

Engaging in Collaboration: Piloting an Interprofessional Population Health Course in a School of Public Health

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Background

The U.S. healthcare system is in the midst of complex change demanding new levels of collaboration to provide quality care, reduce health care costs and improve health outcomes. There is an increasing focus on moving to care of populations rather than individual care. However:

- Few clinical health professionals are trained in core principles underlying the care of populations; and
- Public health professionals routinely work at the population level but do not necessarily understand the clinical context and current healthcare reform and how they might play a role.

To address this gap, faculty at the University of North Carolina at Chapel Hill (UNC) have initiated the *Healthcare PROMISE (Populations: Reformed Outcomes Management from Interprofessional Systems-Based Education)* program with:

- Interprofessional education (IPE) offerings for both graduate health professional students and practicing health care providers and
- An interprofessional practice (IPP) experience where students and health professionals collaborate on quality improvement initiatives around population health issues.

This poster focuses on the IPE component for graduate health professional students and how it was operationalized across the UNC health affairs schools.

Healthcare PROMISE Collaboration Partners

UNC School of Medicine Beat Steiner, Assistant Dean for Clinical Education

UNC School of Nursing Meg Zomorodi, Clinical Associate Professor*, Betty Nance-Floyd, Clinical Assistant Professor

UNC Eshelman School of Pharmacy Nicole Pinelli, Clinical Assistant Professor

UNC Gillings School of Global Public Health Lorraine Alexander, Clinical Associate Professor, Dept. of Epidemiology; Amanda Holliday, Clinical Assistant Professor, Dept. of Nutrition; Rachel Wilfert, Training Manager, NC Institute for Public Health and Adjunct Asst. Professor, Public Health Leadership Program

UNC School of Social Work Lisa de Saxe Zerden: Associate Dean for Academic Affairs

UNC Physicians Network Robert Gianforcaro, President and Chief Executive Officer

*Team Lead

IPE Population Health Courses

All students ($n=23$) utilized the same core content (based in a School of Nursing course). Public health students had the opportunity to enroll in another course within the UNC Gillings School of Global Public Health.

Healthcare Course

- Housed in School of Nursing (SON)
- Hybrid course (3 credits)
- **6 online modules** covering topics such as population health, quality care, needs assessment, care coordination, patient and community engagement, cost/risk assessment
- **Monthly face-to-face class sessions** focused on team-based case studies, interprofessional collaboration
- Students formally enrolled in SON course also participated in online discussion forums and had additional assignments
- SON faculty as primary teaching lead with supplemental support from other Healthcare PROMISE faculty
- Students from schools of medicine, nursing, pharmacy, social work and also nutrition department †

†joint medicine/public health

Public Health Course

- Based in Public Health Leadership Program; open schoolwide
- Classroom course (1 credit)
- **Supplemental content** covering potential roles for public health engagement with healthcare sector; baseline clinical information, healthcare context, and 'big picture of public health' to facilitate engagement in core team-based case studies
- Taught by 3 public health faculty representing different disciplines
- Students from public health degree programs

Lessons Learned

- **Key inputs for success** included a tenacious team leader, multi-school faculty commitment, student engagement and flexibility with piloting a new course, graduate student assistance for initial curriculum drafts, leveraging of resources
- **Significant challenges** of coordination
- **High motivation of students** to engage in IPE and to cover population health concepts
- **Evaluation data showed increased understanding** of skills/ assets of different professions; particularly on roles of public health and social work
- **Conceptualizing work in practice settings varied** dependent on where students were in their curriculum
- **Separate course for public health** students supported important learning on healthcare context and public health/healthcare intersection BUT separated students from some interprofessional engagement opportunities



Figure 1. Students, Fall 2015

Next Steps

- **Change course structure** to allow for a single course with profession-specific recitation sections that meet periodically
- **Improve course coordination/logistics**
- **Move course towards sustainability** and find additional opportunities to expand access to population health content beyond course
- **Incorporate additional concepts** based on student evaluation feedback
- **Have faculty model interprofessionalism** through more collaborative teaching
- **Increase participation from public health students** from different disciplines