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Utilization of Student Community Health Projects in an Outpatient Primary Care Office

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BROOKFIELD PRIMARY CARE

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Qualities of Service-Learning

Service-learning is an experiential learning modality in which students engage a community to better address community needs.

Integration of service-learning into medical education has steadily increased since the 1990s.

Benefits include problem-solving, contextualizing abstract knowledge with authentic situations in the real world, developing community relationships, improving the conditions of the underserved, and developing medical professionals who experienced in addressing health inequities.

There is limited research on reciprocal transfer of knowledge between medical students and communities. There is also limited research on measuring effects on cultural competency.

34 community health projects completed at Brookfield Primary Care since 2015, 24 of which produced patient education handouts for distribution in the outpatient setting.

Economics of Service-Based Learning

The associated costs of service-based learning programs may include compensation for faculty/staff or community mentors, costs of supplies, compensation for research and development of an educational program, and compensation for those evaluating student works.

Limited discussion directly comparing costs of service-based learning vs. traditional pedagogy in medical education.

In a 2000 study, service-based learning among school aged children showed costs ranging \$14 per student to \$149 per student in 1996, representing <1% of educational costs. However, educators were not compensated for the additional labor of executing these programs.

Community Perspectives

Amanda Kolb, director of the family medicine clerkship at UVM, describes the goal of community health projects during the family medicine clerkship:

- “The visibility of the project to the medical office may be very large if it is addressing an issue within the practice itself or maybe not visible at all for instance a project that primarily focuses on the community (giving a lecture to students in a local school about sexual health or holding an informational session at a senior center).”

An anonymous medical professional at Brookfield Primary Care described some common barriers to integrating community health projects into patient care:

- “The [community health] projects aren’t widely utilized at the clinic because there’s not enough time to discuss them with patients, but several past projects stand out to me in terms of thoroughness and level of detail in the project.”

Methods

Wrote survey to investigate the utilization of student projects at Brookfield Primary Care.

Surveys were anonymous and primarily multiple-choice in order to protect survey responders' privacy.

Asked questions about barriers to project utilization such as quality and relevance, and reasons for utilizing past projects in some way into their medicine practice.

The family medicine clerkship for the University of Vermont requires a community health project from all students, which has culminated in a number of patient education handouts and presentations over the years.

1. Agree or Disagree: In general, UVM community health projects have been helpful to my practice. (Please circle)

Strongly Agree ~~Agree~~ Neutral Disagree Strongly Disagree Cannot Assess

If not, why have they not been helpful or informative (circle all that apply)?

- A. Poorly researched
- B. Poorly formatted
- C. Poorly written
- D. Poorly communicated
- E. Seldom see the final product
- F. Prefer materials from professional organizations (eg, USPSTF, ACOG)
- G. Did not present any new information
- H. Not enough time to incorporate them in patient visits
- I. Information not relevant to practice
- J. Other: _____

2. In what ways have the projects been helpful to your practice (choose all that apply)?

- K. Learned something
- L. Incorporated some elements into patient counseling
- M. Distributed pamphlets to patients
- N. Helped patients better understand health
- O. Relevant to patient concerns
- P. Well researched
- Q. Refer to it in my practice
- R. Easy to understand
- S. Other: _____

3. This project aims to identify common aspects of impactful projects. Which projects have you found most helpful? If possible, please identify the project topic, author, and any identifiable information.

4. Agree or Disagree: The community project is a valuable use of student time during the family medicine clerkship. (please circle)

Strongly Agree ~~Agree~~ Neutral Disagree Strongly Disagree Cannot Assess

Results

Two survey respondents.

Both respondents “agree” with the statement, “ In general, UVM community health projects have been helpful to my practice.”

Cited barriers to project utilization included “Seldom see final product,” “not enough time to incorporate into patient visits,” and the challenges of integrating them during the current COVID-19 crisis. **Critically, none of the respondents cited “information not relevant to practice” as a reason for non-utilization.**

The positive impact and aspects of the projects include “learned something,” “incorporated some elements into patient counseling,” “well researched,” “easy to understand,” “distributed pamphlets to patients,” and “relevant to patient concerns.”

Both survey respondents “strongly agree” with the statement, “The community project is a valuable use of student time during the family medicine clerkship.”

Efficacy and Limitations

The effectiveness of this quality improvement project can be assessed by validating the results with a larger data set at different clinical sites.

Limited survey respondents, only two responses.

Because they were anonymous multiple choice surveys, respondents may have felt constrained by the options available to them.

The project only assesses the perception of student community health projects through the perspectives of health professionals or people who are involved in medical education. These medical educators may have very different perspectives compared to the medical students conducting the project and the target population for the intervention.

Future Directions

Quality improvement projects that solicit perspectives of medical students conducting the community health projects, and the patients/target population that the project aims to help.

Increase the number of respondents/participants.

Conducting research through interviews instead of surveys in order to collect a wider variety of responses and experiences surrounding the community health projects.

Soliciting faculty and patients for the most helpful community health projects and identifying commonalities among the most effective projects.

Collecting data across multiple different clinical sites and comparing them.

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