



**U.S. Department of Health and Human Services
Health Resources and Services Administration**

REPORT TO CONGRESS

**PREVENTIVE MEDICINE AND PUBLIC HEALTH
TRAINING GRANT PROGRAM
Fiscal Year 2023**

Executive Summary

This is the fiscal year (FY) 2023 report to Congress on the Preventive Medicine and Public Health Training Grant Program administered by the Health Resources and Services Administration (HRSA). This report to Congress is required by section 768(d) of the Public Health Service Act, which states:

The Secretary shall submit to the Congress an annual report on the program carried out under this section.

This report provides a description of activities and funding levels for the Preventive Medicine and Public Health Training Grant Program, which is carried out through HRSA's Preventive Medicine Residency (PMR) Program. The goal of the program is to increase the number of preventive medicine physicians trained in preventive medicine specialties who can lead public health activities, including integrating population health with primary care, managing response to disasters, and investigating outbreaks. In FY 2023, the PMR Program awarded nearly \$7 million in funding to 19 PMR Program grantees, for a period of performance of May 1, 2023, to April 30, 2027. HRSA awarded 12 no-cost extensions to grantees from the prior (FY 2018) competition cohort. The reporting period on grantees' project activities for this report is FY 2023 (October 1, 2022, to September 30, 2023).

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Acronym List

ABMS	American Board of Medical Specialties
ACGME	Accreditation Council for Graduate Medical Education
ACPM	American College of Preventive Medicine
AMF	Addiction Medicine Fellowship
AY	academic year
CDC	Centers for Disease Control and Prevention
CHW	community health worker
ECHO	Extension for Community Healthcare Outcomes
FQHC	Federally Qualified Health Center
FY	fiscal year
GME	graduate medical education
HRSA	Health Resources and Services Administration
IM/PM	internal medicine/preventive medicine
MPH	Master of Public Health
OEM	occupational and environmental medicine
OD	opioid use disorder
MOUD	medications for opioid use disorder
PGY	postgraduate year (also known as residency) ¹
PH/GPM	public health and general preventive medicine
PHS Act	Public Health Service Act
PMR	Preventive Medicine Residency
QI	quality improvement
SDOH	social determinants of health
SUD	substance use disorder
VA	Department of Veterans Affairs

¹ PGY-1 is the first year of postgraduate training after completing the formal 4 years of medical school. Similarly, PGY-2 and PGY-3 are the acronyms for postgraduate years 2 and 3. Residents typically begin the 2-year Public Health and General Preventive Medicine training in PGY-2, after at least 1 year of direct clinical training.

I. Legislative Language

This is the fiscal year (FY) 2023 report to Congress on the Preventive Medicine Residency (PMR) Program administered by the Health Resources and Services Administration (HRSA). This program is authorized by section 768 of the Public Health Service (PHS) Act (42 U.S.C. § 295c).

The PHS Act requires this report in section 768(d) (42 U.S.C. § 295c(d)):

The Secretary shall submit to the Congress an annual report on the program carried out under this section.

II. Introduction

HRSA is committed to reducing health disparities by increasing access to quality services and promoting a skilled health professions workforce. Innovative residency programs that increase the number and skills of physicians graduating from preventive medicine residencies increase access to care. Through the PMR Program, HRSA provides training in graduate medical education (GME) through grants to entities to train residents in preventive medicine specialties. Through these innovative residency programs, participants are prepared to advance public health research, address emerging public health issues, and assume leadership roles within the public health system.

The goals of the PMR Program, which has a 4-year period of performance, are to increase the supply of preventive medicine physicians and enhance the quality of preventive medicine residencies. Residents complete one longitudinal rotation in a Federally Qualified Health Center (FQHC) in rural and/or medically underserved communities. The PMR Program supports this goal through awards to accredited schools of public health, medicine, or osteopathic medicine; accredited public or private nonprofit hospitals; state, local, or tribal health departments; and consortiums of two or more of these entities that plan and develop new residency training programs or expand current programs in the specialty of preventive medicine. In FY 2023, PMR Program grantees began integrating population health into primary care by having at least one of their population health rotations in a FQHC.

This report describes the funding levels and highlights of the PMR Program.

Preventive Medicine Specialties

Preventive medicine is one of the 40 specialties recognized by the American Board of Medical Specialties (ABMS).² Preventive medicine physicians are educated in both clinical medicine and public health. Preventive medicine training includes biostatistics, direct patient care, environmental health sciences, epidemiology, health services administration, practicing prevention in clinical medicine, and social and behavioral sciences. The fundamental

² ABMS. About ABMS. Retrieved April 25, 2024, from <https://www.abms.org/member-boards/>.

competencies of preventive medicine align with the current version of the *Ten Essential Public Health Services* framework.³ The ABMS and Accreditation Council for Graduate Medical Education (ACGME) recognize three specialty areas under the “preventive medicine” umbrella: aerospace medicine, occupational and environmental medicine (OEM), and public health and general preventive medicine (PH/GPM).⁴

Effective July 1, 2020, the ACGME became the sole accrediting entity for both allopathic and osteopathic GME.⁵ This change streamlined the accreditation process and enabled consistency in outcomes between allopathic and osteopathic medicine.

Preventive medicine training requirements include at least 1 year of clinical residency training in an ACGME-accredited program followed by 2 years of competency-based education, academic- and practicum-based training, and completion of a Master of Public Health (MPH) or other comparable postgraduate degree.⁶ During their preventive medicine specialty training, residents train in community-based and governmental organizations, including health centers, state and local health departments, managed care organizations, non-governmental organizations, and private industry. Some residencies offer rotations through federal agencies including the Centers for Disease Control and Prevention (CDC), Office of the Assistant Secretary for Health, Agency for Healthcare Research and Quality, and National Institutes of Health.

Residents often combine their preventive medicine residency training with another specialty, such as family medicine, internal medicine, or pediatrics. These residency programs are completed either sequentially or integrated as a combined residency training program.

The Centers for Medicare & Medicaid Services funds most GME based on payment formulae established by statute and regulation.⁷ These formulae are linked to residents’ time spent furnishing direct patient care, the number of residents, and patient volume; reimbursable time must be linked to patient care activities, thus excluding from funding time spent completing the MPH and other public health activities.⁸ In addition, statutorily required caps on the number of residency slots and the linkage of payments with Medicare patient volume have been found to systematically disadvantage non-clinical, population-based specialties such as public health and

³ de Beaumont. (2020). *10 Essential Public Health Services*. Retrieved April 25, 2024, from <https://debeaumont.org/10-essential-services/>.

⁴ ACGME. Retrieved April 25, 2024, from <https://www.acgme.org/specialties/preventive-medicine/overview/>.

⁵ History of the Transition to a Single GME Accreditation System. Benefits of Single GME. Retrieved April 25, 2024, from <https://www.acgme.org/about/transition-to-a-single-gme-accreditation-system-history/>.

⁶ ACGME. (2020). ACGME Program Requirements for Graduate Medical Education in Preventive Medicine. Pgs. 16 and 64. Retrieved April 25, 2024, from https://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/380_PreventiveMedicine_2020.pdf?ver=2020-06-30-144631-400.

⁷ Centers for Medicare & Medicaid Services. (December 5, 2023). Direct Graduate Medical Education. Congressional Research Service. Retrieved April 25, 2024, from <https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/direct-graduate-medical-education-dgme>.

⁸ Ibid.

general preventive medicine.⁹ Therefore, Medicare GME does not support the majority of the training required for preventive medicine. As a result, there is no national, sustained funding mechanism for preventive medicine residency programs, and local funding sources are often lacking, limited, or unreliable.¹⁰ ABMS reported that of the 33,600 newly board-certified physicians in 2022, only 204 physicians were certified in preventive medicine (93 physicians in PH/GPM, 90 in occupational medicine, and 21 in aerospace medicine).¹¹ HRSA, as authorized by section 768 of the PHS Act, is the largest single source of federal support specifically for preventive medicine residency programs.¹²

III. FY 2023 Preventive Medicine Residency Program

The PMR Program supports GME training for preventive medicine residents by defraying the costs of living expenses, tuition, and fees. Grantees also use the award funds to plan, develop, and implement preventive medicine curricula; operate or participate in an accredited residency program in preventive medicine; establish, maintain, or improve academic administrative units in preventive medicine; and establish, maintain, or improve residency programs that improve clinical teaching in preventive medicine. The PMR Program encourages grantees to develop new, community-based rotations and focus on health equity. Grantees may also use grant funds for stipends and travel support for residents who present their academic activities and research findings at national academic meetings. A portion of grant funds provides support for faculty and staff who are directing residency programs, developing curricula, teaching, and coordinating residency program activities, including clinical rotations and public health experiences.

HRSA held a competition for the PMR Program in FY 2023 with a 4-year period of performance and made 19 new awards. The period of performance for the FY 2023 grantees is from May 1, 2023, to April 30, 2027. HRSA awarded 12 no-cost extensions to the cohort of grantees from the FY 2018 competition, which ended April 30, 2024. No-cost extensions provide grantees additional time to use their existing award dollars to complete their projects after the period of performance has ended. The large number of extension requests was due in part to the COVID-19 pandemic, as many preventive medicine residency programs were unable to recruit full complements of residents each year during the pandemic, and some programmatic activities were curtailed as a result. Table 1 provides a list of FY 2023 awards. Table 2 provides a list of the FY 2023 no-cost extension awards.

⁹ Committee on the Governance and Financing of Graduate Medical Education; Board on Health Care Services; Institute of Medicine; Eden J, Berwick D, Wilensky G, editors. Graduate Medical Education That Meets the Nation's Health Needs. Washington (DC): National Academies Press (US); 2014 Sep 30. 3 GME Financing. Retrieved April 25, 2024, from <https://www.ncbi.nlm.nih.gov/books/NBK248024/>.

¹⁰ Jung P, Lushniak B. Financing Preventive Medicine Graduate Medical Education. *J Public Health Manag Pract*. 2021 May/Jun; 27 Suppl 3, HRSA Investment in Public Health: S206-S210. Retrieved April 24, 2024, from https://journals.lww.com/jphmp/fulltext/2021/05001/financing_preventive_medicine_graduate_medical.19.aspx.

¹¹ ABMS. (2023). ABMS Board Certification Report 2022-2023, pg. 17. Retrieved April 25, 2024, from <https://www.abms.org/abms-board-certification-report/>.

¹² See footnote 10.

Table 1: FY 2023 Preventive Medicine Residency Program New Awards

	State	Grantee Name	FY 2023 Award Amount	Discipline
1	California	University Of California, Los Angeles	\$399,999	PH/GPM
2	California	Loma Linda University	\$400,000	PH/GPM
3	California	University of California, San Diego	\$399,993	PH/GPM
4	California	Regents of the University of California, San Francisco, The	\$400,000	OEM
5	California	Regents of the University of California, San Francisco, The	\$344,776	PH/GPM
6	Connecticut	The Griffin Hospital	\$295,177	PH/GPM
7	Georgia	Morehouse School of Medicine, Inc.	\$399,999	PH/GPM
8	Maine	MaineHealth	\$400,000	PH/GPM
9	Maryland	Johns Hopkins University	\$399,997	PH/GPM
10	Massachusetts	Boston Medical Center Corporation	\$399,997	PH/GPM
11	Michigan	Regents of the University of Michigan	\$400,000	PH/GPM
12	Mississippi	University of Mississippi Medical Center	\$399,955	PH/GPM
13	New Mexico	University of New Mexico	\$399,725	PH/GPM
14	New York	University of Rochester	\$160,161	PH/GPM
15	New York	Icahn School of Medicine at Mount Sinai	\$285,251	PH/GPM
16	New York	The Research Foundation for the State University of New York	\$399,999	PH/GPM
17	North Carolina	University of North Carolina, Chapel Hill	\$395,792	PH/GPM
18	Texas	University Of Texas Health Science Center at Tyler	\$316,233	PH/GPM
19	Wisconsin	University of Wisconsin System	\$399,094	PH/GPM
	Total		\$6,996,148	

Table 2: FY 2023 Preventive Medicine Residency Program No-Cost Extensions

	State	Grantee Name	Discipline
1	California	University of California, Los Angeles	PH/GPM
2	Colorado	The Regents of the University of Colorado	PH/GPM
3	Connecticut	The Griffin Hospital, Inc.	PH/GPM
4	Georgia	The Morehouse School of Medicine, Inc.	PH/GPM
5	Maine	Maine Medical Center	PH/GPM
6	Michigan	Regents of the University of Michigan	PH/GPM
7	Mississippi	University of Mississippi Medical Center	PH/GPM
8	New Jersey	Rutgers, The State University of New Jersey	PH/GPM
9	New Mexico	University of New Mexico	PH/GPM
10	New York	The Research Foundation for the State University of New York, Stony Brook	PH/GPM
11	North Carolina	University of North Carolina at Chapel Hill	PH/GPM
12	West Virginia	West Virginia University Research Corporation	PH/GPM and OEM

HRSA awarded no-cost extensions to the FY 2018 cohort of grantees in response to their requests for additional time to complete their funded projects. There was no new funding associated with these extensions.

FY 2023 HRSA Activities to Support Preventive Medicine

HRSA's Bureau of Health Workforce hosted the second national virtual PMR graduation on June 6, 2023, to celebrate residents' completion of their residency. There were 52 graduates from the FY 18 cohort for academic year (AY) 2022-2023, representing 17 PMR Program grantees.

The Bureau of Health Workforce hosted the 2023 Preventive Medicine Annual Stakeholder Meeting on December 6, 2023. The annual stakeholder meeting is one of several ways that HRSA supports and raises the profile of the medical specialty of preventive medicine. To promote the contributions of preventive medicine physicians in building healthy communities, the meeting:

- (1) highlighted the work and accomplishments of preventive medicine residents, faculty, and fellows in strengthening the community of preventive medicine physicians throughout our health system;
- (2) explored and highlighted the need for and contributions of preventive medicine physicians in FQHCs; and
- (3) sought individual input from stakeholders on meeting presentations and generated additional questions for study to improve health outcomes.

IV. Selected Program Highlights

In AY 2022-2023, the PMR Program provided financial support to 118 residents, through grant funding to residency programs. Twenty-nine percent of PMR residents were from populations that are underrepresented in preventive medicine, and 26 percent came from disadvantaged and/or rural backgrounds.

Over the course of the AY, residents engaged in 82,530 patient encounters across all training settings, including in primary care settings (87 percent of residents) and in communities that are medically underserved (72 percent of residents). During the AY, 81 percent of residents received training in health equity, 75 percent received training in telehealth, and 63 percent received training in substance use treatment. A total of 52 residents from the FY 2018 cohort were in their final year and completed their residency program. At the end of the AY, 49 percent of residency graduates who reported follow-up data were already working in primary care settings and 20 percent were working in medically underserved communities. In addition, 54 percent of prior-year residency graduates who reported 1-year follow-up data were working in primary care settings, while 33 percent were working in public health/prevention settings and 13 percent in medically underserved communities.

Highlights from HRSA-funded Preventive Medicine Residency Programs: FY 2023 New Awards

Below are programmatic highlights of the PMR Program grantees who received new awards in FY 2023. Grantees provide HRSA with these highlights upon request at the end of each FY. As part of its efforts to better link HRSA's workforce programs with care delivered by community-based organizations to medically underserved populations, HRSA now requires that PMR Program grantees provide their residents with a minimum 2-month rotation in population health at an FQHC. The highlights from each program listed below emphasize the development of these new rotations and note the Congressional districts of partner FQHCs.

Note that there is significant overlap between the 2018 and 2023 grantees, as several of the programs funded in 2018 that received no-cost extensions also submitted new competitive applications and were awarded new grants in 2023.

CALIFORNIA

Loma Linda University

In collaboration with a local FQHC look-alike, SAC Health (CA-25), the residency program initiated the planning for a systems-based longitudinal rotation program which will begin in October 2023. An initial project in this rotation aims to reduce barriers to cervical cancer screening among patients served at FQHCs, demonstrating a commitment to addressing health disparities.

With only 17 to 21 percent of residents from underrepresented groups in medicine in this residency program, the program actively works to increase this percentage through targeted

recruitment and partnerships with diverse local medical schools. The residency program continues to reach out to area medical schools for intentional recruiting and mentorship of students underrepresented in medicine. A curriculum review in FY 2023 highlighted opportunities for enhancement in areas such as public health crises, health equity, health literacy, and social determinants of health (SDOH). The integration of the FQHC interdisciplinary teaching curriculum and specialized grand rounds teachings in cultural competencies, health equity, and implicit bias prepares residents to effectively address these crucial areas.

The program places a strong emphasis on preparing residents for post-residency employment in areas that integrate public health practice with primary care and serve populations with limited or lack of access to care. Three graduates are currently helping to lead public health departments in California, four graduates remain as residency program faculty, and many others are providing care to priority populations in the region.

The University of California, Los Angeles

The residency program has been active in planning for the rotation at an FQHC partner site, Venice Family Clinic (CA-43). This required rotation will incorporate aspects of health education, quality improvement (QI), and evaluation activities in alignment with the FQHC's priorities.

Understanding and addressing SDOH are at the core of the residency program's mission and vision. The residency program has sustained the expansion of clinical rotations in marginalized communities from the previous AY and has ensured residents continue to work at these sites (e.g., safety net clinics in the county, street medicine in underserved areas in the county, addiction medicine at a rural site). All residents address SDOH through their longitudinal projects and scholarly activities. Examples from AY 2022 - 2023 include improving health and environmental justice through afterschool park programs, improving access to primary care among unhoused populations, and improving veterans' access to healthy food. The program collaborates with partners in Kern County to reduce urban-rural disparities in public health and health care access and initiated engagement with the county-run health system and the public health department to identify existing needs and ideas for collaboration. As a first step, the residency program will begin developing a continuing medical education series on preventive medicine and public health topics that it will offer to physicians in Kern County.

The residency program works to build a consistent pipeline of applicants across its three tracks. Faculty are mentoring five medical students interested in pursuing careers in public health and continue to engage medical students through the medical student elective as well as the medical student interest group.

Other areas of specific focus include emerging infections, disease surveillance and infection control, substance use, and management of public health crises including risk communication, emergency preparedness, and public health law.

The University of California, San Diego

The program began a 2-month rotation at the Linda Vista Healthcare Community Clinic (CA-51) of San Diego Family Care, coordinating with Health Care Partners, an organization that

coordinates activities, including QI, for a network of 17 FQHCs in Southern California. All residents participated in didactic sessions on the history, purpose, and processes of FQHCs and experiential learning activities in QI.

All residents participated in a formal needs assessment at the Linda Vista Healthcare Community Clinic that emphasized SDOH, including developing scripts for and conducting focus group and key stakeholder interviews with physicians, staff, and patients. Residents analyze, code, and present preliminary results from the needs assessment to Health Care Partners and Linda Vista Healthcare Community Clinic leadership. The residency program has begun developing a lifestyle medicine intervention for improving prenatal nutrition based on the results of the needs assessment. In addition, all residents participated in a 3-day training session and field work conducting a survey of the neighborhoods surrounding the clinic. The survey assessed the walkability and safety of neighborhood streets, an important component of SDOH.

Of the four residents who graduated from the residency program in July 2023, two are involved in a program that provides screening to asylum seekers at the U.S./Mexico border for communicable and non-communicable diseases and brief medical interventions if necessary. Another resident is conducting research related to underserved populations, and one is in clinical addiction medicine practice.

The University of California, San Francisco PH/GPM: Rural Track

The residency program partners with United Health Centers of the San Joaquin Valley (CA-09), which operates two FQHCs in rural Fresno County, to add a rural track to complement its existing program in the city of San Francisco. Residents identify a scholarly project during this rotation that benefits United Health Centers and their patient populations. In subsequent months, they contribute to data gathering, analysis, and write up. These projects are expected to address the needs of the FQHCs' patient population, particularly in health care access, health literacy, and pertinent SDOH identified by the residents and their mentors from the FQHCs.

The residency program has designed public health rotations in collaboration with the Fresno County Department of Public Health. The department is uniquely positioned to address both health needs of the rural portions of the county and those of the city of Fresno. The curriculum includes rotations for each resident at the Fresno County Department of Public Health under the mentorship of a preventive medicine residency faculty member, which includes communicable disease control and epidemiology as well as at least one of the department's specialty clinical services, such as sexually transmitted diseases or tuberculosis.

The rural track has not yet graduated residents as of AY 2022 - 2023. There were two graduates from the general program in AY 2022 - 2023. One serves in a primary care practice while the other works in a part-time primary care practice and works in health technology.

The University of California, San Francisco, OEM

The residency program has a longstanding commitment to caring for the underserved at the Zuckerberg San Francisco General Hospital (CA-11) – an FQHC – and at the San Francisco Veterans Administration Medical Center. The 2-month longitudinal FQHC experience under development at Zuckerberg San Francisco General will imbed each OEM resident in a specific

outpatient clinic, such as pulmonary medicine, rheumatology, or primary care. During this rotation, the resident will engage in a needs assessment linked to QI in assessing the role of occupational and environmental exposures in acute and chronic health conditions. FY 2023 activities focused on preparation for the FQHC rotation, which is scheduled to launch early in FY 2024.

At the San Francisco Veterans Administration Medical Center, residents engage in evaluations of veterans exposed to multiple occupational hazards, including Agent Orange, burn pits, contaminants at military bases, and post-traumatic stress disorder. For 2 months in 2023, a resident at the San Francisco Veterans Administration Medical Center conducted environmental health evaluations. In 2023, the residency program increased the number of patients seen from underserved groups by systematically promoting the university's OEM clinic as a referral site and by direct outreach to local community-based clinics. The residency program increased the number of patients seen for pro bono consultations and incorporated training on health disparities and cultural competence into the clinic curriculum.

The program graduated five residents in 2023, three of whom are now serving underserved and vulnerable workers. One is working at a Concentra occupational health clinic in Fresno, California that serves farmworkers. A second is employed at a Kaiser Permanente facility in South Sacramento in an area that has both light industry and agriculture, as well as underserved populations. A third is in clinical practice in Southeastern Florida where he is serving underserved patients in primary care and occupational medicine. The final two residents are working at a Kaiser Permanente facility in San Francisco and are on active duty in the U.S. Navy.

CONNECTICUT

The Griffin Hospital

The residency program entered a 4-year contract with the Connecticut Institute for Communities, Inc. (CT-05), an FQHC located in Danbury, Connecticut. Under the supervision of the team at the Connecticut Institute for Communities, senior residents implement population-based projects such as needs assessments, QI projects, and data analyses. Combined Internal Medicine/Preventive Medicine (IM/PM) resident physicians complete this 2-month FQHC rotation in the final year of training. Advanced preventive medicine resident physicians complete a 3 ½ month FQHC rotation in the final year of training.

The combined IM/PM and preventive medicine residents address SDOH through their clinical preventive medicine experience and lifestyle medicine practice, using evidence-based guidelines to refer patients to resources to meet their SDOH needs as well as support their self-efficacy. The Connecticut Institute for Communities launched a mobile health unit for dental and primary care services to reach more people in the community, especially those without reliable transportation. Residents assist with efforts to initiate and operate the unit. The mobile health unit is expected to help address health disparities among communities in the Danbury area.

Three graduates work in primary care settings, all of which are in medically underserved areas.

GEORGIA

The Morehouse School of Medicine

The residency program works with two FQHCs to place second-year residents in QI projects to improve health equity of the FQHCs' patient populations. The two FQHCs are the HEALing Community Center (GA-03) and the Southside Medical Center (GA-05). During meetings with the FQHCs, hypertension and diabetes were identified as priority health issues.

The PH/GPM residency program recruited and trained six residents, all of whom are from underrepresented populations. Three of the six residents were new and started on July 1, 2023. The residency program continues recruiting residents through pipeline programs for medical students at the Morehouse School of Medicine, the Standardized Acceptance Program of the American College of Preventive Medicine (ACPM), and the Electronic Residency Application System of the American Association of Medical Colleges. The residency program does so in collaboration with the school's internal medicine residency and by participating in several annual conferences that served diverse and underrepresented medical students and physicians. For example, residency leadership introduced and mentored students in the practice of preventive medicine. The residency program director served as the mentor and preceptor for a third-year medical student in the Community Health Honors Program on a journal article for submission to the *American Journal of Public Health* on premature COVID-19 mortality by race and ethnicity. In addition, the residency program's associate program director served as the preceptor for the fourth-year medical student elective in preventive medicine.

MASSACHUSETTS

Boston Medical Center Corporation

FY 2023 was a planning year for the rotation at the Boston Health Care for the Homeless Program's Oasis Clinic (MA-07), an FQHC, which is scheduled to start in FY 2024.

The residency program is dedicated to empowering primary care physicians to become public health practitioners, clinicians, researchers, and advocates. The central goal is to equip residents with skills necessary to address SDOH and health disparities in immigrant and refugee populations. The 2-year health equity and SDOH curriculum, which started July 2023, is designed to provide a thorough understanding of the intersection of immigration status, nativity, and immigrant identity with SDOH such as housing safety, experiences of discrimination and violence, and economic opportunities that significantly determine income, wealth, and life choices. Didactic and experiential learning focus on the health needs of immigrant and refugee populations within Massachusetts' FQHCs and safety-net populations.

The resident who graduated in June 2023 was hired by the Department of Family Medicine at Boston Medical Center as an Assistant Professor of Medicine. His clinic is at the Codman Square Health Center, and he is faculty on a HRSA-funded Primary Care Training and Enhancement maternal health-related grant project.

MARYLAND

The Johns Hopkins University

The Johns Hopkins PH/GPM residency program explored potential collaborative opportunities with four of the largest FQHCs in the region: Healthcare for the Homeless (MD-07), Baltimore Medical Systems (MD-07), Total Health Care (MD-05), and Chase Brexton Health Services (MD-03). Discussions with the FQHC rotation sites progressed and the topics of residents' scholarly projects were developed during 2023.

All residents in the PH/GPM residency program participate in a variety of didactic activities that occur throughout the AY. These activities include speaker series such as a Meet the Professor Series and a Meet the Preceptor Series, where prominent faculty of the school and rotation preceptors offer lectures on specific topics, many of which pertain directly to SDOH and methods of reducing health disparities and promoting equity.

Past residency graduates have moved to careers at local and state health departments, various federal agencies, managed-care organizations, think tanks, FQHCs, academia, community-based organizations, international health non-governmental organizations, and various public health organizations that provide care and community-level interventions to underserved populations.

MAINE

MaineHealth Services

The three second-year preventive medicine residents embarked on a pilot population health rotation at a local FQHC, Portland Community Health (ME-01). The population health projects that they are conducting were developed through team-building exercises with the faculty and are engaging the unhoused population, immigrants, and school-based health centers.

The Preventive Medicine Enhancement for Maine residency program continues to direct Maine Medical Center's community health worker (CHW) program, Community Informed Care Initiative. The Community Informed Care Initiative seeks to help support immigrants to navigate the health care system upon arrival to Maine. The residents are crucial in shaping, coproducing, and clinically advising the program. The center's CHW program receives patient referrals through the electronic health record and from there, builds a trusting relationship with patients and providers to address SDOH, medical complexities, care plan implementation, and health goals. The CHWs work closely with the resident to prioritize patients, refer them to specialties when needed, and respond to public health crises.

Residents also rotate in facilitating "Ask the Doc" sessions, a collaboration with Maine Access Immigrant Network. Each month, a resident collaborates with a CHW to co-lead a session with immigrant community members to address medical questions and concerns. Sessions are held three times a month in three languages (i.e., Somali, Arabic, and French/Lingala). Topics cover preventive medicine (e.g., vaccines, immunizations, and screenings), maternal-child health, infectious diseases such as COVID-19, and other health-related topics. Sessions are led in-person and virtually.

One residency graduate is working at MaineHealth part-time in clinical services and part-time continuing research on a community COVID-19 response. A second residency graduate is working as a preventive medicine and family physician in a practice in Richmond, Virginia.

MICHIGAN

The University of Michigan

The program has a long history of partnering with the Detroit Community Health Connection (MI-13) in Detroit, Michigan and the Center for Family Health (MI-05) in Jackson, Michigan. At these sites, residents participate in providing direct patient care and conduct QI projects based on the needs at each site. The program expanded its FQHC partnership to include a rotation site focused mainly on population health where the residents can demonstrate the importance of a preventive medicine physician stationed within an FQHC. A new partner, Ingham County Health Centers (MI-07), is part of the Ingham County Health Department. The first resident will start a 2-month rotation at this site in February 2024 and contribute to the clinic's data reporting and interpretation of findings to identify methods to best meet the needs of the community served by the health center, with a focus on health equity and SDOH.

In addition to its focus on SDOH, health disparities, and health equity through the academic curriculum, the program is providing unique training opportunities to the residents.

Two residents graduated from the residency program in AY 2022 - 2023, funded by the 2018 grant. One has reported starting work at an academic medical center. Residency graduates often continue to primary care or governmental public health careers.

MISSISSIPPI

University of Mississippi Medical Center

The program partner FQHC is Jackson-Hinds Comprehensive Health Center (MS-02), a clinical network offering primary care, pediatrics, obstetrics and gynecology, dental, and limited mental health services to patients in and around Jackson, Mississippi. The rotation was piloted in September 2023 with two residents spending 2 months at Jackson-Hinds Comprehensive Health Center evaluating their colorectal cancer screening program.

Post graduate year (PGY)-3 residents enrolled in a master of population health science program at the University of Mississippi completed a three-credit-hour course, "Social Determinants of Health." Lectures on health literacy and strategies for overcoming social barriers to health care are covered in didactic sessions. The program has a special focus on lifestyle medicine and chronic disease prevention, especially in Black/African American and low-income patients, which comprise a large proportion of the community and patient population. The Student Health rotation at Jackson State University, a historically Black college/university, focuses on diversity and inclusion. Four of the residents who graduated in June 2023 and four current PGY-3 residents have rotated at Jackson State University.

Other areas of specific focus include the opioid epidemic and substance use disorder (SUD) management practices; occupational health practice and administration; health and wellbeing

among agricultural workers and specific conditions affecting this population including cardiometabolic illnesses, suicide, and other drug and alcohol dependence. Residents also participated in disaster relief efforts in response to a tornado in Rolling Fork, Mississippi.

One residency graduate is practicing combined outpatient primary care with lifestyle medicine in Pittsfield, Massachusetts. Two graduates are entering in an Addiction Medicine Fellowship (AMF) program in New Orleans, Louisiana. A fourth residency graduate is enrolled in an internal medicine residency program in Tupelo, Mississippi.

NEW MEXICO

University of New Mexico

The residency program began collaborating with First Choice Community Healthcare (NM-02), an FQHC system in New Mexico, to arrange a 2-month rotation for a resident to occur in October and November 2023. First Choice Community Healthcare includes nine health care center locations serving Albuquerque and surrounding rural communities. The rotation will provide residents with the opportunity to work on population health-based projects, including addressing SDOH, low health literacy, and health disparities faced by the populations served. At the conclusion of their rotation, residents will present to seniors in the underserved community on fall prevention and on the role of hope in lifestyle.

The residency program implemented a new curriculum to train residents in factors affecting the health of underserved populations. The director of the University's Center for Healthcare Equity in Kidney Disease led the education of residents in SDOH and health disparities. Her research focuses on health services interventions that will increase diversity, equity, inclusion, and access to health care for vulnerable populations. All residents also completed a training in health literacy for both written and verbal communication through the University's Hospitals Office of Health Literacy. The residents completed a month-long rotation, Advancing Health Equity Through Organizational Operations, where they created a business plan that would serve medically underserved populations.

Other areas of specific focus include public health crises and emergency preparedness training; clinical care for medically underserved communities including family planning, sexually transmitted diseases, and tuberculosis clinics; and community-based substance use prevention activities.

Four residents graduated in 2023. Two residents entered AMF programs, with one at the University of New Mexico and the other at East Tennessee State University. Two other residents entered primary care practice with a focus on occupational medicine.

NEW YORK

The Research Foundation for the State University of New York, Stony Brook

The program implemented a new rotation at the Sun River Health FQHC (NY-17). Four senior residents each devote 3 months to the rotation, providing the health center with a senior resident rotator throughout the year. Residents undertook QI activities focused on conditions or services

of importance to the health center that are below desired quality indicator levels, specifically diabetes control and colorectal cancer screening rates.

Residents completed the course “Social Determinants of Health,” which contribute to their ability to address SDOH during their Sun River Health and other rotations. Resident seminars included “Health Equity and Public Health Impact,” presented by the American Medical Association’s Chief Health Equity Officer and Senior Vice President who is a residency graduate; and “The Importance of SDOH in Educating Health Care Leaders,” presented by a Stony Brook University professor of social welfare. In their health department rotations, residents often participate or lead projects addressing SDOH in vulnerable or underserved populations. In 2023 at the annual meeting of the ACPM, residents gave six oral presentations and two poster presentations on a variety of topics that related to improving health care for marginalized populations to reduce disparities.

Residents who graduated in 2023 are employed as follows: one is employed by Suffolk County Department of Health Services; another is contracted by the Stony Brook Program in Public Health to conduct a health equity impact analysis; and another is practicing obesity medicine as a member of the faculty of the Cleveland Clinic.

University of Rochester

Residents began working under the preceptorship of the physician President and Chief Executive Officer of Jordan Health (NY-25), a large and historically significant FQHC, serving the needs of traditionally underserved populations in the greater Rochester area.

The residency program developed a “Health Equity and Literacy” training track, whose flagship rotation is at an FQHC. This has expanded the teaching roles of a diverse and highly experienced group of faculty members. Moreover, the residency program has been able to recruit and retain two additional residents, both from historically underserved populations, into training slots that are ACGME-accredited, but have laid dormant for years due to lack of funding.

Two residents graduated in June 2023. One has accepted a clinical faculty position at a medical school affiliated with a historically Black college/university. The resident is also working as an associate residency program director. The second accepted a position as a preventive medicine physician at the same FQHC at which the University of Rochester is developing a residency rotation under the PMR Program grant.

Icahn School of Medicine at Mount Sinai

The residency program established relationships and a rotation structure with four FQHCs. Two FQHC rotation sites, Settlement Health (NY-13) and Institute for Family Health (NY-12), are in East Harlem, an underserved community in New York City. A third site, Care for the Homeless (NY-14), works to end homelessness by providing high-quality, patient-centered medical and mental health services for the unhoused. A fourth site, Housing Works (NY-13), serves New Yorkers who are at risk of or living with HIV, particularly those with housing instability. Beginning in FY 2024, residents (as part of their FQHC rotation) will conduct a QI or population health outcome project, prepare and deliver at least one talk to an audience of FQHC patients on

a health topic prioritized by the FQHC community, and develop leadership and systems thinking skills through participation in meetings with FQHC leadership staff and members of their board of directors. Two residents will start their rotations in December 2023 (FY 2024).

The residency program developed and implemented a new course for residents, “Health Equity, Literacy, and Communications,” to prepare residents to address health inequities through cultural and linguistically appropriate communication and an SDOH lens. The 15-hour course includes didactics to assess the role of health literacy in conveying health risk, a workshop to create patient-facing materials, lectures on incorporating community voices to address racism through clinical care, and a tour of East Harlem. The course explores the structural bases for health outcomes, such as food access and green spaces, as well as community strengths and resources, such as the local health department action center, community-based organizations, and community gathering sites.

Of the three 2023 residency graduates, one is practicing primary care and population health at a school-based health center in an underserved community in the Bronx, New York, a second is pursuing a cancer prevention and control research fellowship at Mount Sinai with a focus on equity in cancer clinical trial enrollment, and the third is a pain medicine fellow at Johns Hopkins University.

NORTH CAROLINA

University of North Carolina at Chapel Hill

The residency program worked to reinvigorate a previously established relationship with Piedmont Health System (NC-09) to develop a dedicated 2-month rotation at the FQHC. Residents work at the central management office and onsite at clinic locations participating in program development, evaluation, and QI. Through the development of the FQHC rotation, residency program leadership worked collaboratively with other HRSA grantees to discuss the development of the rotation.

The activities of the FQHC rotation focus on health equity, health literacy, health disparities, and SDOH. Residents conduct community needs assessments for the local population and develop and evaluate programs to determine if they are meeting the needs of the community based on the local SDOH and health literacy with a goal of reducing disparities. In addition, residents participate in diversity, equity, and inclusion training in their first year and then implement this training in their second year. Examples of implementation include interactions with underrepresented minority medical student groups such as the Student National Medical Association and the Latino Medical Student Association.

The 2023 graduates included residents who obtained positions at state and federal agencies. One resident continued their training in an obesity medicine fellowship.

TEXAS

The University of Texas Health Science Center at Tyler

One resident engaged in a mandatory 2-month longitudinal rotation at Tyler Family Circle of Care (TX-01), an FQHC. This rotation aims to familiarize the resident with SDOH, health literacy, and chronic conditions prevalent among the populations served by the FQHC and how to apply public health/population-based data analysis and quality improvement techniques to the FQHC setting. The initial rotation will start in October 2023 (FY 2024), focusing on a QI research project targeting low childhood vaccination rates in rural East Texas communities.

Residents completed essential training programs aimed at addressing regional health challenges during AY 2022 - 2023. They participated in a certified lifestyle medicine program tailored to combat chronic diseases prevalent in underserved East Texas communities. Additionally, residents engaged in Operation Lone Star rotations, offering health care to low-income individuals in the Rio Grande Valley. Two residents successfully completed the Operation Lone Star program, broadening their understanding of health needs within the Hispanic population. Moreover, three residents successfully finished the MD Anderson Cancer Center Certified Tobacco Treatment Program, focusing on smoking cessation strategies for underserved areas. Last, the residency program is developing a conference on mental health needs in rural East Texas as part of this grant.

As the program is in its second year, no residents have yet graduated.

WISCONSIN

University of Wisconsin System

The residency program partnered with Wingra Family Medical Center (WI-02), one of the clinics in the Access Community Health Center FQHC system, to support and enhance the clinic's population health activities with a focus on health equity. Both second-year residents will complete a 2-month QI project that the clinic has identified as a priority. FY 2023 has been a planning year, with rotations scheduled to begin in early 2024.

The residency program provides a variety of educational opportunities related to SDOH, health literacy, health disparities, and health equity through the MPH degree, clinical and public health rotations, weekly didactics, and resident participation in the Wisconsin Population Health Fellowship Program. Residents who enter the residency program without an MPH complete their degree in the University's MPH program, which has a strong focus on health equity throughout the curriculum. The residency program's weekly didactic curriculum gives residents additional learning opportunities specific to QI, SDOH, and health literacy. Residents participate in the Wisconsin Population Health Service Fellowship and PMR joint Learning Community, a partnership between the Wisconsin Population Health Service Fellowship and the University of Wisconsin PMR program. This 2-year program is designed for early-career individuals in public health and allied sciences with a focus on health equity and collaborative leadership.

The residency program has two residents per class. One 2023 graduate is now working for a Medicaid coordinated care organization in Oregon. The second 2023 graduate is a

neurologist/preventive medicine physician focusing on brain health and dementia prevention at the University of Texas at San Antonio, where she practices clinically as a neurologist and aims to develop a prevention-focused brain health clinic and pursue research opportunities in this area.

Highlights from HRSA FY 2018 Preventive Medicine Residency Programs: Final Budget Year and No-Cost Extensions Awarded in FY 2023

Below are select programmatic highlights of the 12 PMR Program grantees who received grants in FY 2018 and continued to be active from May 1, 2023, through September 30, 2023, through no-cost extensions. These highlights reflect activities from October 1, 2022, through September 30, 2023, and include activities from both the last 7 months of their initial period of performance and the first 5 months of their no-cost extension. These grantees provided information on activities that were identified by HRSA as key areas of concern during their grants' period of performance, including opioid use disorder (OUD)/SUD, health equity, SDOH, diversity and inclusion, and telehealth. However, only some of the grantees provided activities related to telehealth. Some grantees provided additional highlights related to their program-specific areas of focus. Grantees also gave information about post-residency employment of their 2023 residency graduates.

CALIFORNIA

The University of California, Los Angeles

The preventive medicine program is actively engaged as a member of the University's Addiction Medicine Consortium and the Anti-Vaping Champions. Faculty help lead initiatives related to tobacco cessation and vaping. Partnerships and collaborations with various health care professionals foster efforts to further advance trainees' skills in prevention and management of OUD/SUD. The residency program developed clinical rotations in addiction medicine.

The residency program has expanded primary care services to medically underserved areas in Los Angeles County. Residents provide care for pediatric and adult populations at these sites. Residents rotate with the Los Angeles County Department of Health Service's Street Medicine Program and the Greater Los Angeles Department of Veterans Affairs (VA) to care for unhoused populations, including unhoused veterans, and work in a mobile health care unit to reach underserved areas. Residents participate in various community-based programs which focus on improving health literacy and lifestyle behaviors and lead projects related to addressing childhood obesity, maternal health and wellbeing, breastfeeding, and chronic diseases.

One of the preventive medicine faculty is a co-lead for strategic planning to improve diversity and inclusion through community engagement activities in the department. All faculty and staff are required to complete trainings in diversity, inclusion, implicit bias, and systemic racism. The training program has also employed a holistic review process for its applicants.

As a result of the COVID-19 pandemic, the program expanded opportunities for telehealth/telemedicine services to patient populations. Through the lifestyle medicine clinic and other primary care practices, residents continue to lead and conduct visits in a virtual setting.

The program added combined training programs in IM/PM and infectious disease/preventive medicine. The residency program continues to recruit additional program faculty and has been involved in population health projects for chronic conditions (e.g., hypertension, sickle cell) and workforce development.

In AY 2022 - 2023, three residents graduated. One works in primary care and preventive medicine through a White House Integrative Medicine Fellowship at an academic center. The second has a dual-appointment at an academic center and local safety-net hospital and works in clinical nutrition. The third graduate works in primary care and preventive medicine at the Greater Los Angeles VA Medical Center with a particular focus on improving care and access to unhoused veterans.

COLORADO

The Regents of the University of Colorado

Two residents worked with the project director to see patients at the Addiction Research and Treatment Services Adult Outpatient Program, a methadone clinic. In addition, one resident developed a set of clinical pathways for jail-based substance use withdrawal management in collaboration with the Treatment Workgroup at the Colorado Consortium for Prescription Drug Abuse Prevention. Another resident has helped develop patient education materials to inform patients with SUD what treatment options are available.

One resident worked at the Colorado Department of Public Health and Environment within the Medical Guidance Unit and with community stakeholders on forming a vaccination webpage to assist schools in organizing school-based vaccination events. This resident gave a lecture on identifying and preventing emerging skin infections in jails to prison and jail staff and provided the Medical Guidance Unit team an analysis of issues important to the unhoused population in Denver.

Three residents graduated in June 2023; all residents were employed within 3 months of their program completion. One graduate is working in weight management and obesity medicine in Ohio. One graduate is working at the Colorado Department of Corrections as a staff physician caring for inmates. One graduate is a primary care research fellow at the Adult and Child Center for Outcomes Research and Delivery Science at the University of Colorado School of Medicine, conducting research on vaccine attitudes among parents, among other projects.

CONNECTICUT

The Griffin Hospital, Inc.

The residency program offered a comprehensive curriculum comprised of didactic and experiential learning based on the curriculum of the AMF at the Yale School of Medicine. Residents rotated at the Yale New Haven Health and Yale-affiliated APT Foundation, which

provides primary care, outpatient and residential SUD treatment, and mental health treatment services to New Haven County. They also completed an 8-hour medications for opioid use disorder (MOUD) training. The team at the Yale School of Medicine provided addiction-related conferences and grand rounds to residents and faculty at Griffin Hospital. One combined IM/PM resident worked with the Overdose Project at the New Haven Health Department.

IM/PM residents worked as primary care providers for the Naugatuck Valley Region of Connecticut, a practice from which they refer patients to resources to meet their SDOH needs as well as support their self-efficacy through inclusion of lifestyle medicine. One resident provided project management and administration of a grant project, Community Impact for Care Delivery - Race, Ethnicity and Language Integration at Griffin Health, funded by the Connecticut Health Foundation.

Graduation information from 2023 for this grantee is provided in this report in the program highlights for new awards in FY 2023.

GEORGIA

The Morehouse School of Medicine, Inc.

The residency program sponsored a faculty member to complete training in Addiction Medicine. A recent residency graduate completed an AMF, became board certified, and is now the medical director of a behavioral health clinic. This graduate provided a didactic session to residents and faculty on prevention of SUDs among underserved populations.

The residency program worked closely with the medical school's Office of Diversity and Inclusion. The residency program supported health equity, diversity, and health justice through both recruiting and training diverse residents and by collaborating with organizations that serve diverse populations. Currently, all six residents are from underrepresented communities. The residency program directed outreach efforts to undergraduates, medical students, and residents of diverse backgrounds to consider careers in preventive medicine at historically Black colleges/universities, the Student National Medical Association, and the Hispanic Medical Association. The residency program continued to address the social, economic and policy determinants of health through a unique social, cultural, and behavioral determinants of health longitudinal rotation in a faith-based organization. In addition, all three first-year residents completed a "Bridges to Health Equity" course that stresses inclusive policies for a diverse preventive workforce. The residents provide preventive services to underserved populations in a variety of settings, including a safety-net clinic in Atlanta, which provides care for individuals and families who are experiencing housing insecurity and lack access to health care.

The COVID-19 pandemic greatly expanded participation of residents in telemedicine. Residents participated in a life medicine rotation that included telehealth visits.

Other areas of focus include COVID-19 epidemiology, prevention, control, and mental health effects; other infectious disease outbreak investigation and surveillance; community and individual mental health; and emergency preparedness.

Graduation information from 2023 for this grantee is provided in this report in the program highlights for new awards in FY 2023.

MAINE

MaineHealth Services

The residency program created educational modules on addiction and stigma as well as toxicology. These include modules on “Screening, Brief Intervention and Referral for Treatment,” “Caring for SUD and Stigma,” and “Safe Acute Pain Prescribing,” as well as naloxone education, a toxicology testing podcast, and a documentary for frontline medical, dental and pharmacy staff that directly addresses experiences of stigma and SUD. The residency program partners with addiction medicine fellows, helps educate other trainees on trauma informed care, motivational interviewing, and other diseases associated with SUD. The program implemented an addiction medicine rotation for each of the residents to provide training and clinical experience in treatment of SUD.

The residency program continues to grow its community education and outreach programs using CHWs and residents as advisors and proponents in health equity, cultural humility, and health care access. The program presented at the MetaECHO conference in New Mexico on their coproduction model using CHWs in clinical care teams to achieve better health service and outcomes among immigrants. With help from the residents and local CHWs, the residency program offers “Ask the Doc” sessions each month in French, Arabic, and Somali to provide health information to underserved populations with limited access. The residency program also took part in planning and implementing vaccine clinics in the community for non-English speaking residents with and without insurance. Residents continue to supervise at the Preble Street Learning Collaborative to provide low barrier health access for those experiencing homelessness, as well as the sexually transmitted diseases clinic to provide preventive care and treatment for patients living with hepatitis, HIV, and other related infectious diseases.

The program has concluded a 2-year Project ECHO (Extension for Community Healthcare Outcomes) series on “Improving Patient Care with Community Health Workers.”

Other specific areas of focus include nutrition, emergency preparedness, lifestyle and wellness group medical visits, childhood obesity, and infectious disease control including COVID-19, tuberculosis, and vaccine-preventable illnesses.

Graduation information from 2023 for this grantee is provided in this report in the program highlights for new awards in FY 2023.

MICHIGAN

Regents of the University of Michigan

In addition to caring for patients in FQHCs with MOUDs, one resident supported the work of a local coalition that was developing a plan to use opioid settlement resources to best serve the community. A resident also assisted a local health department in developing a response plan for when an increase in overdoses is identified.

The program partners with several sites that care for underserved people and communities, including FQHCs and health departments. One resident stationed at the Center for Family Health in Jackson, Michigan explored the vaccination coverage for children and the clinic's performance on the corresponding Healthcare Effectiveness Data and Information Set measure. The resident identified several practices that could improve the clinic's performance on the measure and demonstrated that the current protocol for measuring vaccination was not conducive to focusing on vaccination for patients with more social vulnerability. To address this, she collaborated with the local Clinically Integrated Network, Jackson Health Network, and proposed a new measure that would encourage vaccination more equitably across the population served. The new measure will be piloted by the health network.

The residency program continues to focus on supporting the development of a diverse preventive medicine workforce through the trainees and through support of a diverse network for preceptors and mentors, as well as training opportunities for residents. One training opportunity for the residents includes the opportunity to work at a clinic that provides gender-affirming care, with a focus on the young adult/adolescent population. Two residents have rotated in the clinic in the last year; and this has been an opportunity to focus on delivery of inclusive care.

Other areas of focus include vaccination efforts, childhood lead exposure, local public health systems and the academic health department model, and public health/primary care integration.

Two residents graduated from the residency program in the last year. One resident, who is also an infectious disease physician, is working at an academic medical center in the clinic setting treating patients with infectious diseases. The other resident has an academic role with a focus on training and connecting physicians to public health through the residency program and as part of another training program that delivers public health content to a primary care graduate medical education center in Detroit, Michigan.

MISSISSIPPI

University of Mississippi Medical Center

Three recently graduated residents participated in a clinical rotation in the Addiction Psychiatry clinic. Of the four current PGY-3 residents, one has already completed the rotation. Residents also receive education about SUD as part of their required lifestyle medicine residency curriculum and they receive training in tobacco cessation treatment approaches through the University's ACT Center for Tobacco Treatment, Education, and Research.

All 2023 PGY-3 graduates who enrolled in the master of population health science program have completed a three credit-hour course titled "Social Determinants of Health" as one of their degree requirements. Two residents, who already had their MPH degrees prior to joining the residency program, audited the course or completed other assignments to cover similar content.

Two residency rotations focus largely on diversity and inclusion. One residency rotation focused on diversity and inclusion is the Student Health rotation at Jackson State University. Four of the residents who graduated in June 2023 and four of the current PGY-3 residents have rotated at Jackson State University.

All residents participate in telehealth care as part of their required lifestyle medicine clinic rotation. This clinic moved almost completely to telehealth from 2020 through 2022. It has subsequently transitioned back to a mixture of in-person and telehealth visits but continues to use telehealth for some visits.

Other areas of focus include chronic disease prevention, especially in Black or African American and low-income patients, rural health, tornado relief efforts, and occupational health practice and administration.

One residency graduate is practicing combined outpatient primary care with lifestyle medicine in Pittsfield, Massachusetts. Two graduates are entering in an AMF program in New Orleans, Louisiana. A fourth residency graduate is enrolled in an internal medicine residency program in Tupelo, Mississippi.

NEW JERSEY

Rutgers, The State University of New Jersey

Residents work with veterans with SUD at VA primary care clinics and the health promotion/disease prevention program. The school's AMF welcomes preventive medicine residents to work in their ambulatory care practice and to assist with patient consults for substance use treatment. Two residents conducted assessments for a multicenter study of different MOUDs with guidance from a research faculty member in the infectious disease department.

Residents see patients who live in an under-resourced neighborhood in the primary care practice at University Hospital. They also work with a state- and CDC-funded community cancer screening program, designed to ensure screening for uninsured persons in the Essex County area. At the VA, they work with veterans, many of whom are also without sufficient resources. Health equity and SDOH are emphasized in all courses taught at the school of public health.

The school's pathway programs, starting in middle school through high school and into college, seek to ensure that children from many cultures, ethnicities, and interests learn science and have the opportunity for ongoing education. Students and faculty hold workshops and seminars on acceptance, approval, and appreciation of persons of all backgrounds. All students, residents, faculty, and staff undergo training on bias and microaggressions.

Telehealth is key for the VA program, centered in East Orange, three miles from the medical school, that serves the entire state. Residents attend and facilitate statewide groups of veterans working to manage tobacco use, hypertension, weight, and diabetes. At University Hospital, residents are trained in telehealth use.

Both 2023 residency graduates are now in AMF programs, one in New Jersey (Hackensack Meridian's Jersey Shore Medical Center), and one in Ann Arbor, Michigan (Trinity Health in Ann Arbor).

NEW MEXICO

University of New Mexico

All residents provided clinical care to patients in the Addiction and Substance Abuse Program clinic, serving diverse and underserved populations. All residents are trained in harm reduction and behavioral counseling.

The residency program provides education to residents that focuses on health equity, inclusion, and diversity and SDOH to fully support these populations in New Mexico. Residents provide clinical services at the New Mexico Department of Health public health clinic. Two residents also completed a rotation at the Prevention Research Center, which serves under-represented populations. One of the residents evaluated weight management medications and the other resident investigated digital interventions for adolescent obesity to support prevention strategies.

Three first-year residents completed the “Traditional Healing/Curanderismo” course, where healers from the Southwest and Mexico are the instructors. Residents learned about the history, traditions, rituals, herbs, and remedies of Curanderismo, a folk healing tradition of the Southwestern United States, Latin America, and Mexico. In addition, diversity and inclusion resources for residents were provided to residents from the university’s Health Sciences Center Office for Diversity, Equity and Inclusion.

All senior residents completed a clinical rotation in telehealth with Project ECHO. Residents within the occupational medicine clinic completed telehealth visits with patients. All residents were able to attend the MetaECHO Conference, which brought together attendees from 40 countries, including India, Australia, Canada, Indonesia, Vietnam, and countries across Africa.

Four residents graduated in 2023. Two residents entered AMF programs, with one at the University of New Mexico and the other at East Tennessee State University. Two other residents entered primary care practice with a focus on occupational medicine.

NEW YORK

The Research Foundation for the State University of New York, Stony Brook

The residency program continued offering addiction medicine content during both didactic and elective practicum components of the training (e.g., methadone maintenance clinic sessions). Residents completed a course, “Contemporary Issues in Public Health,” with two class sessions devoted to the opioid epidemic. Residents attended the 2023 Annual Meeting of the ACPM which had multiple sessions relating to OUD/SUD.

The residency program initiated a new elective health equity advocacy rotation with the American Medical Association Center of Health Equity, supervised by a program graduate who is the American Medical Association Chief Health Equity Officer and Senior Vice President. All entering residents took a course on SDOH during the summer of the first year in the program. Health equity and SDOH are included throughout the curriculum during practicum training and practice. During the ACPM Annual Conference residents attended a session on “Innovative Health Systems Approaches to Achieve Health Equity in Diabetes Prevention.”

Two residents joined the GME Diversity Equity and Inclusion Committee. One of them developed “Cook with the Doc” videos and food kits for use with diverse, low-income participants. The other resident worked with Suffolk County boys’ and girls’ clubs to conduct cooking classes for high school students to encourage healthy eating.

During 3-month rotations, senior residents provided tele-preventive medicine services to address the socio-behavioral challenges affecting the health and access to care of underserved populations. Patients were referred to the tele-preventive medicine service from the family medicine patient-centered medical home when they did not meet the quality metrics for preventive services or had gaps in care, specifically breast and colorectal cancer screening and pneumococcal vaccination. Residents provided motivational counseling to facilitate receipt of these clinical preventive medicine services, and lifestyle modification counseling. The cohort of residents who entered the residency program on July 1, 2023, started providing Medicare annual wellness visits through tele-preventive medicine to decrease the backlog of these important preventive exams.

Residents who graduated in 2023 are employed as follows: one is employed by Suffolk County Department of Health Services, another is contracted by the Stony Brook Program in Public Health to conduct a health equity impact analysis, and another is practicing obesity medicine as a member of the faculty of the Cleveland Clinic.

NORTH CAROLINA

University of North Carolina at Chapel Hill

The residency program continues to have a close relationship with the AMF program as well as the Tobacco Treatment clinic. The residency program currently has two residents with clinical time in addiction medicine clinics and four residents with clinical time in the tobacco treatment clinic.

Through the Gillings School of Public Health MPH program and their government public health rotations, residents have academic and practice experiences, respectively, in health equity and SDOH. These topics are covered in weekly didactic sessions with expert visiting speakers.

Residents in their first year attend a formal 2-day training on diversity, equity, and inclusion. In the second year, they participate in a recruitment program for underrepresented minority groups or other approved diversity and inclusion service-learning activity. All faculty are enrolled in and are in the process of completing diversity, equity, and inclusion certificate training programs. Further, second year residents participate in population-specific talks at a local Area Health Education Center Grand Rounds to reach their rural-based trainees and expose them to preventive medicine training.

Residents have exposure to telehealth through their clinical experiences in addiction medicine, weight management, tobacco treatment, and population health. Further, several residents worked with the University’s Hospital at Home Program, a program that combines continuous virtual monitoring with periodic home visits to care for patients requiring hospital-level care at home, to evaluate its effectiveness.

The graduating class of 2023 included residents who obtained positions at state and federal agencies. One resident continued their training in an obesity medicine fellowship.

WEST VIRGINIA

West Virginia University Research Corporation

All residents completed a rotation at the Chestnut Ridge Center Dual Diagnosis Unit caring for patients with mental health and coexisting SUD diagnoses. In addition, they learned about alternative approaches to opioids through a rotation at a multidisciplinary pain management clinic at the Lewis A. Johnson Veterans' Affairs facility in Clarksburg, West Virginia.

Both the PH/GPM and the OEM residency programs made significant efforts in supporting health equity and addressing disparities. They are the only two preventive medicine residency programs in the entire Appalachian region, which extends from southern New York to northern Mississippi. All residency program activities seek to comprehensively address health equity in meeting the needs of a population almost entirely consisting of persons who live in rural areas and persons otherwise adversely affected by persistent poverty.

All residents in both programs were required to both attend and present in one session through the state-wide ECHO program. All residents also rotated through the occupational medicine clinic and actively participated in telehealth visits with patients.

Other areas of focus include COVID-19, vaccine response, contact tracing, and occupational safety, particularly with respect to health care workers and COVID-19 exposure.

One graduate from the PH/GPM residency program is a physician at Patient First in Germantown, Maryland. The residency graduates from the OEM residency program are physicians at Southeastern Integrated Medical in Gainesville, Florida, and at General Motors in Arlington, Texas.

V. Summary and Conclusions

The PMR Program supports HRSA's goals of fostering a health care workforce capable of addressing current and emerging needs, achieving health equity, and enhancing population health while ensuring underserved communities have access to quality health care and support services.

Preventive medicine physicians, through their clinical and public health preparation, provide essential leadership and expertise in many areas of health care, including integrating public health with primary care, providing leadership in governmental public health, and conducting outbreak investigations to prevent the spread of emerging diseases. They do this work in many settings that include federal health agencies, state and local health departments, health care systems, primary care practices, and universities.

This report described the efforts that HRSA's PMR Program undertook to increase the number of preventive medicine physicians who address public health needs and enhance the quality of their training. These efforts demonstrate how grantees advance key components of health service

delivery and strengthen the health care system's focus on prevention and health promotion. Such efforts increase interprofessional training and improve the quality of care by strengthening their collaboration with public health systems.

In FY 2023, HRSA supported two cohorts of PMR Program grantees. The period of performance for the 17 grantees initially awarded in 2018 ended on April 30, 2023. HRSA granted no-cost extensions to 12 of the 17 residency programs, and these residency programs were still active at the end of FY 2023. This report therefore included activities of these residency programs for the last 7 months of their initial period of performance and the first 5 months of their no-cost extension. The FY 2018 cohort responded to several health system challenges that were of key concern to HRSA during their period of performance, including COVID-19, SUD, SDOH, health inequities, and access to health care using telehealth. This report shared program activities undertaken in FY 2023 with respect to these priority areas. A new cohort commenced on May 1, 2023, and HRSA funded 19 grantees. For the FY 2023 cohort, in keeping with HRSA's strategic effort to better link workforce training programs to the delivery of health care in community-based settings, the agency incorporated a new emphasis on partnerships with FQHCs. The report highlighted the early efforts of grantees to forge these partnerships and develop rotations in FQHCs, along with their efforts to address SDOH and health equity.

The preventive medicine physicians who complete these residency programs contribute to HRSA's mission to improve health and reduce health disparities by increasing patients' access to quality services, strengthening the skilled health workforce, and engaging in innovative programs. Graduates practice in and lead local and state health departments and federal public health agencies, serve as medical directors in community health centers, conduct research and teach in academic settings, pursue fellowship training, and work as QI and medical informatics specialists. Residents and graduates work in both clinical and public health roles and provide leadership in efforts to improve population health, primary care, and health care systems. Preventive medicine residency training gives them a unique capacity to integrate clinical and public health approaches to addressing the nation's health problems and priorities.