
The Mutual Missions of the National Health Service Corps and State-Supported Medical Schools — the Alabama Story

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IN THE LATE 1960s, the people of Alabama had the opportunity to articulate the major problems that would face the State in the decade of the 1970s. A statewide poll of Alabama citizens identified the availability of health care as a major issue. This issue was particularly acute in the small towns and rural areas. As one response to this expressed need, the University of Alabama's College of Community Health Sciences on the Tuscaloosa campus was established by an act of the legislature in 1971.

The mandate of the College of Community Health Sciences is the identification and solution of health problems of Alabama's communities, particularly the rural areas and small towns. This mission has been translated into education, service, and research programs. Educational programs include the family medicine residency with 36 positions in Tuscaloosa and 12 in Selma, the community medicine residency with 6 positions in Tuscaloosa, clinical education for undergraduates cooperatively with the University of Alabama

School of Medicine in Birmingham for a selected number of third and fourth year medical students, and programs in allied health education and continuing education for health professionals.

An obvious problem for Alabama is the unavailability of health manpower in many communities. Alabama ranks 48th in the nation in the ratio of primary care physicians to population and has a proportionately larger rural population than most other States in the union. For this reason, the College of Community Health Sciences has taken responsibility for the placement of health manpower in rural areas. This goal and concern is, of course, congruent with the mission of the National Health Service Corps (NHSC). It seemed appropriate, therefore, for the college to develop an alliance with the Corps to accomplish the mutual missions.

The successful placement and retention of medical personnel in underserved areas is contingent on a number of training and support factors that span the entire continuum of medical education from premedical college years, through medical school, residency, the beginning of practice, and continuing education during the years beyond. The college has attempted to intervene at a number of points on the continuum with programs and activities which relate to preparation for and service in the NHSC.

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Prebaccalaureate Activities

During prebaccalaureate and premedical education, the College of Community Health Sciences has developed coursework for University of Alabama undergraduate students which seeks to improve their knowledge of and motivation toward community-responsive practice in underserved areas. Two such courses are "Introduction to Health Professions" and "Introduction to Clinical Medicine." Both are open to undergraduate prehealth professions students.

The college has also served as the supporting arm for the Student Coalition for Community Health, a group of undergraduates involved in the development of an infrastructure for health care in Alabama's isolated rural communities. In addition, the college has launched a program to familiarize the university's premedical students with the National Health Service Corps Scholarship Program and to encourage them to consider it when their career goals include serving in a physician-short area.

Working with Medical School Students

For students accepted into medical school the college has a three-phase program designed to facilitate interaction among the National Health Service Corps scholarship recipients in Alabama's two medical schools.

The first phase of this program is the Saturday Seminar, a 1-day meeting, held approximately every 6 weeks in Tuscaloosa, to which all 40 medical scholarship recipients in Alabama are invited. The State's other medical school is in Mobile, at the University of South Alabama. These seminars focus on primary care skills and the kinds of attitudes and knowledge that are most necessary to develop a community-responsive practice in an underserved area. At these seminars, future NHSC physicians have the opportunity to meet each other and begin to develop the informal relationships that could prove a valuable source of support as they choose to practice in Alabama's rural and underserved areas. In addition, scholarship recipients have the opportunity to become familiar with those programs and facilities of the college that will benefit them after they enter practice.

The second phase of the program is the college's commitment to support the American Medical Student Association's efforts to place students with National Health Service Corps preceptors in rural communities for periods of 4 to 8 weeks. Through its department of community medicine, the college offers elective academic credit for students placed in Corps sites with which the university has an ongoing relationship. Departmental faculty make field visits to assist the community and the student in this academic experience.

In the third phase, the college's Office of Physician and Health Professions Placement contacts the scholarship students to provide information about the support and assistance the college gives the Corps physicians in Alabama. A questionnaire is distributed to these recipients in an attempt to identify a student's placement potential early and to familiarize the student with the placement services offered through the college.

Finally, another questionnaire is sent to all scholarship recipients in the State. Its purpose is to explore their attitudes toward Corps assignments, determine areas of confusion about the Corps, and assess their needs for information and certain skills. Responses to this survey enable the college to facilitate the Corps members' adjustment to practice in underserved areas.

As an initial step in facilitating this adjustment, in October 1979 the Office of Physician and Health Professions Placement hosted two workshops for the State's scholarship recipients and their spouses. The agendas for these meetings were based on the survey findings, and the programs were designed to respond to the common concerns expressed by the recipients. Ample time for individual questions and answers was also provided in both agendas. Both workshops were evaluated as "excellent" by the students, and subsequently, development of a statewide National Health Service Corps advocacy network has begun.

Aid After Graduation

In graduate medical education, the college's efforts have focused on its family medicine residency programs in Alabama. Preference is given to recipients of National Health Service Corps scholarships in selecting residents, and priority is placed on arranging for supervised practice experience in National Health Service Corps sites. In 1979 there were 32 Corps sites in the State.

When the time approaches for the scholarship recipients to decide on practice locations, the college's Office of Physician and Health Professions Placement works through the Corps to publicize practice opportunities in Alabama and to recruit the future Corps assignees to these sites. A brochure, distributed to potential Alabama Corps assignees, describes support services available through the college to persons practicing in rural Alabama. A community information data base system, developed by the college, supplements materials about Alabama sites that are otherwise available through the National Health Service Corps so that potential assignees can make a more informed decision about the opportunities in Alabama's rural areas.

When a National Health Service Corps physician is placed in a rural Alabama community, he or she may then use several services offered by the college. They include continuing medical education opportunities in Tuscaloosa, as well as on-site; the opportunity for linkage with specialists for referrals as well as for specialty service clinics and consultations in the National Health Service Corps practice itself; and the opportunity to participate in teaching medical students, allied health students, and house staff, both in the Corps communities and, through appointment to the faculty, on the Tuscaloosa campus. In addition, the college staff offers technical assistance to Corps members as they develop programs of community health care.

In an effort to introduce Alabama Corps members and their spouses to the existing services mentioned previously, and to obtain their input in identifying other specific areas where the college's involvement would be beneficial to them, the college held a 2-day retreat for physicians, nurse practitioners, and spouses last November. An added benefit derived from this activity was the opportunity for Corps members and spouses to get acquainted with each other and establish professional linkages to benefit their work in rural areas.

State-supported medical schools have a vested interest in the National Health Service Corps. These institutions are expected to provide trained medical manpower to their State, and they are now being asked to address the problems of physician specialty and geographic maldistribution. As pressure to address these points increases, it seems useful and logical for medical education programs to form linkages with the Corps, a program that addresses the same problems of specialty and geographic maldistribution, but uses mechanisms of placement and support instead of education.

Potentially, the National Health Service Corps also represents a substantial field force for carrying out extramural medical education. In Alabama, Corps physicians have usually been well-trained, excellent clinicians and highly motivated teachers of primary care. Many of them can serve as perceptors for predoc-toral as well as postdoctoral physicians-in-training.

Finally, since the National Health Service Corps, through its scholarship program, now pays the tuition of an increasing pool of medical students, thereby indirectly supporting a portion of the costs of educating them, the Corps must be seen as a new constituent of medical education, a constituent with a mission that compels the leaders of medical education programs to respond.