

Health Professions Education and the Social Mission of Medical Schools



Regional Meeting on Human Resources for Health, Buenos Aires,
Argentina Aug 31-Sept 2, 2015

Arthur Kaufman, MD

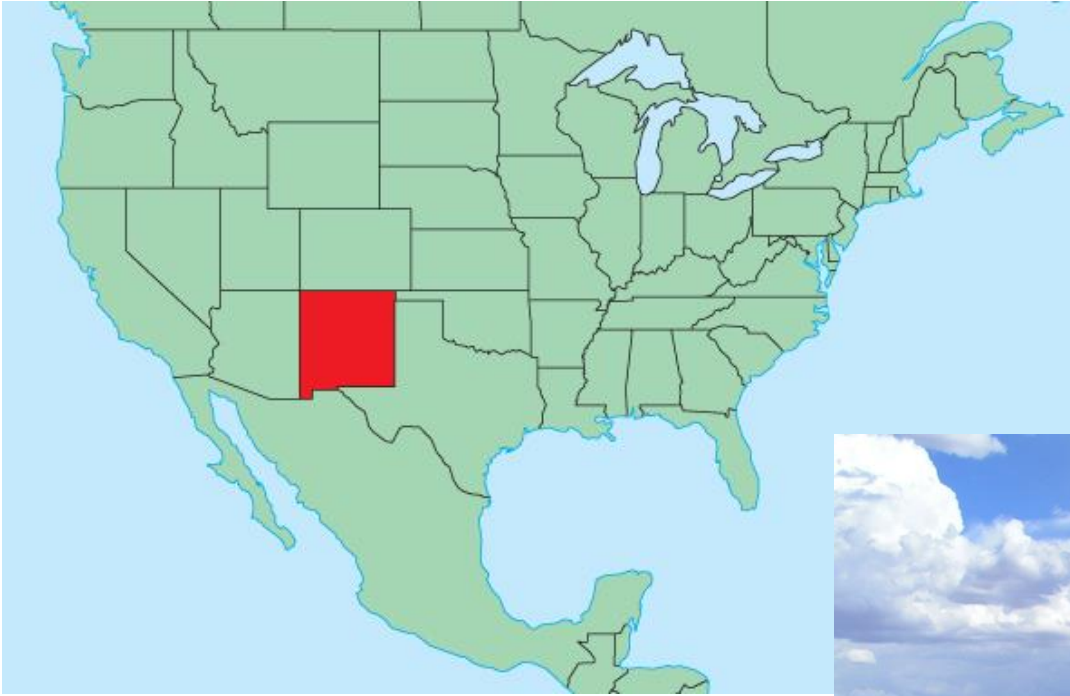
Vice Chancellor for Community Health

Distinguished Professor of Family and Community Medicine

University of New Mexico

akaufman@salud.unm.edu





New Institutional Vision Statement

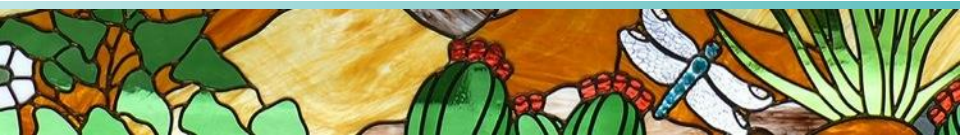
“The University of New Mexico Health Sciences Center will work with community partners to help New Mexico make more progress in health and health equity than any other state by 2020.”

V I S I O N
2020



History of Medical Education Innovation in New Mexico

- 1979 Change preclinical curriculum
- 1988 Change clinical curriculum
- 1992 Change residency education
- 1998 Interdisciplinary learning
- 2000 Change clinical practice
- 2008 Integrate public health and medicine
- 2010 Address the social determinants of health, disease



How We're Changing Research: 2007 Top Health Priorities from 31 County and 6 Tribal Councils (compared with UNM HSC research priorities)

■ County Health Councils' Priorities (in order)

- Substance Abuse
- Teen Pregnancy
- Obesity
- Access to Care
- Violence
- Diabetes

■ UNM HSC Research Priorities ("Signature Programs")

- Cancer
- Cardiovascular and
Metabolic Diseases
- Brain and Behavior
- Infectious Disease and
Immunity

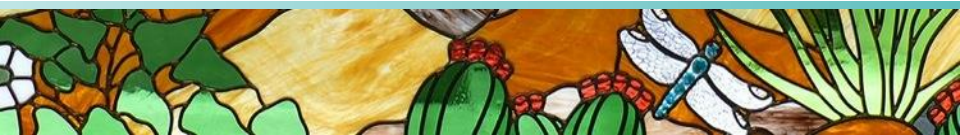


Quality Care is Not Enough

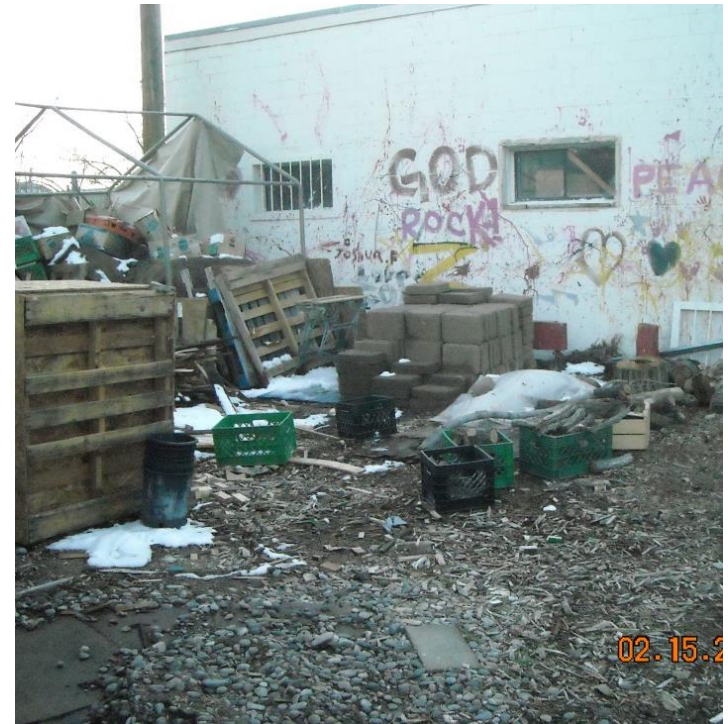
ex. Diabetes in Native Americans

- Recommended Preventive Services:
 - Native Americans have best rates
- Deaths from Diabetes:
 - Native Americans have highest rates

New Mexico Dept of Health 2010 Report on Ethnic Disparities in Health



Communities We Serve



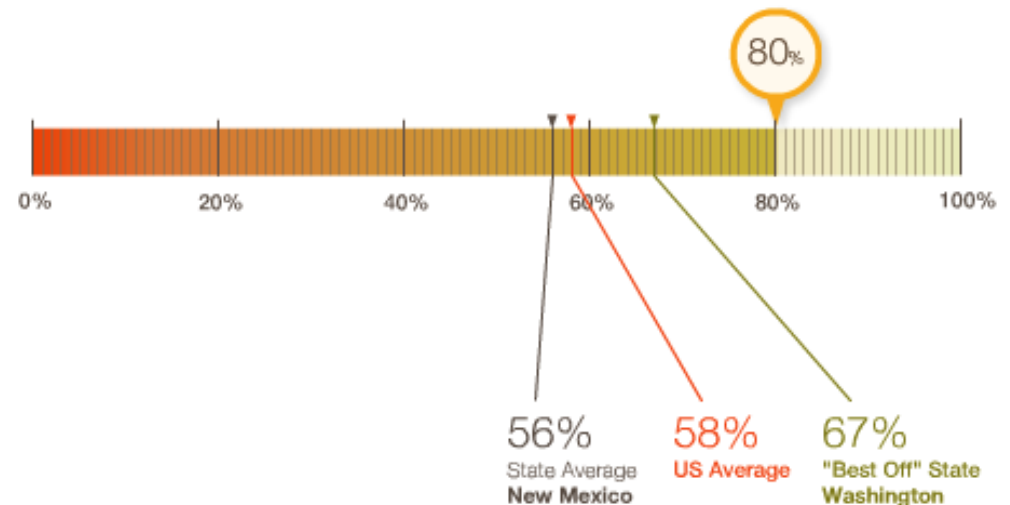
Determinants of Health

<u>Contribution to Mortality</u>		<u>% Nat'l Health Budget</u>
• Lifestyle	43%	1%
• Biology/Genetics	27%	7%
• Environment	19%	2%
• Health Services	11%	91%

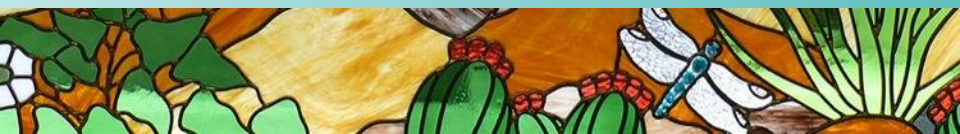


Education and Health

- High correlation of educational attainment and health
- 56% of New Mexicans had some college education (we rank 36th in nation)
- If 24% more (80%) had some college, we would avert 677 deaths/year



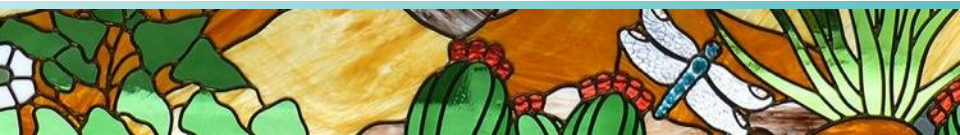
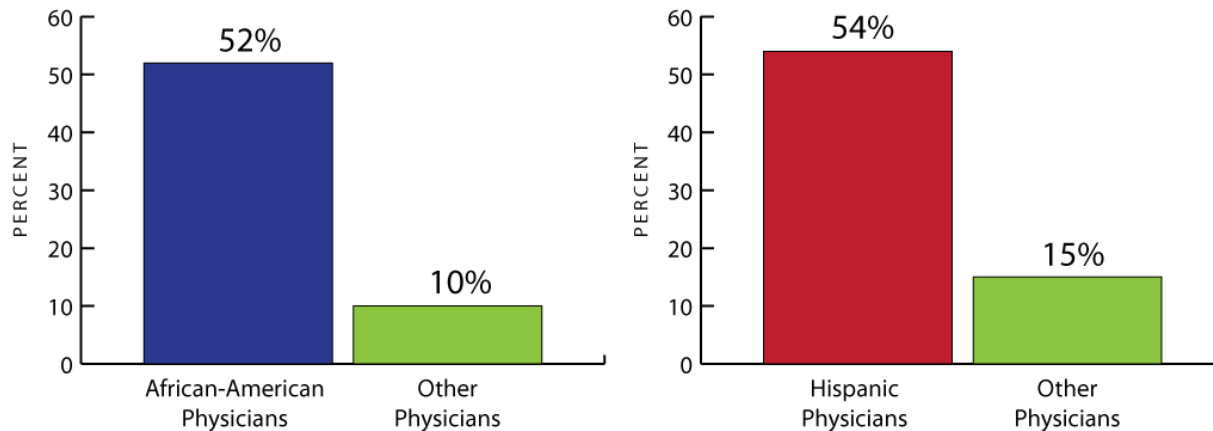
Source: Robert Wood Johnson Foundation Commission to Build a Healthier America



Access and Ethnicity

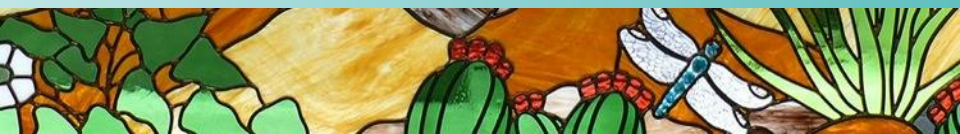
- Population is becoming more ethnically diverse
- But U.S. medical students from more upper income families
- Impact of ethnicity on access:

Likelihood of African-American or Hispanic Physicians to Treat Patients of the Same Race or Ethnicity



Health Workforce: A Social Determinant, Public Health Impact

- PCPs/100,000 population
- 1 Physician in Rural Community
 - a) hires ~18 people directly, indirectly
 - b) generates ~ \$1 million in business annually



Rural Retention in New Mexico

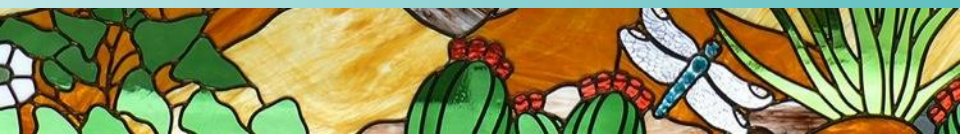
- Physicians – least
- Nurses – more
- Medical Assistants – much more
- Community Health Workers - most



Factors Favoring NM Rural Practice

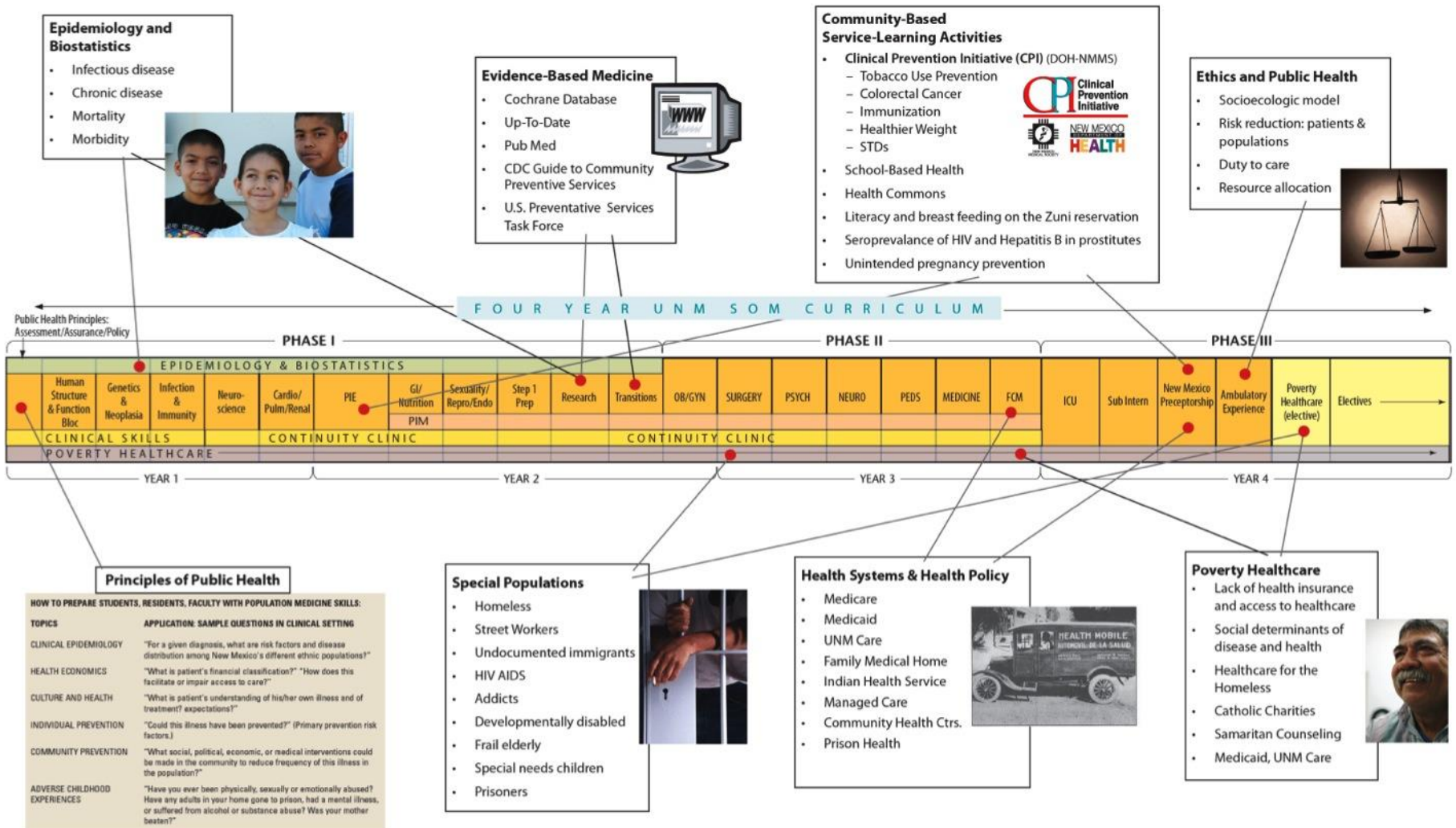
- Likelihood of practicing prim care in NM
 - come from NM
 - come from rural area
 - underrepresented minority
 - med school in NM
 - residency in FM in NM

Pacheco M, The Impact on Rural New Mexico of a Family Medicine Residency. Acad Med v 80, No 8/Aug 2005:730-744.



How We're Changing Education: Curriculum Relevant to Community Health Public Health Certificate

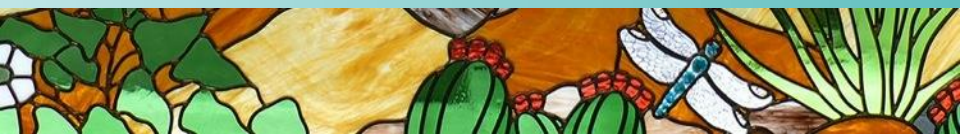
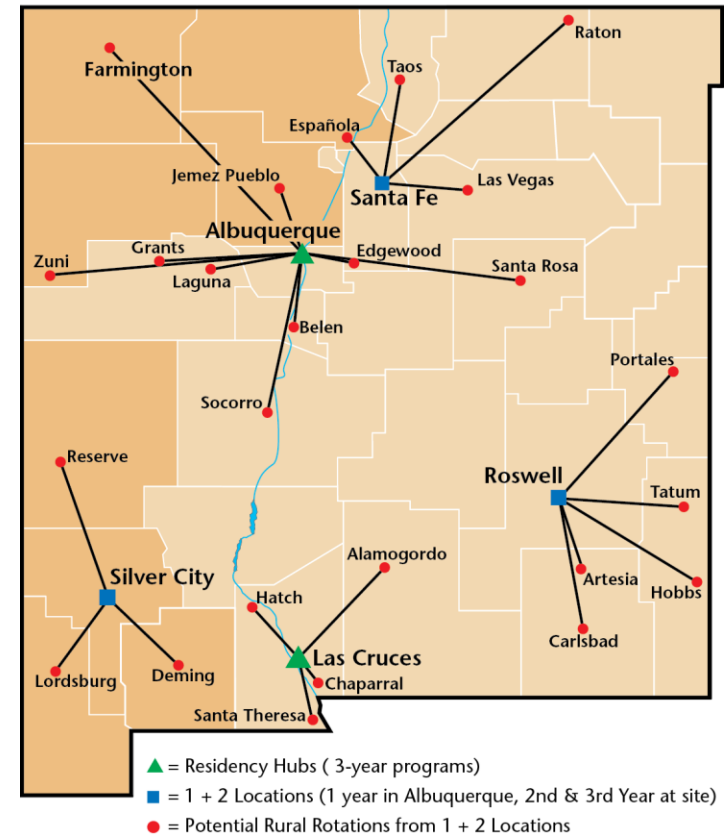
(17 credits) for all UNM medical students matriculating in 2010



FM resident Outcomes, Plans

- 76 Residents, half in ABQ, half in rural NM
- 25% of ABQ grads work in rural NM
- 70% of rural NM grads for in rural NM

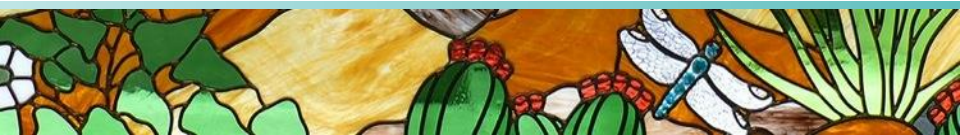
Existing and Potential Training Locations for Family Medicine Residents in New Mexico



Health Professional Shortages in Lea County

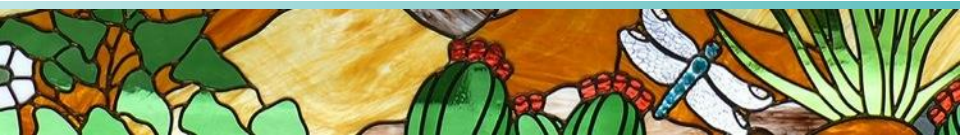
Health Profession	Estimated # Needed	# Licensed, Residing in County	Provider Gap
Physicians	108	60	48
Nurse practitioners	54	17	37
Physician assistants	54	6	48
Physical therapists	22	15	7
Dentists	39	7	32
Registered nurses	466	379	87

Source: New Mexico Center for Health Workforce Analysis, 2012

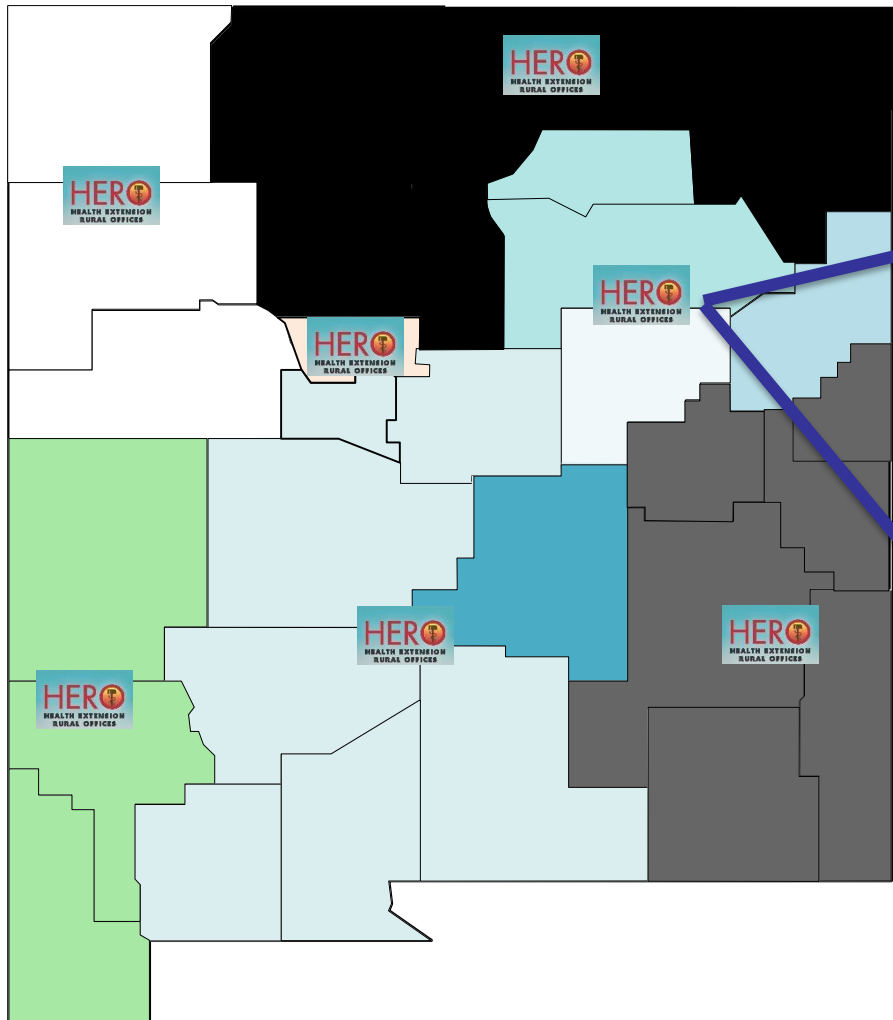


New Health Workforce Members

- Health Extension Agents
- Community Health Workers
 - a) Social determinants their priority
 - b) Community is their base



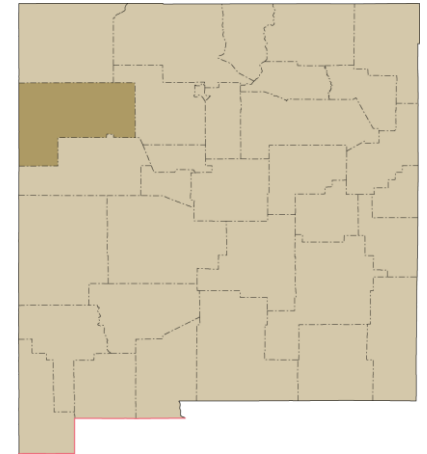
Health Extension Rural Offices (HEROs): Building on an Agricultural Model



HERO McKinley County – Crownpoint

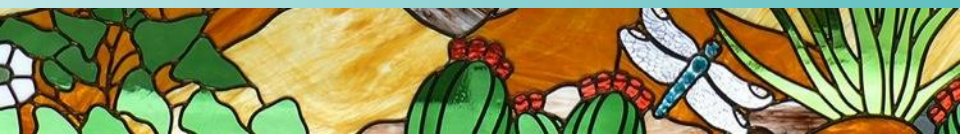
Youth/Pipeline Development into Health Professions

- “Grow our own”
- “Health Summit” – Eastern Navajo Mid-Schoolers
- Future mentoring



Lessons from Other Countries

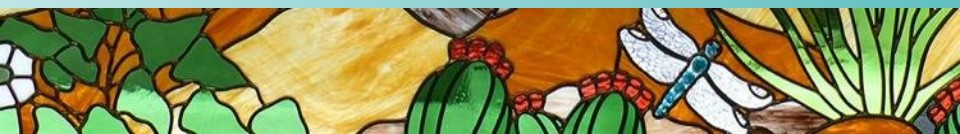
- Community Health Workers:
 - Kenya
 - Brazil





CHWs and Health System

- Health insurers contract with Univ to hire, train CHWs
- CHWs help “manage” high users in comm
Health insurers ROI ~4:1
- Program all over New Mexico, in 10 states



4 in 5 Physicians Surveyed

- Patients social needs as important as medical conditions
- Not confident in their capacity to address social needs
- Unmet social needs leading to worse health for all, not just those with low income

Robt Wood Johnson Foundation



Social Determinants



Name _____ Age _____

Address _____ Date _____

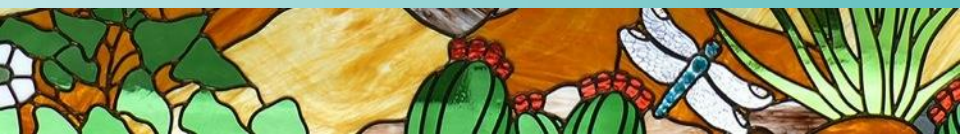
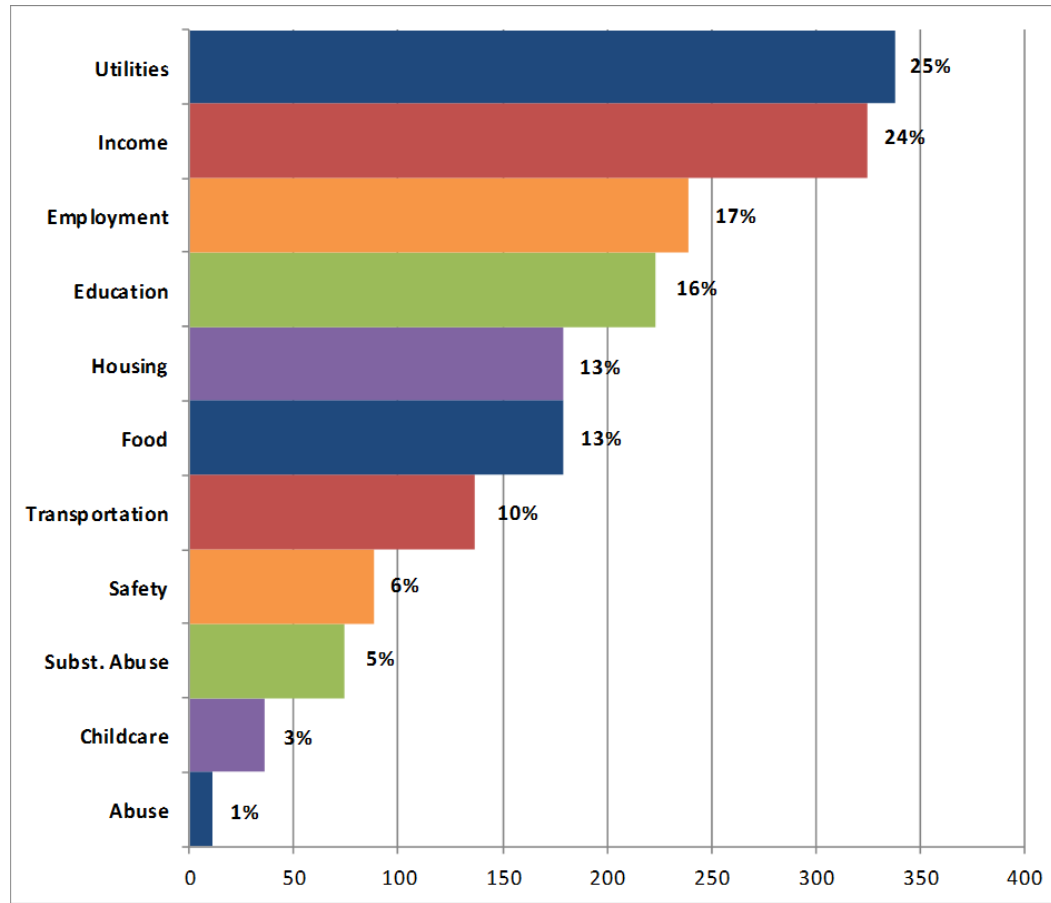
Referral to Community Health Worker for:

- Food Assistance
- Housing Assistance
- Utilities Assistance
- Transportation Assistance
- Daycare Assistance
- Legal Assistance
- Employment Assistance
- Education Assistance
- Substance Abuse Assistance
- Safety Assistance
- Domestic Violence Assistance
- Other

Provider Signature



Well Rx Survey Responses (N = 3,048)





} 5% of population



} 10% of population



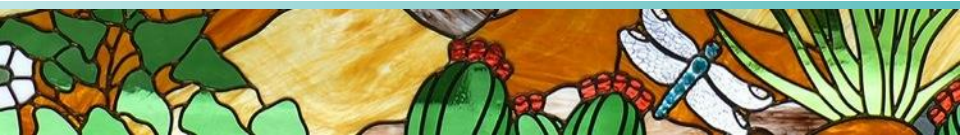
} 85% of population



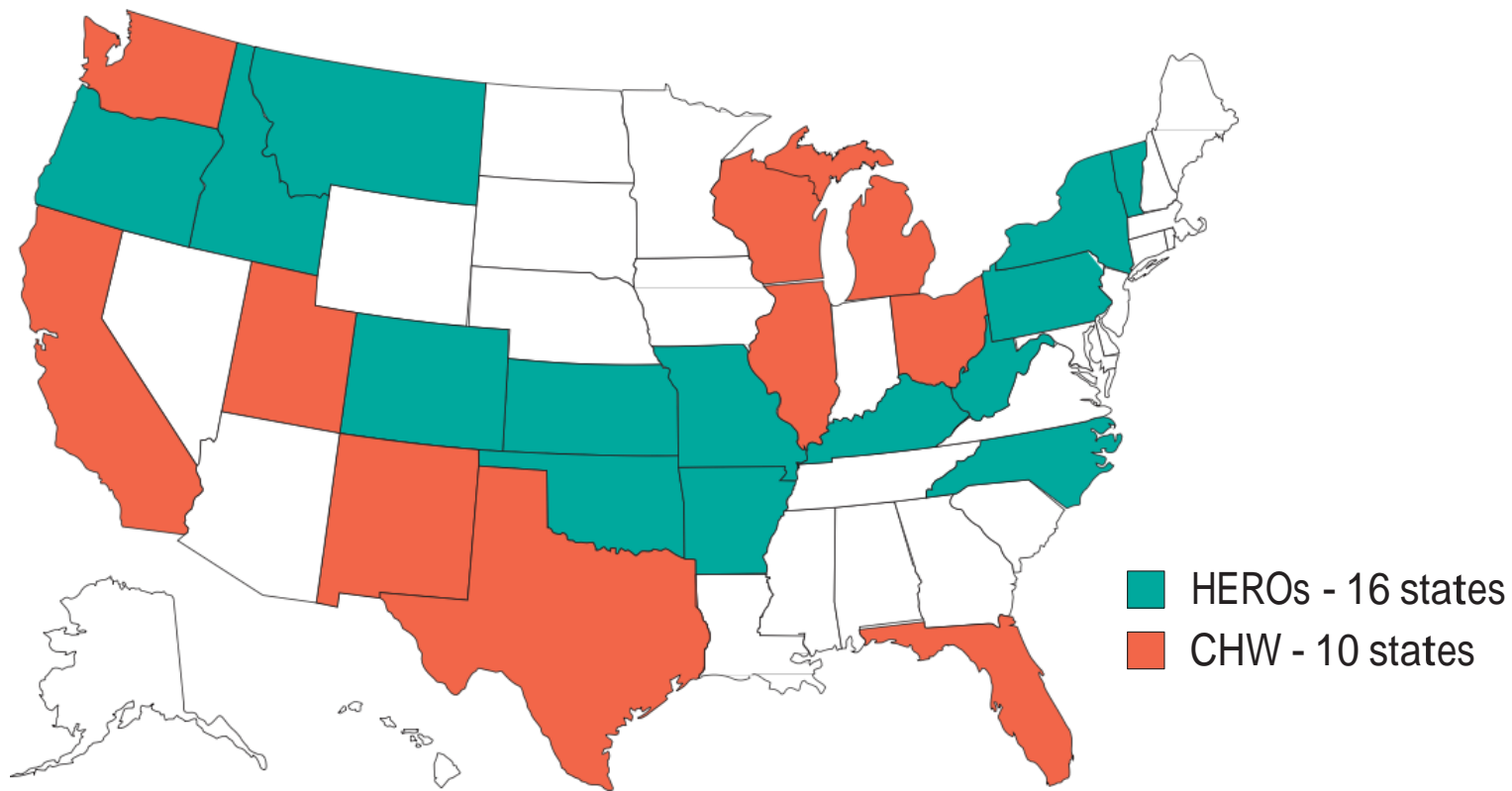
“Health Commons:” A future SDOH service/learning Model

- One Stop Shop: primary care, oral health, behavioral health, case management
- Community-Clinic links via CHWs
- Clinic programs determined by community health priorities
- Clinic links with other sectors

Kaufman et al. The Health Commons and Care of the Uninsured. *Ann Fam Med* 2006 (4):S22-S27.



States Developing Health Extension or Community Health Worker Programs



International Movements: Social Mission in Medical Education

- WHO: Social Determinants of Health
- AMEE: Aspire- Social Accountability
- The Network: Towards Unity for Health
- Canada: Social Accountability
- US: Beyond Flexner- Social Mission

