University of Connecticut
Urban Service Track:
A Model of Interprofessional Education and Service Learning

Ruth Goldblatt DMD
Petra Clark-Dufner MA
Devra Dang PharmD
Kenia Mansilla MD
Marcus Moss DSIII
Laura Huling DSIII

ADEA Annual Meeting
March 13, 2011
Learning Objectives

- Articulate the purpose, goals & evolution of UST
- Identify examples of interprofessional education and service learning
- Describe symbiotic relationship between UST, state agencies, other institutions of higher learning in CT and the School of Dental Medicine
- Strategy used in UST that can be modeled by other dental schools
Urban Service Track at UConn
About Urban Service Track (UST)

The Urban Service Track is designed to produce a cadre of well qualified health care professionals committed to serving Connecticut’s urban underserved populations. As Urban Health Scholars, participants represent a select group of students enrolled in the University of Connecticut Schools of Pharmacy, Nursing, Medicine and Dental Medicine.

A total of 22 to 24 Urban Health Scholars, four to six students per school, are selected each year from among qualified applicants who have a demonstrated commitment to service. Urban Health Scholars gain valuable exposure to the...
Purpose, Goals and Evolution of UST
Why do we need an Urban Service Track?

- Demographic changes
- Health disparities
- Healthcare workforce shortages
Goal of UST

- To develop a cadre of well-qualified health care professionals committed to serving Connecticut's urban core.

- Key elements
  - Qualification
  - Commitment
  - Workforce development and retention
  - Urban populations
UST Placement at UConn

- Four UConn health professional schools:
  - Dental Medicine
  - Medicine
  - Nursing
  - Pharmacy

- Center for Public Health and Health Policy
Program Details

• Modeled on rural physician training programs

• Housed in CT AHEC program office at the University of Connecticut Health Center

• 2 campuses, 40 miles apart

• Financial support – private, federal, state and institutional resources.
Who Guides UST

- Steering Committee
- Advisory Committee
- Student Leadership Cabinet
History of UST

- July 2005
  - Planning grant received
- March 2006-June 2007
  - Pilot period
- August 2007
  - 24 Scholars enrolled, 1st cohort
- August 2008
  - 54 Scholars enrolled, 1st & 2nd cohort
- September 2009
  - 105 Scholars enrolled, 1st, 2nd & 3rd cohort
- September 2010
  - 144 Scholars enrolled, 1st, 2nd, 3rd & 4th cohort
History of UST Graduates

- 21 graduates
  - Pharmacy = 13
  - Nursing = 8
- 2008 – 2
- 2009 – 7
- 2010 – 12
Identifying Interested Scholars

• Most apply in the summer before admission, or early in their first year
  ✓ Proven track record of volunteerism
  ✓ Interest in working with variety of health profession students
  ✓ Desire to work with underserved communities

• Students are increasingly entering off-cycle
• Must be enrolled in professional school
Curricular Components
Curricular Components

- Competencies
- Retreats
- Interprofessional and Service Learning
- Community Research
- Advocacy
- Professional Development
UST Curriculum

- Based on 11 competencies
  - Delivered over 2 year period

- Complements mainstream curriculum

- Inter-professional experiences designed to heighten awareness of the challenges and opportunities in urban communities
Developing Competencies

• Providers at the community health centers were surveyed
• What skills/competencies did they feel were important in a provider working with underserved patient populations at community health centers other look alike facilities
What We Wanted to Know

• What specific skills does a professional need to be successful as a provider and thrive in the community health center environment whose mission is to provide quality care for some of our most vulnerable communities?

• Our 11 competencies were born!
1. Cultural & Linguistic Differences
2. Population Health
3. Health Policy
4. Advocacy
5. Healthcare Financing and Management
6. Multiple Constituencies
7. Community Resource Constraints
8. Interprofessional teamwork and leadership
9. Professional & Ethical Conduct
10. Community Resources
11. Quality Improvement & Patient Safety
UST Learning Retreats

- Vehicle to deliver UST curriculum
- Held quarterly
- Leadership rotates
- Community partners provide site and assist in delivery of content
Learning Retreats

- Pre-reading assignments
- Equal proportion of didactic & interactive components
- Clinical skills integrated
Learning Retreat
Case Introduction
Curricular Components

Use of University and community clinicians as facilitators combine academic and “real world” training

Small group discussion, case study and problem based learning activity
Learning Retreat - learning a new skill
Learning Retreat-Closure
Curricular Components

Integrates clients and patients giving vulnerable populations a voice and face
Model Retreat
Use of Community Resources
Sub-Topic: The Elderly

Location: Southend Senior Wellness Center, 830 Maple Ave., Hartford, CT

Parking: Because of the recent snowfall, parking is limited and carpooling is greatly encouraged. Parking is available in the rear and side of the South End Senior Center building. If the lot is full, parking is available on Douglas Street (one way street) adjacent to the lot.

Time: 2-5:15 p.m., followed by dinner/networking 5:15 - 6 p.m.

Assignments
Student Pre-Reading:

Learning Objectives:
- Continue development of inter-professional teams and peer support groups.
- Discuss the needs of the elderly community and how their environment affects their health and health care.
- Describe how social support is provided to the elderly in a local community organization.
- Discuss the role of the social worker as a member of the inter-professional team.
- Articulate key resources in urban environments regardless of locale.
- Review health issues of the elderly: depression / poor oral health.
## Model Retreat - Timeline

<table>
<thead>
<tr>
<th>Agenda:</th>
<th>Speaker:</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Topic:</strong>&lt;br&gt;- Opening and introduction of the learning retreat.&lt;br&gt;- Defining the “wave” – demographics and what that means in terms of health care.</td>
<td>Victoria Odesina, DNP, School of Nursing</td>
<td>2:00-2:10pm</td>
</tr>
<tr>
<td><strong>Defining the role of a Social Worker</strong>&lt;br&gt;- Social Workers as health care team partners&lt;br&gt;- Services provided to the elderly in Hartford</td>
<td>Ronnie Tate, MSW, City Of Hartford Senior Services Division</td>
<td>2:10-2:35pm</td>
</tr>
<tr>
<td><strong>Introduction of Case</strong></td>
<td>Devra Dang, PharmD, School of Pharmacy</td>
<td>2:35-3:00pm</td>
</tr>
<tr>
<td>½ Groups Clinical Skills:&lt;br&gt;- Oral Health Screening</td>
<td>Ruth Goldblatt, DMD, FAGD, School of Dental Med</td>
<td>3:05-3:50pm</td>
</tr>
<tr>
<td>½ Groups Clinical Skills:&lt;br&gt;- Depression Screening: Administering the PHQ-9</td>
<td>Kenia Mansilla, MD School of Medicine</td>
<td>3:55-4:40pm</td>
</tr>
<tr>
<td>Process Case: Divide into four groups, faculty members will be dispersed between the groups</td>
<td>Devra Dang, PharmD, School of Pharmacy</td>
<td>4:40-5:10pm</td>
</tr>
<tr>
<td><strong>Wrap-up:</strong> Student evaluations, Excellence Awards, and Upcoming Community Events</td>
<td>AnnMarie Bolduc, RN, School of Nursing</td>
<td>5:10-5:15pm</td>
</tr>
<tr>
<td><strong>Dinner</strong></td>
<td></td>
<td>5:15-6:00pm</td>
</tr>
</tbody>
</table>
The Case

Case of AB

CC: “I can’t swallow my pills because my stomach hurts.”

HPI: AB is a 65 yo Hispanic female who speaks very limited English that is difficult to understand. She presents to clinic with a complaint of difficulty swallowing and taking medications secondary to dysphagia, bloating, and abdominal pain, which have been present on and off for several months. She states she tries to take her medications anyway by dissolving the tablets in a glass of water, then drinking the glass of water. AB also c/o gas and an “acid” taste in her mouth. She states that she can only eat a small amount of food. She also complains that the food “gets stuck in my throat”, and experiences early satiety. She reports having episodes of vomiting after eating, as well as episodes of diarrhea and constipation.

PMH: Type 2 DM (diabetes mellitus), HTN (hypertension), hyperlipidemia, OCD (obsessive compulsive disorder), depression/anxiety, h/o irritable bowel syndrome

Allergies: NKDA (no known drug allergies)

Medications:
paliperidone (Invega) 3 mg QHS – hasn’t taken in 2 months
lorazepam (Ativan) 0.5 mg BID pm – hasn’t taken in 2 months
amlodipine (Norvasc) 5 mg daily
metoprolol succinate (Toprol XL) 25 mg daily
glyburide 5 mg BID
valsartan (Diovan) 320 mg daily
esomeprazole (Nexium) 20 mg daily
sertraline (Zoloft) 100 mg BID
simvastatin (Zocor) 80 mg daily
aspirin 81 mg daily

Payer Source: Medicaid (Title 19)

SH: lives alone; denies tobacco, alcohol, or illicit drugs

Vitals/Labs: (No meds taken today)
Wt 180 lbs  BP (sitting, L arm, reg cuff): 150/75 mmHg  P 80 RRR
Na 137   Cl 98   BUN 14  Random glucose 142
K 4.2  CO2 28  SCr 0.7
A1c 8%
WBC 7.6  Hgb 14  Hct 42  Plt 210
AST 20  ALT 25

Created by Devra Dang, PharmD & Ruth Goldblatt, DMD, University of Connecticut (01/10)
Model Retreat

• Questions for students to discuss in groups
  – What else would you ask the patient?
  – Make a list of all the information you want to obtain from the patient and the rationale for each question.
  – Prioritize your list: triage
  – Ask the medical chart
  – Make your assessment and plan for assisting your patient
## Geriatric Depression Scale (GDS-short form)

Choose the best answer for how you felt over the past week:

1. Are you basically satisfied with your life?  
   - yes/no
2. Have you dropped many of your interests or activities?  
   - yes/no
3. Do you feel that your life is empty?  
   - yes/no
4. do you often get bored?  
   - yes/no
5. Are you in good spirits most of the time?  
   - yes/no
6. Do you often feel helpless?  
   - yes/no
7. Do you feel happy most of the time?  
   - yes/no
8. Do you often feel helpless?  
   - yes/no
9. Do you prefer to stay home, rather than going out and doing new things?  
   - yes/no
10. Do you feel you have more problems with memory than most?  
    - yes/no
11. Do you think it is wonderful to be alive now?  
    - yes/no
12. Do you feel pretty worthless the way you are now?  
    - yes/no
13. Do you feel full of energy?  
    - yes/no
14. Do you feel that your situation is hopeless?  
    - yes/no
15. Do you think that most people are better off that you are?  
    - yes/no

Score 1 point for each bolded answer. Cut off: Normal 0-5, above 5 suggests depression. Note: the actual form used does not have bolded answers or scoring.
Model Retreat – Facilitator Guide

Additional Information for Case of Senior (AB)

Questions Students May Ask:
Q1. Where are the patient’s teeth located??
A1: Pt has no upper teeth; she has lost most of her molars, and has only 5 teeth remaining. Pt states, “I was told I have no bones for teeth.”

Q2: Does the patient have dry mouth (xerostomia)?
A2: Pt frequently has dry mouth and reports not drinking much water.

Q3. Drinking any other fluid? Any problem with access to water? Salivary substitutes?
A3: No problem with access to water. Drinks juice and sometimes Crystal Light. No salivary substitutes.

Q4: Does the patient have dental pain?
A4: Yes.

Q5: What diagnostic testing has been done?
A5: - Abdominal x-ray shows no bowel obstruction
   - CT Scan of abdomen & pelvis indicate scattered colonic diverticuli & fatty infiltration of the liver
   - Barium swallow indicates no esophageal abnormalities and minimal gastroesophageal reflux, and a minimally-sized hiatal hernia
   - Endoscopy – wnl
   - Colonoscopy – wnl
Model Retreat Excellence Awards

• Role of Excellence Awards
  – Nominations
  – Culture
From: Charette,Jacki
Sent: Thursday, January 13, 2011 9:20 AM
To: Clark-Dufnor,Petra
Subject: RE: UST Excellence award for student volunteers

Thanks,
Jessica
Hi Petra (and Elizabeth) --

I’m putting these all in separate emails so I can keep my head (and records) straight. Elizabeth & I would really like to nominate Mike Zavaski and Julie McNelis for excellence awards for their work at Pathways/Senderos. Julie, as I said in my previous email, was a star. I’d heard her do this presentation before (at the Vine Street garden), and this time was even better than before. She really engages with the kids - she doesn’t just talk at them or stand up and tell them things; she asks questions, engages with as many of them on an individual level as possible, and is so warm, open, and friendly. I really felt like many of the kids came away from the event truly having learned something! Plus, she got to talk to two kids who were interested in dentistry, and I think that experience was really great for everyone. You already knew that Julie was awesome - we just wanted to make sure that her awesomeness was recognized in the context of Pathways/Senderos!

We’d also like to nominate Mike for being an all-around great guy and enormous help at Pathways for the past two events. He came along and helped out this time, despite having a completely immobile arm (which was quite the conversation piece among the kids). All the kids loved him, as usual, and his energy and good nature really contributed to the success of the event. Mike has been such a positive presence both for the kids at Pathways and for Elizabeth and me, and as such, we’d love to see him get some recognition for his general excellence!

Neonatal Administration and
Neonatal-Perinatal Medicine Fellowship Program
University of Connecticut Health Center
Dinner and Networking
Model Retreat - Field Activities

Post Learning Retreat Field Activities:

- High School Clinical Skills Day - April 1st, 9-11:30 a.m. If interested contact Julie McNeish (jmcneish@uchc.edu) or Alaina Kessler (akessler@uchc.edu)
- Middle School Health Careers Exploration Program – May 14th and May 21st, 7:30 a.m.-3 p.m. If interested contact Ricky Grewal (rgrewal@uchc.edu)
- KEEP Screenings - March 26th, Waterbury. If interested contact Tiffany Chen (tchen@student.uchc.edu). Additional KEEPs will be announced in March.
- Hispanic Senior Center- Ongoing- if interested contact Dylan Graetz (dgraetz@student.uchc.edu)
- Smiling Seniors - Oral Health Outreach to Hartford Seniors- in development, if interested contact Colleen Donnelly (cdonnelly@student.uchc.edu) or Erica Knee (eknee@student.uchc.edu)
- Public Health Living/Learning Community – UConn Storrs Campus. Topic: childhood obesity as a public health issue, date: April TBD, if interested contact Shamsul Arif (shamsul.arif@uconn.edu)
- 2011 CT Mission of Mercy – Wilby High School, Waterbury, CT – a third team is being developed. If interested, pls contact Petra (clarkdufner@uchc.edu)
Integrating Interprofessional Education and Service Learning
The making of the team
Interprofessional Education and Training

- Clinical Primers
- Ensures adequate and identical information for everyone
- Interprofessional collaboration
- Cultural competence
- Team lead
Interprofessional Education and Training
Interprofessional Education and Training

Feedback and reflection components integrated into all service activities and trainings.
Example of Service Learning Activities: Community Research

Research teams composed of UST scholars from all 4 disciplines immersed in a community partner agency.

COMMUNITY PARTNERS

- Institute for Community Research
- ProHealth Physicians
- CT Center for Primary Care
- Community Health Center Association of CT
- Khmer Health Advocates
Past Research Topics

• Female condoms among high risk populations

• Home health models for vulnerable populations

• Redesign methods at community health centers to increase patient services

• Links between diabetes and depression

• Identifying victims of trauma through appropriate screening and history taking
Professional Development Activities

Reinforces UST curriculum and includes:

Local, state and regional conferences & meetings

Articles, poster and seminar presentations

Participation in the UST Leadership Cabinet
Community Activities

Focus Areas:

1. Health careers awareness activities for grades K-12
2. Advocacy
3. Health promotion & education
Health Careers Awareness Activities

- For students Grades K-16
- College Student Clinical Skills Activities (13-16)
- High School Clinical Skills Day (9-12)
- Middle School Health Careers Exploration Program (6-8)
Advocacy

- Recognize populations in need
- Voice for underserved populations
- Access to deserved care
Advocacy
Health Promotion

- Healthy life choices
- Prevent illness and disease
- Access to primary health care
Community Service Events

- Migrant Farm Worker Clinic
- Healthy Hartford Campaign
- Kidney Early Evaluation Program Screenings
Community Service Events

- Heart Strong Community Nutrition
- Hispanic Senior Center
- Primary Care Week Health Fairs
Community Service Events

• Pathways Senderos - teen pregnancy prevention

• Public Health living learning community

• Senior Smiles
Community Service Events

• Community Garden

• Fall Prevention for Seniors
Dental Student Perspective
Oral Health Initiatives through UST
Oral Health Initiatives through UST

• National Primary Care Week oral health education
• Online tutorial about oral health to train the interdisciplinary team
• Smiling Seniors Program
• Community outreach oral health screening
• Diabetes and Oral Health Survey part of SEARCH rotation
• Access and Redesign Community research project
• Develop an oral assessment for use by physicians for patients that may have suffered oral trauma
Oral Health Training Module

Using FITS as a partner

- Whole health - oral health connection

Chapter 1: Lesson 5
Dry Mouth

Oral health has been linked to many systemic health conditions.

- Dry mouth is common in older adults
- Often a side effect of more than 400 prescription drugs and over-the-counter medications.
- Alcohol use, some cancer therapies, and Sjogren's Syndrome, an auto-immune disease, also causes dry mouth.
- Dry mouth can contribute to tooth decay.
Poster developed used for Primary Care Week

**Oral Health for Seniors**

**Daily Care**
- **Brush teeth** twice a day with an ADA approved fluoride toothpaste
- **Replace toothbrush** every 3-4 months or if bristles are worn
- **Clean teeth daily with floss** or interdental cleaner to remove particles from between teeth and gums
- **Clean all surfaces of dentures with a denture brush and denture paste**. Brush inside and outside and rinse with cool water
- **Before wearing dentures** brush gums, tongue, and roof of mouth with a soft toothbrush

**Professional Dental Care**
- Seniors should **visit the dentist** twice a year for regular teeth cleanings and oral cancer exams
- **Dentist will check dentures for good fit.**

**Medications**
- Many prescriptions and over-the-counter medications can cause dry mouth that leads to tooth decay

**Dry Mouth Symptoms**
- lack of saliva
- bad breath
- mouth infection
- cracked lips or sores
- burning mouth
- thick or stringy saliva

**Oral Cancer Exams**
- Seek professional care if you notice any of the following symptoms
  - white or red spots
  - mouth sores that don’t heal or that bleed easily
  - change in color of gums
  - lump or rough spot in mouth
  - problems chewing or swallowing, moving jaw or tongue
  - any other concerns such as pain, bleeding gums or bad breath

**Nutrition**
- A healthy, balanced diet including food from the 5 food groups promote better overall health

**Limit intake of soft drinks** because of the cavity causing effects of both acids and sugars

**Regular exercise** promotes a healthier lifestyle for seniors

**Moisturizing sprays and special mouthwashes** are available to help with dry mouth

**Medications can also cause**
- swollen or bleeding gums
- fungal infections
- tooth decay
Smiling Seniors

• Idea born out of 2 small grants from Alliance for ADA

• Dental Students lead interdisciplinary team in oral health curriculum for older adults
Oral Health Screenings

Based on our own internal records, we distributed 300 oral health kits (60 seniors, 200 adults and 40 children); 65-70 oral health screenings performed. BMI and blood pressure on 55-60 patients.
Paul Ambrose Scholars

- UConn students exposure at Paul Ambrose scholars program at the Association for Prevention, Teaching and Research.
- 3 of the 45 selected Nationally last year were from our UST program
Creating Powerful Relationships

• Collaboration with Older Adult Task Force

• Dept of Public Health - Office of Oral Health

• Oral Health Research Strategic Alliance
Creating Powerful Relationships

CT State Dental Association

CT Mission of Mercy Free Dental Clinic
Strategies for Implementation at your school
Panning Worksheet Brainstorming

- Stakeholders
- Engaging students
- Student selection
- Benefits for students
- Engaging community partners
- Funding
For questions or comments please contact:

Ruth S. Goldblatt DMD, FAGD, FASGD, DABSCD
University of CT School of Dental Medicine
E-mail: goldblatt@nso1.uchc.edu
Phone: 860-679-4829