

PRIMARY CARE SCHOLARS CERTIFICATE OF DISTINCTION

Shahrzad Saririan, MD

Director, Primary Care Scholars COD

University of Arizona College of Medicine - Phoenix

Vision

Training future leaders in primary care.

Goals

- Develop leaders who intend to pursue a career in primary care medicine.
- Contribute to a college of medicine culture that supports primary care.
- Increase the number of the University of Arizona COM-Phoenix (UArizona College of Medicine—Phoenix) graduates practicing primary care.
- Prepare medical students for the rewards, challenges, and unique characteristics of primary care practice.
- Expand and develop collaborative relationships with community primary care physicians and faculty.

Background

Despite a historical lack of financial support and recognition, primary care remains the critical focal point of any health care system. As originally defined by the Institute of Medicine, primary care physicians consist of physicians who provide continuous, comprehensive, coordinated care in addition to serving as the first point of contact for most health care needs. Research shows that health systems undergirded by primary health care principles achieve better health and greater equity in health than systems with a specialty care orientation.

The pipeline for generalist physicians in the US healthcare system is in serious jeopardy. At a time when a robust primary care network is vitally important for the delivery of high value population level care, there is a growing shortage of family physicians and general ambulatory internists. 8,000 primary care physicians enter the US healthcare workforce each year, but 8,500 retire annually.3 Within less than a decade, it is predicted that the shortage of primary care physicians in the US will reach between 12,500 to 31,100.4 This shortage is particularly severe in Arizona, which ranks in the bottom 10% of states in terms of primary care access.5 There are multiple factors contributing to this phenomenon, including the salary differential between generalist and subspecialty physicians, the rising debt incurred from

medical school tuition, burnout of overworked providers, and a culture in most medical schools that champions specialist over generalist careers.

Substantive steps need to be taken to address the looming crisis in our supply of primary care physicians. Often students begin medical school planning and are strongly considering a career in primary care but are later dissuaded due to negative feedback from faculty and the generalist-specialist income gap. Therefore, financial support to offset medical school debt is an important way to help medical students planning generalist careers remain on that pathway.6 As our system of care moves toward value based reimbursement, the need for population health management through a strong primary care infrastructure becomes critical to both financial and health outcomes. Healthcare systems that invest in the primary care pipeline will enjoy a competitive advantage in a delivery system that is increasingly dependent on coordinated, efficient, evidence-based, patient-centered primary care to manage populations of patients over time.7

In response to the need for more primary care physicians, University of Arizona COM – Phoenix is now offering a Primary Care Scholarship covering tuition fees for students committed to primary care practice. Additionally, a loan repayment program is being pursued with Banner Health to help mitigate the financial barriers for UArizona College of Medicine—Phoenix students considering primary care careers. In return for substantial financial support, recipients would commit to employment as primary care physicians within the Banner Health provider network after completion of residency training. The program name honors the legacy of Dr. Robert A. Price, a nationally recognized and distinguished pioneer in the field of Family Medicine who served as the former Director of the Family Medicine residency at Banner University Medical Center Phoenix (then known as Good Samaritan Hospital) from 1971-1991. Additional loan forgiveness or scholarship programs will be sought to provide financial support for students choosing primary care careers.

Primary Care Scholars Program

The PCS COD is a mentoring and scholarship program. The program seeks students who demonstrate a strong commitment to primary care. Students admitted to the PCS COD are offered a 4-year enriched curriculum that focuses on the acquisition of knowledge pertaining to primary care practice, health policy, public and population health, and the development of leadership and scholarship skills. Students will participate in unique educational experiences and longitudinal clinical opportunities during the 4-year program to prepare them to be leaders in the field of primary care. Students will receive extensive financial aid counseling regarding the various federal and state primary care loan repayment and scholarship programs currently available. In addition to the supplemental medical preparation and potential for financial support, completion of the PCS program leads to a *Primary Care Scholars* certificate of distinction.

Admission

 All students accepted to the UArizona College of Medicine—Phoenix with an interest in developing leadership skills in primary care are eligible to apply.

- Applicants must apply for the PCS COD by the first Friday in August of their first academic year at the College.
- Interested students are encouraged to meet with the PSC COD Director to discuss their scholarly project or alternative project prior to submitting an application.
- Upon receipt and review of an application, a personal interview may be requested at the discretion of the PCS Director.
- Candidates can request to meet with the PCS COD Director and current students to learn more about the program.
- Final selections and notification of acceptance in the program will be completed by the third Friday in August.
- By individual agreement with the director, late admission to the COD may be granted pending the student's ability to meet COD requirements and availability of mentors.

Requirements for completion of the PCS COD

- PCS students match with a primary care faculty mentor. Faculty mentors discuss concerns, answer questions, and encourage eventual primary care practice. Mentor-PCS student meetings are required to take place at least bi-annually. Formative review of the students will occur yearly to assess student progress in the PCS COD.
- Multiple primary care seminars are presented across a two-year cycle. Students will attend a minimum of 10 seminars over the course of 4 years.
- Students will complete a Scholarly Project with a focus relevant to primary care or may complete an alternative project with an emphasis on primary care upon approval of the COD director. See description of alternative project below Requirements for Completion.
- Students are required to complete the Information Mastery online evidence-based medicine course by the end of year 4. They will be encouraged to complete most of this course during the six-week Personalized Active Learning (PAL) block at the end of Year 1. As part of the Information Mastery course, students must attend all flipped classroom discussion sessions scheduled at the end of the PAL block.
- Second year students will participate, along with the primary care student interest groups, in the planning and implementation of activities during the Primary Care Week, a week-long program of lectures, panels, films or other activities that focus on issues relating to primary care. These sessions are open to the entire student body and faculty at UArizona College of Medicine—Phoenix, as well as other interested persons.
- Students will participate in primary care and public health advocacy with the establishment of a Primary Care Progress chapter at the UArizona College of Medicine—Phoenix. Students must participate in at least 10 hours of advocacy over the course of 4 years.
- Students must complete a primary care, leadership or advocacy 4-week elective during their 4th year. Students may choose from available UArizona College of Medicine—Phoenix electives or may identify away opportunities in conjunction with COD director and electives team.
- Students must have passing grades in all blocks and courses in order to remain in the program.

- Students must adhere to the student code of conduct and may not receive more than two Level 1 ratings in behavioral competencies.
- Students cannot receive more than one Certificate of Distinction.
- Students need to complete all of the MD requirements of the UArizona College of Medicine— Phoenix.

Alternative Project

As approved by the COD director, students may consider completion of the following:

- 1. A primary care quality improvement project.
- 2. A primary care community needs assessment (in the community in which student has been placed during their PC3/LCE course)
- 3. A systematic review submitted for publication.
- 4. An approved primary care service-learning project, completion of the project, and submission of a statement of outcomes related to the project.
- 5. Writing a grant application and providing oversight for fund utilization.
- 6. Serving on a primary care specialty, association or organization Board of Directors
- 7. Applying for a primary care national student leadership position and serving in that function throughout their 4 years.

PCS Curriculum

For students committed to pursuing careers in primary care medicine, the PCS COD offers an enriched curriculum that parallels the regular medical curriculum at the UArizona College of Medicine—Phoenix. Five themes comprise the core of the PCS experience for students. These themes are Scholarship, Health Policy and Population Health, Leadership, Information Mastery, and Clinical Practice.

- 1. Scholarship: Every student at the UArizona College of Medicine—Phoenix designs and successfully completes a Scholarly Project (SP) or alternative project. PCS students will work closely with their mentors and the Scholarly Project office throughout the four years of their primary care scholarly project. During their fourth year, the students submit a final poster and thesis summarizing their primary care SP. Each student will present the poster at the annual Student Research Symposium. The PCS students also provide an oral slide presentation in front of PCS faculty. Students will be encouraged to submit projects for presentation at national meetings such as the Society of Teachers of Family Medicine annual conference.
- 2. Health Policy and Population Health: Students will attend talks by public health and population health specialists on topics related to health care policy and the impact of these policies on patient care. Students also learn about ways physicians may engage in advocacy and may pursue specific public health issues of interest to them including health services and health outcomes research projects. Those students interested in public health and policy may delve more deeply into these issues by pursuing a master's degree in public health.

- 3. Leadership: PCS students are expected to assume a leadership role in their future endeavors, whether as a community practitioner or in the realm of research and academic medicine. Leadership preparation starts early in the program when students help plan and coordinate the annual Primary Care Week activities. Additionally, students will participate in the establishment of a new chapter of Primary Care Progress, a nationally recognized network that is committed to strengthening the community of people at the heart of primary care through leadership development, advocacy, and community at medical schools nationwide.⁸ Fourth year students further develop these skills by taking a primary care leadership and advocacy elective.
- 4. Information Mastery: Future primary care clinicians stationed on the front lines of health care management must recognize the power obtained from the appropriate management of information. Information Mastery is the application of the principles of evidence-based medicine concepts and techniques to the day-to-day practice of medical care. It allows future physicians to maximize the value of their services by paying close attention to the costs, benefits, and harms of their interventions as they relate to the patient, family, and the entire community. The program pursues a core mission to change the way people think about health, how they deliver health care and ultimately care for themselves. PCS students will complete the Information Mastery curriculum by the end of the program. Students will have many opportunities to apply and teach the principles of Information Mastery over the course of their 4-year medical education at the UArizona College of Medicine—Phoenix.
- 5. Clinical Practice: The PCS program is designed to prepare the next generation of primary care physicians to meet the rising health needs of local and global communities. The program will provide longitudinal experiences in primary care by pairing each PCS student with a primary care physician mentor for their Longitudinal Clinical Experience (in lieu of the CCE) Course, a component of the curriculum spanning all 4 years of medical school. Through various preceptorship and shadowing experiences with an interprofessional team, students will have multiple opportunities to observe and work with primary care clinicians. Through these experiences, students will learn core principles of patient-centered care, population health management, continuity, health care disparities, team-based care, health policy, and quality improvement.

References

- 1. Starfield B, Primary Care and Equity in Health: The Importance to Effectiveness and Equity of Responsiveness to Peoples' Needs. Humanity & Society. 2009; 33:56-73.
- 2. Sox HC. The future of primary care. Ann Intern Med. 2003; 138:230–1.
- 3. Petterson et al, Ann Fam Med 2015;13:107
- 4. IHS Inc. The Complexities of Physician Supply and Demand: Projections from 2013 to 2025. Association of American Medical Colleges, March 2015.
- 5. The Henry J Kaiser Family Foundation. Primary Care Health Professional Shortage Areas. Dec 31, 2016.
- 6. Bodenheimer et al. The primary care-specialty income gap. Ann Fam Med 2007; 1467:301-306.
- 7. Bodemheimer T, Grumbach K. Improving Primary Care: Strategies and Tools for a Better Practice. McGraw-Hill, 2007; 5-8.
- 8. Primary Care Progress. https://www.primarycareprogress.org. Retrieved Sept 2017.
- 9. Slawson DC, Shaughnessy AF, Bennett JH. Becoming a Medical Information Master: Feeling Good About Not Knowing Everything. J Fam Pract 1994; 38: 505-13.
- 10. Tufts University School of Medicine: Center for Information Mastery.

 http://medicine.tufts.edu/Education/Academic-Departments/Clinical-Departments/Family-Medicine/Center-for-Information-Mastery. Retrieved Sept 2017.