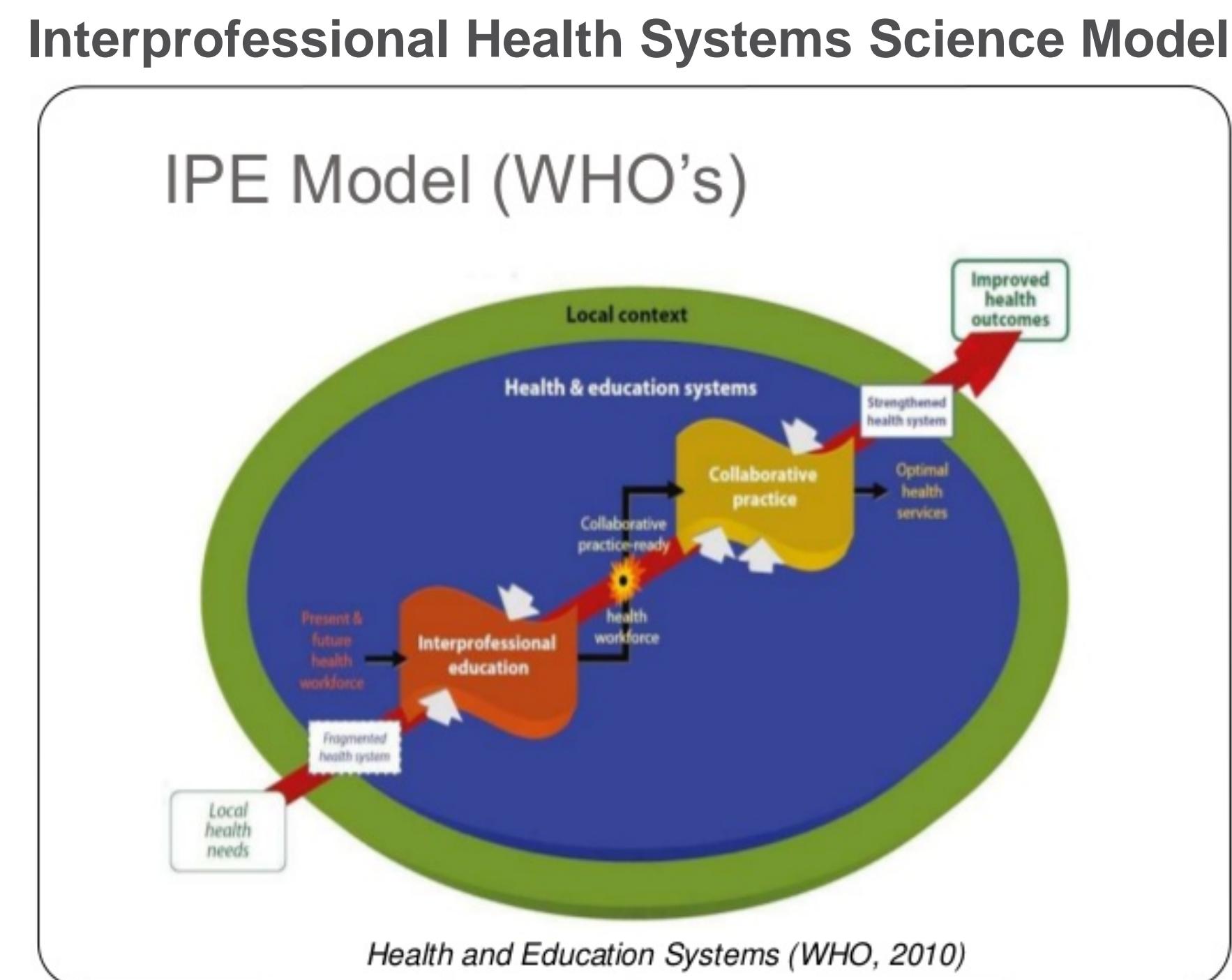


Teaching Health System Science through Longitudinal Patient & Medical Student Navigation Partnerships

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Innovation Identified



Navigators develop health systems science knowledge and skills by functioning as a member of an interprofessional patient-centered medical home (PCMH) team. Navigators perform a variety of functions as a critical member of the health care team leading to increased health system knowledge and positive impact on the team and patient. This innovation is built upon the interprofessional dialectical model of team learning where teams build on different perspectives of members by problem-solving in a back and forth process of sharing, co-construction and constructive conflict.

Resources Needed and Potential Barriers

The PODS approach required the following:

- Identification of high-performing community PCMH practices with complex medical and social patients, willing to engage in medical education innovations.
- A faculty/practice development process to build partnership in the curriculum, share goals and objectives, and identify potential student population health and QI activities that would enhance patient and population outcomes.
- IRB to track student learning, patient outcomes, and practice/partner impacts.
- Development of a core curriculum for students, including online resources, and monthly meetings with course directors.
- Identification of staff support for curriculum implementation.
- Credentialing, EMR training and community practice credentialing.
- Approval for course implementation by curriculum governance structure within the medical school.
- Development of a recruitment process for pilot students and patient/families.

Need/Gap Addressed

Health System Science is needed in the preclerkship curriculum, but has been difficult to integrate into a crowded curriculum in a meaningful way.

Early health professional students may not have sufficient experience with health care to understand the challenges, and often have misperceptions of other health professionals.

Community practices with resource limitations and complicated patients are wary of additional teaching responsibilities with early medical students.

The Patient Navigator (Professionals Orchestrating Delivery Systems - PODS) approach is intended to address community practice needs, leverage the power of team learning, and provide students with a meaningful curriculum in health system science that encourages health system thinking.

Two high-performing patient-centered medical homes (VA Center of Excellence in Primary Care Education and Neighborhood Family Practice, a federally qualified community health center) have integrated first and second year medical student navigators on their PCMH teams, serving identified veterans and newly arrived refugee families.

Timeline Proposed

Our team took six months to develop the curriculum, plan evaluation strategy and the complete IRB submission.

We chose to time the recruitment of medical students into the program to facilitate student interest in the "pilot".

Our major barrier is the scalability of the project beyond 2 community practices and 30 medical students. We anticipate that the majority of time for a full-scale implementation would involve identification and preparation of practices which would vary by institution.



Stakeholder Input

We held a stakeholder partner planning retreat to gain insight and build community relationships during the development phase. The first cohort of students at both the VA Center of Excellence and Neighborhood Family Practice are navigating alongside their partner patients and families within the patient/family's PCMH team. The formal mixed method evaluation of the first cohort is in progress, led by a community health researcher/evaluator and a medical anthropologist from the CWRU Prevention Research Center for Healthy Neighborhoods.

- Evaluation domains linked to our 9 SOM competencies and associated educational program objectives include:
 - Impact on student health systems knowledge/skills and professional identity formation
 - Impact on patient/family process and outcome measures, satisfaction with team and health care experience
 - Impact on veteran and refugee population health outcomes (through registry management and systems improvements within each practice)
 - Impact on clinical interprofessional patient-centered medical home team and community partners (close navigator collaboration with social work refugee resettlement teams)
- Early qualitative feedback from patients, practice teams, and community partners includes uniformly positive comments regarding the impact of medical student navigators as part of the care team.

Institutional Contact

Please provide the name and email of an institutional contact(s) for other Consortium members interested in learning more about your innovation

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