



Teaching Population Health and Safety Using Reflective Learning of Systems-based Healthcare with Medical, Nursing, and Dental Students

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“All health care professionals should be educated to deliver patient-centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches, and information.”

Intervention

The David Geffen School of Medicine worked with the UCLA School of Nursing and the UCLA School Dentistry to create a joint, year long, required, small group course, focused on healthcare systems. The course met nine times between late September through early June. Each small group lasted for up to three hours, and included 4 or 5 third year medical students, with three or four second year advanced practice nursing students or third year dental students. Students were asked to reflect on their clinical experiences as they related to each of the topics, and share their written reflections with the group.

Two facilitating faculty worked with each group. Their disciplines included dentistry, advanced practice nursing, medicine, social work, and psychology. The IPEC competency domains were specifically a part of the goals of the course.

- **Faculty development:** Faculty met as a group for a half day at the start of the course, and then over breakfast for an hour immediately before each seminar meeting. They were expected to have read all of the readings for the week, and have read the reflective writings each students sent at least 48hours prior to class to everyone in the group. Faculty received continuing education credit for participation in the faculty development. Tutors gave ongoing feedback about the course and the readings.
- **Student feedback:** Each small group sent representatives for each of the two disciplines in their group to a feedback session with the course directors in the winter and in the spring. The students were also invited to complete on-line evaluations of their tutors and the course at mid year and at the end of the year.

History of intervention

2005: The course was created for medical students.
 2007-2008: Leadership meetings of the schools of nursing and medicine
 2009: Pilot with two nursing faculty and a few advanced practice nursing students as elective within required medical student course
 2010: Required participation of second year acute care (20) advanced practice nursing students
 2012: Retreat with leadership at school of dentistry
 2013: Pilot with 18 third year dental students and 2 dental faculty
 2014: Required for all 88 third year dental students and 7 dental faculty
Plan for fall 2015: Required for 108 dental students, 24 advanced practice nursing students, and 180 medical students

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Topics

First quarter	Second quarter	Third quarter
Teamwork	Boundaries and Burnout	Stigma and Implicit Associations
Moral decision-making	Healthcare delivery systems	Conflict of Interest
Collaboration and conflict resolution	Quality improvement and error	Sexuality

IPEC Interprofessional Education Competency Domains

Competency Domain 1: Values/Ethics for Interprofessional Practice

Competency Domain 2: Roles/ Responsibilities

Competency Domain 3: Interprofessional Communication

Competency Domain 4: Teams and Teamwork

Example of prompt for reflective writing:

Write about an experience you have had or witnessed of stigma, or bias, or assumptions. This could be directed at you or at another student or a patient. It could be based on race, ethnicity, gender, a disability/illness (such as depression or ADHD), or discipline (such as nursing or psychiatry). What happened? How did you react? What did you learn from this experience? How could we prevent this in the future?

Example of video/audios:

I, Too, Am Harvard
<http://itooamharvard.tumblr.com/>

<http://www.wnyc.org/story/invisibilia-how-become-batman>

Example of Reading:

Aronson J1, Burgess D, Phelan SM, Juarez L. Unhealthy interactions: the role of stereotype threat in health disparities. Am J Public Health. 2013 Jan;103(1):50-6.

Results

Student feedback: Students and faculty who came from nursing and dentistry in the first year when the course was an elective loved the class. The first year that it was required for nursing, and the first year it was required for dental students, about 10 percent of the students complained loudly about how inconvenient it was, and that they felt the course was geared toward the medical students. This improved over the years with the nursing students. This reflected the evolution in sentiment the medical students have had over the years, from a resented to a favored course. Students want activities in each class, not just talk.

Faculty feedback: Faculty uniformly value the faculty meeting before class, which is a lively interaction of ideas. The faculty want more understanding of why topics are chosen, and generally wish for more session with their students. The most common issue for faculty is a desire to teach rather than facilitate. This has been partially resolved by having a student lead each session. Creating a nonjudgmental setting for exploration of sensitive topics can also be challenging for some faculty.

Conclusions

- Setting up a joint course is made easier by having the schools in physical proximity. However logistical obstacles abound, including curricular computer platforms, quarter versus semester systems, graded versus ungraded curriculum, and full-time versus part-time students.
- A common obstacle to creation of any new curriculum is that it takes away from clinical time. For the nursing students this translated to financial loss, for the dental students less time to complete procedures required for graduation, and for the medical students potentially poorer clinical grades. Many faculty in all three schools opposed the time away from clinical settings.
- Medical students appreciated the opportunity to learn about nursing and dental school, and were impressed at what these students were expected to do.

Future Directions

- Improve the integration of dental topics and dental students into the small groups and the readings
- Address potential conflict of having a clinical supervisor teach a small group including their dental students
- Addition of simulations to bring more practical interactions
- Creation of clinical settings for interaction between the three groups

