



Take 3 with Dr. John Raymond

John R. Raymond Sr., MD, who serves as President and CEO of the Medical College of Wisconsin, reflects on the regional campuses ...

Transformational Times: Please share with us the foundational concepts in developing the Regional Campus Model.

Dr. Raymond: There were several forces at play in developing the Regional Campuses. A key factor was the shortage and maldistribution of physicians in the state's workforce in 2011, as identified by the AAMC and the Wisconsin Medical Society. At that time, our own internal data suggested that only between five to ten out of every 200 graduating medical students would go on to practice in a rural setting in Wisconsin. Echoing these concerns were several Wisconsin legislators urging us to develop creative ideas to get more physicians interested in practicing in the Northern part of the state. Additionally, the Wisconsin Medical Society encouraged us to expand the physician workforce by admitting more students into medical schools.

In recognition of these needs we decided to develop an innovative model that addressed the workforce needs and allowed us to retain the unique characteristics and strengths of MCW at all regional campus locations. We focused on a model that was efficient, economical-viable with an emphasis on employing the community resources of the regional campuses. We also wanted to keep debt burden as low as possible for our students so that they could preserve a broad array of choices to serve underserved rural areas. One means to develop efficiency was the three-year graduation option at the regional campuses, and another was to use local talent as faculty and leaders at the regional campuses, while maintaining strong connections to the resources of the Milwaukee campus. Additionally, our hope was to develop regional campuses that provided a community immersive experience - a concept relying on the strengths of the community surrounding the regional campus and those of MCW. I think of this as our first big idea pertaining to the regional campuses – the immersive model – a principal

dependent on regional talent and resources; engagement between students and the community; and the support of the Milwaukee campus.

Important to this immersive model was to have the incoming students feel welcomed by their community. One means to do this was to include the regional campus community in the admissions process. This led to the creation of the regional admission advisory committees (RAAC) on each campus and their key role in advising the admission process. These volunteer community members play a key role in the interview process. We observed these community members tended to focus on questions of character and caring during the interview process. Their involvement was transformative as they placed a renewed focus upon character and caring in our medical school applicants. As such the RAAC process, among others, was formative in shaping future and current efforts at our institution focused on character and caring.

Transformational Times: How do you feel the Regional Campuses have transformed MCW as an institution?

Dr. Raymond: The immersive model I discussed earlier has enabled MCW to deepen and strengthen its roots in multiple communities. Building on these relationships within the communities of our two Regional Campuses has given MCW greater visibility and perceived value across the state. It has also strengthened our relationships within those communities and has improved legislatorial ties in the surrounding areas of the regional campuses. These improved legislatorial ties in turn enhance our institutional credibility with legislators across the state. In so doing MCW is better viewed as a state partner with greater political reach and prestige – not to mention an enhanced donor base.

Additionally, the multi-directional learning that has developed among the three campuses has made us a better institution as we gain for the wisdom of a greater community of learners and educators.

Lastly, we have excellent founding Deans leading both campuses that are deeply passionate about the success of the campuses and our students they serve. They also have embraced the concepts of transforming medical education in the areas of community engagement, character and caring.

Transformational Times: In which ways have the Regional Campuses exceeded your expectations?

Dr. Raymond: Both campuses have done an excellent job of building greater inclusivity as it pertains to engaging and empowering learners as future physicians. They have reached learners that before the establishment of the regional campuses might have not considered medical school an option, such as first-generation college students, students from rural regions of Wisconsin, and Hmong students. Our regional campuses have shared the dream of being a physician with more learners across our state and specifically within rural communities.

I also have been impressed with the remarkable degree of community outreach and engagement by our regional campuses. There are many excellent examples of outreach at both campuses; one that stands out to me from the Central Wisconsin Campus is its engagement with Hmong community. There are multiple programs on the Central Wisconsin campus which interact and engage the Hmong community - including the development of a pipeline program aimed at rural and Hmong learners. It serves as great example of how to care for the community and expand to profession of medicine within the community. Another excellent example has been the commitment of students at our Green Bay campus to address the mental health needs of individuals from under-resourced communities in northeast Wisconsin.