Heart Failure Project

For many patients, a diagnosis of congestive heart failure means a hospital readmission is likely. Interdisciplinary student teams in the Heart Failure Project are hoping to change that.

Collaboration among the ATSU Aging Studies Project, Banner Heart Hospital, East Valley Adult Resources, and the Greater Valley Area Health Education Center has given rise to the grant-funded program, launched in fall 2011. Students actively work in interdisciplinary teams to educate patients with a primary diagnosis of congestive heart failure on proper dietary and nutritional guidelines. The goals are to help patients become better informed and better able to self-manage their condition. This can result in improved quality of life and reduce re-hospitalizations. And, students receive a healthy dose of IPE, learning about team-based care and the challenges that face older adults with chronic conditions.

"We could not recreate these experiences in the classroom," says Elton Bordenave, MEd, CHC, director, Aging Studies Project, Arizona campus. Bordenave oversees this project and is responsible for developing interdisciplinary programming emphasizing geriatric healthcare.

"There are only a handful of projects like this around the country, and our students are getting to play an active role in perhaps the most aggressive of these experiments," he says.

By visiting patient homes once a week for four weeks, students are exposed to economic, physical, and social situations that they wouldn't have access to otherwise. Plus, they are working with peers from other disciplines, hopefully soaking up fresh perspectives and new skills.

ATSU students from four disciplines are participating – osteopathic medicine, dentistry, physician assistant, and occupational therapy. As part of an Arizona state-wide initiative to decrease the number of hospital readmissions for specific health issues, even more partners are being invited to participate. Grand Canyon University nursing students are already participating and, in the coming year, pharmacy students from Midwestern University will join the team.

It's unclear whether patient outcomes are directly impacted by the interdisciplinary nature of the teams delivering the program; nonetheless, the project has won the hearts of students who are transcending disciplinary boundaries. Program data are limited, but results are promising. Data on the initial 25 congestive heart failure patients show that none of the participants were readmitted to the hospital within 30 days of discharge. The national 30-day average is a 25 percent readmit rate.



Still Standing Fall Prevention Outreach

According to the Centers for Disease Control and Prevention, a third of adults over age 65 fall each year, causing moderate to severe injuries. Since 2008, ATSU has made significant contributions to Arizona's response to the fall issue through the Still Standing Fall Prevention Outreach.

Physical therapy, occupational therapy, audiology, athletic training, and physician assistant students are trained in A Matter of Balance fall prevention curriculum (licensed by MaineHealth's Partnership for Healthy Aging, Portland, Maine) and are assigned to one of 23 senior and community centers around Maricopa County where they deliver the program over an eight-week period. Students are paired in interdisciplinary teams and deliver the curriculum to groups of 10-15 older adults.

Students have fallen for this IP opportunity. To date, 140 coaches have been trained and nearly 1,000 seniors have benefited. The program, which now runs nine months out of the year, meaningfully

connects students from many disciplines with populations they wouldn't be exposed to normally.

MaineHealth reports many positive outcomes for elderly participants. Evaluations indicate increased physical strength, improved confidence in their ability to manage a fall, and increased ability to perform everyday tasks.

"More than once I have received calls from [elders] who have told me that the fall prevention classes helped them overcome their fear of falling and allowed them to go out and do basic activities like grocery shopping," says Bordenave, who also oversees this outreach.



Developed by the Interprofessional Education Collaborative

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Core competencies

House Calls

"Working as a tech in a hospital I saw firsthand how important every member of the team is to a patient's overall care. I also saw very poor examples of teamwork. I watched physicians act disrespectfully toward members of the healthcare team. As I began medical school, I was thankful for these examples, both good and bad," says second-year KCOM student Hillarey Stone. "I truly understand the importance of even the most minor players on the team, and I hope to always respect their opinions and value their important contributions to patient care."

Students at KCOM (osteopathic medicine) and Truman State University (nursing, health sciences, and communication disorders) are connecting the IP dots, teaming up for House Calls, an in-home patient program that focuses on health promotion and disease prevention in senior and vulnerable populations.

Sponsored by the Department of Family Medicine, Preventive Medicine and Community Health, House Calls is part of the Complete DOctor course. Curriculum includes patient medical and social histories, basic physical exams, and patient education. Students, who have the option of joining an IP or DO-only team, make four hour-long visits to volunteer patients over a 12- to 14-month period and meet with faculty after each visit to discuss patient findings. IP student groups also discuss team dynamics.

"It goes beyond the nuts and bolts of a medical visit in order for students to see that their patient is more than their illness," says KCOM Dean Margaret Wilson, DO, '82, "There are so many other issues that impact that patient's ability to stay healthy and get good healthcare."

Both students and patients are benefiting. Students develop meaningful relationships with real patients in real settings. They interact with interprofessional peers while learning to administer a range of functional patient assessments.

This unique avenue for receiving healthcare allows patients to share wisdom and healthcare observations. And, they gain friends and important social contacts while taking advantage of community resources.

Student interest in being a part of IP teams continues to increase. When it launched in 2002-03, seven teams participated in House Calls. In 2010-11, 50 teams participated.

"I think that the interprofessional opportunity to explore how to work with each other is a great experience and evolves as they continue to work within that team," says Janet Head, EdD, director, Aging Studies Project, Missouri campus, and AHEC program co-director. AHEC contracts with Family Medicine to coordinate patient volunteers for the program. Dr. Head knows a thing or two about IPE. Having been a nurse, she too has personally experienced the benefits of IP communication. Not to mention, her passion for the subject led her to do her 2007 dissertation on IPE, with House Calls as her research base.

Her data on attitude measurement showed that DO students who participated in IP teams had a better sense of the efficiency of teams; had a greater appreciation of the value of teamwork; felt that shared leadership was hard for them, but still showed an appreciation for it; and rated their teamwork skills as improved and stronger.

"Students seem to struggle with who will lead the teams and how the work will get done," Dr. Head says. "But, one of the important aspects of teamwork is conflict resolution – they learn how to settle disputes with the best possible outcome for the patient." Patients seem especially pleased with the program, the interactions with local students, and the distinctive approach each profession brings to the conversations at their kitchen tables.

"I've met a lot of nice kids through the program. We get to know the students like family," says Tepa Ross, a local resident who has been a part of House Calls for a year.

"The interdisciplinary teams get a chance to see how different disciplines do things differently. It's good for our students, as developing physicians, to see how it takes a team to be successful in the delivery of healthcare," adds Dr. Wilson. "The bottom line is that the patient is the center of healthcare, and everyone else works together to best satisfy the needs of the patient. Recognition of everyone's roles and contributions is a starting point."

