



PA TIX

A Corps physician and his wife, who taught English in the local high school, recall some highlights of their time in an Appalachian mining town: making apple butter and cracklin' bread; quilting; going down into a shaft mine; helping a neighbor slaughter, salt, and hang his hog; long walks in the country; picking wild strawberries; thank you gifts from patients—vegetables, baked goods, and, nicest of all, homemade quilts. She particularly remembers all she learned from her students about squirrel hunting, country music, planting and harvesting. But the learning was shared. She took eighty students to Virginia's Barter Theatre, the first time most of them had seen a live dramatic performance.



THE NATIONAL HEALTH SERVICE CORPS



The National Health Service Corps, created by the Emergency Health Personnel Act of 1970, recruits and places physicians and other health professionals in areas that have a critical shortage of health manpower.

At the present time 400 Corps physicians, dentists, nurses, and other health professionals are serving 206 communities in 45 States. By July of 1975, the Corps intends to have over 800 health professionals serving 250 communities in 46 States.

Providing health care through recruitment and placement of health teams is the immediate objective of the Corps. Helping communities build their own health resources and assisting them to develop systems that attract and keep health professionals is a longer range objective. Toward this goal, the Corps provides motivation and technical assistance to the community. The results are already obvious. In the first 2½ years of Corps operation, 25 percent of its clinic sites have become independent and no longer require direct Federal support. The number of independent sites is expected to increase significantly with each year of operation.

No two Corps sites are identical. Generally, however, the community has less than one primary care physician for every 4,000 people and is located in a rural area (85 percent). The factor common to all Corps sites is that the patients need and want health care.




THE COMMUNITY AND THE CORPS



The Corps represents a cooperative venture between the Federal Government and a local community working as partners to provide quality medical care. Any community that has a critical shortage of health manpower and that will cooperate in the management and development of a successful medical or dental practice may apply for Corps assistance.

The Corps agrees to provide administrative and financial management assistance. The community agrees to manage the practice and to provide an office, equipment, supplies, and staff support. It is responsible for purchasing, billing, and collecting fees. By law, fees must be charged for those able-to-pay to recover the "reasonable cost" of providing the health services; however, no patient is refused services because of inability to pay. Any surplus revenue must be used by the community to improve its health care system.

Corps members are accepted as peers in the local medical community and have hospital privileges. They are part of a primary care practice and treat all socioeconomic segments of the population.





A CHOICE OF COMMUNITY

Each Corps site has something different to offer. Corps members may choose their geographic locations—rural or metropolitan areas—from among the NHSC communities available. They can choose to practice alone or to work with other professionals—in an established clinic or at a facility that they will help to develop.

To help the professionals select the communities best suited to their needs, the Corps conducts an assignee and community selection match. After an assignee completes a community matching questionnaire, the Corps compiles the information and supplies profiles on communities with requested characteristics. The Corps pays for assignees to make one pre-assignment visit to the areas of their choice.

PRACTICE IN THE CORPS

Service with the Corps permits professionals to establish quality primary care practices. With the security of an adequate salary, they can afford to spend the extra time they may want to develop their practices or to provide a broader range of treatment and services.

When possible, the Corps places physicians in groups of two or more or with physician extenders. Couples or medical school colleagues with similar interests can practice together in the same Corps community.

The Corps utilizes the problem oriented medical record as developed by Dr. Larry Weed and as used in a rural practice by Drs. Harold D. Cross and John C. Bjorn, among others. The Corps believes this approach is important. The physicians, by using supporting personnel to perform screening functions, can use their own skills at the highest level.

Backup services, available through other Corps members, hospital affiliations, and local practitioners, assure assignees that their patients will receive care when they are away for training or vacation. For the few Corps physicians who are in solo practice, a special program of the American Medical Association, Project USA, provides physician coverage for short periods of time.





PROFESSIONAL AND PERSONAL GROWTH

Service in the Corps is a multidimensional experience that enables assignees to grow both professionally and personally. As part of their continuing medical education, assignees may elect to explore the problem oriented medical practice or other forms of special training, depending on their educational needs and practice requirements. Some members have arranged with nearby medical schools and training centers to take instruction on an "as needed" basis. Assignees are entitled to 5 days a year, in addition to leave time, to attend a medical meeting or conference and ½ day per week for other approved continuing education activities.

Corps service also offers the opportunity for personal growth—to know new environments, to appreciate other cultures, to understand people and their needs, and to have new experiences. Corps members have found these enriching and rewarding experiences a valuable part of their service.

The National Health Service Corps wants health professionals—physicians, dentists, nurse practitioners, and physician's assistants—who want to invest themselves in providing health care to people who are without it. It welcomes those who:

- Want to provide medical care that serves the needs of a community.
- Want a primary care practice without personal financial investment.
- Want to serve as a member of a health team.

THOSE WHO QUALIFY

PHYSICIANS

The primary need of the Corps is for physicians in general practice, family practice, internal medicine, and pediatrics. Some specialists in psychiatry and OB-GYN also are needed.

Medical and osteopathic physicians must be eligible for licensure in the States they choose for assignments. Public Health Service Commissioned Corps physicians who have completed their internships may enter

the Corps at the grade of Senior Assistant Surgeon (O-3), a rank equivalent to an Army captain or Navy lieutenant. Civil Service physicians usually enter the Corps at the GS-12 grade.

DENTISTS

The Corps needs dentists to work in general practice. They must be eligible for licensure in the States they choose for assignments. PHS Commissioned Corps dentists enter the Corps after their senior year at a grade of Senior Assistant Dental Surgeon (O-3), a rank equivalent to an Army captain or Navy lieutenant. Civil Service dentists usually enter the Corps at the GS-12 level.

NURSE PRACTITIONERS

The Corps is particularly interested in demonstrating to communities how nurse practitioners may be utilized. Where possible, the Corps recruits nurse practitioners locally and gives preference to local nurses for training in the field.

Nurse practitioners must meet the basic nursing education and registration requirements of the States chosen for practice. They may be employed either through the Commissioned Corps or the Civil Service. Beginning salaries vary with location. The Civil Service grade ranges from GS-7 to 11.

PHYSICIAN'S ASSISTANTS

Applicants must meet the entrance requirements established by the U.S. Civil Service Commission. Physician's assistants are eligible for Corps employment at the GS-9 to GS-11 level, based on individual qualifications.

Positions in the National Health Service Corps are open to everyone without regard to sex, race, color, or national origin. Merit is the sole criterion for employment and advancement.



BENEFITS

National Health Service Corps assignees enter the Federal Government as term (2-year) Civil Service employees or as Commissioned Officers in the Reserve Corps of the U.S. Public Health Service. Under either employment system, Corps assignees are entitled to the following benefits:

LOAN REPAYMENT

Service at a Corps site for a minimum of 2 consecutive years qualifies medical, dental, osteopathy, and nursing students for repayment of 60 percent of educational loans incurred during the professional level of study leading to the professional degree. If the assignee elects to remain a third consecutive year, an additional 25 percent of the loans will be repaid by the Federal Government.

HEALTH BENEFITS

Commissioned Officers receive full medical care and hospitalization. Their dependents are eligible for medical benefits under the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS), which provides comprehensive medical care with minimal deductibles and co-payment. Commissioned Officers receive unlimited sick leave benefits. Civil Service employees receive annual and sick leave benefits.

EDUCATIONAL BENEFITS

Each Health Corps assignee is entitled to spend 5 full days a year participating in approved courses or attending professional meetings, plus an additional half-day a week for approved continuing education. The Corps allots \$500 for each assignee for fees and travel expenses for educational purposes.

SCHOLARSHIP PROGRAM

The Public Health Service offers a scholarship program for medical and osteopathy students that includes payment of tuition, fees, and a monthly stipend during professional education leading to an M.D. or D.O. degree. Participation in this program requires a minimum obligation of 2 years of service, with 1 year of service obligated for each year of academic training. Service in the National Health Service Corps satisfies this obligation.

VETERAN'S BENEFITS

Twenty-four months as a Commissioned Officer in the Public Health Service satisfies the Selective Service obligation and makes the assignee eligible for veteran's benefits.

OTHER BENEFITS

The Corps pays for moving each assignee's family and household goods to the chosen site.

- The Corps provides malpractice coverage.
- The Corps pays for a site visit to one community prior to assignment.
- Commissioned Officers are entitled to Post Exchange and Commissary privileges at Uniformed Services facilities.
- Commissioned Officers receive 30 days paid vacation each year.

For further information about the PHS Scholarship Program, write:

Scholarships, U.S. Public Health Service, Room 4-35, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20852.

For further information about the Loan Repayment Program, write:

Loan Repayment Program, Bureau of Health Resources Development, Building 31, Room 4C27, 9000 Rockville Pike, Bethesda, Maryland 20014.

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In South Dakota, two young couples came to establish a practice in what all of them then considered an incredibly ugly area. But when it was time to leave, they found the parting difficult. They had developed a deep feeling for the environment—the Indian reservations, the Badlands, the isolated ranches—and the people who live on them. They had learned to throw pots, to play the guitar, to refinish furniture they had scoured the countryside to find, and to identify hundreds of birds at a nearby sanctuary. Although they never learned to make the famous Sioux star quilts, they had improved the economy of the area by helping build a market for them. Again, the learning was shared. One of the spouses, a nurse, worked at the hospital and later taught health classes at the high school. The other spouse, though busy with two small children, taught in the adult education program on a nearby Indian reservation. With all the new experiences, they still found time to continue their interests in tennis, gourmet cooking, bridge, and music.



- A Corps health team in Texas is cooperating with other health agencies to staff a mobile health unit that takes information on nutrition, hygiene, and family planning services to migrant families.

- Some Corps assignees have organized rescue squads and trained the volunteers as Emergency Medical Technicians. Some have helped to obtain and staff a mobile intensive care unit. Emergency medical care is vitally important to communities located up to forty miles from a hospital.

- A Corps dentist in Texas, faced with a backlog of a potential 50,000 patients, has launched an aggressive preventive dental program.


- A Corps nurse practitioner in New Mexico drives the canyons in a jeep to reach patients who, in a lifetime of over 70 years, have never seen a health professional.

- Two Corps physicians in Pennsylvania worked with citizen groups to arrange transportation for medical services and the use of school recreational facilities by all citizens.

- A Corps inner city site in Ohio developed satellite clinics to serve patients in the area.

- A Corps dentist-dental hygienist team in Tennessee, husband and wife, are conducting a preventive dentistry program in the school system.

- Shortwave radio and bush pilots link physicians and physician's assistants who provide medical care above the Arctic Circle.



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