Description of CDPH PMRP Public Health Priorities Track

The California Department of Public Health (CDPH) Preventive Medicine Residency Program (PMRP) is an ACGME-accredited, 2-year training program in Public Health and General Preventive Medicine (PH/GPM). In July 2019, CDPH PMRP launched a Public Health Priorities (PHP) Track using funding from the Health Resources and Services Administration. The PHP Track is offered alongside PMRP’s Traditional Track.

Need for PHP Track: The PHP Track stems from the need to graduate preventive medicine physicians who are well prepared to address California’s pressing public health needs as leaders in state and local public health agencies. California has a need for trained PH/GPM physicians to serve as health officers in its 61 local health departments. By law, every local health jurisdiction (58 counties and 3 cities) in California must appoint a physician health officer. These health officers serve as public health leaders and experts, shape public health practice and structure, and protect and promote the health and well-being of all people and communities. California also has a need for trained PH/GPM physicians to serve as public health medical officers and administrators in state-level programs at the California Departments of Public Health and Health Care Services.

In 2007, the Institute of Medicine (IOM) declared a critical shortage of public health physicians nationwide, calling for a doubling of the workforce at the time. In addition, the IOM noted that once the desired number of 20,000 public health physicians is reached, the system must have the capacity to train at least 1,350 new physicians each year to replace those leaving the workforce. The IOM recommended that PH/GPM residency programs graduate a minimum of 400 additional residents each year.ii Currently, approximately 100 PH/GPM physicians graduate annually.iii Prior to launching the PHP Track, CDPH PMRP was only able to train 2 PH/GPM physicians every 2 years, despite having ACGME accreditation for 8 trainees each year.

PHP Track Objectives:

1. Increase the number of PH/GPM residents the CDPH PMRP trains by six, with five graduates by the end of the five-year award.
2. Strengthen didactic, clinical, and practicum experiences for residents by expanding instruction in United States Department of Health and Human Services priorities of opioid abuse, mental health, and childhood obesity into the curriculum, while also increasing resident competencies in emergency preparedness.
3. Provide interprofessional training for CDPH PMRP residents and other primary care and community-based healthcare trainees or providers.
4. Continue the focus of the CDPH PMRP on underserved populations.
5. Increase diversity in the public health workforce by continuing to recruit residents from disadvantaged backgrounds and/or underrepresented minority populations.
6. Assure a well-trained public health physician workforce to maintain and optimize California’s public health infrastructure.

Key Program Elements: The CDPH PMRP PHP Track will utilize the following programmatic components and resources to achieve the aforementioned objectives:

A. Partnerships with University of California (UC), Davis School of Medicine, Department of Public Health Sciences, MPH programs at UC Berkeley, UC Davis, and UCLA, the UCSF Preventive Medicine Residency Program, and several local health departments and health officers.

B. Funding from HRSA, Centers for Disease Control and Prevention Preventive Health and Health Services Block Grant, and State General Fund to provide direct resident support (MPH tuition, stipends, and benefits) and program infrastructure.

C. Nationwide recruitment of qualified residency candidates through primary care residency programs, residency fairs, and online databases.

D. Resident participation in graduate courses leading to a Master of Public Health degree at UC Berkeley, Davis, or UCLA, including core and advanced PH/GPM courses and an elective addressing childhood obesity, mental health, opioid abuse, emergency preparedness, health disparities, and/or social determinants of health.
   a. Completion of an interprofessional MPH practicum project addressing one of the public health priority areas above.

E. Hands-on, practical interprofessional training in public health through longitudinal resident placement at a California local health department under the guidance and mentorship of an experienced local health officer.
   a. Completion of a major project addressing one of the public health priority areas listed in part D.

F. Resident experience in direct patient care addressing prevention and treatment of diseases of public health significance at community-based continuity and public health clinics.

G. A to-be-developed, evidence-based PHP curriculum addressing the areas listed in part D. Curriculum will be delivered through case-based learning complemented by presentations by expert speakers through the CDPH Preventive Medicine and Public Health Seminar Series and a resident journal club.

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i California Health and Safety Code Section 101005.
iii Personal communication, American College of Preventive Medicine, December 2018.