

VIEWPOINTS

Public Health, Pharmacy, and the Prevention Education Resource Center (PERC)

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Curricular reform and demands for such are a common and much needed phenomenon in the Association and our academy. Hours to spare for varying courses are difficult to distribute among so many worthy but differing options. It is my contention that not near enough attention in our programs has been devoted to incorporating public health components, or clinical prevention and population health, into both our pre-pharmacy and/or pharmacy curricula. In addition, there is a need to share collectively what good things we are doing in our programs within and external to the academy.

Most notably, *Healthy People 2010*¹ has called for enhanced attention to be placed on education efforts to enhance clinical prevention and population health by including an objective “to increase the proportion of schools of medicine, schools of nursing and health professional training schools whose basic curriculum for healthcare providers includes the core competencies in health promotion and disease prevention.” Calls have been made to move our collective health professions from: “the current treatment-oriented focus to a prevention-oriented focus.”^{2(p478)} There are also many examples of where a public health focus has been shared in an interdisciplinary fashion. One such groundbreaking example is the initiation, deliberation, and outcomes of the Healthy People Curriculum Taskforce.

The Healthy People Curriculum Taskforce

The initiation of a Healthy People Curriculum Task Force (HPCT) was begun by the Association of Teachers of Preventive Medicine (now the Association for Prevention Teaching and Research [APTR]) and the Association of Academic Health Centers (AAHC). The HPCT was convened in 2002 to promote the achievement of the *Healthy People 2010* Objective 1-7 of increasing the teaching of health promotion and disease prevention in health professional education. The following clinical health professional education associations are repre-

sented on the Task Force: Association of American Medical Colleges, American Dental Education Association, American Association of Colleges of Nursing, National Organization of Nurse Practitioner Faculties, American Association of Colleges of Osteopathic Medicine, American Association of Colleges of Pharmacy (we as an Association have benefited from the dedication and representation on the taskforce by our representatives: Dr. Robert McCarthy, Dr. Susan Meyer, and Will Lang, MPH), Physician Assistant Education Association, Undergraduate and Graduate Public Health, Global Health, and the Student Health Alliance. The Association of Schools of Public Health and Community-Campus Partnerships for Health serve as resource groups. A representative from Allied Health will be named at a later date. The functioning and outcomes of this multidisciplinary group is noteworthy for its success and successful outcomes. The initial product of the HPCT was the clinical prevention and population health curriculum framework.³ The goal of this framework is to: “provide a structure for (1) communication and collaboration within and among health professions, (2) organizing curriculum, and (3) monitoring curriculum.”^{4(p477)} Please see Table 1 for a listing of the four components and 19 total domains suggested for this clinical prevention and population health curriculum framework. Another outcome of the HPCT taskforce has been the initiation of the Prevention Education Resource Center.

Prevention Education Resource Center

In 2005, Dr. David Garr as principal investigator received a 3 year grant from the Josiah Macy, Jr. Foundation to fund the project “Educating about Prevention.”⁴ The purpose of this grant was to support the development of a common curriculum framework for education about prevention among seven health professions and to establish a web-based Prevention Education Resource Center.

The Prevention Education Resource Center (PERC, www.teachprevention.org) was launched in October 2006 by the Association for Prevention Teaching and Research. PERC is a web-based repository of education of educational materials related to clinical prevention and

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Table 1. Health People Curriculum Taskforce Components and Domains.

Components	Domains
Evidence-Base for Practice	<ol style="list-style-type: none"> 1. Epidemiology and Biostatistics 2. Methods for Evaluating Health Research Literature 3. Outcome Measurement, including Quality and Costs 4. Health Surveillance 5. Determinants of Health
Prevention and Population Health Curriculum Framework Clinical Preventive Services - Health Promotion	<ol style="list-style-type: none"> 1. Screening 2. Counseling 3. Immunization 4. Preventive Medication
Health Systems and Health Policy	<ol style="list-style-type: none"> 1. Organization of Clinical and Public Health Systems 2. Health Services Financing 3. Health Workforce 4. Health Policy Process
Community Aspects of Practice	<ol style="list-style-type: none"> 1. Communicating and Sharing Health Information with the Public 2. Environmental Health 3. Occupational Health 4. Global Health Issues 5. Cultural Dimensions of Practice 6. Community Services

population health. The site promotes wonderful collaboration across health care disciplines, professions, and institutions by facilitating the exchange of teaching resources and through connecting educators with other faculty and many points of interactive opportunities.

Utility of PERC

Registration through the PERC website allows users to submit materials for inclusion on the website, download materials for use, and/or evaluate the quality of materials. PERC is envisioned to fulfill the identification of accessible relevant syllabi, teaching materials, examination materials, and curriculum evaluation approaches that may be used to teach each of the 19 domains identified in the Clinical Prevention and Population Health Curriculum Framework as well as curriculum frameworks developed for introductory undergraduate (college level) public health courses (Public Health 101; Epidemiology 101, and Global Health 101 Curriculum Framework). One of the expected outcomes for PERC includes the provision of a searchable web site allowing the user to identify materials that are relevant to particular domains of the Curriculum Framework, that is applicable to particular clinical health professions, and that will allow for utilization of particular types of teaching methods and materials. Working with APTR to maintain and sustain PERC are an editor and associate editors representing each of the health professions constituency groups. The Association and our academy are represented by Dr. Jeanine Mount

who will serve as an Associate Editor. It is my distinct privilege to serve as the inaugural Editor of PERC.

Benefits for Many

The true benefit for the PERC platform will be for our faculty, our students, and most importantly our patients. Our faculty can learn from others and teach others through the mechanisms facilitated by PERC. Our students can learn from each of the sections available for use through PERC. Carey and Roper⁶ when highlighting the benefits of the HPCT and the curricular components, stress among other points the importance of professionalism in health professional schools. Professionalism in this context refers to the duty of health professional faculty and students to understand the tenets and limitations of the current health care system and how to constructively funnel frustration with the system dealing with health policy, interplay between public and private components, and practice opportunities to efforts toward improvement and enhancement of the future health care system.

Most importantly, our collective patients will benefit from the fruits of interactive options facilitated by PERC, use by faculty and others, and its multidisciplinary segments. Multidisciplinary collaboration cannot help but enhance the care that individual professionals provide to patients. Professionally, we as an association can gain so much by participating in, and benefiting from, the many options available through PERC. Please join us in this exciting venture.

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