

Title VII General Pediatrics Training Grants Recommendations for FY 2006

Challenges facing tomorrow's generalist pediatrician

Today, over 9 million children and adolescents – many of whom live in federally designated Health Professional Shortage Areas – do not have health insurance. Nationwide, the racial and ethnic diversity of the pediatric population continues to increase in record numbers. Estimates predict that by the year 2020, approximately 40% of school-aged children will be of non-white racial or ethnic backgrounds. Given these changes, in the 21st century, America's children will need, more than ever, culturally competent primary care pediatricians who are educated in a variety of settings and who are trained to meet the health care needs of their diverse communities.

Title VII of the Public Health Service Act

While a relatively small program, the grants offered through the Title VII program address an enormous need. The grants help to support individuals and institutions, improve the racial and ethnic diversity of the health care workforce, foster high quality training for more health professionals in fields of primary medical and dental care, nursing, public health and allied health, and improve the geographic distribution of the healthcare workforce.

Pediatric Education and Training

Included as part of the Title VII program is federal support to innovative pediatric residency training and faculty development programs throughout the country, providing the only federal support available for education beyond the hospital-based model. Grants frequently support training in a wide-variety of ambulatory and community-focus sites including juvenile detention centers, homeless shelters, child nutrition programs, pediatricians' offices, child care centers and community health centers.

FY 2006 Funding Recommendation

The pediatric community, including the American Academy of Pediatrics, Ambulatory Pediatric Association, American Pediatric Society, Association of Medical School Pediatric Department Chairs, Society for Pediatric Research, and Society for Adolescent Medicine support innovative training for generalist pediatricians through appropriate funding for the General Internal Medicine/General Pediatrics program of at least **\$40 million in FY 2006**. This figure represents the first step in a multi-year effort to achieve a funding level of at least \$69 million for the General Internal Medicine/General Pediatrics programs, as recommended by the congressionally-established Advisory Committee on Training in Primary Care Medicine and Dentistry.

The pediatric and adolescent health community, as members of the Health Professions and Nursing Education Coalition (HPNEC), also recommends an overall funding level of at least **\$550 million in FY 2006** for the Title VII (health professions) and Title VIII (nursing) programs. The President's budget for FY 2006 for the fourth year eliminates funding for all Title VII programs, with the exception of \$10 million for Scholarships for Disadvantaged Students and \$1 million for health workforce information and analysis.

Title VII General Pediatrics Success Stories

Children's National Medical Center in Washington D.C., in conjunction with the George Washington University, has used Title VII funds to launch an innovative postgraduate pediatric fellowship training program that prepares pediatricians for academic-focused community based careers emphasizing the health needs of the underserved. Through the General Academic Pediatrics and Community Oriented Pediatric Care (COPC) fellowship, new general pediatric faculty members divide their time between clinical work, educational training and child health advocacy. Over the course of two years, COPC fellows conduct a comprehensive community needs assessment, develop a community based health intervention plan with local input, and complete a Masters of Public Health. COPC graduates have remained in underserved communities, as health care providers and as leaders, teachers, and advocates for their patients and families.

At the **Cincinnati Children's Hospital**, Title VII health professions programs have funded two critically important programs in pediatric medical education. The Residency Training in Primary Care grant supports the development of a primary care track within the overall pediatric residency program, designed to train physicians for a career in primary care pediatrics. The track features a strong emphasis on behavioral and developmental pediatrics, pediatrics in a community setting, and care for under-represented minorities and medically underserved populations. The community settings in which the primary care training take place – and, often, ultimately where the physicians chose to practice – are federally designated HPSAs with diverse populations. This program is now an integral part of the Cincinnati Children's residency program, and widely sought after by physicians entering training at Children's. As importantly, much of the behavioral, developmental, and care for under-represented minorities and medically underserved populations curriculum has been incorporated into the overall residency program.

The second program, Faculty Development in Primary Care, funds the development of an online Masters Degree in Education for Healthcare Professionals. The program, one of the first in the country, provides efficient and accessible advanced studies in education, and is designed to graduate leaders in medical education who will provide their home institutions the expertise to develop programs to train primary care physicians to become accomplished and effective teachers of residents and, by example, encourage primary care as a career. Considering the number of other educators that the program graduates will teach, as well as the number of learners, that these other educators will be responsible for, the national “multiplier effect” on the training of primary care providers of this Title VII program is extremely significant – impacting potentially thousands of learners nationally.

The University of Colorado Health Sciences Center's Title VII grant program trains primary care physicians to be teachers and to do research that is focused on improving the delivery of health care to children and adults. The graduates of this program frequently work in community settings that care for underserved, low-income populations, and their research focuses directly on problems that face these communities. Recent graduates of the fellowship have studied improving the delivery of immunizations to medically high-risk and underserved populations, eliminating racial and ethnic disparities in the delivery of health care, using innovative means of delivering health care such as the internet or telephone, and evaluating barriers to access and quality of care for children. Title VII provides the sole source of funding to train primary care physicians who are dedicated to teaching future physicians and doing research relevant to improving health care in community settings.

The University of Utah's Title VII grant takes the form of a collaborative between the Departments of Family and Preventive Medicine and Pediatrics. The grant facilitates both a traditional fellowship training component and a community preceptor training component, under which 35 community preceptors have been trained in topics such as Medical Education, Underserved Medicine, and Advocacy. The traditional fellowship program continues to exceed expectations, producing academic physicians who have earned a Masters of Public Health with a Master Teacher emphasis.

The Montefiore Medical Center in the South Bronx of New York City has used Title VII funds to support its Residency Training Program in Social Pediatrics (RPSP). Initiated in response to local needs to prepare physicians for the delivery of care to underserved populations and to practice specifically at Community Health Centers in the inner-city setting, RPSP simultaneously trains physicians in neighborhood health centers and in an academic hospital. Since its inception, RPSP has graduated over one hundred pediatricians, a large number of whom are women and minority physicians. Additionally, 79% of all RPSP graduates report that they currently practice in community-oriented primary care settings serving predominately poor and minority inner-city populations. Another 10% of RPSP graduates report that they are involved in professional activities such as health administration and policy, including directing patient care in community health centers.

The University of Maryland-Baltimore's Department of Pediatrics is participating in a collaborative grant with the Departments of Family Medicine and Internal Medicine. This initiative is fostering the development of a competency-based curriculum for primary care that addresses both discipline-specific areas as well as areas that cross-disciplinary lines. In addition, the grant enables them to fund a medical educator to study the impact of the program's educational endeavors. The University has also used Title VII funds to establish an innovative residency training and education program that helps pediatricians provide better care to underserved communities. Located in a federally-designated "empowerment zone," the University combines workshops, discussions, and clinical experiences to improve residents' understanding of the impact of cultural diversity on the practice of medicine, the primary skills needed to care for underserved patients, and the potential for technology to facilitate care. The program also allows residents to gain insight into the basic principles of managed care through a one-month rotation focusing on the administrative aspects of managed care practice. Residents then have the opportunity to apply what they have learned during their own community clinic placements.

The University of Wisconsin Department of Pediatrics has used Title VII funds to develop a residency primary care training track. As a part of this innovative program, which was implemented in the mid-1990s, residents were placed with community pediatricians in their weekly continuity clinics and took part in a number of community-based training experiences such as making home visits with public health nurses and attending immigrant clinics. As part of off-site elective rotations, residents gained additional primary care experience in migrant worker camps, reservations, inner city areas, third-world countries and rural health clinics. The primary care track ultimately led to a required, month-long community pediatrics/public health rotation, which has received national attention.

The **Mount Sinai Primary Care Clinician Research Fellowship** is funded through Title VII and has been pivotal in generating interest in primary care and in the training of both majority and minority primary care clinician researchers in New York. This fellowship is jointly developed and administered through the Divisions of General Pediatrics and General Internal Medicine. General Pediatrics had not had a fellowship program prior to funding. Nearly 40% of its fellows are minority clinician researchers, and all fellows are deeply committed to serving the underserved, which is key given the health disparities in the local community of East Harlem. Fellows' research projects include detecting psychosocial problems in primary care, alternative medicine, obesity in elementary school age children, asthma and the health belief model, hormone replacement in women, and medical education. This core group of fellows and faculty has created real enthusiasm for primary care and clinical research in the General Pediatric and Internal Medicine residents and medical students, while at the same time re-emphasized school-wide the importance of community-based research and care.

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