

[In these minutes: Election of 2011 – 2012 Chair, 1Health Update]

**ACADEMIC HEALTH CENTER STUDENT CONSULTATIVE COMMITTEE (AHC SCC) MINUTES**

**APRIL 20, 2011**

**5:00 - 6:00 p.m.**

**488 CHILD REHAB CENTER**

[These minutes reflect discussion and debate at a meeting of a committee of the University of Minnesota Senate; none of the comments, conclusions, or actions reported in these minutes represent the view of, nor are they binding on the Senate, the Administration, or the Board of Regents.]

**PRESENT:** Sean Corvin, (chair pro tem), Patrick Day, Mark DeRocher, Grant Hennington, Erin Kasper, Chase Lembeck, Lynn Seuer, Eden Sonn, Leah Tacheny, Josie Thole, Lindsey Tischer

**REGRETS:** Eric Moeker, Brandon Burk, Junaid Ghouse, Kit Johnson

**ABSENT:** Samantha Berget, Paul Syverson

**GUEST:** Dr. Paul Jardine

**OTHERS ATTENDING:** Aklilu Beyene, Gina Kundan (CHIP Student Center), Kathryn Nelson (COGS), Barry Park

I). Sean Corvin, chair pro tem, convened the meeting, welcomed those present, and called for introductions.

II). Renee Dempsey, Senate staff, reported receiving one nomination for next year's chair, Sean Corvin. Mr. Corvin explained that because he expects to complete his master's program at the end of fall semester 2011, he would be willing to serve as chair through December 2011. He went on to say that he spoke with Ms. Dempsey about his situation and she suggested electing a vice chair and having that person assume the chair responsibilities as of spring semester 2012. Members were amenable to this plan and unanimously voted to elect Mr. Corvin as chair.

III). Members unanimously approved the March 23, 2011 minutes.

IV). Mr. Corvin introduced and welcomed today's guest, Dr. Paul Jardine, the overall course director of Foundations of Interprofessional Communication & Collaboration (FIPCC), part of the 1Health initiative that is taking place at the University - <http://www.ahc.umn.edu/1health/index.htm>. Interprofessional education, noted Dr. Jardine, is a driver behind much of the curricular revision that is taking place at various institutions across the country. The Academic Health Center (AHC) at the University of Minnesota is one of a handful of institutions attempting this undertaking on a large-scale basis. Because the University's AHC includes a college of vet med, which is fairly unique among other schools with academic health centers, this presents both opportunities and hurdles in terms of the curricular revision.

Last fall, seven programs participated in FIPCC. The goal of the course was to introduce the concept of interprofessional education to a broad range of professional students. While overall the course was successful in a number of respects, there were some problems. A lot of the criticism about the course had to do with the structural organization of the material. FIPCC was a hybrid course with a large number of on-line components, which were paralleled with face-to-

face, small group sessions. Based on numerous student comments, there was an inadequate level of integration between the on-line and face-to-face components of the course. The on-line components did not mesh well with the exercises that occurred in the small group sessions. While, generally speaking, the small group sessions were well received by students, a reoccurring criticism was that the small group sessions should have included more interprofessionalism interactions.

Based on the feedback that was received, there are plans to streamline the course and make significant structural changes to how the course is offered and organized. A trajectory needs to be established throughout the course, stated Dr. Jardine. The revised course will introduce students to as many health care disciplines as possible in an interprofessional environment where they can interact. The revised course is expected to give students a better experience. To help ensure a better experience, the course will also be frontloaded with an orientation so that students who will be participating in the 1Health initiative will know what to expect. Last year, some students knew a great deal about what to expect from the course while others knew very little. In addition, some module components, e.g., Communications and Exercises in Ethics, were reworked in order to better integrate the concept of interprofessional education.

Dr. Jardine stated that he would like FIPCC to be more of a student driven process rather than just having facilitators assign exercises. Such a process will give students an opportunity to represent and educate other students about their discipline and to learn about other disciplines from their fellow students.

A challenge for the course, noted Dr. Jardine, is that for some AHC programs, FIPCC has competencies linked to ethics and communications whereas others do not. With this said, there is a risk of redundancies/repetition in some of the material.

Another change that is being made to the course is that the on-line component is being reduced to a resource-based set of materials. While on-line learning is exceptionally effective in some formats and with certain subjects, with a course as broad as FIPCC, it was not effective as designed. Eventually, stated Dr. Jardine, he expects that the on-line components will be revised so that there will be on-line modules included in the course.

Admittedly, stated Dr. Jardine, FIPCC was not as well received as had been hoped, which was evident from the course evaluations. The evaluations are being used to revise the course and give students a better experience going forward. In Dr. Jardine's opinion, in order to make the course better, the revised course material should be vetted by as many people as possible. With that said, Dr. Jardine asked for volunteers who would be interested in reviewing the revised material. He stated that given the fact that interprofessionalism is becoming increasingly important in the health care community outside of educational institutions, it is imperative that the University offer a successful course.

Another criticism from last year, stated Dr. Jardine, was that nursing students did not participate in the course. This, however, will change in fall 2011 when nursing students will participate in the course.

All of the 636 students who participated in the fall 2010 course, noted Dr. Jardine, received a report that summarized the strengths and weaknesses of the course. In an effort to get student input, Dr. Jardine plans to contact course facilitators and ask them to suggest students from their small groups last fall who might consider reviewing the revised course material. The student perspective is absolutely essential because a good teaching tool is not necessarily a good learning tool.

Lynn Seuer, a Rochester AHC SCC member, stated that she might be interested in reviewing the revised course materials. She also requested receiving a copy of the summary report so she can share it with other occupational therapy students. Dr. Jardine stated that he would send the report to Ms. Dempsey, and have her distribute it to the committee.

In response to a question about whether Dr. Jardine is only interested in getting the perspective of students who took the course or students in general, Dr. Jardine stated that a wide variety of student perspectives are being sought; everyone's opinion is important.

A member who participated in FIPCC last year stated that it was somewhat awkward to try to educate other students in their small groups about their field when most students were only two weeks into their programs. From the evaluations, it was clear, stated Dr. Jardine, that a number of students felt they did not learn enough about different professions during the last FIPCC course. It is very important to keep in mind that FIPCC is an introductory course and it is intended to establish a culture of comfort and ease when interacting with other health care professions in other trained disciplines.

In response to a question about staying connected for those who are internally motivated to do so, Dr. Jardine stated that an ambition of the 1Health initiative is to design the course so that students continue to be connected throughout their training. He suggested that this comment be directed to Dr. Brandt, associate vice president, Office of Education.

Lindsey Tischer asked Dr. Jardine to provide information on the different phases of the 1Health initiative. Currently, stated Dr. Jardine, FIPCC is the only phase that exists, and the second phases is in the process of being developed. FIPCC is phase one and it is an introduction to interprofessional education. Phase two is emersion into interprofessional education and phase three is mastery of interprofessional aspects of health care. Phase one, as an introductory course, is meant to establish the concepts and mechanics of interacting in an interprofessional health care environment.

The interprofessional education movement is a cultural shift in health care that is being driven not only by institutions, but by the World Health Organization (WHO). As a result, the AHC's seven professional programs have integrated in their competencies an interprofessional education component. Dr. Jardine volunteered to pull together some website links and other interprofessional education information and share with the committee.

In Dr. Jardine's opinion, the reason the course was rated so poorly was because FIPCC did not meets students' expectations. Having said that, the goal will be to match students' expectations going forward.

Ms. Seurer, a Rochester student, stated that the Rochester students who participated in FIPCC last fall tended to feel left out of the face-to-face sessions because they were connected by phone and it was extremely difficult to hear, which was very frustrating. Dr. Jardine acknowledged this concern and stated that this is one of the logistical problems that is being addressed. Because ITV is not an option given the large number of small group sessions, Dr. Jardine stated that Skype is being considered as an alternative way to connect to Rochester participants. In any event, every effort is being made to find the best mechanism for tying together the three campuses, Twin Cities, Rochester and Duluth.

Mr. Corvin thanked Dr. Jardine for his presentation, which was very informative.

Hearing no further business, Mr. Corvin adjourned the meeting, and thanked members for attending.

Renee Dempsey, University Senate

