



Community Health and Advocacy Milestones Profile (CHAMP) Map

Community Health and Advocacy Goals & Objectives					
A. Culturally Effective Care	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
<p>Pediatricians must demonstrate skills that result in effective care of children and families from all cultural backgrounds and from diverse communities.</p> <p>Graduates are expected to:</p>					<ul style="list-style-type: none"> -Knows -Knows how -Shows how -Does
<p>1. Identify and manage cultural attributes, stereotypes, and biases they bring to clinical encounters</p>	<p>ICS1 ICS2 PBL11 PROF6</p>	<p>PROF2 PROF5</p>	<p><i>Inpatient Pediatrics Outpatient clinic Adolescent Continuity Clinic Kaiser Ambulatory</i></p>	<ul style="list-style-type: none"> • <i>Global evaluation</i> • <i>CC evaluation</i> 	<p>Does</p>
<p>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.</p>	<p>ICS1 ICS2 SBP1 PBL12</p>	<p>PBL8 PBL9 PROF5</p>	<p><i>Inpatient Pediatrics Outpatient clinic MBU PICU Heme/onc Subspecialties (consult) Emergency Medicine Continuity clinic</i></p>	<ul style="list-style-type: none"> • <i>Global evaluation</i> • <i>CC evaluation</i> 	<p>Does</p>
<p>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.</p>	<p>ICS1 SBP1</p>	<p>PBL17 PBL18 PROF5</p>	<p><i>Inpatient Pediatrics Outpatient clinic MBU PICU NICU Adolescent DBP Continuity clinic</i></p>	<ul style="list-style-type: none"> • <i>Global evaluation</i> • <i>CC evaluation</i> 	<p>Does</p>
<p>4. Identify, analyze, and describe health disparities, as well as organizational assets and barriers to delivering culturally effective services.</p>	<p>SBP2 PBL13 PROF2</p>	<p>ICS3 ICS4 ICS5 SBP1 PROF5</p>	<p><i>Nephrology Outpatient clinic Inpatient pediatrics Continuity clinic CACH 1/CACH 2</i></p>	<ul style="list-style-type: none"> • <i>Global evaluation</i> • <i>Reflective Writing</i> • <i>Project Planning Tool</i> • <i>Faculty Assessment of Final Products</i> • <i>CC evaluation</i> 	<p>Shows How Does</p>
<p>5. Describe and outline quality improvement activities to achieve health care equity.</p>	<p>SBP2 PBL13</p>	<p>ICS3 ICS4 ICS5 Prof5</p>	<p><i>Resident QI Curriculum</i></p> <p><i>Continuity clinic CACH I/CACH II*</i></p>	<ul style="list-style-type: none"> • <i>Participation in annual residency QI project</i> • <i>Reflective Writing</i> • <i>Project Planning Tool</i> • <i>Assessment of QI activities by faculty, CCC</i> • <i>Faculty Assessment of final products</i> • <i>CC evaluation</i> 	<p>Shows How Does</p>

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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:

Community Health and Advocacy Goals & Objectives	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated -Knows -Knows how -Shows how -Does
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
1. Identify and discuss individual, family, and community (local, state and/or national) concerns that impact children's health.	ICS2 SBP2 PBLI2 PROF2	ICS1 ICS3 SBP7	<i>Inpatient Pediatrics Heme/Onc Subspecialties (consult) MBU CACH 1 / CACH 2 NICU Advocacy SIGs</i>	<ul style="list-style-type: none"> • <i>Global evaluation</i> • <i>Project planning tool</i> • <i>Op-ed</i> • <i>Advocacy SIG presentation</i> 	<i>Shows how Does</i>
2. Formulate an attainable plan of action in response to a community health need.	ICS1 SBP2 PBLI2 PROF2	ICS3 ICS4 SBP1 SBP7 PBLI2	<i>CACH 1 / CACH 2 Advocacy SIGs Individualized curricula (IC) rotations</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> • <i>Op-ed</i> • <i>Advocacy SIG presentation</i> • <i>IC deliverable</i> 	<i>Shows how Does</i>
3. Identify and describe resources to effectively advocate for the well-being of patients, families, and communities.	ICS1 SBP1 SBP2 PROF4 PROF6	ICS3 SBP7 PPD6	<i>MBU Inpatient pediatrics Outpatient clinic CACH 1 / CACH 2 Subspecialty (consults) NICU</i>	<ul style="list-style-type: none"> • <i>Global evaluation</i> • <i>Project planning tool</i> • <i>Op-ed</i> • <i>Advocacy SIG presentation</i> 	<i>Shows how Does</i>
4. Communicate effectively with community groups and the media.	ICS1 ICS2 PROF2	ICS3 ICS4 PBLI8 PBLI9	<i>Adolescent CACH 1 / CACH 2</i>	<ul style="list-style-type: none"> • <i>Global evaluation</i> • <i>Project planning tool</i> • <i>Op-ed</i> 	<i>Shows how Does</i>
5. Find and use evidence and data to communicate, educate, affect attitude change, and/or obtain funding to achieve specific health outcomes.	ICS1 SBP2 PROF2	ICS3 ICS4 SBP7 PBLI8 PBLI9 PROF2 PPD6	<i>CACH 1 / CACH 2 Resident QI Curriculum Journal club</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> • <i>Op-ed</i> • <i>Advocacy SIG presentation</i> • <i>Participation in QI project</i> • <i>Journal club presentation evaluation</i> 	<i>Shows how Does</i>
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.	ICS1 ICS2 SBP2 PROF2	ICS3 PROF2 SBP7 PBLI8 PBLI9 PPD6	<i>CACH 1 / CACH 2 Advocacy SIGs IC rotations</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> • <i>Op-ed</i> • <i>Advocacy SIG presentation</i> • <i>IC deliverable</i> 	<i>Shows how Does</i>

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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:	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated -Knows -Knows how -Shows how -Does
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
1. Recognize the family as the principal caregiver and expert in their child's care, the center of strength and support for the child.	ICS1 ICS2 SBP2 PBLI1 PBLI2 PROF1	PROF2	<i>Inpatient Pediatrics Outpatient clinic MBU NICU Heme/onc Subspecialties (consult) Emergency Medicine Continuity clinic</i>	<ul style="list-style-type: none"> Global evaluation CC evaluation 	Does
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.	ICS3 PROF2	PBLI1 PBLI10	<i>CACH 1 Medicaid Application CACH 1 WIC visit Continuity clinic</i>	<ul style="list-style-type: none"> Completed Medicaid application Reflective writing CC evaluation 	Knows how Shows how
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.	ICS1 ICS2 SBP1 SBP3 PROF2	ICS3 ICS4 ICS5 PBLI9	<i>Inpatient pediatrics Outpatient clinic MBU Continuity clinic Subspecialties (consult) NICU</i>	<ul style="list-style-type: none"> Global evaluation 	Does
4. Collaborate with families and communities to help navigate the health care system, including transition to adult care.	ICS1 SBP1 PROF2 PROF6	ICS3 ICS4 ICS5 SBP1 PBLI9 PPD6	<i>Inpatient pediatrics Outpatient clinic Emergency Medicine NICU CACH 1 / CACH 2 Heme/onc Subspecialties (consult) Continuity clinic</i>	<ul style="list-style-type: none"> Global evaluation 	Does
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	<i>Resident QI Curriculum Outpatient clinic Continuity clinic</i>	<ul style="list-style-type: none"> Completion of QI project Monthly dashboard review 	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	<i>Outpatient clinic Continuity clinic Kaiser ambulatory</i>	<ul style="list-style-type: none"> Global evaluation CC evaluation 	Does

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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:	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated -Knows -Knows how -Shows how -Does
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
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.	ICS1 ICS2 PBL1 PBL2 PROF1 PROF2	PBL2 PROF5 SBP7	<i>Adolescent CACH 1</i>	<ul style="list-style-type: none"> <i>Global evaluation</i> 	<i>Shows how Does</i>
2. Screen for risks specific to defined special populations.	ICS1 ICS2 PBL6	PROF5	<i>Outpatient clinic Continuity clinic START training @ noon conference</i>	<ul style="list-style-type: none"> <i>Global evaluation</i> <i>Continuity clinic evaluation</i> <i>Completion of START training</i> 	<i>Does</i>
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	<i>CACH 1 Continuity clinic</i>	<ul style="list-style-type: none"> <i>Global evaluation</i> <i>CC evaluation</i> 	<i>Does</i>

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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:	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated -Knows -Knows how -Shows how -Does
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
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.	ICS1 PBL11 PROF2	ICS3 ICS4 ICS5 SBP7 PBLI9 PPD6	<i>CACH 1 / CACH 2 Advocacy SIGs</i>	<ul style="list-style-type: none"> <i>Project Planning Tool</i> <i>Op Ed</i> <i>SIG participation</i> 	<i>Shows how Does</i>
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.	ICS1 PBLI2 PROF1 PROF2	ICS2 ICS3 ICS4 PBLI5 PBLI9 PPD6	<i>CACH 2</i>	<ul style="list-style-type: none"> <i>Project Planning Tool</i> 	<i>Knows how</i>
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.	ICS1 ICS2 PBLI2 PROF1 PROF2	ICS3 ICS4 PBLI2 PPD6	<i>CACH 1 / CACH 2 Leadership reading Advocacy SIGs</i>	<ul style="list-style-type: none"> <i>Project planning tool</i> <i>Reflective writing with discussion</i> <i>SIG participation</i> 	<i>Knows how Shows how Does</i>

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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:	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated -Knows -Knows how -Shows how -Does
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
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.	ICS1 SBP2	ICS3 ICS4 SBP1 PBLI9 PPD6 SBP7	<i>CACH 1 / DCH School Program Continuity Clinic</i>	• <i>CC evaluation</i>	<i>Knows how Does</i>
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.	ICS1 SBP1 SBP3 PBLI1 PROF2	ICS3 ICS4 PBLI9 PPD6	<i>CACH 1 / DCH School Program Continuity Clinic Noon Conference</i>	• <i>CC evaluation</i>	<i>Knows how Does</i>
3. Describe and discuss how a physician can collaborate to improve the physical, social, and health environment in schools and child care settings.	ICS1 ICS2 SBP2 SBP3 PBLI2 PROF2	ICS3 ICS4 SBP1 PPD6 SBP7	<i>CACH 1 / DCH School Program Continuity Clinic Noon conference</i>	• <i>CC evaluation</i>	<i>Knows how Does</i>

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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:	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated -Knows -Knows how -Shows how -Does
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
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.	PBLI1 PBLI2 PROF2	ICS3 ICS4 SBP7	<i>CACH 1 / CACH 2 Advocacy SIGs Focused readings</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> • <i>Completion checklist</i> • <i>SIG participation</i> 	<i>Knows Shows how</i>
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.	PROF2	ICS3 ICS4 SBP7 PBLI6	<i>CACH 1 / CACH 2 Advocacy SIGs Focused readings</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> • <i>Completion checklist</i> • <i>SIG participation</i> 	<i>Shows how Does</i>
3. Identify measurable outcomes for assessing progress in addressing child health issues, including health equity.	PBLI3	ICS3 ICS4 PLBI2	<i>CACH 1 / CACH 2 Advocacy SIGs</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> • <i>SIG participation</i> 	<i>Shows how Does</i>
4. Identify and describe effective public health interventions at the individual, community, and national level, e.g. screening & prevention programs aimed at modifying risk factors for disease or adverse health outcomes, and case identification and tracking.	PBLI1 PBLI3 PROF2	ICS3 ICS4 SBP7 PPD6	<i>CACH 2</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> 	<i>Knows how</i>
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.	SBP3 PROF1 PROF2	ICS3 ICS4 PBLI8 PBLI9 PROF2 PPD6	<i>CACH 2 Advocacy SIGs Focused readings</i>	<ul style="list-style-type: none"> • <i>Project planning tool</i> • <i>Completion checklist</i> • <i>SIG participation</i> 	<i>Knows Shows how</i>

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H. Inquiry and Application Pediatricians should be capable of pursuing inquiry that advances the health of children, families, and communities. Graduates are expected to:	Milestones-Based Sub-competencies		Rotation/ Curricular Activity	Assessment Method/ Demonstration of Competence	Level of Competence to be Demonstrated
	As of September 2014				
	Reporting Currently Required	Reporting Not Yet Required			
1. Assess and apply evidence-based practices for children and families relevant to the needs and resources of their communities.	PBLI2	ICS4 SBP7 PBLI6	<i>CACH 1 / Librarian literature search CACH 2 Friday Forum – EBM</i>	<ul style="list-style-type: none"> <i>Project planning tool</i> <i>Completed bibliography</i> <i>EBM presentation</i> 	<i>Knows how Does</i>
2. Discuss how quality improvement assessments and methodology can be integrated into interactions with community organizations serving children and families.	ICS1 SBP2 PBLI3	ICS4	<i>CACH 2</i>	<ul style="list-style-type: none"> <i>Project planning tool</i> 	<i>Shows how</i>
3. Describe and discuss the ethical issues that relate to research and scholarship in communities.	ICS2 PBLI2	ICS4			
4. Describe and discuss different methodologies of research in communities, including community-based participatory research.	PBLI1 PBLI3	ICS4 PBLI6	<i>CACH 2</i>	<ul style="list-style-type: none"> <i>Project planning tool</i> 	<i>Knows</i>