Through the Longitudinal Integrated Clerkship, students become advocates and advisors as they learn the art and science of medicine.

BY ERIN POST
“I did the initial interview on his history of drug use and his goals for subsu- nome treatments,” says Munger. “He had been in and out of the medical system for years. This time he was back to initiate treatment for opioid use disorder.”

Since that first encounter several months ago, Munger has become an important member of Dan’s care team. He’s gone with him to appointments for a wide range of chronic health issues that are now being treated thanks to his reengagement with Hudson Headwaters. Not only is Munger able to learn how to help patients manage long-term conditions by accompanying Dan—an important objective for all third-year medical students—Munger has become a champion and advocate for him as he navigates what is a critical time in his recovery.

This advocate role has much to teach doctors-to-be, says Hudson Headwaters LIC Site Director and UVM Clinical Assistant Professor of Family Medicine Colleen Quinn, M.D. As students experience the health care system alongside patients, they understand more deeply just how many factors can influence health and well-being, from food insecurity and employment to transportation and insurance. They bring empathy and thoughtfulness to their interactions with patients, fostering relationships that grow throughout the year. “There’s that added value,” says Quinn. I don’t think the students always understand how valuable [their presence]
is, but it’s incredible. It really helps with patient care.”

The Art of Listening
At the foundation of the LIC is the gift of time. The program, which launched at the Hudson Headwaters site in 2017, gives students the opportunity to stay in one location for the entirety of their third year. They complete all of the same core clerkships as medical students across the country, but as students get to know patients and their families, they also play an important role in helping to navigate the healthcare system. Students—in their short white coats emblazoned with the UVM Larner College of Medicine name—become a familiar presence over the course of the LIC. At both Hudson Headwaters and Central Vermont, they are assigned two family medicine or outpatient medicine preceptors and a pediatric preceptor for the duration of the year. They spend at least half a day per week with each of these providers. They work with a neurologist and psychiatrist, nurse practitioner two times every month. For obstetrics/gynecology and surgery, they spend half the year focused on each specialty. Students complete “Burst Weeks” for inpatient medicine and psychiatry, where they focus solely on each of these specialties. Rounding out these requirements is “white space,” or the unstructured time in the schedule when students take the lead. The opportunities here are many: Students explore specialties they’re interested in; they use the time to study for upcoming exams; they see patients they’ve been adding to their panel over the course of the year.
“The students are getting exposed to almost every facet of the hospital.”
— CHRISTINE PAYNE, M.D.

This panel—consisting of anywhere from 25 to 50 people—gives LIC students opportunities to dig deep into the patient experience. Whether it’s witnessing a birth and then following mother and baby to post-natal check-ups, or accompanying a patient with diabetes through check-ups and consultations, students are there with patients through it all, often becoming trusted advisors.

Catherine Westbom ’21, a student in the Central Vermont LIC, says she’s able to help patients with their questions answered, improving their care in the process. “One of the benefits of being a medical student is that I can spend 30 minutes with any one patient and chit chat,” she says. “And through the chit chat sometimes they’ll say: ‘Oh yeah, I’ve been wondering about this and keep forgetting to ask.’”

At the Hudson Headwaters site, Cassie Nowicki ’21 says this role—liaison between patients and providers—dovetails nicely with their work learning the basics of patient care. “Across different specialties, physicians are asking questions about what’s relevant,” she says. “You’re actually able to contribute and they’re trusting you to contribute.”

Students in both locations have patients on their panels who live in nursing homes; they go on home visits; they spend time in the emergency department and with palliative care teams. Depending on their interests, some students fill their white space by spending time with cardiologists, pathologists, or neurologists. Others have accompanied patients to social services appointments, seeing first-hand how issues like homelessness and lack of access to reliable transportation can influence health.

Central Vermont LIC student Alexa Golden ’21 has patients on her panel who have been diagnosed with terminal illnesses. Witnessing how these patients face the end of life with dignity and grace is shaping how she plans to practice medicine. “There are people in really tough situations who are at the hospital all the time or in the doctor’s office all the time,” she says. “Some of these patients are never going to get better, but they’re really optimistic. They carry on knowing that they’re going to do the best with what they have left.”

For Jessica Lyon ’21, following up with a physician who hosted a continuing medical education talk she attended led to an opportunity to spend time at a UVM Medical Center clinic for patients who identify as transgender or LGBTQ. She learned more about this interest area and has connected with some patients. Kalle Fjeld ’21 is building a foundation for life-long wellness through her LIC experience at Hudson Headwaters. “I’ve gotten to know some people really well, which has been a delight,” says Fjeld. “Some of the most sustaining and fulfilling things that keep people from burning out are those long-term positive relationships.

I think it’s good to be able to start that now rather than in five years when I’m done with residency.”

Through these experiences, students begin to recognize their talents and skillsets, says Quinn, which helps them to chart a course for the future. “As they go through the program, they learn a lot about themselves,” she says. “It’s an amazing thing to watch as they gain confidence.”

**The Future of Health Care Delivery**

Hudson Headwaters Health Network, a nonprofit system of 19 community health centers, extends into some of the most rural regions of the vast Adirondack Park in New York State. As a Federally Qualified Health Center, Hudson Headwaters is the sole “safety net” provider in the Glens Falls area, providing primary care to patients across 5,600 square miles in this medically underserved region. This unique mission has helped to propel Hudson Headwaters to the forefront of innovation in rural health care delivery. They’re piloting an advanced model of team-based care—renovating two clinics and building one from the ground up to better accommodate health professionals from different disciplines working together—and are moving towards a value-based care payment model.

Students at Hudson Headwaters experience these innovations and learn about the future of health care delivery through a health systems science curriculum. The goal is to introduce students to the “triple aim” in health care, which includes improving the patient experience, improving the health of populations, and reducing the per capita cost of health care. Students attend ten sessions over the course of the year and complete a community project.

Hudson Headwaters Vice President for Population Health Management Linda Spokane teaches students about value-based care and quality improvement, and helps to guide their projects. “I would like [students] to understand this concept of whole person care, which to me means addressing the social, the behavioral and the physical health of a person,” she says. “With their time here
and through focusing on population health, they become more aware of some of the other factors that contribute to an individual’s well-being.”

In central Vermont, the medical center serves 26 communities and is the primary health care provider for about 66,000 people. Although less than an hour from Burlington and about a half an hour from Montpelier, the challenges of delivering care in a rural region still apply, as do the opportunities. In such a tight-knit community, LIC students have already earned a positive reputation and specialists are enthusiastic about opportunities to engage, says site director Christine Payne. “We’ve had students doing things like rheumatology and palliative care and anesthesia,” she says. “The students are getting exposed to almost every facet of the hospital.”

They’re also making a lasting impact, not only through direct patient care but through their community projects, which students at both locations complete. Last year at Hudson Headwaters, Isabella Kratzer ’20 organized mailings of an at-home colorectal screening test to high risk patients. Chad Sorrels ’20 traveled to health centers to educate providers on the health effects of vaping products. Students this year have chosen projects focused on medication-assisted treatment for opioid use disorder, doula and their role in childbirth, access to healthy food, and more.

(“The community projects) are a great opportunity for students to get out of that medical model mindset and think more globally in terms of whole patient care,” says Spokane.

Shaping a Life in Medicine

When Dylon Gookin ’20 returned to Hudson Headwaters for a fourth-year rotation after spending his third year in the LIC, it felt like a homecoming. For the month he was there to complete his fourth-year scholarly project—which focused on developing tools for physicians to use in student assessment—he lived with a Hudson Headwaters physician and his family. He also hosted review sessions for current students, something that Class of 2019 student Holly Buchhas also did for his group.

“My third year left me optimistic and enthusiastic and incredibly excited for what comes next. and I have my time [at Hudson Headwaters] to thank for that,” he says. “Because Holly had been such a value to us, I wanted to provide that support.”

These relationships have encouraged many LIC students to thoughtfully reflect on how they see their lives unfolding as physicians.

For Nowicki, her third year is confirming her interest in practicing family medicine in a rural location. Westbom at Central Vermont has surgery in mind, but now she’s also considering OB/GYN. Fjeld has found her horizons expanding. A native Vermonter, she knows she’d like to practice medicine: By focusing on those who are least likely to seek care. Dan, the patient he met who is struggling with opioid use, has helped him to find his path.

“What has made me interested in addiction medicine is that it almost by definition represents a stigmatized, marginalized type of people,” he says. “That’s going to stay with me now that I’ve had the chance to do it. And I keep getting the chance to do it.”

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Regardless of specialty, students know they’ll be keeping the patient at the center of their work.

“People aren’t just the problem that they’re presenting to you for,” says Lyon. “They’re a whole set of characteristics and health concerns and issues. I don’t know if there will be any other time in my medical training or career where I’ll get to see everything a person goes through.”

This act of bearing witness has clarified for Munger how he wants to practice medicine. By focusing on those who are least likely to seek care. Dan, the patient he met who is struggling with opioid use, has helped him to find his path.

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