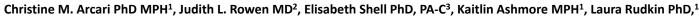
PRIMARY CARE PLUS:



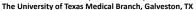
EXPANDING INTERPROFESSIONAL PREVENTION EDUCATION

AT AN ACADEMIC HEALTH CENTER



¹Department of Preventive Medicine and Community Health

² School of Medicine Department of Pediatrics ³School of Health Professionals Department of Physician Assistant Studies





- Focus: Providing Medical (MD) and Physician Assistant (PA) students knowledge, skills, and values needed to partner with public health
- · Goal: Build the prevention workforce by increasing the number of primary care providers with public health skills practicing in medically underserved areas of Texas
- · Funding: HRSA Primary Care Training Enhancement Grant (Interprofessional and Interdisciplinary Joint Graduate Degree Program)

LEVELS OF ACTIVITY

Level 1: Think Prevention

All MD and PA students

- Public Health and Prevention Theme
 - Integrate prevention curriculum into clinical, basic science courses, using a case-based curriculum
- · Focus On:
 - · Prevention in the Clinical Encounter
 - · Prevention in the Practice of Medicine

Level 3: Partner for Prevention

Selected MD and PA Primary Care Plus Scholars Requirements:

- Scholarly Track:
 - 5 elective blocks over 4 year MD curriculum
 - · 3 elective blocks in 2 year MPAS curriculum
- Knowledge:
 - · Public Health Boot Camp or Topics in Public Health
 - · Monthly Seminar Series
- - · Public Health in Community Elective or Monthly Communities of Practice Meeting
- · Research:
 - · Scholarly Research Project

Level 2: **Practice Prevention**

Self-selected MD and PA students

- · Public health opportunities include elective classes and experiences
- ➤ Electives for Credit:
- Topics in Public Health •
- · Public Health in the Community
- Public Health Research
- Integrated Clinic-Public Seminars (monthly)
- > Experiences: Public Health Boot
- Camp
- · Public Health
- Community of Practice
- Health Practice Course Service Projects

Level 4: Think Prevention, Practice Prevention, Partner for Prevention

Dual-degree students

MD-MPH

- 5 vear curriculum
- · MPH between years 3 and 4 of medical school

MPAS-MPH (Planned)

3 year curriculum



The UTMB National Public Health Week Symposium.

LOGIC MODEL

Figure 1: UTMB Primary Care Plus Program Logic Model Preparing an Effective Prevention Workforce by Providing Integrated Care-Public Health Curricula

Inputs	Outputs		М	Outcomes Impact			
inputs	Activities	Participation	Ш	Short	Medium	Long	
Faculty Primary Care MD Primary Care Public Health	Primary Care Plus Curriculum	Student Participation		Faculty Participants Enhanced ability to collaborate with other	Health Science Center Integrated primary care- public health curricula	Health Care System Increased number of primary care providers	
Community Partners Clinic Sites Public Health Sites	Level 1 Think Prevention	All medical (4 cohorts n=920/ year) PA students (2 cohorts n=140/year)		disciplines in curriculum development Enhanced ability to develop active learning opportunities, employ educational	sustained and materials available to all schools and programs Primary care residency programs interview, recruit	prepared to employ public health approaches and partner with public health entities Increased number of public	
Student Organizations Primary Care Public Health Community Service	Level 2 Practice Prevention	Self-selected medical and PA students		technologies Student Participants Enhanced ability to	medical students with prevention, public health skills Local Community	health trained primary care providers practicing in medically underserved areas	
Active Learning Curricular Plans Medicine Physician Assistant	Level 3 Partner for Prevention	Recruited, screened and		collaborate with public health practitioners Enhanced ability to identify and partner with public health entities	Sustained university- community partnerships integrating primary care and public health approaches to identify problems, resources,	Increased number of minority primary care providers with public health training Communities	
Public Health Faculty Development Workshops and		competitively selected medical and PA students		Enhanced ability to perform basic population health research and practice functions	and solutions Increase in number of sustained partnerships producing more effective	Improved access to quality medical care in population Growth in primary care-	
Training Curriculum Building Educational Technology Mentoring	Level 4 Think Prevention Practice Prevention Partner for Prevention	Recruited, screens and competitively selected medical and PA students		Community Partners Increased capacity to identify high yield projects for student service learning experiences,	results Medical Educators Dissemination of curricula and strategies to agencies	public health partnerships to address community problems Improved population health	
				research rotations	and strategies to agencies and educators in primary care, public health, and prevention		

PROGRAM CHALLENGES

- · Clinical curricula already full with required courses
- · Students from different programs have conflicting schedules
- · Students in clinical clerkships and rotations are geographically
- · Physician and other clinical faculty have demanding clinical schedules
- Public health faculty have competing research programs
- · Community partners are geographically dispersed and short staffed
- · Limited exposure to and knowledge of public health

WORKABLE SOLUTIONS

- Public Health Boot Camp: One intensive week of experiential public health learning for students. Students are able to start primary care rotations with a foundation in essential public health
- Community of Practice: Online activity designed for discussion between experts and novices around solving public health

LESSONS LEARNED

Boot Camp has been a success with multiple cohorts of medical and physician assistant students participating. The in-person intensive format provides an interactive public health learning experience. Field trips and in-class active learning exercises prepare student to Think Prevention

The online Community of Practice was less successful in helping students Practice Prevention or Partner for Prevention. Given the number of students and faculty involved in Primary Care Plus, participation was low. Most comments on online discussion boards were posted by a small number of students and one faculty member. It is imperative to assign leadership roles within a Community of Practice. Strong Community Leaders and Faculty Sponsors are needed to encourage and sustain participation.

