

# OFFICE OF COMMUNITY HEALTH

Strategic Plan 2010-2015







Community

**Education** 

Research

Clinical Training

"We would fall short of really doing something significant if we forget about the communities that surround us - locally, regionally, nationally, and internationally - because at the end of the day, they are whom we serve."

Philip A. Pizzo, M.D. Dean, Stanford School of Medicine

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## Letter from the Director and Faculty Advisor

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It is with much excitement that we present the Office of Community Health's (OCH) strategic plan for 2010-2015. The plan reflects the organizational priorities of the School of Medicine: medical education, research, and patient care. Within this structure, we have defined short and long-term goals in four areas: Community Partnerships, Faculty Training and Support, Student Programs, and the OCH Infrastructure.

Stanford's commitment to community health is not new. Over the years, many individuals - students, faculty and staff - have built long-term relationships in the community and many have been committed to improving the health of underserved populations. For decades, our colleagues in Family Medicine, Pediatrics, and other academic departments have done community outreach and advocacy and have facilitated community-based training for medical students and residents. The Stanford Prevention Research Center has been a leader in community-based research studies to improve population health. And the student-run Arbor Free Clinic has been operating in Menlo Park for over 20 years, joined in 2005 by the second student-run site, Pacific Free Clinic in East San Jose.

To augment this ongoing work, in fall 2005, Dean Philip Pizzo inaugurated the OCH with a charge to build and sustain community-responsive programs at the School of Medicine. What makes the OCH unique is its mandate to formally integrate the School of Medicine's mission with efforts to meet the diverse health needs of our surrounding communities. We do this by building and sustaining partnerships with local community health agencies, and collaborating with them to assess needs and develop and implement initiatives to address them. These initiatives are woven into the structure of our educational, research, and clinical care programs, allowing us simultaneously to build capacity in the community and to develop physician skills for addressing important public health challenges.

This document is intended to solidify our purpose and direction, to foster further dialogue about how we can best support the School of Medicine mission, and most importantly, serve as an invitation to join us in fulfilling our mission.

Rhonda M Clinton Drown marily winkleby

Warm Regards,

Rhonda McClinton-Brown, MPH

**Executive Director** 

Office of Community Health

Marilyn Winkleby, MPH, PhD

**Professor of Medicine** 

Faculty Advisor

Office of Community Health

## **Mission and Vision**

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#### **MISSION**

To develop community-responsive education, research, and clinical training programs aimed at building leaders in community health and improving the health of underserved populations.

#### **VISION**

Stanford School of Medicine and its students, faculty, and alumni will play an active and sustained role in improving the health of underserved populations.



"My work in community health through Stanford has shown me the importance of an integrated biopsychosocial approach to patient care. Patients are more than the sum of their diagnoses; we have to understand them in the context of their communities and cultural traditions in order to provide them with the utmost care."

#### Ruo Peng Zhu, Third-Year Medical Student

Scholarly Concentration: Molecular Basis of Medicine
Co-Coordinator, Fall Forum on Community Health and Public Service (2008)
Valley Foundation Fellow (2008)

## Physician Leaders in Population Health

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#### IMPORTANCE OF PHYSICIAN LEADERS ADDRESSING PUBLIC HEALTH

The need for physicians with expertise in population health has become critical as the population becomes more diverse, chronic disease rates rise, preventable racial and ethic health disparities become more apparent, and epidemics cross international boundaries with ever-increasing speed.

Medical Education has traditionally focused on the scientific foundations of medicine and developing clinic skills for individual patient care. While the Stanford School of Medicine has a longstanding reputation for training excellent scientists and clinicians, it also embraces an ethic of social responsibility, recognition that some of our most pressing health challenges must be met outside of the clinical setting. In acknowledgement that physicians wield unique influence in society, the School seeks to develop leaders prepared to advocate for improved population health locally and around the globe.

The OCH has been at the forefront of developing curricula and training to incorporate population health into the core medical curriculum, and has expanded students' opportunities to engage with community-based agencies committed to addressing these complex issues.

#### **Building Competency in Population Health**

The following are select educational competencies developed by the Association of American Medical Colleges' Population Health Working Group in 2009.

All MD graduates should be able to:

- Assess the health status of populations
- Describe the impact of socioeconomic and other population-level factors on health outcomes
- Identify approaches to preventing and addressing racial and ethnic health disparities
- Describe principles for ethical and effective community engagement
- Participate in population health improvement strategies:
  - Systems and policy advocacy
  - Program and policy development
  - Design and implementation of community-based interventions



"The medical profession has a long-standing ethos of strong advocacy for the health needs of individual patients, but a less strong tradition of advocacy for the health of the public. In addition to traditional public health and prevention activities, this other role includes working effectively with communities to identify and address their broad health needs. Physicians can and should play a leadership role in applying their knowledge and skill in these public activities."

## Clarence Braddock III, MD, MPH

Associate Dean of Medical Education

Faculty Director, Population Health Curriculum

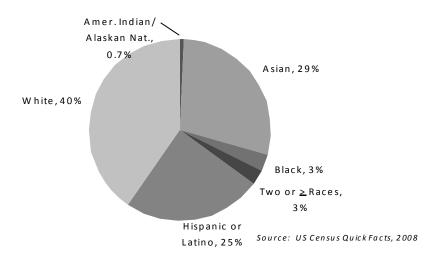
## The Local Community

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#### THE LOCAL COMMUNITY

The communities surrounding Stanford University are marked by extreme individual wealth and one of the highest cost-of-living indices in the country. The high-tech, high-wealth reputation of Silicon Valley, however, can easily cloud the economic and ethnic diversity across the region – and the significant health disparities that are the result.

#### RACE/ETHNICITY IN SAN MATEO & SANTA CLARA COUNTIES





- 16% of San Mateo County adults live below 2005 Federal Poverty Level.
- 23% of Santa Clara County families live at 200% of the Federal Poverty Level or below.
- 85% of children in East Palo Alto receive free/reduced lunches.

Source: 2005 American Community Survey, U.S. Census

#### **INSURANCE STATUS**

- Approximately 52,000-60,000 adults ages 19-64 are uninsured in San Mateo County; 85% of whom live in poverty.
- Approximately 108,000 adults in Santa Clara County are uninsured and are low to moderate income.

SOURCE: BLUE RIBBON TASK FORCE, SANTA CLARA VALLEY MEDICAL CENTER

#### **IMMIGRANT COMMUNITY**

- 32% of San Mateo County and 34% of Santa Clara County residents are foreign-born compared to 26% in California.
- Nearly 40% of people in the two counties speak a language other than English at home.
- San Mateo County has the largest Tongan population outside of Tonga.

  Source: US Census Quick Facts, 2008



"The OCH offers programs that help us achieve goals in our work that we may not have the resources for. It is a privilege to use our expertise in teaching our future doctors."

Community Partner in 2008 Community Partner Survey

## **Strategic Goals**

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#### ORGANIZATION OF OUR WORK

In order to integrate the OCH within the mission and strategic goals of Stanford School of Medicine, we have organized our five-year priorities in align with the School of Medicine's organizational structure:

**AREA 1: MEDICAL EDUCATION** 

**AREA 2: RESEARCH SUPPORT** 

**AREA 3: CLINICAL TRAINING** 

#### **GOALS FOR 2010-2015**

Four overarching goals guide the work of the OCH:

#### **COMMUNITY PARTNERSHIPS**

Build and sustain community partnerships, both to inform collaborative health-improvement strategies and provide a foundation for experiential learning and community-engaged scholarship.

#### **FACULTY TRAINING AND SUPPORT**

Develop and implement quality training programs for faculty, post-doctoral fellows, residents, and staff on community-engagement approaches to research and medical education.

#### **STUDENT PROGRAMS**

Develop, expand and evaluate experiential educational programs for undergraduate, graduate, and medical students in community and population health.

#### **OCH INFRASTRUCTURE**

Build organizational sustainability and strengthen internal structures to achieve five-year vision.

## Area 1: Medical Education

#### VISION AND PROGRAMS

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#### SCHOOL OF MEDICINE MISSION: MEDICAL EDUCATION

To educate students to become outstanding clinicians with the passion and skills to improve world health through research, innovation, and leadership.

#### **OCH FIVE-YEAR VISION**

- Each MD graduate of the School of Medicine will demonstrate knowledge and skill competencies in population health.
- Select students will graduate with expertise and leadership skills in community/population health.
- Community health and community partnership initiatives across the University will benefit from increased opportunities for collaboration and shared learning.

#### **CURRENT PROGRAMS AND ACTIVITIES**

The OCH currently provides infrastructure and support for a number of programs designed to give students knowledge, skills, and first-hand experience in addressing community health challenges.

The required **Population Health Curriculum** introduces first-year medical students to population health principles and matches them with community partnership projects designed to address the social and economic determinants of health.

The Valley Foundation Fellowships and nationally-linked Schweitzer Fellowships fund medical students to work on intensive precepted community partnership initiatives.

The **Dual Degree MD-MPH Program with UC Berkeley** supports medical students in integrating medical and public health training across five years.

**Expert consultation, classroom presentations and training workshops** offered on a variety of topics, such as the health care delivery systems, the health care safety net, principles of engagement, the needs of underserved populations, and policy advocacy.



"I learned about the advocacy role that physicians can play in terms of championing certain services that shouldn't be cut and bringing those issues to the attention of people who are making the budget decisions. It's important to see how I can make a difference as a doctor inside and outside of the clinic."

First year medical student, reflecting on the population health project

# **Area 1: Medical Education**

GOALS AND OBJECTIV				
	One-Year Objectives	Five-Year Objectives		
Goal: Community Partnership	<ul> <li>Conduct site visits to all community agencies where students are working.</li> <li>Develop and implement a preceptor training workshop for community partners working with medical student Population Health Projects.</li> <li>Identify and participate in local community health coalitions and task forces.</li> <li>Restructure and broaden participation in annual partner summit to assess community needs.</li> </ul>	<ul> <li>Ensure that medical student project opportunities span all Healthy People 2020 Topic Areas.</li> <li>Facilitate 2-3 annual skills workshops for community partners, based on their self-identified needs.</li> <li>Fund all community-based preceptors.</li> </ul>		
Goal: Faculty Training and Support	<ul> <li>Develop and standardize terms for the "OCH Affiliated Faculty" appointments.</li> <li>Recruit a corps of the "OCH Affiliated Faculty" to teach and mentor students in community health.</li> <li>Create a database of faculty campuswide who are engaged in community health.</li> <li>Develop and implement annual faculty development workshop for instructors and advisors on community health.</li> </ul>	Incorporate community health research and teaching into recruitment, retention, and promotion of School of Medicine faculty.		
Goal: Student Programs	<ul> <li>Develop and institutionalize graduation competencies in population health for all MD students.</li> <li>Develop and implement required population health curriculum for second-year medical students.</li> <li>Provide advice and consultation to medical students seeking dual degree in public health in conjunction with Stanford medical training.</li> </ul>	<ul> <li>Develop and adopt competencies for advanced knowledge in population health in collaboration with Scholarly Concentration in Community Health.</li> <li>Secure funding for 1-3 MPH Fellowships for MD students annually.</li> </ul>		

# Area 2: Research Support

#### **VISION AND PROGRAMS**

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"I came to Stanford with little if any research experience. While Stanford is known for being on the cutting edge of basic science/bench research, I was also impressed by the commitment to community health I witnessed amongst the faculty members and my colleagues. The required courses for the Scholarly Concentration in Community Health served as my first real *introduction to community* based research and was my impetus for pursuing an MPH."

#### Diana Badillo, MD, MPH, Class of 2009

Family Practice, Residency, Columbia University

Scholarly Concentration in Community Health

MD-MPH Dual Degree

Oral Presenter, Fall Forum on Community Health and Public Service: "Homeless Veterans and VA Healthcare"

Arbor Free Clinic Steering Committee

#### SCHOOL OF MEDICINE MISSION: RESEARCH

To train leaders in advancing the frontiers of knowledge in the biomedical sciences.

#### **OCH FIVE-YEAR VISION**

- The Stanford School of Medicine will have a well-established infrastructure to support community-based research.
- School of Medicine faculty will receive support and recognition for undertaking substantive community-engaged scholarship.
- The number of faculty and students pursuing community-engaged scholarship will significantly increase.
- The dissemination of Stanford research findings and best practices into the community will be standard practice.

#### **CURRENT PROGRAMS AND ACTIVITIES**

The OCH has developed a collaboration with Spectrum, Stanford Center for Clinical and Translational Education and Research. Stanford is one of the 46 institutions across the USA that has received a Clinical and Translational Science Award (CTSA) funded by the National Institutes of Health. These awards are designed to assist medical centers to develop a transformative home for clinical and translational science through innovation, education and optimization of resources. The OCH oversees Stanford's CTSA Community Engagement Program, which focuses on two primary aims:

- Develop and expand existing relationships with community-based agencies to foster development of a mutually-beneficial research agenda.
- Strengthen Stanford's capacity to support community-based research.

# **Area 2: Research Support**

		GOALS AND OBJECTIVES
	One-Year Objectives	Five-Year Objectives
Goal: Community Partnership	<ul> <li>Develop mechanisms to identify research interests of community partners.</li> <li>Assess the potential for collaborative research projects.</li> </ul>	<ul> <li>Offer annual trainings and workshops on community-based participatory research.</li> <li>Provide seed funding and consultation to partner agencies to support community-based research.</li> <li>Connect and facilitate collaboration among community partners and Stanford-based researchers.</li> <li>Disseminate research findings by faculty to community-based stakeholders.</li> </ul>
Goal: Faculty Training and Support	<ul> <li>Develop and implement faculty development workshops for instructors and advisors on community-engaged research.</li> <li>Develop and identify resources for consultation and technical assistance for faculty interested in community engagement.</li> <li>Identify and cultivate resources for consultation and technical assistance on community-engaged research.</li> </ul>	<ul> <li>Offer trainings and support for translation and dissemination of research to local communities.</li> <li>Offer faculty trainings and consultation on community-based research design and methods.</li> <li>Promote and support the translation and dissemination of research to local communities.</li> </ul>
Goal: Student Programs	<ul> <li>Provide mentoring and advising in community-engaged research for Scholarly Concentration in Community Health students.</li> <li>Develop standards for dissemination of community-engaged research to local communities.</li> </ul>	Identify funds for Community Health scholarships/grants to support dissemination of research to local communities.



"I am so appreciative for the opportunity to work with such a committed group of future physicians. The medical students in the Scholarly Concentration in Community Health understand the importance of the environment, the role of poverty and education, and how one's community can influence health. These are truly the physicians of the 21st century - they are prepared to meet and address health challenges at every level."

**Lisa Chamberlain, MD, MPH,** Assistant Professor of Pediatrics, Faculty Director, Scholarly Foundation in Community Health, Director Pediatric Advocacy Program

Physician Advocacy Merit Award from Institute on Medicine as a Profession (2008)

The Golden Apple Award for excellence in teaching, Stanford pediatric residents (2004-05)

## **Area 3: Clinical Training**

#### **VISION AND PROGRAMS**

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#### SCHOOL OF MEDICINE MISSION: CLINICAL TRAINING

To promote the health of our patient community and advance the frontiers of clinical medicine.

#### **OCH VISION**

- Community-based clinical training will be widely available across medical specialties.
- The student-run Cardinal Free Clinics will be institutionalized and financially sustained as a training program and a community benefit.
- All community-based clinical training will be accompanied by education and training in population health.

#### **CURRENT PROGRAMS AND ACTIVITIES**

The OCH currently provides undergraduate and medical students with an enriched opportunity to work in community-based clinical settings.

The **Patient Advocacy Program** trains undergraduate students to provide direct service hours and conduct capacity-building projects in local community health centers and free clinics.

Medical and undergraduate students come together for cultural immersion, language skills training, and clinical and community service through the **Community Health in Oaxaca Program**.

For more than 20 years, the **Cardinal Free Clinics** (CFC) have been providing quality free medical care to low-income, uninsured populations in our local community. The CFC comprises two student-run free clinic sites in San Mateo and Santa Clara Counties: Arbor Free Clinic in Menlo Park and Pacific Free Clinic in San Jose. The clinics offer a hands-on learning environment for Stanford students while filling a critical gap in the local healthcare safety net.

Beginning in 2008, the OCH has offered consultation and support to the free clinics in their effort to streamline operations and build long-term sustainability. In 2009 the OCH became responsible for the administrative and educational oversight of the CFC.



"Population health programs challenge students to exercise leadership and creative problem-solving skills. Their experiences will prepare them to confront the growing complexities of a struggling healthcare system."

#### lan Tong, MD

Clinical Instructor in Internal Medicine

Medical Director, Veterans Outreach (Palo Alto Veterans Affairs Hospital)

Medical Co- Director, Arbor Free Clinic

# **Area 3: Clinical Training**

GOALS AND OBJECTIVES					
	One-Year Objectives	Five-Year Objectives			
Goal: Community Partnership	<ul> <li>Formalize referral processes between Cardinal Free Clinics and other community healthcare providers.</li> <li>Develop and implement workshop and online training for Stanford clinicians to facilitate ethical and effective community engagement.</li> </ul>	<ul> <li>Ensure that the Cardinal Free Clinics are an effective access point in the local health care safety net.</li> <li>Develop and expand community-based preceptorships and integrate with required clerkship rotations.</li> </ul>			
Goal: Faculty Training and Support	<ul> <li>Recruit and strengthen volunteer MD network for the Cardinal Free Clinics.</li> <li>Develop training materials and resource manuals for volunteer MD's in the Cardinal Free Clinics to complement student educational programs.</li> </ul>	Integrate population health themes and case studies into required clerkships.			
Goal: Student Programs	<ul> <li>Develop and implement education programs for Cardinal Free Clinics managers and student volunteers.</li> <li>Develop clinical training curriculum that ensures quality of care at Cardinal Free Clinics.</li> <li>Provide community health training to build culturally competent clinical care, health education and community referrals and research skills for work with underserved populations.</li> </ul>	<ul> <li>Integrate population health topics into School of Medicine clerkship training.</li> <li>Develop and implement plan to integrate medical clinical skills training into the Cardinal Free Clinics.</li> </ul>			

"The training I received through the Patient Advocacy Program remains central to what I do as a medical student and hope to do as a future surgeon. Whether I am seeing patients at Arbor Free Clinic or at the Outpatient Surgery Center, I always take time to think about where my patients are coming from and what I can do to address their needs, medically-related or not."

#### Tiffany Castillo, Fourth-year medical student

Scholarly Concentration: Clinical Research
Stanford Medical Student Association President (2008-09)
Arbor Free Clinic Manager (2007-08)
Community Health in Oaxaca (2007)
OCH staff member (2005-06)
Patient Advocacy Program (2004-05)



## **OCH Infrastructure**

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The OCH is dedicated to building and sustaining programs and activities in line with our newly defined mission. Our goal is to build organizational sustainability and strengthen internal structures to ensure that we reach the OCH five-year vision.

#### **ADMINISTRATION AND ORGANIZATION**

#### **ONE-YEAR OBJECTIVES**

- Develop administrative and financial systems to ensure efficient and effective functioning of the OCH.
- Implement a communication plan for the OCH vision, priorities, and successes.
- Develop a database to track the OCH partnerships and community contacts.
- Restructure and expand the OCH Advisory Board to support the new OCH vision and strategic priorities.

#### **FIVE-YEAR OBJECTIVES**

- Systematically and regularly measure the impact of the OCH programs and services.
- Produce an OCH annual report as a communication tool for partners and stakeholders.
- Expand the OCH database to facilitate information and resource sharing as well as collaboration within the School of Medicine, across the University, and within the broader community.
- Expand the OCH Advisory Board to become more active and influential in advancing the mission and goals of the OCH.



#### **ONE-YEAR OBJECTIVES**

 Secure sufficient resources to maintain existing programs and activities of the OCH.

#### **FIVE-YEAR OBJECTIVES**

Secure diverse resources in the form of institutional support, endowments, revenue generation, and grants to ensure the sustainability of the OCH programs and services.



"Opportunities to pursue my interests in community and global health at Stanford were the perfect complement to our training in clinical medicine."

### Matthew Craven, Class of 2008

Resident Physician, Dept. of Medicine, Brigham and Women's Hospital Howard Hiatt Fellow in Global Health Equity, Partners in Health

## **Appreciation**

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The OCH has benefitted tremendously from the counsel and collaboration of many partners, both within the University and from the local community. Particular thanks goes to Dr. Gabriel Garcia, OCH Advisory Board Chair, Dr. Paul Wise, former OCH Advisory Board Chair, and Dr. Lisa Chamberlain, the Director of the Scholarly Concentration in Community Health, for their leadership and wisdom in guiding this effort.

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#### STANFORD UNIVERSITY COLLABORATORS

Center for Education in Family and Community Medicine

Stanford Center for the Study of Poverty and Inequality

Haas Center for Public Service Stanford Center of Excellence
Lucile Packard Children's Hospital Stanford Center on Ethics
Pediatric Advocacy Program Stanford Hospital and Clinics

Stanford Center for Clinical and Translational Education and

Stanford Prevention Research Center

Research (Spectrum)

#### **COMMUNITY PARTNERS**

American Cancer Society – Silicon Valley Chapter Mayfair Improvement Initiative
Bay Area Nutrition and Physical Activity Collaborative (BANPAC) MayView Community Health Centers

California March of Dimes Mexican American Community Services Agency

Center Force The Opportunity Center of the Midpeninsula

Collective Roots Ravenswood City School District
Community Health Partnership Ravenswood Family Health Center

Costano Middle School Sports to Prevent Obesity Randomized Trial

Head Start of San Mateo County Samaritan House Free Clinic

Health Plan of San Mateo San Francisco Department of Public Health

The Health Trust

Healthy Silicon Valley

San Jose Unified School District

San Mateo County Health System

Legal Aid Society of San Mateo County's Peninsula Family

Santa Clara County Family Health Plan

Advocacy Program Santa Clara County Public Health Department

U.S. Department of Health and Human Services



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