

625J Introduction to Community-Oriented Primary Care

This course is available to UC Irvine 4th year students only

Students must obtain permission from the course coordinator who will obtain faculty approval based on availability prior to enrollment in this course

Course Description: The student will gain exposure to community-oriented primary care for the underserved community of Santa Ana by working at the UC Irvine Family Health Center, at the Orange County Health Care Agency, and visiting other community health agencies and patient homes.

Department: Family Medicine

Prerequisites: UC Irvine students must have successfully completed their basic science curriculum and their 3rd Year Clerkships.

Restrictions: This course is available to UC Irvine students only. Students must obtain approval from elective director prior to enrollment.

Elective Director: Kathryn Larsen M.D., UC Irvine Medical Center, Department of Family Medicine, Building 200, Room 835, Orange, CA 92868, (714) 456-5171, kmlarsen@uci.edu

Instructing Faculty: Faculty with academic appointments in the Department of Family Medicine at UC Irvine

Course Website: None

Location/Time to Report on First Day: contact site coordinator

Site Coordinator: Joana Godoy, UC Irvine Medical Center, Department of Family Medicine, Building 200, Room 835, Orange, CA 92868 , (714) 509-2158, godoyj@uci.edu

Site: UC Irvine Family Health Center, Santa Ana

Periods Available: Throughout the year

Duration: 4 weeks

Number of Students: 1 per rotation block

Scheduling Coordinator: UC Irvine students please email comsched@uci.edu or call (714) 456-8462 to make a scheduling appointment.

Course Objectives: At the end of this rotation the student will demonstrate appropriate, relevant, and sufficient knowledge of

- the concept of community-oriented primary care as a process of improving a community's health by using principles of public health, epidemiology, preventive medicine, and primary care.
- infectious disease trends and chronic disease patterns of the local patient population and their treatment and management.
- local community agencies and their roles in health promotion and education.

At the end of this rotation the student will demonstrate at the appropriate level the ability to

- provide patient care with a multidisciplinary and comprehensive approach in keeping with
- the goals of disease prevention, early intervention, and health promotion.
- provide care in the context of family, social, and cultural environments.
- use community and government-sponsored resources effectively to provide optimal and cost-effective care for indigent patients without funding.

Key Topics:

- Adult and child health maintenance and disease prevention
- Treatment and management of TB, HIV/AIDS, and STD's
- Mental health counseling
- Patient safety
- Nutrition counseling
- Available funding sources and programs for screening and intervention
- Community efforts in health education, intervention, and management of developmental disorders, chronic illnesses, and communicable diseases

Competencies:

- Patient Care: Provide patient-focused care aimed at health maintenance and disease prevention.
- Make diagnostic and treatment plans based on patient information and preference.
- Communicate effectively in counseling and educating patients and their families.
- Medical Knowledge:
- Demonstrate an analytic and holistic approach to clinical situations.
- Apply basic and clinical science knowledge in solving problems.
- Practice-Based Learning and Improvement:
- Obtain epidemiologic information about the medically underserved population of Santa Ana and apply it in clinical practice.
- Participate in monthly quality improvement resident conference at UCI FHC-Santa Ana.
- Use on-line medical information to enhance learning.
- Interpersonal and Communication Skills:
- Work effectively with residents and attending physicians at FHC and with medical professionals at OCHCA as an integral member of the health care team.
- Engage in therapeutic and ethically sound relationships with patients.
- Professionalism:
- Demonstrate compassion, respect, and sensitivity to patients' economic, cultural, and psychosocial background.
- Demonstrate commitment to ethical principles of patient care, confidentiality, informed consent, and other practices.
- Systems-Based Practice:
- Make effective use of community, private, or government-sponsored resources available to provide optimal and cost-effective care even within the confines of poverty medicine.
- Be an advocate in assisting patients to access available health programs.
- Use and involve community agencies to coordinate and promote health care.

Attitudes and Commitment:

- Professionalism
- Strong work ethic

- Patient advocacy and education
- Self directed learning
- Sensitivity and awareness of diversity in patient population
- Commitment to family medicine principles of continuity
- Comprehensive and holistic medical care
- Commitment to working with the underserved and using appropriate community resources

Educational Activities:

Monday AM	FHC Santa Ana Noon Conference/Resident Q1
Monday PM	Behavioral Science clinic (x2)
Tuesday AM	Meeting with course director weeks 1 &3 Project presentation fourth week
Tuesday PM	TB Clinic at OCHCA (10 am to 2 pm x3) Project Preparation
Wednesday AM	FHC SA (x3) Refugee Clinic at OCHCA (x1) Noon conference
Wednesday PM	Latino Health Access WTLC x1 (when available)
Thursday AM	FHC SA (x2) TB Conference at OCHCA (x2)
Thursday PM	HIV Clinic at OCHCA
Friday AM	STD clinic at OCHCA
Friday PM	WIC at OCHCA (x1) CCS at OCHCA (x1) Project preparation (x2) Domestic Violence ride-along with SAPD (x1) to be arranged Friday or Saturday night)

What Students Should do to Prepare for the Rotation: Learn medical Spanish if not already proficient; review key topics mentioned above.

Clinical Responsibilities of the Student: Students will be working at multiple sites in Santa Ana to gain a broad community experience. At UC Irvine Family Health Center, they will be paired with a resident each half day that they are in clinic, and are to consult with the resident after seeing each patient, and before presenting the case to the attending physician. Students will attend noon conferences at Family Health Center on mornings that they are assigned there. At OCHCA, they will work directly with the attending physician and observe other medical and allied professionals as they provide counseling to the patients. Students will work with the family medicine resident on community medicine rotation at Latino Health Access, and make home visits and community site visits with family medicine behavioral science faculty. They will fill out site or home visit forms describing the experience. They will also submit a written project on patient safety and present it the last week of the rotation to the course director and/or to Family Health Center staff as appropriate.

Patient Care Responsibilities: Same as above

Call Schedule of the Student: None

Procedures Students will Learn: Minor office procedures at UC Irvine Family Health Center Santa Ana

Percentage of Time in Ambulatory Setting: 100%

Conference/Lecture/Small Group Sessions:

- Antibiotic resistance
- Common dermatologic problems
- Tuberculosis
- Aging and disability
- Depression and anxiety in older adults
- Abnormal uterine bleeding
- Behavioral science
- Evidence-based medicine
- Clinical journal review
- Practice management
- Quality improvement
- Balint group

Course Hours Weekly Summary:

2	Conference
24	Clinic
2	Lecture
10	Tutorials
4	Other: reading, writing, journaling
42	Total

Content Theme Integration:

- Behavioral Science
- Alternative Medicine
- Community Health
- Decision Making
- Diversity
- Epidemiology
- Ethics
- Evidence Based Medicine
- Family Violence/Abuse
- Health Care Systems
- Home Health Care
- Humanities
- Informatics
- Integrative Medicine (CAM)
- Medical Socio-economics
- Multicultural Medicine
- Nutrition
- Patient-Health Education
- Population-based Medicine
- Practice Management
- Preventive & Health Maintenance
- Substance Abuse
- Women's Health

Required Reading:

- Community-Oriented Primary Care: Health Care for the 21st Century. Rhyne R, Bogue R, Kukulka G, Fulmer H, Ed. American Public Health Association, 1998.
- Mullan F, Epstein L. Community-oriented primary care: new relevance in a changing world. American Journal of Public Health 92:1748-1755, 2002.
- Longlett S, Kruse J, Wesley R. Community-oriented primary care: historical perspective. Journal of the American Board of Family Practice 14(1): 54-63, 2001.

Recommended Reading:

- Mettee T, Martin K, Williams R. Tools for community-oriented primary care: a process for linking practice and community data. Journal of the American Board of Family Practice 11(1): 28-33, 1998.
- Pickens S, Boumbulian P, Anderson R, Ross S, Phillips S. Community-oriented primary care in action: a Dallas story. American Journal of Public Health 92:1728-1732, 2002.
- Goode L, Clancy C, Kimball H, Meyer G, and Eisenberg J. When Is "Good Enough"? The Role and Responsibility of Physicians to Improve Patient Safety. Academic Medicine 77(10): 947 - 952, 2002.

Official Grading Policy: The student will receive a grade of Honors, Pass or Fail. The student's final grade will be submitted on the standard UC Irvine Student Performance Evaluation form. The student will be evaluated by attending physicians and residents in the areas of attendance, knowledge base, clinical skills, technical skills, motivation, professionalism and humanistic qualities. If the student fails the elective a grade of "F" will be permanently recorded on his/her transcript. The student can repeat the course for a second grade, however, the "F" will not be removed from the transcript.