

School: Stanford University

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Collaborating organizations: Stanford University Office of Community Health
Community Health Partnership of Santa Clara County
Ravenswood City School District
San Mateo County Health Department
Santa Clara County Public Health Department.

Project Description:

The curricular structure for the School of Medicine is divided into these blocks:

i. Scholarly Concentrations

Stanford's Scholarly Concentrations are analogous to *majors* and provide medical students with independent, creative scholarly experiences in areas of personal interest. This required component of the curriculum develops critical thinking, skills in evaluation of new data, and hands-on experience with the methods by which new scholarly information is generated.

ii. Foundations of Medicine

This block provides building blocks for organ-based learning and integrates with the Practice of Medicine (POM) Block through weekly clinical correlates. Foundations of Medicine is broken into a number of smaller elements including: Molecular Foundations of Medicine, Cells and Tissues, Anatomy, Neurobiology, Biochemistry, Developmental Biology, Genetics, and Immunology.

iii. Human Health and Disease

This organ-based system block is divided into 8 separate units in which students learn about normal organ systems and then the diseases that occur in these systems.

iv. Practice of Medicine

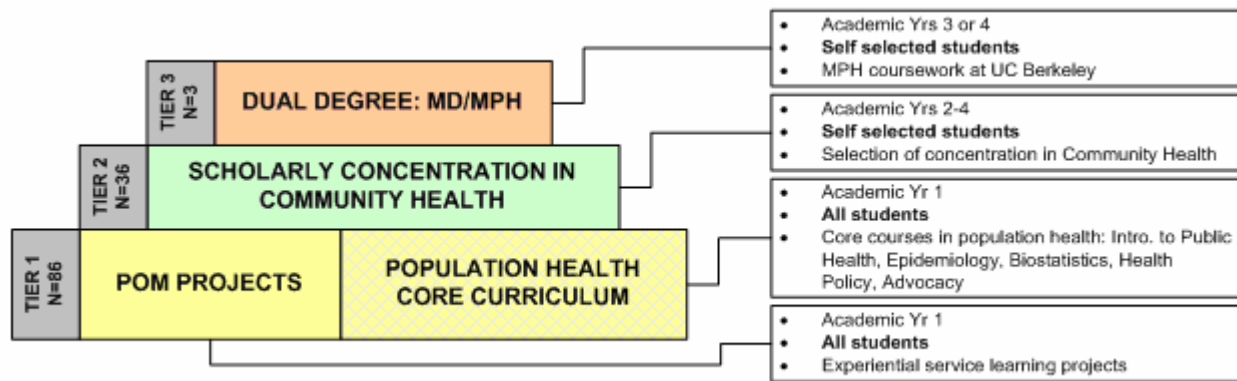
This block—which comprises the elements of patient oriented learning—weaves together 8 threads over 6 quarters of medical school. This stretching of the threads across the two years provides the opportunity to reemphasize important principles on several different occasions, in different scenarios, and linked to different biomedical scientific principles. The new Population Health curriculum has evolved into one of the threads in the Practice of Medicine block.

v. Clinical Clerkships and Applied Biomedical Sciences

Public health/population health/preventive medicine education prior to RMPHEC

Prior to the establishment of Stanford’s RMPHEC, the POM curriculum included a number of stand-alone lectures on population health topics, e.g., basic public health concepts, epidemiology, biostatistics and health policy. Additionally, since 2003, students have been required to carry out small-group advocacy/community projects, however these projects were not explicitly linked to the curriculum. Students with a passion for Community Health have also had the option of electing into the Scholarly Concentration in Community Health, which includes courses in Methods for Community Assessment, Evaluation and Research and Social and Environmental Determinants of Health.

Public Health Education Prior to RMPHEC

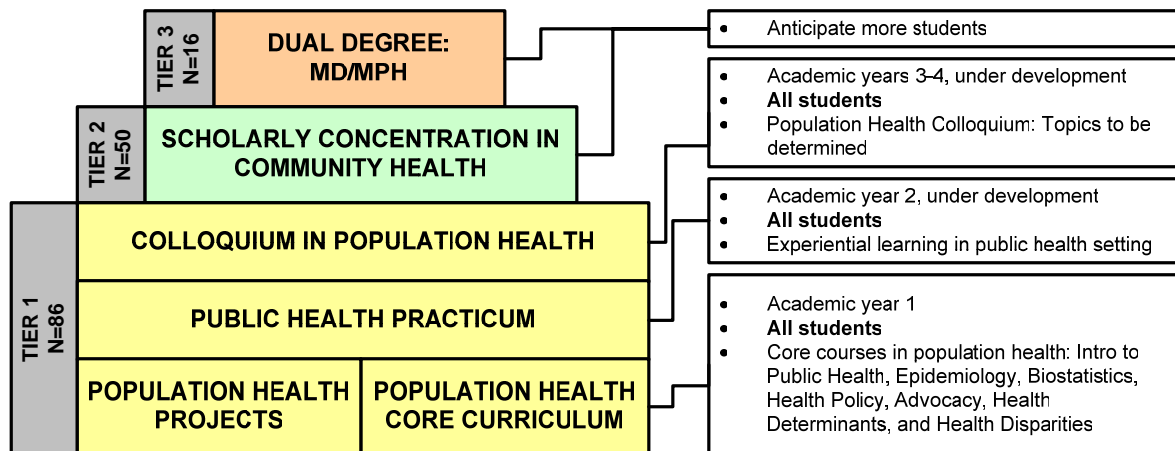


Elements of new curriculum

Innovations/products/activities supported by RMPHEC

The RMPHEC has augmented and integrated existing population health content, creating a coherent program of didactic and experiential learning across multiple years of medical education.

RMPHEC Supported Curriculum



After 7 months of collaborative planning, the Year 1 Population Health curriculum was launched in Fall 2006, merging new didactic content with closely integrated Population Health Projects. Key domains that are covered in the lectures include: health determinants, health disparities, Healthy People 2010 objectives, physician advocacy, and environmental health.

Through the projects, students work in small groups to address pressing local health issues identified by our community partner organizations. Through these projects, students are able to integrate and apply their understanding of health determinants and policy solutions to address local issues. In 2006-2007, there were 16 group projects working with 13 community agencies on topics including childhood obesity, diabetes, sexually transmitted diseases, cancer screening, and the built environment. Additionally, population health approaches were integrated into case studies and discussion sessions from the other areas of the Practice of Medicine curriculum such as ethics, psychiatry, and communication skills.

The Public Health Practicum, currently being planned for Year 2 students, will provide students with direct field exposure to the public health system, disease surveillance, and community programs. A Colloquium planned for Years 3 and 4 will help to solidify and integrate students' understanding of population health throughout their clinical clerkships.

Evaluation:

Student Assessment

- First year students evaluate the curriculum, didactic sessions, and projects at the end of each quarter as part of the larger course evaluation for the Practice of Medicine course.
- Qualitative evaluation is conducted at the end of the academic year. Student focus groups provide regular feedback on curriculum and projects
- Students complete evaluations about their experience with community partners to identify and build on strengths of successful partnership relationships.

Community Partner evaluation

- Office of Community Health staff conduct regular check-ins with community partners at the beginning of each quarter.

- At the end of the year, Community partners complete an online survey to measure satisfaction and usefulness of student contributions.

Process evaluation

- First year students participate in a baseline study on knowledge, attitudes, behaviors around population health and re-tested upon completion of the year.

Outcome assessment

- Retrospective analysis of types of projects students have chosen in previous years

Publications and presentations:

Lisa J. Chamberlain, MD, MPH, N. Ewen Wang, MD, Evelyn T. Ho, MPH, Ann W. Banchoff, MPH, MSW, Clarence H. Braddock, III, MD, MPH, and Neil Gesundheit, MD, MPH. Integrating Collaborative Population Health Projects into a Medical Student Curriculum at the Stanford University School of Medicine. Academic Medicine. In press.

Evelyn T. Ho, MPH, Lisa Chamberlain, MD, MPH, Ann Banchoff, MSW, MPH, Ewen Wang, MD, Laurie Bauer, RN, MSPH, Lourie Campos, MPA, Sara Cody, MD, Rhonda McClinton-Brown, MPH, Scott Morrow, MD, MPH, Dorothy Vura-Weis, MD, MPH, Clarence Braddock, MD, MPH, Neil Gesundheit, MD, MPH. Population health in medical school: Educating future physicians using the public health paradigm. Poster at the American Public Health Association Annual Meeting, November 2007.

Lisa Chamberlain, MD, MPH, Ann Banchoff, MSW, MPH, Dr Suzanne McKenzie, Anne W. Bunde-Birouste. Physician Leadership in Population Health Promotion: Medical Education Models from Australia and the United States. Presentation at the International Union for Health Promotion and Education World Conference, June 2007.

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