

University of Arizona, College of Medicine - Tucson

Virtual 1st Look Event – October 26, 2021

Frequently Asked Questions



About the 1st Look Event

Q: Is this a formal event (residency interview) or a "meet-and-greet the residents" type event?

A: The 1st Look Event! Is an informal, open forum event where residency/fellowship applicants will be able to meet our GME & ODEI Leadership, hear from current residents in many of our residency programs, learn about Tucson and the many opportunities for you to get involved at University of Arizona College of Medicine – Tucson (UA COM-T). We are hoping to give our applicants an overview of how diverse Tucson and UA COM–T are and highlight some of the diversity, equity and inclusion efforts at UA COM-T.

Q: Is the 1st Look Event a default for everybody who has applied? Or a shortlist?

A: The 1st Look Event! is open to all potential applicants to a residency or fellowship program at the University of Arizona, College of Medicine – Tucson.

Q: Is there an agenda for the event?

A: The 1st Look agenda includes – **Welcome, Tucson at a Glance, How you can get involved.**
https://diversity.medicine.arizona.edu/sites/default/files/virtual_1st_look_event_oct_26_2021.pdf

Q: What is the dress code for the event?

A: The 1st Look Event! is informal.

Housestaff Diversity Advisory Committee (HDAC)

Q: What residency specialties need more representation in HDAC?

A: All residents are encouraged to join. Family Medicine is well represented this academic year; however, HDAC actively seeks representation from all residency and fellowship training programs at UArizona College of Medicine – Tucson.

Q: Does HDAC do any outreach to smaller towns such as Nogales or Douglas? I would be interested in becoming involved in mentorship for these communities. (apologize if this was already answered)

A: Although all residents have opportunities for community involvement, HDAC has not been the sponsor of specific community events. This group is focused on networking and supporting house staff by building allyship. They also partner with medical student affinity groups to host activities.

Spanish Language Healthcare Disparities Distinction Tract (SLHCD DT)

Q: Is the Spanish distinction track only for peds residents? How is it incorporated into your training?

A: All residents and fellows with 2-years remaining in their training at UA COM-Tucson may apply to the SLHCD DT. The program is composed of two parts: monthly, one-hour facilitated advanced Spanish classes featuring interactive, systems based Spanish curriculum; and quarterly Health Care Disparity Forums and Health Equity Grand Rounds hosted by resident participant teams of the DT.

Q: Is there separate training as a component of the Spanish distinction tract/what does that look like?

A: The SLHCD DT is an optional 2-year program separate from residency/fellowship training.

Q: Is there a baseline language proficiency you should have to go into the Spanish distinction track?

A: Yes, there is an initial Spanish proficiency testing to determine eligibility. The current program focuses on the intermediate to high proficiency Spanish speaker who aims to become a certified Bilingual provider. There are also Spanish lunches where groups come together to practice their Spanish.

Q: How fluent do you need to be to participate in the track?

A: Proficiency rating of intermediate to advanced Spanish speakers will be selected per class.

Q: Is there any certification or baseline assessment for residents to be able to serve Spanish-speaking patients (in Spanish) in a way that is accurate and valid?

A: In order to become a certified bilingual provider, Banner offers the ALTA Clinician Cultural and Linguistic Assessment (CCLA) exam. SLHCD DT participation provides an opportunity for the distinction tract participants to take the exam and become a certified bilingual provider.

Mobile Health and Community Engagement Programs:

Q: How do residents get involved with the mobile clinic? And is it open to residents outside of Family Medicine?

A: Although the Mobile Health Program is part of the Department of Family and Community Medicine, residents can request an elective that will be supervised by FM physicians and FNP's.

Q: I really appreciate the focus on developing systems to improve engagement and better care for diverse patient populations. As these programs progress, is there a formal method of transition of leadership as residents graduate from residency to maintain these needed programs?

A: Many of the programs are built into the College of Medicine. Residents often function in a supervisory role for medical students (e.g. CUP Clinic). Annually, departments or programs solicit resident/fellow interest to continue the community engagement.

Q: I'm applying to Ob-gyn and wondered if anyone would be able to speak to how frequently Ob-gyn residents work at the mobile clinic (or elsewhere with underserved populations). Is it built into our curriculum, volunteer based, or some combination?

A: The Mobile Health Clinic is run by the Department of Family Medicine. One of our maternal fetal medicine specialists, Dr. Lynn Coppola, volunteers in this clinic. While it is not built into our curriculum, interested residents are able to volunteer alongside Dr. Coppola. Some of our faculty additionally volunteer at the Commitment to Underserved People Clinic, a medical student run clinic. A resident within our program could also volunteer in this clinic if interested.

Q: Are there opportunities for other individuals to get involved with the work you are doing with the local high schools?

A: Our local high schools are anxious to engage potential role models with our high school students. We offer a biannual (2x/year) High School student event which exposes junior and senior high school students to potential health care careers. We actively engage residents, fellows, medical and undergraduate students. Many of our student affinity groups mentor medical students as well as community college students. All of these are opportunities to engage with high school students.

Q: Are there opportunities to join volunteer activities?

A: There are multiple opportunities to engage in volunteer activities.

Tucson:

Q: What percentage of your patient population would you say is Spanish speaking only?

A: While 30% of Tucson population is Spanish speaking approximately only 60% of Banner patient base are Spanish speaking. Additionally, since Tucson is located one hour from the Mexico border, we often provide care for a larger number of Spanish speaking only patients. As a refugee resettlement community, there are a number of other languages spoken within our patient population.

Q: How have you engaged the government and community politically as an institution given the perpetuation of racism and other discriminatory behavior in our political policies and structures beyond AU?

A: The UA is a land grant institution which bears the mission of developing a diverse workforce that reflects the State of Arizona. The UA leadership actively supports diversity, equity and inclusion in all arenas, ensuring respect and value of all members of our constituency.

Inclusive Community:

Q: I would like to know how your program addresses bias in medicine in regard to transgender patients and other members of the LGBTQ+ community

A: All of our GME programs are offered Medical Safe Zone training to ensure equitable care of our LGBTQ patients and allyship with our colleagues. Additionally, we offer trainings in multiple DEI related topics, including Microaggressions and Confronting Bias. We also invite speakers from the LGBTQ+ community to offer presentations as well as community resources.

Q: Are there opportunities to learn about gender affirming care, including puberty blockers for children? (asking from a family medicine perspective specifically)

A: There is an LGBTQ+ CUP Clinic where medical students, under the supervision of senior residents/fellows or faculty provide an affirming point of entry for LGBTQ+ patients. UAHS EID office annually hosts a LGBTQ+ National Symposium that includes coverage of gender affirming care.

Q: What kind of involvement do spouses of residents have with diversity-equity-inclusion events? Is there a spousal organization allied with this?

A: HDAC events are open to family also. There is also a family org called Partners in Medicine for couples and families- not DEI specific but very warm and welcoming. All DEI forums and presentations welcome a varied audience, hence spouses are welcomed.

Other:

Q: Could we get the contact email for the residents in case we have questions, please, (if that's alright with them)?

A: Yes, these will be distributed to the attendee list.

Q: Do we have to know Spanish to match at University of Arizona?

A: No, we do not limit our residents and fellows to Spanish speakers only. Many learn some Spanish while training at our institution.

Q: Tell us about research programs in Internal Medicine?

A: Shortly after arrival at the University of Arizona, each intern is assigned a PD or an APD as a mentor. Interns meet with this mentor within the first couple of months of arrival. At that time, we discuss how things are going, career aspirations, clinical and research interests, and other topics. If you are aware of your career goal and clinical/research interests, we will then seek to match you with a mentor in that field. We have research going on throughout the department, and in all divisions. Research ranges from basic science, to translational, to clinical. Most residents, due to time constraints caused by clinical rotations, elect to participate in clinical research. Those residents with a research project and mentor can request research time during their elective rotations. This time can extend up to 12 weeks throughout training. Most choose to take 4 weeks each year, but some participate in projects or programs that require a long block. That can be arranged with support of the research mentor and if the resident is in good standing with the program. All residents granted research time in an academic year will be expected to report their progress, and to present a poster at the end of the academic year (in our Research Academic Half Day). Those far enough along in projects are also strongly encouraged to present them at local, regional, national, and international meetings. There is some financial support available for travel to or registration for these meetings. Also, each resident is required to participate in at least one QI project over the course of their residency training.

Q: Are there Arabic speaking patients?

A: Yes, we have multiple Arabic speaking families in our clinics as well as the ED

Q: Is there anyone from Rad-Onc department?

A: This evening we have Yesenia Rios, Radiation Oncology Residency Program Coordinator Sr. who joined us.

Q: Do we have opportunities to pursue a fellowship in Trauma after surgery residency?

A: Please contact Department of Surgery. You may also refer to their website: <https://surgery.arizona.edu/education/fellowship-programs>

Q: Will there be surgical residents to share?

A: Unfortunately, we do not have surgical residents joining us tonight.

Q: Is the panel on cultural humility open to visiting students? I'm currently rotating at Tucson.

A: Yes, it was. Please note, the majority of our DEI hosted events aim to engage a broad audience to further the conversation of DEI.

