CDU LONGITUDINAL PRIMARY CARE PRECEPTORSHIP PROGRAM

Course Description
The Longitudinal Primary Care Preceptorship (PC011) is a required year-long clerkship for the CDU/UCLA Medical Education Program third year students. It is designed to further develop clinical skills in caring for medically underserved patients in an ambulatory setting, as new patients and for follow-up visits. Over the course of the third year, each student is excused from their clinical rotations for two to three Tuesday mornings per month, for a total of 10-12 sessions.

Under the supervision of community-based faculty, students will be given the opportunity to provide patient-centered primary care or specialty specific care to vulnerable and underserved populations in various types of health care settings. Students will use evidence-based medicine to manage the presenting complaints of patients and will also become familiar with the psychosocial, cultural, economic, and insurance factors that are important to their overall healthcare.

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Course Goals and Objectives
1. Students must understand and demonstrate how to manage the care of vulnerable populations.
   a. Identify and appropriately manage care for patients who are homeless.
   b. Identify and appropriately manage care for patients with low or inadequate health literacy.
   c. Identify and appropriately manage care for patients who are otherwise vulnerable based upon socio-demographics, economic, or disease characteristics.

2. Students must understand and demonstrate how to deliver culturally and linguistically appropriate care.
   a. Understand and utilize ethno-medical principles to provide effective culturally appropriate care.
   b. Identify and manage care for patients who are non-English speaking (particularly in the linguistically isolated).

3. Students must understand and demonstrate how to deliver community appropriate care.
   a. Identify the structure of local community resources and utilize those resources in managing care for patients.
   b. Develop care plans that recognize unique components of the community and that are sensitive to the needs of the community including non-medical and spiritual dimensions of care.
   c. Demonstrate an understanding of complex health systems in the context of community and their efforts on patient access, quality of care and clinical outcomes.

4. Students must understand and demonstrate how to deliver patient-centered medical care.
   a. Understand the concepts and implement strategies associated with providing medically effective patient centered care.
   b. Incorporate prevention and wellness in all aspects of care, utilizing appropriate aspects of both biomedical and psychological models of care.
   c. Demonstrate the appropriate skills and strategies necessary to effectively share knowledge with their patients and educate their patients in their own care, involve the patients’ family and
friends, collaborate with other medical and non-medical team members and that demonstrates respect for the patients' needs and preferences.

5. Students must understand and demonstrate **competency in Systems Based Practice**.
   
a. Distinguish the roles of primary care providers and specialists, and discuss the options communities have to achieve an appropriate balance between primary and specialty care.

b. Understand the flow of funds through the US health care system, from their points of origin though public (Medicare and Medicaid) and private (insurance companies and health plans) intermediaries, down to the provider tier (physicians and hospitals). Distinguish between costs and charges.

c. Identify and use resources and ancillary health care services for patients in which social and economic barriers to access exist.

d. Articulate the physician's special responsibilities toward both individual patients and society at large, and discuss ways to balance these competing needs and priorities.

e. Describe population health frameworks, including social determinants of health, population based medicine, and community prevention and public health, and identify the utility of these frameworks in designing health care delivery systems, particularly for diverse, underserved populations.

f. Understand health disparities, their relationship to the US health care system, and define resources and methods to identify and address health disparities within health systems and across communities

g. Describe major current health system reform initiatives and laws, including possible benefits and barriers to implementing them.

h. Discuss the concept of a medical safety net and strategies for lowering access barriers for vulnerable populations.

i. Define an integrated delivery system, list its key components and describe how they function together to deliver optimal patient care and outcomes.