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Primary Care for the Homeless and Formerly Homeless: A Community Based Quality Improvement Project for Health Professionals

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The Interdisciplinary Professional Education Collaborative (IPEC) was created in 1994 by the Institute for Healthcare Improvement (IHI), with assistance from the Health Resources and Services Administration's Bureau of Health Professions (HRSA/BHPr) and the Pew Health Professions Commission. Its aim is to improve health care by equipping new health professionals with the ability to continually improve the health of individuals and communities they serve. The IPEC seeks to prepare health professionals with: 1) an understanding of the knowledge that will drive continuous improvement in the daily work of health service delivery, 2) skills in the application of that knowledge, 3) a professional ethic that supports integrated work, and 4) competency for integrated health professional work aimed at meeting individual and community health needs and making health services more cost effective.

Four sites were selected to form the initial IPEC: Charleston, South Carolina--Medical College of South Carolina; Cleveland, Ohio--Case Western Reserve University and Cleveland State; Philadelphia and Pittsburgh, Pennsylvania--Allegheny University of the Health Sciences, LaSalle University, Duquesne, and Carnegie Mellon Universities; and Washington, D.C.--George Washington and George Mason Universities. Each site experimented with educational experiences congruent with the aim and objectives of IPEC but was tailored to local needs and culture. Preliminary results of IPEC's work has been reported elsewhere.¹⁻⁷

In 1997, BHPr/HRSA created the Community-Based Quality Improvement Education for the Health Professions (CBQIE -HP) to initiate six new sites patterned after the IPEC Model. The Department of Family Medicine at Thomas Jefferson University was selected as one of the six sites. The project will focus on improvement in primary care for the homeless and formerly homeless. This effort to integrate improvement knowledge into health professions education and community health improvement is occurring at three levels:

1. As part of a course entitled Interdisciplinary Team-based Health Service for Underserved Populations, involving medical students and nursing, physical therapy and occupational therapy students from the College of Health Professions, who work in teams at four homeless shelters in Philadelphia. The course involves a didactic and practical component, and each team develops, implements and evaluates an intervention, using the principles of quality improvement (QI).
2. As a component of the H.O.P.E Urban Healthcare Initiative, involving over 600 medical and nursing students, and 90 faculty working at three shelters, and at Prevention Point Philadelphia, which provides primary care services. Several specific projects are underway utilizing QI principles.
3. As part of the development of a community health center in lower North Philadelphia. Family medicine residents and faculty, and community health nursing faculty and students are working with Project H.O.M.E as part of the Philadelphia Plan, a comprehensive neighborhood revitalization program.

An integral component of these projects is the formation of a Local Improvement Team (LIT), composed of representatives from the Department of Family Medicine, the College of Health Professions, Jeff H.O.P.E leadership, Hospital administration, the Philadelphia Health Management Corporation, Project H.O.M.E., and the homeless community. Outcomes of these efforts will include: improved primary care for the homeless and formerly homeless; knowledge about how integrated efforts can accelerate improvements in community health, health services delivery and health professions education, and about the change mechanisms involved in integrating interdisciplinary health professions education, health services and community health improvement.

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