

Collaboration Through Interdisciplinary Education and Its Impact on Future Healthcare Practitioners

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UConn
SCHOOL OF NURSING

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Needs Based Assessment:

- Need: Interprofessional Collaboration (IPC) to address
 - Increasing challenges in navigating and coordinating healthcare practice and provider care
 - Address demand for comprehensive care in a cost efficient manner without diminishing quality.



Core Competencies for Interprofessional Collaborative Practice

Sponsored by the Interprofessional Education Collaborative*



Report of an Expert Panel
May 2011

*IPEC sponsors:
American Association of
Colleges of Nursing
American Association of
Colleges of Osteopathic Medicine
American Association of
Colleges of Pharmacy
American Dental Education Association
Association of
American Medical Colleges
Association of
Schools of Public Health

Conditions: What is the Problem?

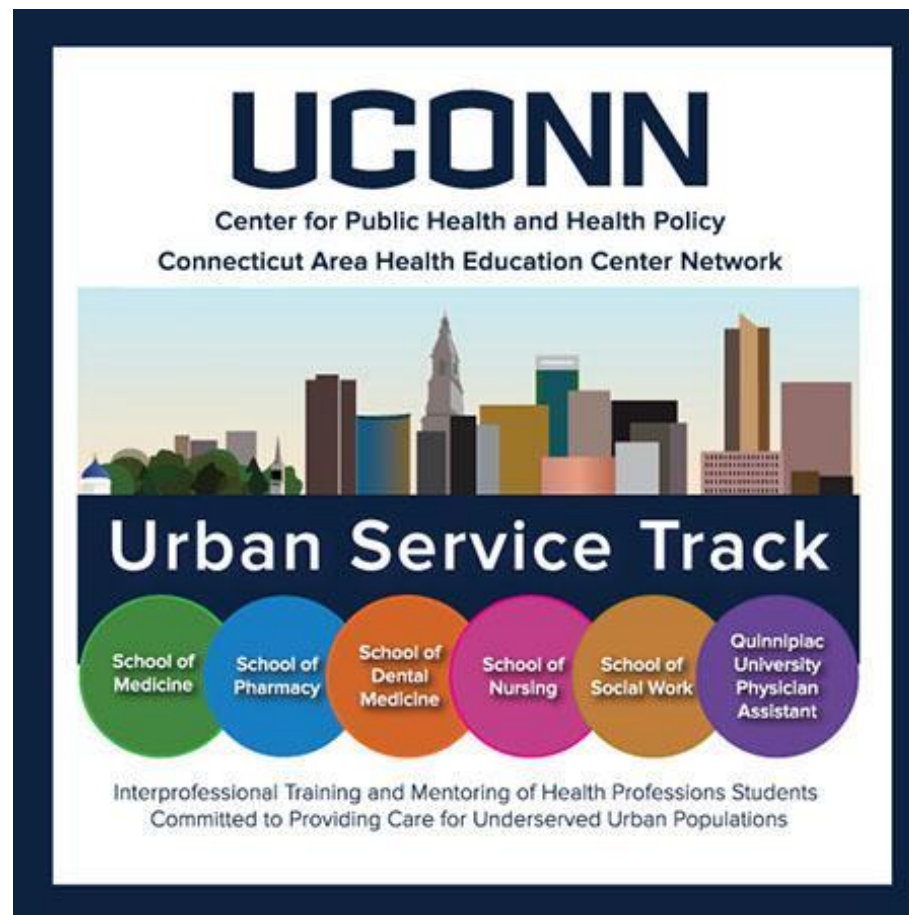
Current Condition:

- Lack of Interprofessional Education (IPE) that directly correlates to diminished Interprofessional Practice and Collaboration (IPC)

Desired Condition:

- Foundational of IPC through IPE

University of Connecticut Urban Service Track (UST)

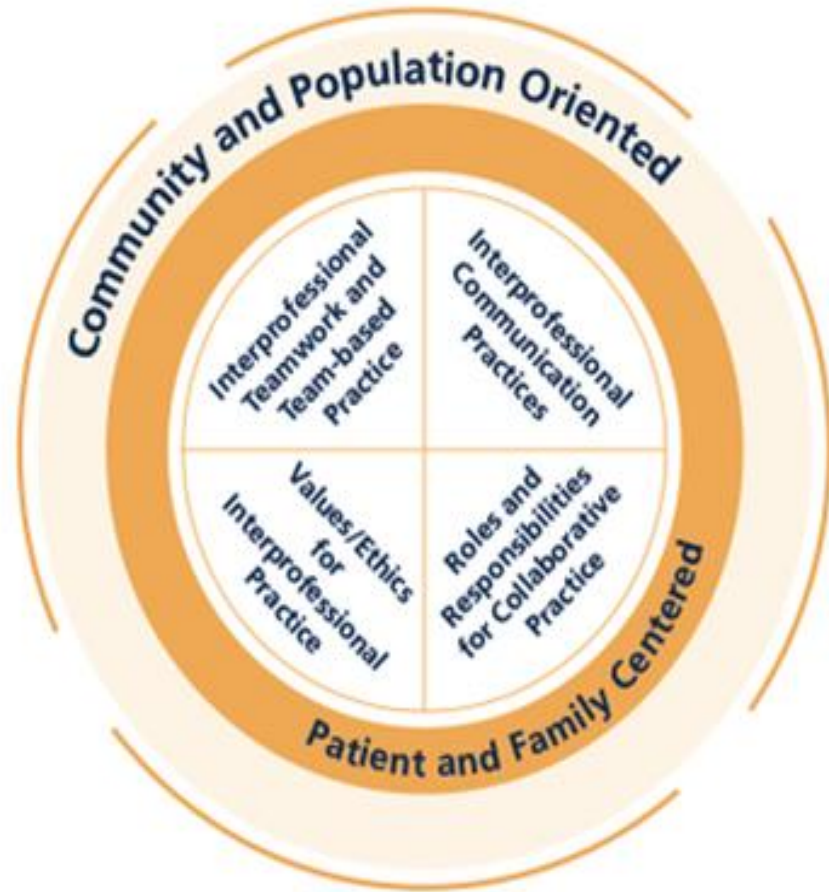


What is Urban Service Tract?

- A program comprised of select students from 6 health profession programs that encompasses:
 - ❖ 2 Universities
 - ❖ 4 Campuses
 - ❖ Nursing, Medicine, Dental Medicine, Pharmacy, Physicians Assistants, Social Work
 - ❖ 160+ Healthcare Student Participants, annually

Urban Service Tract:

- Focus
- Competencies
- Curriculum



→
The Learning Continuum pre-licensure through practice trajectory

Vulnerable Populations Lenses

- ***Elderly***
- ***Children & Youth***
- ***Immigrants & Refugees***
- ***Patients with Substance***
- ***Incarcerated & Ex-Offenders***
- ***Veterans***
- ***Individuals with HIV/AIDS***

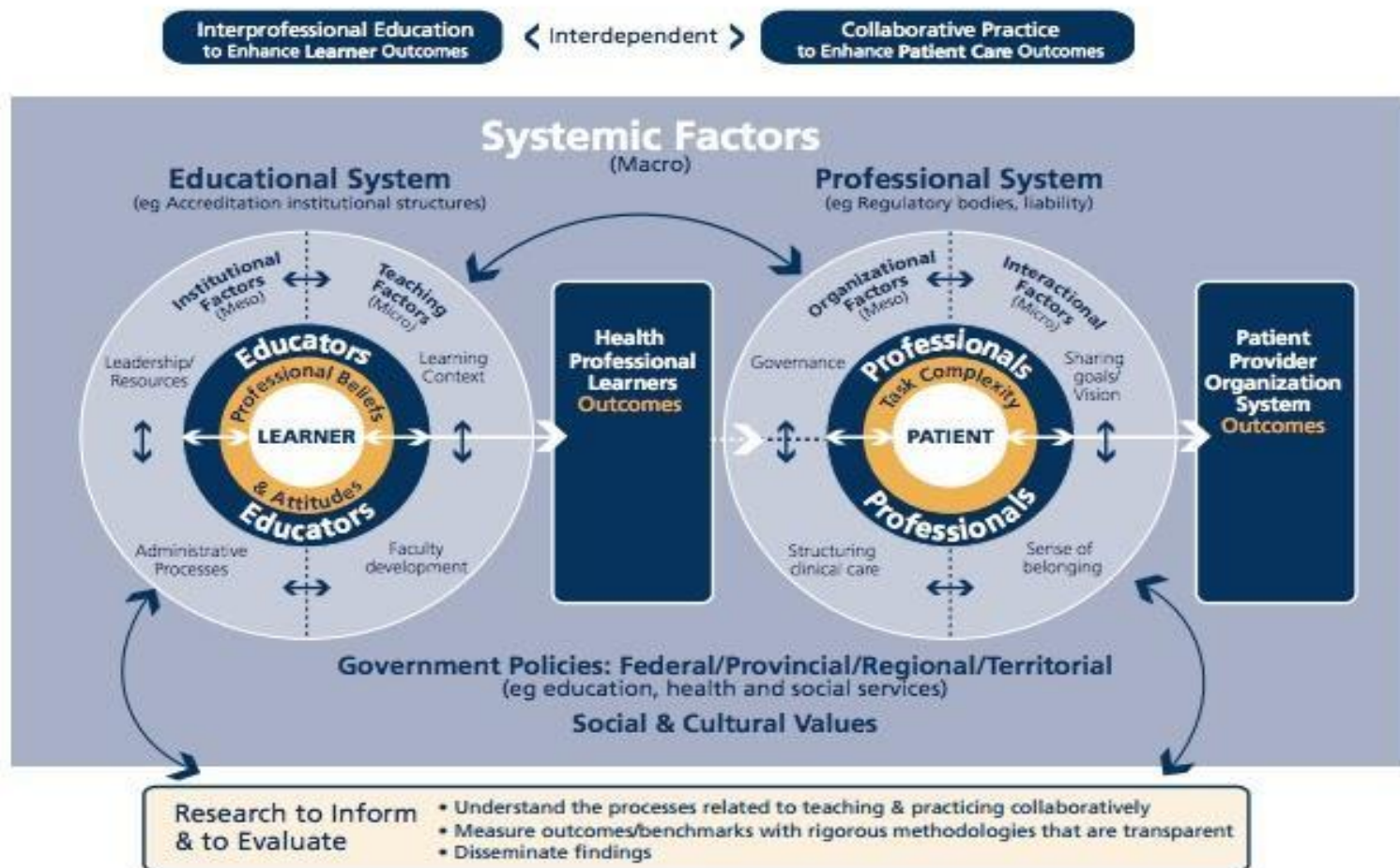


Competencies



- ***Cultural & Linguistic Differences***
- ***Population Health***
- ***Multiple constituencies***
- ***Health care Financing & Management***
- ***Interprofessional Teamwork & Leadership***
- ***Community Resources***
- ***Advocacy***
- ***Resource Constraints***
- ***Health Policy***

FIGURE 1: Interprofessionalism as the field of interprofessional practice and interprofessional education: An emerging concept.



Reprinted with permission from D'Amour, D. & Oandasan, I. (2005). *Interprofessionalism as the field of interprofessional practice and interprofessional education: An emerging concept*. *Journal of Interprofessional Care*, Supplement 1, 8-20.

Example of applicability and utilization of learned skills:

Better Breathing Program:

- *Scholar led outreach*
 - *Asthma Education*
- *Urban environment*
 - *One of 10 worst school in Connecticut*
 - *Diagnosed asthma rate of 42%*



Asthma Camp

November 6, 2015



Team Leads:

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MD Candidate 2018

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Quinnipiac University
PA Candidate 2016

Meteyana Miller
University of
Connecticut
BSN Candidate 2016













**WORRY
DOLLS &
SUPERHEROS**



STATION 3



The Smalley Bees
Have Their "Eye" on College

CONN

The Smalley Bees
Have Their "Eye" on College

















5th Annual Sickle Cell Walk-A-Thon & Health Fair

INFORMATION SESSION AND PRIMER *OCTOBER 11, 2015* *TELE-CONFERENCE*

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Urban Service Track Scholar



Citizens for Quality Sickle Cell Care



Statistics:

Evaluation Data: Survey 2014 – 2015 (1st and 2nd year scholars)

As a result of your UST participation...

Category (Post Completion Year 1 and 2 in Urban Service Track Program)...	N (87): Percent Indicated Strongly Agree/Agree
familiarity with other health care professions	98%
value in interacting with interprofessional faculty	94%
value in the content provided from each learning retreat	96.5%

Mentoring

- *Faculty to students*
- *Peer to peer*
- *Urban Service Tract Leadership Cabinet*
- *Professional meetings and conferences*
- *Community Based Interprofessional Projects*
- *Interprofessional team structure and leadership for all service learning activities*





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Statistics: Value

Year	Student Contacts	Clients	Hours	*Hourly Value (\$)	Value Service Hours (\$)
2007	27	345	126	26.03	3279.78
2008	125	736	597	26.49	15,814.53
2009	105	2905	563	26.98	15,189.74
2010	560	5716	2940	27.77	81,643.80
2011	452	4705	2054	28.26	58,046.04
2012	510	4387	2242.5	26.92	60,368.10
2013	547	3998	2405.5	26.43	63,577.37
2014	552	3921	1723	26.79	46,159.17
2015	601	3416	2350	27.77	65,259.50
Totals	3,479	30,129	15,001		409,338.03
Source: http://independentsector.org/uploads/resources/ValueofVolunteerTimebyState2001-2015.pdf					

Attestations:

- “My time in UST as one of the most memorable and valuable experience in my time at UConn. My perspectives on the value of interprofessional, team-based health care delivery developed from my experience volunteering with and leading UST programs.” - Scholar (School of Dental Medicine)
- “UST is an incredible experience and I am so proud of my myself for having had this desirable experience. Thank you so very much. I am beyond a shadow of a doubt assured it will guide my future clinical practice all the more holistically.” - Scholar (School of Nursing)
- “UST elevated my medical education experience to include a curriculum on professionalism and teamwork that would have otherwise been missing. I know without any doubt that every UST alumni has had the values of teamwork, communication, and service instilled in us and that our collective practices will be better for it.” - Scholar (School of Medicine)

Challenges:

- Limited faculty and resources:
 - A large part of what Urban Service Track provides, in terms of education and urban services, is on a voluntary basis for the learner and faculty.
 - Solution: choosing the “right” faculty who have a commitment to the community, their practice, and the profession. UST is now able to “tap” alumni who remain in the state as community preceptors, mentors & faculty.

Challenges:

- Challenges to interprofessional collaborative education lay in that, as students, there are other academic time commitments/constraints.
 - Solution: Creating an environment and structure in which students can take back what is learned in an efficient and effective manner
 - Some individuals have a natural capability for collaboration; It can be learned, however to fully appreciate interprofessional collaboration within health care requires forming an understanding of each profession's practice, breaking down the barriers (misconceptions, biases, etc.) between the roles, and fostering a culture of collaboration to provide the most effective, efficient, accurate, and cost conscious care for patients.

Opportune Outcome:

- Utilizing an Urban Service Tract program to ready our nursing students to actively participate in an interprofessional workforce.
 - What do we know as a measurable outcome?

Future Research:

- Interprofessional Education to Interprofessional Collaboration and its influence on patient outcomes.
- Cost effective?
- Decrease medical testing and procedures, decrease errors in Health care, decrease missed diagnosis

In Summary:

Our Purpose of the Presentation:

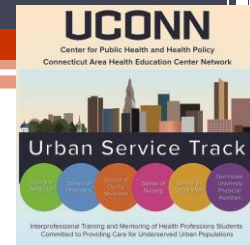
- To enhance knowledge of IPE for nurses in education

Emphasis:

- The importance of academics engaging Health Care students in thinking about interprofessional practice and, as a stepping stone to initiating IPE within nursing education.

Interprofessional Education for Health Care Students

Committed to Connecticut's Underserved Populations



Trishanna Bunsie, Linda Hoang, Rubby Koomson, Angelica Lee, Jhennelle Lee, Meteyana Miller, Megan Ryan
Urban Service Tract Cohort #8, Fall 2014-Spring 2016, UConn Nursing Class of 2016

INTERPROFESSIONAL EDUCATION AND SERVICE LEARNING INITIATIVE

- The Urban Service Track (UST) is a collaboration between 2 Universities, 6 schools and 4 campuses focused on training health professions students on the medical management of vulnerable and underserved populations in urban communities.
- The goal of UST is to develop a cadre of well-qualified health care professionals committed to serving Connecticut's urban underserved populations who value collaborative team-based care and practice.
- The educational partners include: the University of Connecticut Schools of *Dental Medicine, Medicine, Pharmacy, Nursing & Social Work* and the Quinnipiac University's *Physician Assistant* program
- The community partners include: *healthcare, social service and faith based* organizations as well as non-profit and professional organizations.
- Through UST, student participants provide public service to citizens in the state that focuses on: raising awareness of health careers, public health and primary care. More than 50 programs are delivered annually to approximately 4,000 individuals.



Better Breathing Program:

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 - Asthma Education
- Urban environment
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CURRICULAR FOCUS AND COMPONENTS

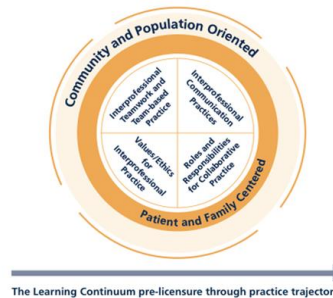
Competencies

- Cultural & Linguistic Differences
- Population Health
- Multiple constituencies
- Health care Financing & Management
- Professional & Ethical Conduct
- Quality Improvement & Patient Safety
- Interprofessional Teamwork & Leadership
- Community Resources
- Advocacy
- Resource Constrains
- Health Policy

Vulnerable Population Lenses

- Elderly
- Children & Youth
- Immigrants & Refugees
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- Veterans
- Individuals with HIV/AIDS

www.publichealth.uconn.edu/urban-service-track.html



Mentoring

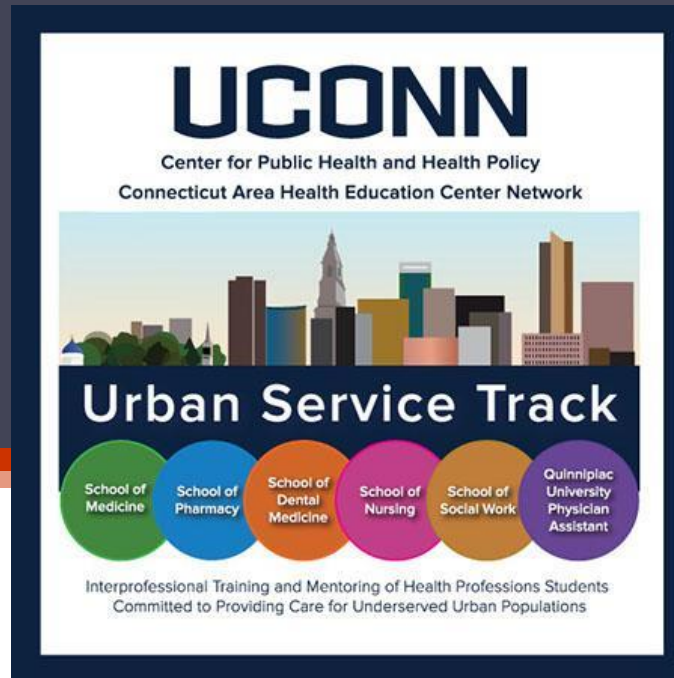
- Faculty to students
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Urban Health Scholars learn to:

- Recognize populations in need
- Be a voice for underserved populations
- Advocate for access to care
- Partner with community-based organizations
- Participate in state, regional and national forums promoting access and improved health

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Questions?



www.publichealth.uconn.edu/urban-service-track.html

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