COMMUNITY MEDICINE

OVERVIEW OF PROGRAM

Community Medicine in Years One and Two
In the first year, students were exposed to the principles of community health in the content areas of the Concepts of Health and Illness, Population Health Methods, Study Designs, Biostatistics, Evidence-Based Medicine and Critical Appraisal, Determinants of Health, Health Care Organization and health care policy. In the human development block, sessions included the principles of community development influencing the well being of individuals and families. In the second year, topics in community medicine were more specific to body systems and disease.

Introduction to Clerkship in Community Health Sciences
Introduction to Clerkship focused on the organizational aspects of medicine. Lecture topics included the: structure and function of Regional Health Authorities and hospital care; health technology assessment; public health act; community programs and services; environmental and occupational health histories; travel medicine; fatality inquiries act; regulation of the profession; and patient safety.

Community Medicine in the Clerkship
Community Medicine in the clerkship years gives the student the opportunity to apply the principles of community health science to the practice of medicine. These opportunities occur in two rotations; the Family Medicine/Community Medicine Rotation and the Multiple Specialty Rotation.

The third edition of the Objectives for the Qualifying Examination of the Medical Council of Canada demonstrates the importance and relevance of a community health curriculum in the present training of medical doctors. The objectives specific to the teaching of Population Health can be found at http://www.mcc.ca/Objectives_Online/objectives.pl?lang=english&loc=phelo and the Considerations of the Legal, Ethical and Organizational Aspects of Medicine can be found at http://www.mcc.ca/Objectives_Online/objectives.pl?lang=english&loc=cleo

THE COMMUNITY MEDICINE CLERKSHIP ROTATION
(part of Family Medicine/Community Medicine)

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ADMINISTRATION AND COMMUNICATION
Prior to the rotation, each group of students will receive the rotation schedule as well as information and materials required for Community Medicine. Some content including resources for the rotation will be available on the ANGEL Learning system.
OVERALL GOAL
The broad aims of the rotation in Community Medicine are to enable the student to observe and to understand health problems, the health system, and a population health approach in the context of the community setting. *The goals of a population health approach are to maintain and improve the health status of an entire population and to reduce inequities in health status between population groups.* The opportunity for the student to learn more about public health and community medicine during the rotation occurs in three main ways:
1. Small group teaching before and after the field placement;
2. In the clinical practice of family medicine in a specific community setting;
3. Observing and actively participating in the practice of community medicine through the regional and local health unit.

OBJECTIVES
By the end of the community medicine portion of the rotation the student will:
1. Participate in 2 – 3 days of experiential learning in a community-based health setting under the co-ordination of community health professionals.
2. Describe the health status of the community.
3. Understand and explain the scope of health problems and the organization of the health programs and services in the context of the community setting.

SMALL GROUP TEACHING
In the first three days of the rotation, community health teaching sessions will include content on Public Health Organization, Community Health Assessment, Environmental Health, Public Health Inspection, Emergency Preparedness, First Nations and Inuit Health, and WCB Healthcare Services. Teaching objectives, resources, and some self directed learning will be available on ANGEL.

Attendance and professional behavior at all the educational and experiential sessions is required and will be monitored throughout the rotation.

FIVE-WEEK PLACEMENT IN THE COMMUNITY
Each student is expected to spend **at least two** (and up to three) days in a community health setting other than the family practice clinic. The student should be freed from the family practice clinic to allow for this.
- A minimum of 1 half day should be spent with the Medical Officer of Health in the region. Each student will be given guidelines as well as the contact information of the Medical Officer of Health and the Public Health Program Manager to contact in the community.
- Students are required to keep a record (student log) of their community health experience.

Some examples of opportunities for community medicine experiences include:
1. Medical Officer of Health: Specific meetings or issues which involve the MOH, communicable disease control, outbreak management, pandemic planning, health protection, health promotion and disease and injury prevention programs
2. Public Health Nurse: Prenatal clinics, post partum visits, case and contact management for communicable diseases, immunizations, school health, travel health, prison health
3. Public Health Inspectors/Environmental Health Officers: On-site inspections of restaurants, housing or other environmental sites
4. Homecare and continuing care: Home care assessment, paneling for personal care homes, community therapy services with Occupational Therapy, Physiotherapy, Social Work and/or other Health Professions
5. Community Mental Health: Assessments, home visits
6. Geriatric Program Assessment team: Inter-professional roles
7. Chronic disease prevention and control programs: Diabetes prevention & management
8. Child & family service workers: Abuse committee investigations
9. Drinking water officers: Issues in Department of Water Stewardship
10. Other community members with a role in the health of the community: Politicians, special interest groups, non-government organizations, police, self-help groups, etc.
Last Two Days of the Rotation - Back at the Medical School

Students will participate in a debriefing session for Community Medicine. The debriefing of the community medicine rotation includes the submission of a log sheet, a personal reflection report, and an informal presentation by each student.

**Student log sheet:** This is a logged report that includes the name and position of the health professional you were with, the experience/program, the approximate time spent, and the overall learning value.

**Personal reflection report:** This report is to be type-written and 1-2 pages in length, according to the following outline:

1. Observations and **brief** descriptions of community health status assessment including examples of each of the following:
   i) Population demographics
   ii) Natural, physical and social environment
   iii) Health practices of individuals, families and community
   iv) Health care organization and services
   v) Burden of illness
2. Report on the community health experience and activities
3. A brief case example to demonstrate the relationship between family practice and community health
4. State the one most important change you would make (if you could) in the community to improve the health of the population and justify the change.
5. Critical feedback and evaluation of the Community Medicine part of the rotation.

**Oral Presentation:**
Each student will be expected to make a **brief oral presentation (5 minutes or less)** on their personal reflection of the community. The focus of your oral presentation should be on what you saw as the main health priorities in the region and what you would recommend to improve the health of the population.

**EVALUATION**
To pass the Community Medicine part of the Family Medicine/Community Medicine rotation the student must:

1. Attend and participate satisfactorily in the small group CHS teaching sessions, including the orientation and debriefing sessions;
2. Attend and participate satisfactorily in the local health unit or equivalent community health setting for at least two days;
3. Submit the personal reflection report, log form and complete a brief and informal oral presentation. Each portion of the assigned tasks must be completed satisfactorily.