



CENTER FOR FAMILY
AND COMMUNITY MEDICINE

2009-2010 Annual Report



COLUMBIA UNIVERSITY
MEDICAL CENTER



NewYork-Presbyterian

The University Hospital of Columbia and Cornell



Our Mission

The Center for Family and Community Medicine seeks to enhance the health of our community through education, service, research, and academic-community partnerships.



The Center for Family and Community Medicine (CFCM) is located at the Columbia University Medical Center in the Washington Heights region of Manhattan.

Columbia University Medical Center

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Letter from the Director

Dear Colleagues and Friends,

I am delighted to report that the Center for Family and Community Medicine (CFCM) at Columbia University Medical Center (CUMC) has taken significant steps forward over the past year. Building on new initiatives that began in 2007 with merging two Centers, Family Medicine and Community Health Partnerships, our overall development, the community-based research program, educational initiatives and campus profile has been enhanced in 2009.



Upon return from my Robert Wood Johnson Foundation Health Policy Fellowship in which I worked to re-write Title VII legislation in collaboration with then Senator Hillary Clinton, the Center has charted a new course of action that will help better integrate us into the University and the Hospital. Collaborations with faculty from several departments and across school boundaries are providing new opportunities for faculty research, and a platform to strengthen our already excellent residency and medical school training programs. Recent faculty recruits have added a great deal of experience and leadership to our dedicated and talented faculty to assist us in our endeavors. The successful recruitment of these academicians is a good sign that the CFCM is moving forward.

Our faculty and residents are committed to providing quality services for the community, across the care spectrum in both ambulatory and hospital settings. The residency program received full approval for five years by the Accreditation Council for Graduate Medical Education, which is the highest level achievable. The Community Oriented Primary Care program continues to be the hallmark for the residency program and has been extended to a longitudinal experience throughout the three years of the residency program.

The progress of the past year is bringing us closer to our long-range goal of moving from a Center designation to a Department in the University. We know that we still have miles to go but we are continuing to build toward excellence in patient care, education and research. The appointment of an Advisory Committee for the Center will assist us in our quest.

I wish to thank all of our faculty members, residents and colleagues throughout the Hospital and the University for encouraging and supporting us in meeting our mission. I especially wish to thank Dr. Robert Lewy, who stepped in as Interim Director of the CFCM while I pursued my RWJF Fellowship in Washington D.C. Dr. Lewy will be missed as he retires in 2010 after 35 years of service at CUMC.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Kathleen Klink'.

Kathleen Klink, MD
Director

The Center for Family and Community Medicine

The Center for Family and Community Medicine (CFCM) was created in 2007-08 by merging two Columbia University Centers: Family Medicine and Community Health Partnerships. Each brought distinct aspects to complement the other. The Center for Family Medicine had been built upon clinical services, especially for underserved and vulnerable populations, and educational initiatives focused on primary care. The Center for Community Health Partnerships' mission was to link the academic medical center with the underserved northern Manhattan community through improved communication, access to resources, and development of a diverse healthcare workforce.

The Center for Family Medicine



The Family Medicine program was established mainly as an initiative of (then) Presbyterian Hospital in 1994. Assisted by funds from Health Resources Services Administration (HRSA) grants, the development of a clinical practice and the family medicine residency program occupied most of the efforts during the first decade. One of the Ambulatory Care Network sites was renovated for the residency training site. By 1996, six first year residents began rotations, mainly at the (then) Allen Pavilion. In 1998 an in-patient service was developed. Family Medicine rotations and curriculum was built in collaboration with existing services and personnel in many departments at the Columbia University Medical Center. The faculty and the practice have grown to include 19 full-time and 29 part-time faculty, a nurse practitioner, 6 administrative

staff and 18 residents (six per year enrolled in the three year residency training program). We celebrated the 10th anniversary of graduations from the residency program in 2009.

The Center for Family Medicine was created in the University in 1998 to begin to establish an academic home for family medicine. Through HRSA funding, some Center activities, including faculty development and residency education have been supported. Teaching efforts grew from hosting first year clinical clerks and a peripheral role on the primary care clerkship, to Family Medicine's major role in medical student education which includes co-directing two required courses: a pre-clinical (physical diagnosis) and a clinical (primary care) rotation, both in conjunction with the Department of Medicine.

The year 2007-08 year was a turning point for Family Medicine due to three events: the merger with the Columbia University Center for Community Health Partnerships, (CCHP) to become the Center for Family and Community Medicine (CFCM), the Director, Dr. Klink's leave to pursue a Robert Wood Johnson Foundation health policy fellowship where she held a position in the U.S. Senate in the office of Hillary Rodham Clinton; and the recruitment of several senior faculty members that have led to an acceleration of research, academic and financial development and even greater leadership potential in the CUMC and in the field of family medicine nationally.

The Center for Community Health Partnerships

The Center for Community Health Partnerships (CCHP) was established in the year 2000 with the purpose of continuing to develop programs between CUMC faculty and the northern Manhattan communities. The cornerstone program for the CCHP was a Community Voices Initiative grant that established the Northern Manhattan Community Voices Collaborative (NMCVC). One of 13 national sites funded by the W.K. Kellogg Foundation, the NMCVC was a collaborative partner-

ship between community-based organizations and a wide network of faculty from the health sciences schools and the NewYork-Presbyterian Hospital, with the common goal of improving the health of residents. The experiences, accomplishments and challenges of the program, which operated for over a decade, are described in a book entitled *Mobilizing the Community for Better Health: What the Rest of America Can Learn from Northern Manhattan*, to be published by Columbia University Press in the fall of 2010.

Prior to its merger with the Center for Family Medicine in 2007, the CCHP was home to a number of major research initiatives and national demonstration programs. For example, CCHP received a five-year National Institutes of Health (NIH) project EXPORT grant to assist established researchers in adapting their findings to improve the health of the community in areas such as diabetes and mental health. Further, in collaboration with the College of Physicians & Surgeons and the College of Dental Medicine, CCHP established and operated a primary care facility in Harlem. The Thelma C. Davidson Adair Center, named for a prominent Harlem resident, brought a unique perspective by incorporating mental health care into primary care with a grant from the Fan Fox/Leslie R. Samuels Foundation. In the summer of 2009, The Adair Center became an extension clinic of a Federally Qualified Health Center known as The Ryan Center. CCHP funded, through grants from the RWJF and The California Endowment, 23 dental schools to add service learning/cultural competence training and to increase enrollments of underrepresented minority students. CCHP's mission revolved around developing networks of collaborators who wished to focus efforts on reducing health disparities. In fact, CCHP organized the first Columbia University Research Symposium in 2006 on Understanding Fundamental Disparities in Health, a Symposium that the then Provost Alan Brinkley called "unprecedented" at Columbia.



Allan Formicola, D.D.S., M.S. led the Center for Community Health Partnerships in collaboration with **Robert Lewy, M.D., M.P.H.** The legacy of the work begun under CCHP, and the many lessons learned there have passed on to the Center for Family and Community Medicine and continue today through the unique perspective of primary care.

Allan Formicola, D.D.S., M.S.

Patient Care

The Center for Family and Community Medicine strives to enhance the health of the community and provide quality medical service, especially in underserved urban areas. Building on the Family Medicine precepts of caring for patients regardless of their age or gender in the context of family and community, the goal is to provide comprehensive coordinated and continuous care for patients across multiple settings including the ambulatory, hospital and home. Applying the generalist approach to care, behavioral and cultural issues are key components of communication with patients at each encounter.

Much of our care takes place at two Manhattan locations:

A NewYork-Presbyterian Hospital Ambulatory Care Network site, Denny Farrell Family Health Center is the hub of patient care for CFCM, with over 26,000 patient visits last year. Located at 610 West 158th Street (one block west

of Broadway), the Health Center serves the health needs of families in Washington Heights, Inwood, Harlem and the Bronx, with the majority of our patients receiving their healthcare benefits through Medicaid. Dr. Beena Jani assumed the role of medical director in 2009.



Established in 1994 as part of the NewYork-Presbyterian Hospital Ambulatory Care Network, the Farrell Family Health Center provides comprehensive care for adults and children alike and offers services in primary care including women’s health and maternity care. Included in services offered are: nutritional counseling, psychological and behavioral support and care, dermatological procedures, HIV counseling and testing, and social services. The Farrell Family Health Center strives to meet the underserved health needs of families in Washington Heights, Inwood, Harlem and Bronx communities. A large majority of the patients are Hispanic, predominately Dominican, and a significant proportion is African-American.

The Allen Hospital, located at the northern tip of Manhattan at 220th Street, is one of five NewYork-Presbyterian Hospital campuses. Family Medicine is the only residency program based primarily at the 200-bed hospital, and serves as an integral part of residents’ education and patient care. The Family Medicine Service directed by **Dr. Bertie Bregman**, the clinical service chief for Family Medicine at The Allen Hospital, functions as an autonomous clinical service at the hospital. Under the supervision of Family Medicine attendings, residents rotating through the Service admit over 900 in-patients annually and participate in deliveries on the labor floor. Other resident rotations at The Allen Hospital include psychiatry, ICU, urology, orthopedics and surgery. They rotate in the Emergency Department at the 168th Street campus.

A Patient-Centered Model

The term “medical home” is over 30 years old. A newer term, the Patient Centered Medical Home (PCMH), describes an approach to patient care that could relieve the looming crisis in primary care, improve clinical quality and patient experience, and moderate cost increases.

PCMH principles include improved access by establishing a personal relationship with a primary clinician who serves as the first contact to the health system and provides comprehensive continuous care utilizing interdisciplinary teams.

Care is provided for the whole person, and the practice team takes responsibility for all the patients needs by providing care directly and coordinating specialty services. Care is provided in consideration of the patients’ culture, language, family and community.

In the new model of the PCMH, care is facilitated by the use of office practice systems such as registries, information technology, health information exchange and other systems.

CFCM is working on an initiative with NewYork-Presbyterian Hospital at the Columbia University Medical Center to improve the health of the Washington Heights and Inwood communities. The Washington Heights/Inwood Health Initiative plans to bring a new model of collaboration with the community to improve health and health outcomes of the people residing in Washington Heights and Inwood.

Women's Health



The health of women, and the special needs of women beyond reproductive care, are key components in caring for families. The focus of the program on women addresses their special needs as a result of an increased level of poverty, as heads of households, high incidence of discrimination and abuse. In order to provide full service, the family medicine program provides care in a variety of settings - the Farrell Family Health Center, the women's home, long term care facilities and the hospital.

Home Visit Program

Under the guiding hand of founding faculty member, **Dr. Nancy Bermon**, the home visit program has two goals: providing service to homebound and high risk patients, and teaching family medicine residents and medical students how to provide comprehensive care within the home.

A number of patients are cared for almost exclusively at home, while the program also provides one-time home visits for some patients. These patients may have had a recent hospitalization and still be frail from their illness; they may also be patients whose provider identified a particular challenge in their care that may be best addressed by a home visit. Examples of this are patients with multiple missed appointments, medication confusion, concerns about abuse or neglect, and other safety concerns.

Home visits offer an opportunity not only to provide and teach direct care, but also to provide and teach coordination of care through team meetings with the patient's family, home care worker, home care nurse and social worker, and through communication with the patient's primary provider. It is also an opportunity for the CFCM faculty and residents to demonstrate and teach the precepts of family medicine to medical students.

Through a national non-profit program, second year family medicine residents make home visits to low-income new mothers to whom they provide prenatal care at the Family Health Center. The mothers receive a free glider rocking chair and the residents help assemble it during the visit. The program is designed to encourage parent-child bonding and improves clinician-mother communication.

Residency Program



The CFCM residency training program offers the prospective family physician the highest quality training possible in a unique educational environment which combines the scientific rigor of an academic quaternary medical center with the nurturing collaboration of a well equipped community based hospital. Prospective family physicians receive three years of high quality training from some of the best clinicians and educators available.

CFCM recognizes the alarming shortage of primary care doctors in the workforce and addresses this dilemma by preparing residents to be comprehensive, compassionate primary care physicians.

Building on the seven years of leadership by **Dr. Carmen Dominguez-Rafer**, who will assume the role of CFCM's Associate Director of Faculty and Clinical Affairs, **Drs. Heather Paladine** and **Joanne Dempster** will be the director and associate director in 2010. The residency program is committed to training physicians who are dedicated to the provision of broad scope continuity care of patients and their families, with a focus on problems unique to urban under-resourced communities. The community is the cornerstone of the residency program. Columbia University Medical Center is located in the minority, underserved community of Washington Heights/Inwood in northern Manhattan, where CFCM is working with CUMC to alleviate the inequalities in the distribution of health care services.

The CUMC Family Medicine Residency Program strives to prepare residents with the clinical skills and knowledge to be competent and compassionate physicians with the ability to analyze health problems and develop programs and/or systems within and with communities to improve health. It encourages educating colleagues in other disciplines about what Family Medicine is and does. It aspires to create and maintain change. The Family Medicine Residency Program is recruiting and training leaders for tomorrow's health care.

CFCM receives applicants from some of the best medical schools in the nation, and our graduates have gone on to do comprehensive work in a variety of community oriented and family health care settings. Today, 64% of the 2008 and 2009 residency graduates are working in underserved communities.

Training throughout their three years includes:

- 1-Increasing clinical knowledge and skills in health maintenance, as well as acute and chronic illnesses and continuity care of a patient panel of all ages in the Family Health Center;
- 2-Rotations in various disciplines focusing on, and enhancing aspects of care relevant to the office practice of the family physician (general surgery, urology, orthopedics, rheumatology, sports medicine, ENT, dentistry, psychiatry, women's health including maternity care, dermatology, and adult medicinal and pediatric sub-specialties);
- 3-Rotations each in the busy pediatric and adult emergency departments.
- 4-Didactic and hands-on longitudinal learning curricula in behavioral sciences, disease prevention and health promotion, office and practice management, diagnostic imaging, cardiology, home visits, nursing home and long term care, applied clinical research, and 'Community Oriented Primary Care.'
- 5-Managing the care of hospitalized patients in our Family Medicine Inpatient Service at The Allen Hospital.

Residents and Medical Schools Attended

Class of 2010

Judy Chertok, MD	Columbia University College of Physicians & Surgeons
Jesse Kayal, MD	UMDNJ-Robert Wood Johnson Medical School
Benjamin Nordby, MD	Roy J & Lucille A Carver College of Medicine University of Iowa
Kristen Semanision, DO	Philadelphia College of Osteopathic Medicine
Princess Skyers, MD	University of Pennsylvania School of Medicine
Heather Tindall, MD, MPH	Penn State University College of Medicine

Class of 2011

Timothy Daly, DO	NY College of Osteopathic Medicine
Lama El-Zien, MD	American University of Beirut
Erin Ferenchick, MD	Columbia University College of Physicians & Surgeons
Ricardo Jimenez-Kimble, MD	Boston University School of Medicine
Ashwini Mathai, MD	NY College of Osteopathic Medicine
Esmeralda Serrano, MD	UMDNJ- Robert Wood Johnson Medical School

Class of 2012

Todd Antenucci, DO	NY College of Osteopathic Medicine
Diana Badillo, MD, MPH	Stanford University School of Medicine
Jennifer Cohen, MD	University of Utah School of Medicine
Urmi Desai, MD	University of Buffalo, State University of NY School of Medicine
Inna Ryvkin, MD	Albany Medical College
Katherine Takayasu, MD, MBA	Wright State University School of Medicine

Class of 2013 *(2010 entering class)*

Bonnie Chang	Touro University-California College of Osteopathic Medicine
Mona Dalal	University of Iowa Roy J and Lucille A Carver College of Medicine
Jillion Harris	Duke University School of Medicine
Parham Khalili	University of Chicago, The Pritzker School of Medicine
Lisa Singh	Albany Medical College
Venis Wilder	Harvard Medical School



Community Oriented Primary Care (COPC)

In addition to a traditional “family medicine model,” CFCM strives to partner directly with the community to identify its health problems and develop strategies to intervene. For over ten years, under the leadership of **Dr. Anita Softness** this approach, known as Community Oriented Primary Care (COPC), provides the framework for much of CFCM’s research and scholarship. Family Medicine residents and faculty are engaged in several COPC projects to assess the needs, and improve the community’s health:

Girltalk/Guytalk

Developed by a former resident, **Dr. Nwando Olayiwola** (Class of 2004) as “Girtalk” and later adapted for boys too, this program is for high school students to educate them about sexual health, contraception and prevention of AIDS and STIs. The classes are separated by gender and emphasize knowledge as the key to prevention.

Mujeres en Acción

This project has established a weekly walking club and monthly nutrition workshops for women to improve their fitness and healthy lifestyle.

Homeless Clinic

Columbia Harlem Homeless Medical Partnership (CHHMP) was developed by P & S students, and sponsored by CFCM. Family Medicine faculty and residents provide free primary care, medication and referrals to homeless and insecurely housed individuals living in Harlem. (See page 11).

Community Health Needs Assessment

Separate projects are underway to assess two unique and growing populations in northern Manhattan. One project is studying the health care needs of the Mexican-American community while the other is studying the health care needs of the Arabic speaking community.

Health Needs Assessment of Community Mental Health Agency Clients

This is a project to assess the health needs of clients receiving mental health care at the Association of Progressive Dominicans.

The centerpiece of our COPC projects is an annual trip to the Dominican Republic—a country that is the home to a majority of our immigrant patient population in northern Manhattan. Each year, a group of Family Medicine faculty and residents spend five days immersed in Dominican culture learning firsthand about the country’s health care system. The trip is an invaluable resource for the residents to better understand the needs of the patients they serve. We are currently working to establish a partnership with the Family Medicine Residency Program at Hospital Juan XXIII, which provides community-based health care to underserved neighborhoods in Santiago, DR.



International Health Program

In addition to the annual excursion to the Dominican Republic, organized by **Drs. Carmen Dominguez-Rafer** and **Anita Softness** to learn about the history, socio-cultural and healthcare background of the patients the residents care for, there is an effort by CFCM to enhance and encourage the residents' and students' appreciation and understanding of health from the global perspective.

Each resident is encouraged and supported to participate in an international health elective rotation during their three year training program. The experiences are enhanced by presentations and lectures such as the January, 2010 presentation by CFCM residency graduate, **Dr. Eamonn Vitt**, (P & S, Class of 2002) who discussed his experiences as a Médecins Sans Frontières physician working in Uganda. As a family medicine resident, he worked in Zimbabwe and in India.

During the annual "International Health Night" each participant hosts a slide show of their experience, focusing on health needs of the country they provided care. Last year's event included presentations from Honduras, Kenya, Pakistan, the Navajo Nation and St. Kitts. **Drs. Dominguez-Rafer** and **Ayesha Siddiqui** (Class of 2009) visited Haiti in March to assist with Haitian post-earthquake relief efforts. **Dr. Matthew Spitzer** serves as the president of Médecins Sans Frontières (Doctors Without Borders)-US president. **Dr. Klink** and **Dr. Susan Lin** have worked to build a US-China exchange program that address primary care services in both nations. In 2009 three U.S. medical students and a CFCM resident studied in China. CFCM has hosted a number of visiting Chinese health leaders and residents over the years. **Dr. Klink** served as the 2009 American Chair of the Annual Chinese Community Health Service Symposium held in Beijing. Visiting physicians and health service administrators from Singapore were delighted to learn about the Family Medicine Residency Training program here in New York as they begin to develop family medicine education in that island city-state.

Pre-doctoral Medical Education Program

The faculty at the CFCM plays a crucial role in all four years of medical education for visiting students and those at Columbia's College of Physicians & Surgeons (P&S).

Under the coordination of **Dr. James Spears**, several of our faculty members serve as instructors for first year students during their Clinical Practice I Clerkship. Students are embedded with family physicians at the Farrell Family Health Center, where they keep journal accounts of their patient care experiences and begin to develop interviewing and communication skills.

Second year students have the opportunity to work with CFCM staff member **Dr. Mary Jo Fink**, who co-directs the Foundations of Clinical Medicine Physical Diagnosis course. Dr. Fink, fellowship prepared in women's health, and recently elected to the prestigious Columbia College of Physicians & Surgeons Glenda Garvey Academy, plays a key role in curriculum development, teaching and caring for women and their special needs.

Dr. Matthew Spitzer, recently recruited as the CFCM Pre-doctoral Director, co-directs the required five-week Primary Care Clerkship with the Department of Medicine faculty. Students participate in patient care at sites throughout the country, half of which are under the supervision of Family Medicine physicians. During the clerkship, students complete weekly interactive education modules through a website called Primary Care Online Resources and Education, or PCORE, which

was developed by CFCM faculty members in collaboration with the Columbia Center for New Media Teaching and Learning and the Center for Education Research and Evaluation.

The Center offers a number of electives for fourth year students, including: Family Medicine Sub-Internship, the Ambulatory Family Medicine Elective, and a Family Medicine Research elective.

Last year, **Dr. Jason Hove** (P&S Class of 2010) completed a research project with the Center in which he helped develop a diabetes registry for the Farrell Clinic. His work, done in collaboration with research faculty members **Dr. Richard Younge** and **Dr. Susan Lin**, was presented at the national Society of Teachers of Family Medicine's Conference on Practice Improvement in November 2009.

The CFCM Columbia Harlem Homeless Medical Partnership (CHHMP)

Every Tuesday night, the basement of St. Mary's Episcopal Church on 126th Street in Harlem becomes a makeshift health center, providing free care to the homeless and the uninsured. The Columbia Harlem Homeless Medical Partnership (CHHMP) is the culmination of efforts by students at the College of Physicians & Surgeons who were looking to give back to the community. **Drs. Judy Chertok** (P&S Class of 2007 and CFCM Residency Class of 2010) and **Marc Manseu** (P&S, Class of 2009) with a CFCM founding faculty member, **Dr. James Spears**, who has almost two decades of experience working with the homeless population in New York City, among others, laid the groundwork and secured resources over a three year period before opening doors to patients in 2007.



Participating students commit to the project for all four years of their medical education, an application of the family medicine precepts of continuous care within the community where on-going relationships between physicians and patients are a core value. Supervised by **Dr. Spears** and other CFCM faculty, CHHMP is supported through CFCM and a generous endowment from the family of **Dr. Isaac Golde Kramer**, (P&S Class of 1908). The project serves as a tremendous resource to the patients who are served and an opportunity for the students and faculty who provide care. Patients are given free health assessments, including physical examinations, prescriptions and referrals. Recently the Columbia College of Dental Medicine students and faculty have joined the CHHMP project, providing dental care.

Research Program

Guiding the CFCM research initiatives is a Strategic Research/Scholarly Plan that was created over an 18-month period spanning 2007 and 2008. There are three overlapping themes of the plan based on the mission of the CFCM and the interests and ongoing work of the Center. They are: (1) pedagogy, the art and science of teaching, (2) prevention and behavioral health, and (3) practice related quality improvement. Current work by Family Medicine faculty already fit into these themes, and they are rooted in principles of community-engaged research established by the Northern Manhattan Community Voices Collaborative of the Center for Community Health Partnerships.

The research themes build upon several strengths and opportunities including, for example: the Columbia University Irving Center for Clinical and Translational Research, which is one of the first Clinical and Translational Services awards funded by the NIH. This winter, CFCM received a planning grant from the Irving Center to develop a Practice Based Research Network (PBRN). This research network will bring clinicians in multiple disciplines together with experienced researchers to develop a community engaged, practice and policy relevant research agenda. The PBRN will be a venue for conducting comparative effectiveness studies, and dissemination and implementation research. These studies will have the ultimate goal of improving care for the communities of northern Manhattan and reducing health disparities.



Community Oriented Primary Care (COPC) provides the framework for much of CFCM's research and scholarship. Family Medicine residents and faculty are engaged in several COPC projects to provide care at a health center for the homeless, to assess the health care needs of Mexican immigrants in northern Manhattan, to promote physical activity through walking groups, and to provide reproductive health education in local high schools. CFCM's residency program requires residents to develop a scholarly product (publication, presentation or a poster) based on the COPC projects in which they are involved during their training.

CFCM has received its first NIH funding to support an academic community partnership that will help to improve health outcomes and decrease disparities (**Dr. Richard Younge, PI**), funding from a HRSA faculty development grant to study cycle time Quality Improvement project at the Farrell Community Health Center (**Dr. LeWanza Harris**) and to investigate the role of women's health curricula on student decisions to choose Family Medicine residencies (**Drs. Beena Jani and Heather Paladine**). The American Academy of Family Practice awarded CFCM a grant to develop systems to improve immunization rates (**Dr. Carmen Dominguez-Rafer**). **Dr. Jason Hove** completed a one year research project with **Dr. Younge** that culminated in the development of a diabetes registry at the Farrell Family Health Center. The work was presented at the Society of Teachers of Family Medicine Conference on Practice Improvement last fall. **Dr. Kathleen Klink** received funding from the Josiah Macy, Jr. Foundation to develop new approaches to nurse practitioner and family physician interprofessional clinical training.

CFCM has actively sought opportunities to partner with investigators from other disciplines at Columbia University Medical Center. This has led to the submission of several grant applications, which will form the basis for a long-range CFCM re-

search program with substantial extramural support. **Dr. Silvia Amesty** received an NIH challenge grant with collaborators at the New York Academy of Medicine for a project to test an approach to offering HIV counseling and testing at pharmacies.

Research Fellowship

The Primary Care Clinician Research Fellowship in Community Health is a collaborative effort of the Divisions of General Pediatrics, General Medicine, the Mailman School of Public Health, the Center for Family and Community Medicine and NewYork-Presbyterian Hospital, funded by Health Resources and Services Administration (HRSA). This exciting two-year fellowship is designed for primary care physicians who are dedicated to caring and reducing health disparities for low-income minority children, adolescents and adults.

The fellowship includes:

- Advanced training in research skills, including completion of research projects and publishable manuscript(s) in urban community health
- Pursuit of a master's degree in public health or masters of science in epidemiology at the Columbia University Mailman School of Public Health
- Core didactic curriculum consisting of research skills and academic development
- Clinical practice and teaching of primary care in an urban, underserved community in New York City

Dr. Ayesha Siddiqui, CFCM residency program graduate (Class of 2009), has joined the Center as a research fellow. She is working on a project to decrease barriers to access for patients seeking elective post-partum sterilization.

Dr. Numa Thebe, (Class of 2007), a visiting physician from the United Kingdom, completed medical school and two years of basic post graduate clinical rotations last year. She is planning on pursuing a career in Family Medicine/General Practice, and has joined CFCM for one year to expand her research skills, focusing on community health and health services.

The “Primary Care Imperative” Guest Lecture Series

CFCM hosts a number of guest lecturers on campus to bring attention to the topic of the need for services and research in primary care. Open to the CUMC community, the guests and topics attract an audience from schools of public health and nursing, as well as the medical school.



January 22, 2009

Dr. Kathleen Klink
CFCM, Robert Wood Johnson Health Policy Fellow
Primary Care: Dead or New Deal? Health Reform in 2009

February 19, 2009

Dr. Suzanne Bakken
Columbia University School of Nursing
and Biomedical Informatics
The Challenge of Community Based Research, A Case Study

March 19, 2009

Dr. Hal Strelnick
Albert Einstein College of Medicine, New York
Improving Diversity in the Health Care Workforce

April 16, 2009

Dr. Thomas Rosenthal
University of Buffalo, State University of New York,
Department of Family Medicine and NYS AHEC
The Traditions and the Future of Research in Primary Care

September 10, 2009

Dr. Luisa Borrell
Lehman College
Race/Ethnicity and Health: Implications for Hispanics

October 15, 2009

Dr. Ann O'Malley
Center for Studying Health System Change, Washington DC
*Primary & Specialty Care:
Moving Toward a Vision of Coordinated Care for Patients*

November 19, 2009

Dr. David Hayes-Bautista
UCLA
The Thread to the Health of Latinos

January 21, 2010

Ms. Ronda Kotelchuck
Primary Care Development Corporation
*Health Care Reform:
Two Challenges to the Primary Care Sector*

February 18, 2010

Dr. Yvette Walker
Community Healthcare Network
*Addressing Key Problems for the Black Community:
Transitions in Clinical Care*

March 18, 2010

Panel Discussion
with moderator Dr. Heather Paladine, CFCM
Women's Health – “The Business of Being Born”

April 15, 2010

Dr. Craig Irvine, CFCM
Narrative Medicine

Faculty

Kathleen Klink, M.D.

Director

Carmen Dominguez-Rafer, M.D., M.P.H.

Associate Director

Nancy Bermon, M.D.

Melanie Bernitz, M.D.

Susan Bowers-Johnson, M.D., M.P.H.

Bertie Bregman, M.D.

Rachel Bregman, M.D.

Silvia Cunto-Amesty, M.D., M.P.H., M.S.Ed

Joanne Dempster, M.D.

Mary Jo Fink, M.D.

Allan Formicola, D.D.S., M.S.

Elizabeth Hall, F.N.P.

LeWanza Harris, M.D., M.P.H.

Dinaz Irani, M.D.

Craig Irvine, Ph.D.

Beena Jani, M.D.

Robert Lewy, M.D., M.P.H.

Susan Lin, Dr.P.H.

Jeanne Manubay, M.D.

Thomas Mele, M.D.

Heather Paladine, M.D.

Marion Richman M.D.

David Rosenthal, Ph.D.

Ayesha Siddiqui, M.D.

Anita Softness, M.D.

James Spears, M.D.

Matthew Spitzer, M.D., D.T.M.H.

Yael Swica, M.D., M.T.S., M.P.H.

Christopher Wang, M.D., M.P.H.

Richard Younge, M.D., M.P.H.

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Maria Diaz-Gil

Department Administrator

Ruth Barragan

Shelley Lopez

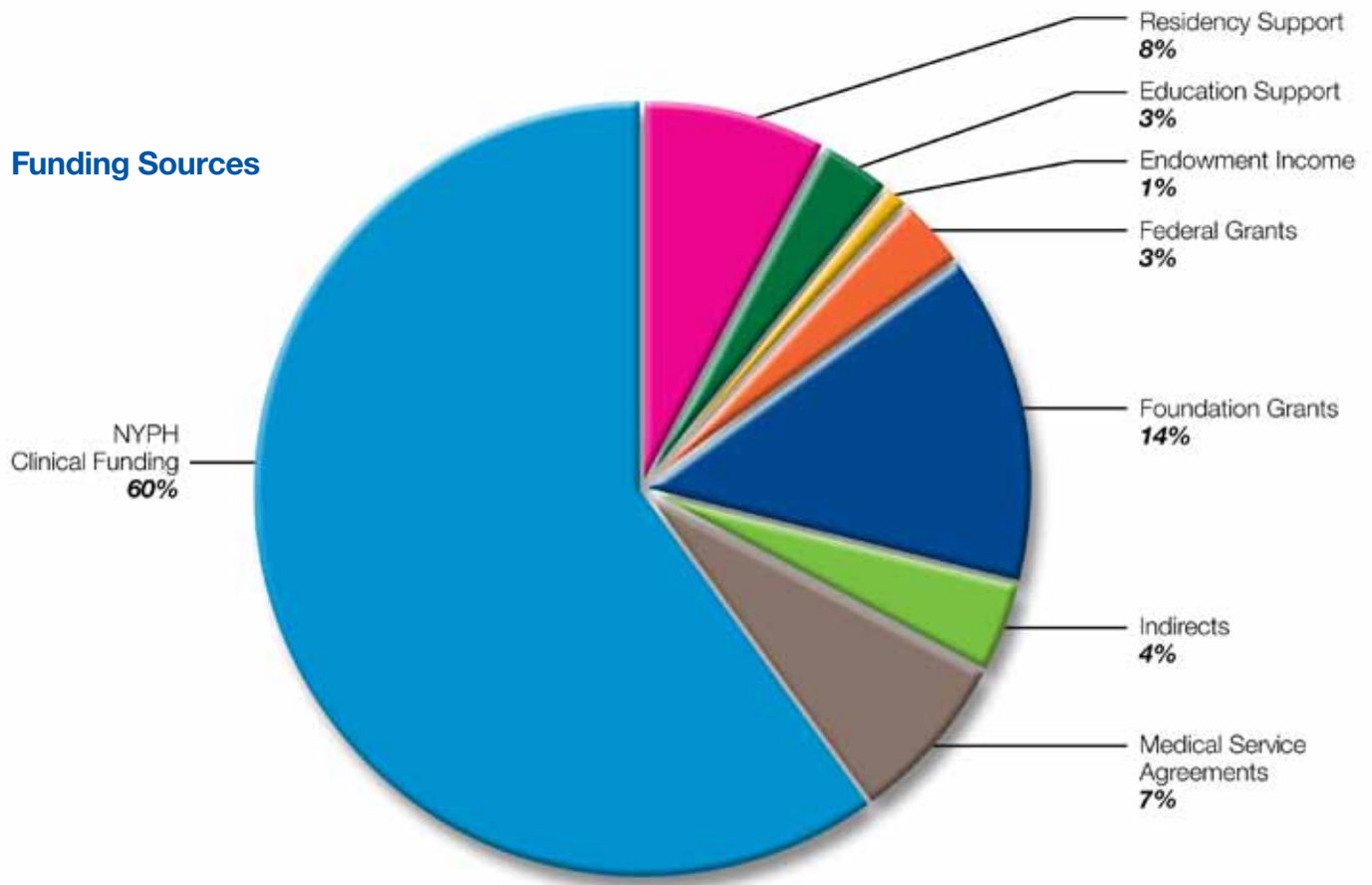
Raquel Munoz

Diana Suarez

Ramona Velazquez

Total Operating Funds (FY '08-'09 \$4.1M)

Funding Sources



Expense Categories

