Jefferson Interprofessional Conference

HIV–ABC: Bringing Healthcare Home, University of Kentucky Project CHANCE Grant

By: Julia Brenneman & Kelley Ratermann
Goals

- Share strategies in developing an interprofessional service learning opportunity.
- Demonstrate the value of building upon existing infrastructure (i.e. Center for Interprofessional HealthCare Education) as an effective way to combine interprofessional learning with sustainable service-learning projects.
- Explain need for collaboration by an interprofessional faculty team in creating and sustaining interprofessional student projects.
Conference Goal 1: Develop strategies to incorporate the IPEC Interprofessional Collaborative Practice Competencies into health professions education and/or practice.
The Beginning...

- University of Kentucky (UK) College of Pharmacy structure
  - Umbrella organization
  - American Pharmacists Association (APhA chapter)

- Previous Project CHANCE Grant
  - Criteria
  - Existing structure
  - Higher stakes
2011–12 Project CHANCE Grant

- **New focus:** INTERPROFESSIONALISM
  - Utilizing resources
  - Community based organization involvement
  - Students from other healthcare colleges?

- **Leadership Legacy (LL)**
  - Structure: Colleges of Medicine, Pharmacy, Dentistry, Nursing, Health Sciences, Public Health
  - Proposal process
  - Incorporation
Budget

- **TOTAL**: $10,000
  - Supplies: $1,700
  - Travel: $4,350
  - Training: $800
  - Supplement: $2,500
  - Patient Education: $500
  - Web Development: $150
Final ‘Ideal’ Product

- Two arms
  - Bluegrass Care Clinic – pharmacy only
  - LL/Moveable Feast – interprofessional

- Training sessions
  - Baseline disease knowledge
  - HIPAA
  - Reality, healthcare team, counseling cards?

- Collaboration to reach goals, obtain feedback
  - Emphasis on SERVICE learning
“HIV–ABC: Bringing Healthcare Home” (Nuts & Bolts)

- Baseline knowledge, augmentation
- Real patients
- Active participation
- Unknown healthcare peers
- Expanding beyond comfort zones
  - Camaraderie?
  - Role definition?
  - Enhancing patient adherence/well-being?
Primary Goals

1. Increase empathy and understanding of HIV/AIDS among interprofessional students by increasing exposure, hands-on education.

2. Provide comprehensive patient care to patients who are bed-ridden or incapacitated in such a way that prevents them from leaving home.

3. Partner with a community-based organization to reach a more diverse patient population and to enhance the delivery of MTM services.

4. To increase knowledge among an interprofessional group of students about the roles, responsibilities and scope of practice of each in positively affecting patient care.
Roadblocks

- Initial buy-in..."too big"
- No benchmarks
- Student motivation
- Negative undertone, complex patient population
- Follow-up
  - Pre-surveys
  - Post-surveys
  - Patient opinions
Implementation

- Academic medical centers, outpatient (HIV) care clinics established
- Interprofessional organization vehicles
- Documented gap in care
- Protocols, training
- Barrier anticipation
- Grant money...always helps
Evaluation (Freeth, 2002)

Level 1 – Reaction
Level 2a – Modification of attitudes & perceptions
Level 2b – Acquisition of knowledge & skills
Level 3 – Change in behaviour
Level 4a – Change in organizational practice and/or service delivery
Level 4b – Benefits to patients/clients
Data Collection

- Pre–Post survey of participants (Levels 1–3)
- Reflective comments / Debriefing (Levels 1–3)
- Patient survey (Level 4)
Outcomes: Participation in this IP service learning project with a CBO enabled students to...

- Enhances health professions student camaraderie (Values/Ethics, Team/Teamwork)
- Provides health professions students with an opportunity to learn with, from, and about one another as they augment their knowledge of HIV/AIDS through practical experience (IP Communication).
- Provides an opportunity for health professions students to use the knowledge of one’s own role and those of other professions to appropriately address the healthcare needs of individuals with HIV/AIDS patients (Roles/Responsibilities)
Lessons Learned

- Buy-in
- Organization is key – require orientation
- IP service learning provided a mechanism for students to connect with the community
- Include intermittent opportunities to allow students to share their experience and connect with the project more directly
- Strengthen communication with patients during clinic visit or otherwise in preparation
Conclusions

- Types of learning that took place within IP route setting
- Value-based service learning
- Future directions...
Acknowledgements

- Project advisors – Dr. Frank Romanelli, Dr. Andrea Pfeifle
- Funding Source – APhA
- Project Facilitators (HIV–ABC Committee Chairs) – Julia Brenneman, David Wittmer
- Leadership Legacy participants

