

University of Illinois at Chicago
Interprofessional Approaches to Health Disparities (IAHD)

Course Goal: *To equip learners with essential skills to improve health care for underserved populations **and** transform health disparities through interprofessional education, research and collaborative practice.*

The IAHD is a longitudinal interprofessional* course offered during the Fall and Spring to students in UIC Health Professions Colleges. For the 2019-2020 Year, the program is being offered to interested students in College of Medicine, College of Nursing, College of Pharmacy, School of Public Health, and College of Social Work. Students will develop skills for scholarship, leadership and advocacy related to addressing health disparities.

- Trainees will work in interprofessional teams and will engage in a series of didactic (in person and online) and experiential learning activities, including community-based participatory research (CBPR) and quality improvement (QI) training, as well as research development and implementation, designed to provide learners with essential skills to improve health care for underserved populations.
- Trainees will function as effective members of interprofessional teams and will have the opportunity to work with our collaborating community agencies serving vulnerable populations. Students will be able to design research studies around important health issues prioritized through a collaborative process.

***Interprofessional Education** is defined as “when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes” (World Health Organization, 2010). The IAHD learning experiences will be guided by the framework developed by the [Interprofessional Education Collaborative](#). In keeping with the guiding principles of IPEC, the IAHD learning environment will foster collaboration without hierarchy of any particular discipline.

Interested in Joining the Program?

Please review the Program Overview, complete the Course Application on page 8, and send to

DFMRESEARCH@LISTSERV.UIC.EDU

by Friday May 31, 2019

Interprofessional Approaches to Health Disparities

IAHD

University of Illinois at Chicago (UIC)

Overview

The Interprofessional Approaches to Health Disparities (IAHD) is a longitudinal interprofessional course offered during the Fall and Spring semesters for health professions students at UIC.

GOAL

To equip learners with essential skills to improve health care for underserved populations and transform health disparities through interprofessional education, research and collaborative practice.

LEARNING OBJECTIVES

Participation in the IAHD will enable trainees to:

- Effectively engage in identifying and addressing social determinants of health impacting vulnerable populations;
- Acquire working knowledge and hands-on experience with community-based participatory research (CBPR) and quality improvement (QI) methods;
- Develop an interprofessional community-based research project designed to improve health care access, communication, care coordination, or additional priority issues for vulnerable populations;
- Develop skills for functioning as effective members of interprofessional teams; and • Develop skills for leadership, advocacy and scholarship.

RATIONALE

In the current era of health care reform and redesign, new models of health care delivery need careful integration with innovative models of health professions education. Traditional health professions education takes place in silos, with limited opportunities for doctors, nurses, pharmacists, social workers, and other health professionals to learn and practice in interprofessional teams during their formative years. A wealth of evidence supports the usefulness of interprofessional training for effective health care delivery, building collaborative linkages among health professionals and communities, and thereby facilitating the provision of patient-centered care, a cornerstone of quality designated by the Institute of Medicine. Based on consensus by UIC health professional schools, a curriculum structure that integrates longitudinal public health education, with CBPR and QI

research, in an interprofessional learning environment, is essential for preparing health care leaders with skills to effectively address the rising burden of key public health concerns.

KEY PROGRAM COMPONENTS

Health Disparities refer to population-specific differences in the presence of disease, health outcomes, or access to health care. These differences can affect how frequently a disease impacts a group, how many people get sick, or how often the disease causes death or disability. A common foundation of various definitions of health disparities rests on the notion that not all differences in health status between groups are disparities; differences that systematically and negatively impact less advantaged groups are considered disparities.

Community-based Participatory Research (CBPR) is a collaborative approach to research that equitably involves all partners and recognizes the unique strengths that each brings to the table. CBPR begins with a topic important to the community and aims to combine knowledge with action for achieving social change. As an emerging research methodology, CBPR has numerous advantages over traditional research and is more effective in addressing complex health disparities.

Quality Improvement (QI) is a set of methodologies for analysis of performance and systematic efforts to improve it. Given our focus on patient-centered care, we will use the Institute for Health care Improvement's (IHI) Collaborative Model and the Model for Improvement as the guiding framework, with Plan-Do-Study-Act (PDSA) cycles, which stand for **PLAN**: testing a change by developing a plan to test the change, **DO**: carrying out the test, **STUDY**: observing and learning from the consequences, and **ACT**: determining what modifications should be made to the change. Improvement changes are tried through multiple, consecutive 'pilot tests' on a small-scale before committing valuable time and resources to system-wide implementation.

Public Health Education emphasizes health promotion and disease prevention to improve health outcomes for individuals and populations. Traditional medical curricula focus on disease diagnosis and treatment for individuals. Public health principles, including understanding systems and how social and behavioral factors affect health outcomes, are particularly important when considering health care for underserved populations. Despite calls for integration of public health and health professions education, few have integrated public health principles and competencies into traditional health professional curricula.

Interprofessional Education is defined as "when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes" (World Health Organization, 2010). The IAHD learning experiences will be guided by the framework developed by the Interprofessional Education Collaborative (IPEC)* organized around the following Core Competencies for Interprofessional Collaborative Practice:

- Values/Ethics for Interprofessional Practice

- Roles/Responsibilities
- Interprofessional Communication
- Teams and Teamwork

In keeping with the guiding principles of IPEC, the IAHD learning environment will foster collaboration without hierarchy of any particular discipline.

LEARNING ACTIVITIES

Trainees will work in interprofessional teams and will engage in a series of didactic (in person and online) and experiential learning activities, including community-based participatory research (CBPR) and quality improvement (QI) training, as well as research development and implementation, designed to provide learners with essential skills to improve health care for underserved populations.

Interprofessional student teams will have the opportunity to work with our collaborating community agencies serving vulnerable populations. Students will be able to design research studies around important health issues prioritized through a collaborative process.

CBPR & QI Training: Participants will receive training on CBPR and QI methods during the course of the year. Training sessions will be led by faculty from the various health profession schools represented in the program.

CBPR & QI Research: Interprofessional teams will be formed and will engage in a process of mentored research development to identify and address priority health needs of vulnerable populations served by our partnering community agencies. Selecting, planning and evaluating pilot tests will inform and guide best practices. The Collaborative Model will employ a team-based approach, working closely with the faculty leaders and student teams to assist the community agencies in conducting careful needs assessment and piloting small changes through PDSA cycles. The principal focus of CBPR-QI projects will be to determine desired outcomes in collaboration with the stakeholders. For example, a desired outcome might be improvement in access to and retention in high quality, competent care and services for vulnerable patients who have never been in care or who have dropped out of care. Teams will identify priority issues and QI pilot tests that are most likely to succeed and plan small-scale implementation; create joint ownership of projects; develop research design and methodology including action steps; implement projects; evaluate impacts; and tailor interventions based on findings.

Learning activities will be grounded in reflection, self-awareness, collaborative learning and applied practice to successfully promote student acquisition of core competencies to address health needs of vulnerable populations:

- Students will participate in seminars, hands-on immersion work at the community agencies and discussions, as well as leadership and advocacy activities.

- Students will synthesize and disseminate their work, in discussions and in writing, and will present at an end-of-course concluding event. They will also be encouraged to present at national and local scientific meetings.
- Students will submit reflections which will be published in a program publication.

Expected Outcomes:

- A. Improved learner skills for functioning as effective members of interprofessional teams.
- B. Learner acquisition of working knowledge of CBPR and QI methods.
- C. Improved health care access, communication and care coordination for vulnerable populations.

STUDENT RESPONSIBILITIES

- Attend didactic instruction sessions/seminars
- Be an engaged group member and attend group meetings
- Contribute to group discussion and work products
- Prepare and submit course assignments and required reflections
- Present project work at end-of-course concluding event

TIME COMMITMENT

4-6 hours per week. Seminars and classes will be on Thursday evenings, 5-8 pm.

COURSE PARTICIPATION AND CREDIT*

	Medicine	Nursing	Pharmacy	Public Health**
Student Level	M4	Graduate level students (e.g. APNs)	P3	2nd year MPH students
Place in Curriculum	PCM Scholars Program	Independent study NUEL 596 with Dr. V. Gruss	Independent Study	<ul style="list-style-type: none"> • Independent study (all divisions) • Part of Field practicum requirements (CHS students)

* Educational credit will be determined by students' respective schools.

** For Public Health students, the experience can be utilized for independent study (all divisions); Community Health Sciences students may use for field practicum credit if augmented by additional learning activities on the project as approved by CHS faculty representative.

Note: Social work is a core partner in IAHD. This year social work students are unable to participate due to logistical reasons.

EVALUATION

Students will receive formative and summative feedback and will also participate in program and peer evaluation.

APPLICATION PROCESS

Applications are due Friday May 31, 2019

- Applicants will complete the **Interprofessional Approaches to Health Disparities (IAHD) Application** form, provide a brief (1-2 pages) statement describing applicant's interest in participating in the program and a current resume or curriculum vitae and submit to DFMRESEARCH@LISTSERV.UIC.EDU by May 31, 2019. Incomplete applications will not be reviewed.
- Applications will be reviewed and scored by a Program Selection Committee. The decision of the selection committee will be communicated to applicants via email.

COURSE FACULTY & STAFF

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University of Illinois at Chicago
Interprofessional Approaches to Health Disparities (IAHD)
A multidisciplinary course for health professions students

2019-2020 Application Form

Name: _____ **UIN:** _____

UIC Email address: _____

Alternate Email Address: _____

Preferred telephone contact number(s): _____

Your School, program (concentration) and year: _____

Additional Documents to Submit:

1. A brief (1-2 pages) statement describing *“Why I want to participate in IAHD”*.
2. Current resume

IMPORTANT: Please assemble your application as a single PDF document with subject line **“PCM SCHOLAR PROGRAM APPLICATION”** in the following order:

1. Applicant information
2. Personal Statement
3. Resume

Please submit the following application materials electronically to:

Email: DFMRESEARCH@LISTSERV.UIC.EDU

Applications must be received by **May 31, 2019**.

Notifications of acceptance into the IAHD Program will be made via email.