

TEXAS HIGHER EDUCATION COORDINATING BOARD
Curriculum Guidelines for an Elective Rotation in Public Health

I. Rationale and Background:

- A. The 75th Texas Legislature amended the Texas Education Code to include the provision of a public health rotation and states that the Texas Higher Education Coordinating Board shall “require family practice residency programs to provide an opportunity for residents to have a one-month rotation through (a) a rural setting; and (b) a public health setting.” [Section 51.918(b)(2)]
- B. The requirement for an elective public health rotation in Texas family medicine does *not* supplant the existing community medicine rotation, as required of all residents by the Family Medicine Residency Review Committee of the Accreditation Council for Graduate Medical Education.
- C. These guidelines were developed by the Family Medicine Faculty Development Center on behalf of the Family Medicine Residency Program Advisory Committee to the Texas Higher Education Coordinating Board. It is based on a Delphi survey of two family physician groups with expertise in public health:
 - 1. Public health family physicians associated with the Texas Department of Health and the United States Air Force, and
 - 2. Texas Family Medicine residency program directors and department chairs.

II. Implementation Guidelines:

A. Qualifying Rotations.

To qualify for the reimbursements outlined in the following section, an elective family medicine public health rotation must:

- 1. Be clearly labeled as a public health rotation in the residency program's curriculum documents and program descriptions;
- 2. Have substantially different objectives than the program's community health rotation;
- 3. Require participating residents to spend at least 50 percent of their time during the rotation working and learning in a public health setting; and
- 4. Provide evidence that the resident's experiences and activities have addressed at least five (5) of the Public Health Rotation's ten (10) objectives, as outlined in sections IV and V.

B. Reimbursement.

Participation by Texas family medicine residents in qualifying Public Health Rotations is supported by Coordinating Board funds. Following the completion of a qualifying Public Health Rotation by a Texas family medicine resident and

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submission of appropriate documentation, a Public Health Reimbursement Grant will be awarded in the following amounts:

1. Resident stipend: \$500
2. Residency program expenses: \$1,500

All documentation listed below must be received by the Coordinating Board before funding will be disbursed to the program.

1. Letter of Agreement
2. Grant Request
3. Evaluations described in Section VII.B. Evaluation

All forms are available at: www.highered.texas.gov/publichealth.

C. Arrangements:

1. Residency programs which initiate elective public health rotations may:
 - a. Arrange for the public health rotation with a public health agency located in the same city/county/district as the residency program;
 - b. Schedule the resident for patient care in the program's family medicine clinic for up to five (5) half-days per week; and
 - c. Teach selected cognitive public health objectives in the course of the residency program's regular lecture series, lectures which could also be attended by other residents not participating in the public health elective.
2. Residency programs which initiate elective public health rotations must:
 - a. Complete a letter of agreement with the sponsoring public health agency (see Appendix A).
 - b. Obtain a completed application form for a Rotation in Public Health from the resident (see Appendix A1).
 - c. Complete a grant request form (see Appendix B).
 - d. Complete the rotation evaluation form (see Appendix C).
 - e. Submit items a – d to the Texas Higher Education Coordinating Board at: FamilyPractice@highered.texas.gov.

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III. Goals:

The goals of the Texas Family Medicine Public Health Rotation are to encourage and assist Texas Family Medicine residents:

- A. To develop an appreciation of the roles, methods, and contributions of public health agencies and officials to the well-being of the citizens of Texas;
- B. To integrate, where possible, public health approaches with their clinical practice of family medicine;
- C. To consider public health medicine as a career option; and
- D. To explore and experience the unique challenges of the Texas Public Health Department in rural and medically underserved areas.

IV. Objectives:

Having completed an elective rotation in public health, Texas family medicine residents must provide evidence of learning activities and experiences which address at least **five** of the following **ten** objectives:

- A. Understand and appreciate the population basis for public health services;
- B. Understand and utilize methods for community health assessment;
- C. Understand and utilize health risk control efforts;
- D. Understand and apply measures to report and control epidemics;
- E. Understand and apply measures for infectious disease surveillance;
- F. Understand and apply preventive medicine approaches;
- G. Understand and apply epidemiological principles and methods;
- H. Understand and appreciate physician roles and legal responsibilities in promoting public health;
- I. Understand and appreciate the goals, functions and structure of public health entities; and/or
- J. Understand and appreciate the goals, functions and challenges of the public health department's support of the populations of rural communities, particularly small Medically Underserved Areas (MUAs) and Health Professional Shortage Areas (HPSAs).

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V. Suggested Learning Activities:

The following list presents the Public Health Rotation ten objectives, followed by examples of learning activities which are appropriate for each objective. The learning activities which a given resident is able to experience will depend to a great degree on the services and activities of the public health agency where the resident is completing the rotation.

Three guidelines regarding learning objectives:

1. Residents must participate in learning activities which relate to at least **five** of the Rotation's **ten** objectives. Because of the inherent variability in the public health experiences available in different sites, residents are not required to fulfill all ten stated objectives.
2. The intent of the public health rotation is to provide learning experiences for family medicine residents by *working in a public health setting*. Therefore, no more than two objectives can be satisfied solely by attending lectures or completing readings.
3. The suggested learning activities listed below are illustrative; other activities are acceptable provided they address one or more of the rotation's ten objectives. Any learning activities beyond those listed here must be specified briefly on the evaluation form (Appendix C).

Objectives and Learning Activities:

A. Objective: Understand and appreciate the population basis for public health services.

Suggested Activities:

1. Participate in a Community Oriented Primary Care (COPC) study or intervention being conducted by the sponsoring public health agency;
2. Attend a lecture on population based medical care (as distinct from individual / family medical care); and/or
3. Complete readings related to this objective (see attached reading list).

B. Objective: Understand and utilize methods for community health assessment.

Suggested Activities:

1. Participate in making a community diagnosis using existing surveillance data;
2. Attend a lecture on methods for community health care assessment; and/or

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3. Complete readings related to this objective (see attached reading list).

C. Objective: Understand and utilize health risk control efforts.

Suggested Activities:

Participate in:

1. Inspection and code enforcement to insure food safety;
2. Nursing home inspection and code enforcement;
3. Day care inspection and code enforcement;
4. Water quality programs, including water treatment and water supply protection;
5. Animal control programs;
6. Air quality control programs;
7. Housing inspection and code enforcement; and/or
8. Environmental hazards control.
9. Attend a lecture on methods for public health risk control; and/or
10. Complete readings related to this objective (see attached reading list).

D. Objective: Understand and apply measures to report and control epidemics.

Suggested Activities:

1. Learn how to define, recognize, and/or report epidemics;
2. Participate in outbreak control efforts;
3. Attend a lecture on methods for reporting and controlling epidemics; and/or
4. Complete readings related to this objective (see attached reading list).

E. Objective: Understand and apply measures for infectious disease surveillance.

Suggested Activities:

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1. Participate in infectious disease surveillance activities;
2. Attend a lecture on methods for infectious disease surveillance; and/or
3. Complete readings related to this objective (see attached reading list).

F. Objective: Understand and apply preventive medicine approaches

Suggested Activities:

1. Participate in preventive medicine activities of the host agency;
2. Participate in the immunization programs of the host agency;
3. Participate in infectious disease prevention activities;
4. Participate in prophylactic measures for foreign travel;
5. Participate in measures preventing the spread of disease from foreign nationals to Texas citizens;
6. Attend a lecture on preventive medicine methods; and/or
7. Complete readings related to this objective (see attached reading list).

G. Objective: Understand and apply epidemiological principles and methods.

Suggested Activities:

1. Participate in collection of epidemiologic data;
2. Attend a lecture on epidemiological principles and methods; and/or
3. Complete readings related to this objective (see attached reading list).

H. Objective: Understand and appreciate physician roles and legal responsibilities in promoting public health.

Suggested Activities:

1. Participate in public health agency's recording and processing of the infectious disease information reported by practicing physicians;
2. Attend a lecture or lectures concerning:
 - a. public health legal requirements affecting practicing physicians,
 - b. the legal ramifications of reporting infectious disease, and
 - c. the police powers of public health agencies; and/or

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3. Complete readings related to this objective (see attached reading list).

I. Objective: Understand and appreciate the goals, functions and structure of public health entities.

Suggested Activities:

1. Participate in on-going activities of a public health agency during a four week rotation;
2. Attend a lecture concerning the goals, functions and structure of public health agencies; and/or
3. Complete readings related to this objective (see attached reading list).

J. Objective: Understand and appreciate the goals, functions and challenges of the public health department's support of the populations of rural communities, particularly small Medically Underserved Areas (MUAs) and Health Professional Shortage Areas (HPSAs).

Suggested Activities:

1. During a four week rotation participate in the on-going activities of one of the three types of public health entities which provide services to rural Texas:
 - a. Participating Rural Health Department,
 - b. Local Health Unit, or
 - c. Public Health Regional Office.
2. Attend a lecture concerning the goals, functions and structure of rural public health agencies; and/or
3. Complete readings related to this objective (see attached reading list).

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VI. Suggested Readings:

The following list of readings was compiled by Ellen Bajorek, PhD at the Santa Rosa Family Medicine Residency Program in San Antonio and Fernando Guerra, MD, MPH and his staff at the San Antonio Metropolitan Health District. It is reprinted here with Dr. Bajorek's permission and is provided to illustrate the kinds of readings which may be useful to a program as it develops its own Public Health Rotation.

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VII. Evaluation:

A. Evaluation of Resident's Performance.

1. Residency programs may use their regular resident evaluation form for this purpose.
2. The resident's supervisor at the public health agency is encouraged to meet with the resident at the end of the rotation and share evaluative ratings and comments face to face.
3. It is often productive to give a blank form to the resident ahead of time and ask that the resident rate himself/herself before the evaluation meeting.
4. The supervisor should return the evaluation form to the residency program director, who should provide a copy of the completed evaluation to the resident.

B. Evaluation of Public Health Rotation (Appendix C)

1. This form is to be completed by the resident and residency program director.
2. The resident will complete sections I through III and forward it to the residency director.
3. The residency program director is to complete section IV and the Grant Request Form. (The Grant Request Form will not be processed unless it is submitted with a completed evaluation form.)
4. After the form is completed, the residency program director must submit the Evaluation and the Grant Request Form via email to the Coordinating Board staff at familypractice@highered.texas.gov.
5. The residency program director should provide a copy of the completed evaluation to the supervisor at the participating public health agency.

The Letter of Agreement, Grant Request, and Evaluations described above must be received by the Coordinating Board before funding will be disbursed to the program.

All forms are available at: www.highered.texas.gov/publichealth.