### Community Health and Advocacy Goals & Objectives

#### A. Culturally Effective Care

Pediatricians must demonstrate skills that result in effective care of children and families from all cultural backgrounds and from diverse communities.

**Graduates are expected to:**

1. Identify and manage cultural attributes, stereotypes, and biases they bring to clinical encounters

   - **Milestones-Based Sub-competencies:**
     - ICS1
     - ICS2
     - PBLI1
     - PROF6
     - PROF2
     - PROF5

   - **Rotation/Curricular Activity:**
     - General: any patient encounter
     - Specific: reflection at end of community rotation
     - Optional: refugee sessions in community advocacy track, refugee and global health tracks, choice of critical incident

   - **Assessment Method/Demonstration of Competence:**
     - Faculty observation/eval
     - Community rotation reflection/debrief
     - 360 eval
     - Critical incident/PD meeting

   - **Level of Competence to be Demonstrated:**
     - Knows
     - Knows how
     - Shows how
     - Does

2. Integrate into clinical encounters an understanding of diversity (e.g. family composition, gender, age, culture, race, religion, disabilities, sexual orientation, and cultural beliefs and practices) by recognizing and respecting families’ cultural backgrounds.

   - **Milestones-Based Sub-competencies:**
     - ICS1
     - ICS2
     - SBP1
     - PBLI2
     - PBLI8
     - PBLI9
     - PROF5

   - **Rotation/Curricular Activity:**
     - General: any patient encounter
     - Specific: reflection at end of community rotation; DBP rotation; Adolescent rotation; CAM rotation; continuity clinic
     - Optional: camps (e.g. DM, disability, etc), advocacy track (refugee sessions), refugee & global health tracks, choice of critical incident

   - **Assessment Method/Demonstration of Competence:**
     - Faculty observation/eval
     - 360 eval
     - Community rotation reflection/debrief
     - Critical incident/PD meeting

   - **Level of Competence to be Demonstrated:**
     - Knows
     - Knows how
     - Shows how
     - Does

3. Identify children, youth, or families who have limited English language Proficiency and demonstrate the ability to use professional interpreters and written materials in the family’s primary language to maximize communication.

   - **Milestones-Based Sub-competencies:**
     - ICS1
     - SBP1
     - PBLI7
     - PBLI8
     - PROF5

   - **Rotation/Curricular Activity:**
     - General: patient encounters (ED, inpt, outpt, etc.)
     - Optional: advocacy track (refugee sessions), refugee & global health tracks, choice of critical incident

   - **Assessment Method/Demonstration of Competence:**
     - Faculty observation/eval
     - 360 eval
     - Critical incident/PD meeting

   - **Level of Competence to be Demonstrated:**
     - Knows
     - Knows how
     - Shows how
     - Does
4. Identify, analyze, and describe health disparities, as well as organizational assets and barriers to delivering culturally effective services.

<table>
<thead>
<tr>
<th>SBP2</th>
<th>PBLI3</th>
<th>PROF2</th>
<th>ICS3</th>
<th>ICS4</th>
<th>ICS5</th>
<th>SBP1</th>
<th>PROF5</th>
<th>Specific: community rotation (bus tour, CBO sites), R2 Skills Block</th>
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<td></td>
<td>Optional: choice of QI project, advocacy track including project, refugee &amp; global health tracks, choice of critical incident</td>
</tr>
</tbody>
</table>

| Faculty observation/eval | Community rotation reflection/debrief | QI project | Critical incident/PD meeting | Advocacy/global health project |

| Knows | 
| Does (track) |

5. Describe and outline quality improvement activities to achieve health care equity.

<table>
<thead>
<tr>
<th>SBP2</th>
<th>PBLI3</th>
<th>ICS3</th>
<th>ICS4</th>
<th>ICS5</th>
<th>PROF5</th>
<th>Specific: community rotation (community health project), noon conference talks, Dyson Day Grand Rounds, R2 Skills Block</th>
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<tr>
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<td></td>
<td></td>
<td></td>
<td>Optional: choice of QI project, advocacy &amp; global health track projects</td>
</tr>
</tbody>
</table>

| Faculty observation/eval | Community health project | QI project | Advocacy/global health project |

| Does |

| Knows | 
| Does (track) |
### B. Child Advocacy

Recognizing their unique roles, pediatricians should advocate for the well-being of patients, families, and communities. They must develop advocacy skills to address relevant individual, community, and population health issues.

**Graduates are expected to:**

1. Identify and discuss individual, family, and community (local, state and/or national) concerns that impact children’s health.
   - **Milestones-Based Sub-competencies:**
     - Reporting Currently Required: ICS2, SBP2, PBLI2, PROF2
     - Reporting Not Yet Required: ICS1, ICS3, SBP7
   - **Rotation/ Curricular Activity:**
     - General: any patient encounter
     - Specific: community rotation, noon conference, Dyson Day Grand Rounds
     - Optional: advocacy track, choice of critical incident
   - **Assessment Method/ Demonstration of Competence:**
     - Faculty observation/eval
     - 360 eval
     - Community rotation reflection/debrief
   - Level of Competence to be Demonstrated: Does

2. Formulate an attainable plan of action in response to a community health need.
   - **Milestones-Based Sub-competencies:**
     - Reporting Currently Required: ICS1, SBP2, PBLI2, PROF2
     - Reporting Not Yet Required: ICS3, ICS4, SBP1, SBP7, PBLI2
   - **Rotation/ Curricular Activity:**
     - Specific: community rotation (community health project)
     - Optional: advocacy & global health track projects, refugee track
   - **Assessment Method/ Demonstration of Competence:**
     - Faculty observation/eval
     - Community rotation project
     - Advocacy/global health project
   - Level of Competence to be Demonstrated: Shows how (track)

3. Identify and describe resources to effectively advocate for the well-being of patients, families, and communities.
   - **Milestones-Based Sub-competencies:**
     - Reporting Currently Required: ICS1, SBP1, SBP2, PROF4, PROF6
     - Reporting Not Yet Required: ICS3, SBP7, PPD6
   - **Rotation/ Curricular Activity:**
     - General: any patient encounter
     - Specific: community rotation, subspecialty & H/O inpt rotations, subspecialty electives
     - Optional: camps (eg. DM, disability, etc), advocacy & global health track projects, refugee track
   - **Assessment Method/ Demonstration of Competence:**
     - Faculty observation/eval
     - 360 eval
     - Advocacy/global health project
   - Level of Competence to be Demonstrated: Does

4. Communicate effectively with community groups and the media.
   - **Milestones-Based Sub-competencies:**
     - Reporting Currently Required: ICS1, ICS2, PROF2
     - Reporting Not Yet Required: ICS3, ICS4, PBLI8, PBLI9
   - **Rotation/ Curricular Activity:**
     - Specific: community rotation (community groups), DBP rotation
     - Optional: community rotation (media), advocacy track (public speaking lecture, talking with the media lecture, project)
   - **Assessment Method/ Demonstration of Competence:**
     - Faculty observation/eval
     - 360 eval
     - Advocacy/global health project
   - Level of Competence to be Demonstrated: Does
5. Find and use evidence and data to communicate, educate, affect attitude change, and/or obtain funding to achieve specific health outcomes.

<table>
<thead>
<tr>
<th>ICS1</th>
<th>SBP2</th>
<th>PROF2</th>
<th>Specific: EBM summer series, Journal Club, educational prescriptions, R2 Skills Block</th>
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<tbody>
<tr>
<td></td>
<td>ICS4</td>
<td>SBP7</td>
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<td></td>
<td>PBLI8</td>
<td>PBLI9</td>
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<td></td>
<td>PROF2</td>
<td>PPD6</td>
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<tr>
<td>Does</td>
<td>Faculty observation/eval</td>
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<td></td>
<td>Educational prescriptions</td>
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<td></td>
<td>Advocacy/global health project</td>
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<td></td>
<td>QI project</td>
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</table>

6. Describe and discuss key features of the legislative process, and identify and communicate with key legislators, community leaders, child advocates, and/or agency administrators about child and family health concerns.

<table>
<thead>
<tr>
<th>ICS1</th>
<th>ICS2</th>
<th>SBP2</th>
<th>PROF2</th>
<th>Specific: community rotation (legislative advocacy lecture, choice of community health project)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ICS3</td>
<td>PROF2</td>
<td>SBP7</td>
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<td>PBLI8</td>
<td>PBLI9</td>
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<td>PPD6</td>
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<tr>
<td>Does</td>
<td>Faculty observation/eval</td>
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<td></td>
<td>Community health project</td>
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<td></td>
<td>Advocacy/global health project</td>
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Knows how
## C. Medical Home

Pediatricians must be able to identify and/or provide a medical home for all children and families under their care. As defined by the American Academy of Pediatrics, medical home is a model for delivering primary care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective.

### Graduates are expected to:

<table>
<thead>
<tr>
<th>Milestones-Based Sub-competencies</th>
<th>Rotation/Curricular Activity</th>
<th>Assessment Method/Demonstration of Competence</th>
<th>Level of Competence to be Demonstrated</th>
</tr>
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<tbody>
<tr>
<td>Reporting Currently Required</td>
<td>Reporting Not Yet Required</td>
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</tr>
<tr>
<td><strong>1.</strong> Recognize the family as the principal caregiver and expert in their child’s care, the center of strength and support for the child.</td>
<td>ICS1 ICS2 SBP2 PBL1 PBL2 PROF1</td>
<td>PROF2</td>
<td>Specific: continuity clinic Optional: primary care track, choice of critical incident</td>
</tr>
<tr>
<td>2. Identify state and national resources such as Medicaid and WIC, as well as relevant state and local programs and resources that support families and child development.</td>
<td>PROF2</td>
<td>ICS3 PBL1 PBL10</td>
<td>General: any patient encounter, but especially continuity clinic, community rotation, DBP rotation, Adolescent rotation, subspecialty electives, inpatient rotations, NBN rotation, NICU, PICU</td>
</tr>
<tr>
<td>3. Partner with families and youth to access resources (including health care financing), and coordinate care to meet the special needs of patients with acute and chronic conditions, at home and in the school setting.</td>
<td>ICS1 ICS2 SBP1 SBP3 PROF2</td>
<td>ICS3 ICS4 ICS5 PBL19</td>
<td>General: any patient encounter, but especially continuity clinic, community rotation, DBP rotation, Adolescent rotation, subspecialty electives, inpatient rotations, NBN rotation, NICU, PICU Optional: choice of critical incident</td>
</tr>
<tr>
<td>4. Collaborate with families and communities to help navigate the health care system, including transition to adult care.</td>
<td>ICS1 SBP1 PROF2 PROF6</td>
<td>ICS3 ICS4 ICS5 SBP1 PBL19 PPD6</td>
<td>General: any patient encounter but especially DBP rotation, adolescent rotation, continuity clinic Optional: primary care track, choice of critical incident</td>
</tr>
</tbody>
</table>
5. Describe and outline quality improvement activities that result in improved access, coordination, continuity, and outcomes of care.

| SBP2 | PBLI3 | ICS3 ICS4 ICS5 SBP1 SBP7 PPD6 | Specific: community rotation (community health project), noon conference talks, Dyson Day Grand Rounds, R2 Skills Block, QI project Optional: advocacy track project | Faculty observation/eval Community health project QI project | Does |

6. Identify and access practice tools that support the provision of a medical home, e.g. electronic health records, coding, and accreditation standards (such as NCQA).

| SBP1 | PBLI3 | ICS6 SBP3 PBLI7 | General: all patient encounters Specific: continuity clinic including didactics and patient encounters, lecture by compliance officer Optional: primary care track | Faculty observation/eval Billing/coding data | Does |
## D. Special Populations

Pediatricians must be competent in the care of children in special populations, including (but not limited to) children and youth in substitute care, homeless children and youth, children and youth with chronic conditions, immigrants and refugees, and children and youth who are adopted.

Graduates are expected to:

1. Identify youth at risk for poor health outcomes and/or with special health care needs; identify the special populations that exist in a community.

   - Reporting Currently Required
   - Reporting Not Yet Required

   | ICS1 | ICS2 | PBL1 | PBL2 | PROF1 | PROF2 | Specific: DBP rotation, community rotation, subspecialty electives, Subspecialty inpatient rotation, H/O rotation, adolescent rotation (Threshold clinic) | Faculty observation/eval | Community rotation reflection/debrief | Community health project | Critical incident/PD meeting | Does |

2. Screen for risks specific to defined special populations.

   | ICS1 | ICS2 | PBL1 | PROF5 | Specific: DBP rotation, adolescent rotation, subspecialty electives, H/O rotation | Faculty observation/eval | Does |

3. Demonstrate a working knowledge of psychosocial issues, legal protections, policies, and services provided for these populations at the local, state, and federal levels.

   | ICS2 | PBL1 | PBL2 | PROF2 | ICS4 | SBP1 | PROF5 | Specific: DBP rotation, adolescent rotation, subspecialty electives, H/O rotation | Faculty observation/eval | Critical incident/PD meeting | Does |
**E. Pediatrician as a Consultant/Collaborative Leader/Partner**

Pediatricians must be able to act as child health consultants in their communities. Using collaborative skills, they must be able to work with multidisciplinary teams, community members, educators, and representatives from community organizations and legislative bodies.

Graduates are expected to:

1. Identify potential opportunities to serve as a health consultant in the community where he/she practices pediatrics and demonstrate the ability to communicate effectively with a variety of audiences within that community.

   - **Milestones-Based Sub-competencies**
     - ICS1
     - PBLI1
     - PROF2
   - ICS3
   - ICS4
   - ICS5
   - SBP7
   - PBLI9
   - PPD6

   - **As of September 2014**
     - Reporting Currently Required
     - Reporting Not Yet Required

   - **Rotation/Curricular Activity**
     - Specific: community rotation, DBP rotation, adolescent rotation
     - Optional: advocacy & global health track projects

   - **Assessment Method/Demonstration of Competence**
     - Faculty observation/eval
     - Community health project
     - Advocacy/global health project

   - **Level of Competence to be Demonstrated**
     - Knows
     - Knows how
     - Shows how
     - Does

2. Describe and discuss the essential qualities of community partnerships including shared vision, the use of complementary strengths, the willingness to collaborate, and the development of agreed-on boundaries.

   - **Milestones-Based Sub-competencies**
     - ICS1
     - PBLI2
     - PROF1
     - PROF2
   - ICS2
   - ICS3
   - ICS4
   - PBLI5
   - PBLI9
   - PPD6

   - **As of September 2014**
     - Reporting Currently Required
     - Reporting Not Yet Required

   - **Rotation/Curricular Activity**
     - Specific: community rotation, DBP rotation, H/O & subspecialty rotation, palliative care elective, subspecialty electives, illness clinic, continuity clinic
     - Optional: advocacy & global health track projects, camps

   - **Assessment Method/Demonstration of Competence**
     - Faculty observation/eval
     - Advocacy/global health project

   - **Level of Competence to be Demonstrated**
     - Knows
     - Knows how
     - Shows how
     - Does (track)

3. Define and discuss principles of consensus building, including fostering inclusiveness, identifying mutual goals, setting measurable outcomes, using effective problem-solving strategies, and negotiating towards consensus.

   - **Milestones-Based Sub-competencies**
     - ICS1
     - ICS2
     - PBLI2
     - PROF1
     - PROF2
   - ICS3
   - ICS4
   - PBLI2
   - PPD6

   - **As of September 2014**
     - Reporting Currently Required
     - Reporting Not Yet Required

   - **Rotation/Curricular Activity**
     - Specific: community rotation, QI project
     - Optional: advocacy & global health track projects

   - **Assessment Method/Demonstration of Competence**
     - Faculty observation/eval
     - QI project
     - Advocacy/global health project

   - **Level of Competence to be Demonstrated**
     - Knows
     - Knows how
     - Shows how
     - Does (track)
**F. Educational and Child Care Settings**

Pediatricians must be able to interact with staff in schools and child care settings to improve the health and educational environments for children.

Graduates are expected to:

<table>
<thead>
<tr>
<th>Milestones-Based Sub-competencies</th>
<th>Rotation/ Curricular Activity</th>
<th>Assessment Method/ Demonstration of Competence</th>
<th>Level of Competence to be Demonstrated</th>
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<td></td>
<td>As of September 2014</td>
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<tr>
<td></td>
<td>Reporting Currently Required</td>
<td>Reporting Not Yet Required</td>
<td></td>
</tr>
<tr>
<td>1. Promote the children’s health and success in school by assessing children for school readiness, making appropriate referrals to relevant community services, and communicating and collaborating with school nurses, teachers, and administration.</td>
<td>ICS1 SBP2</td>
<td>ICS3 ICS4 SBP1 PBLI9 PPD6 SBP7</td>
<td>Specific: continuity clinic, DBP rotation Optional: primary care track</td>
</tr>
<tr>
<td>2. Explain how to work with families, educational, and child care institutions to help provide optimal learning environments for all children. This includes knowledge about high quality early education, the Individuals with Disabilities Education Act (IDEA), participation in Individualized Education Plans (IEP) and Individual Family Service Plans (IFSP), and provision of medications and/or medical care in school settings.</td>
<td>ICS1 SBP1 SBP3 PBLI1 PROF2</td>
<td>ICS3 ICS4 PBLI9 PPD6</td>
<td>Specific: continuity clinic, DBP rotation, community rotation Optional: primary care track</td>
</tr>
<tr>
<td>3. Describe and discuss how a physician can collaborate to improve the physical, social, and health environment in schools and child care settings.</td>
<td>ICS1 ICS2 SBP2 SBP3 PBLI2 PROF2</td>
<td>ICS3 ICS4 SBP1 PPD6 SBP7</td>
<td>Specific: community rotation, DBP rotation, continuity clinic Optional: advocacy track project, primary care track</td>
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</tbody>
</table>
### Community Health and Advocacy Milestones Profile (CHAMP) Map

#### Community Health and Advocacy Goals & Objectives

**G. Public Health and Prevention**

Pediatricians must be able to practice from a population–based perspective and understand relationships between individual, family, and community-level health determinants that affect children and families in the communities they serve. Pediatricians must be able to apply community assets and resources to prevent illness, injury, and death.

**Graduates are expected to:**

<table>
<thead>
<tr>
<th>Milestones-Based Sub-competencies</th>
<th>Rotation/ Curricular Activity</th>
<th>Assessment Method/ Demonstration of Competence</th>
<th>Level of Competence to be Demonstrated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Describe and discuss modifiable risk factors and the evolving epidemiology of pediatric illnesses and their impact on child health and well-being and child health equity.</strong></td>
<td>PBL1, PBL2, PROF2</td>
<td>Specific: community rotation, noon conference curriculum, Dyson Day Grand Rounds</td>
<td>Faculty observation/evaluation, Community rotation reflection/debrief, Advocacy/global health project</td>
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<tr>
<td></td>
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<td>Optional: advocacy track, global health track, refugee track</td>
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<tr>
<td><strong>2. Identify and discuss child health issues at the national, state, and local levels by accessing and using vital statistics, surveillance data, community asset mapping, and other sources of data.</strong></td>
<td>PROF2, ICS3, ICS4, SBP7, PBLI6</td>
<td>Specific: community rotation, Dyson Day Grand Rounds</td>
<td>Faculty observation/evaluation, Community health project, Advocacy/global health project</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Optional: advocacy track, global health track, refugee track</td>
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<tr>
<td><strong>3. Identify measurable outcomes for assessing progress in addressing child health issues, including health equity.</strong></td>
<td>PBL3, ICS3, ICS4, PLBI2</td>
<td>Specific: community rotation, Dyson Day Grand Rounds</td>
<td>Faculty observation/evaluation, Advocacy/global health project</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Optional: advocacy track, global health track, refugee track</td>
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</tr>
<tr>
<td><strong>4. Identify and describe effective public health interventions at the individual, community, and national level, e.g. screening &amp; prevention programs aimed at modifying risk factors for disease or adverse health outcomes, and case identification and tracking.</strong></td>
<td>PBL1, PBL3, PROF2, ICS3, ICS4, SBP7, PPD6</td>
<td>Specific: community rotation, Dyson Day Grand Rounds, continuity clinic, outpatient rotation</td>
<td>Faculty observation/evaluation, Advocacy/global health project</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Optional: advocacy track, global health track, refugee track, primary care track</td>
<td></td>
</tr>
<tr>
<td><strong>5. Describe and discuss the individual practitioner’s role within the greater public health infrastructure, including early identification, notification, mandated reporting, and emergency planning/response recovery.</strong></td>
<td>SBP3, PROF1, PROF2, ICS3, ICS4, PBLI8, PBLI9, PROF2, PPD6</td>
<td>Specific: community rotation, ED rotation, illness clinic, continuity clinic, inpatient rotations</td>
<td>Faculty observation/evaluation, Critical incident/PD meeting, Advocacy/global health project</td>
</tr>
</tbody>
</table>
### Community Health and Advocacy Goals & Objectives

#### H. Inquiry and Application

Pediatricians should be capable of pursuing inquiry that advances the health of children, families, and communities.

Graduates are expected to:

1. **Assess and apply evidence-based practices for children and families relevant to the needs and resources of their communities.**

   - **Milestones-Based Sub-competencies:**
     - PBLI2
     - ICS4
     - SBP7
     - PBLI6

   - **Rotation/Curricular Activity:**
     - General: any patient encounter
     - Specific: EBM summer series, Journal Club, educational prescriptions, community rotation
     - Optional: advocacy & global health projects

   - **Assessment Method/Demonstration of Competence:**
     - Faculty observation/eval
     - Educational prescriptions
     - Community health project
     - Advocacy/global health project

   - **Level of Competence to be Demonstrated: Does**

2. **Discuss how quality improvement assessments and methodology can be integrated into interactions with community organizations serving children and families.**

   - **Milestones-Based Sub-competencies:**
     - ICS1
     - SBP2
     - PBLI3
     - ICS4

   - **Rotation/Curricular Activity:**
     - Specific: community rotation (community health project), continuity clinic
     - Optional: advocacy & global health projects, refugee track, choice of QI project

   - **Assessment Method/Demonstration of Competence:**
     - Faculty observation/eval
     - Community health project
     - Advocacy/global health project
     - QI project

   - **Level of Competence to be Demonstrated: Knows how (track)**

3. **Describe and discuss the ethical issues that relate to research and scholarship in communities.**

   - **Milestones-Based Sub-competencies:**
     - ICS2
     - PBLI2
     - ICS4

   - **Rotation/Curricular Activity:**
     - Specific: QI project
     - Optional: advocacy & global health track (IRB certification, lectures, project), research track, choice of critical incident

   - **Assessment Method/Demonstration of Competence:**
     - QI project
     - Critical incident/PD meeting
     - Advocacy/global health project
     - Research project

   - **Level of Competence to be Demonstrated: Knows (track)**

4. **Describe and discuss different methodologies of research in communities, including community-based participatory research.**

   - **Milestones-Based Sub-competencies:**
     - PBLI1
     - PBLI3
     - ICS4
     - PBLI6

   - **Rotation/Curricular Activity:**
     - Specific: EBM summer series, Journal Club, educational prescriptions
     - Optional: advocacy & global health track projects, research track

   - **Assessment Method/Demonstration of Competence:**
     - Educational prescriptions
     - Advocacy/global health project
     - Research project

   - **Level of Competence to be Demonstrated: Knows how (track)**