - Preparation
    - Action





# Community Engaged Residency Education (CERE)

- Determine Community Capacity – Helpful tools, Consultations
- Design the program and curriculum for the purpose of accreditation
- Develop a business plan – pro forma's, affiliations, letters of commitment, contracts, and other agreements