

# ELEC 705, HEALTH ADVOCACY ELECTIVE ROTATION SYLLABUS ROTATION LENGTH TBD CLINICAL EDUCATION

# 1. Contact Information Course Director Name Department Office Phone Email Jeanne Rupert DO PhD Clinical Education 509.249.7991 Jrupert@pnwu.edu

Support Staff	
Name	Email
Clinical Education	rotations@pnwu.edu

#### 2. Course Description/Overview

The Health Advocacy Elective Rotation serves as an introduction to health policy and advocacy. The learner will gain skills to understand health systems and advocate for improvements at the local, state or national level. The rotation provides dedicated time for knowledge acquisition through engagement in online curricula, and for practical advocacy engagement with local representatives, community advocacy sites, state legislatures or other determined sites under the direction of a faculty mentor (preceptor). A preceptor must be identified (with prior approval from the Course Director) to supervise the student's activities during this rotation. Selected advocacy topics must have approval of the Course Director and the student's preceptor.

### 3. Course Purpose/Goals

Rev. Date: 05.04.2023mnb

The objective of the Health Advocacy Elective Rotation is to provide the student exposure to health policy and advocacy issues including, but not limited to ensuring access to care, navigating health systems, mobilizing resources, addressing social determinants of health and health inequities, influencing health policy and creating systems change. The goal of the rotation is to provide the student with professional knowledge and skills for entering residency.

Page 1 of 11

Nationally, there is a move to utilize EPAs to ascertain a student's residency preparedness.

4. Entrustable Professional Activities (EPAs)			
EPAs	Description of Activity	Domains of Competence	
EPA 1: Gather a history and perform a physical examination including an osteopathic structural exam as appropriate.	Osteopathic medical students should be able to perform an accurate, complete or focused history and physical exam in a prioritized, organized manner without supervision and with respect for the patient. The history and physical examination should be tailored to the clinical situation and specific patient encounter. This data gathering and patient interaction activity serves as the basis for clinical work and as the building block for patient evaluation and management. Learners need to integrate the scientific foundations of medicine with clinical reasoning skills to guide their information gathering.	<ul> <li>Patient Care</li> <li>Knowledge for Practice</li> <li>Interpersonal and Communication Skills</li> <li>Professionalism</li> <li>Osteopathic Principles and Practice (OPP)</li> </ul>	
EPA 2: Prioritize a differential diagnosis following a clinical encounter (musculoskeletal considerations that may lead to somatic dysfunction.	To be prepared for the first day of residency, all osteopathic medical students in training need to be able to integrate patient data to formulate an assessment, developing a list of potential diagnoses that can be prioritized and lead to selection of a working diagnosis. Developing a differential diagnosis is a dynamic and reflective process that requires continuous adaptation to avoid common errors of clinical reasoning such as premature closure.	<ul> <li>Patient Care</li> <li>Knowledge for Practice</li> <li>Practice-Based         Learning and         Environment</li> <li>Interpersonal and         Communication Skills</li> <li>Personal and         Professional         Development         Osteopathic Principles         and Practice (OPP)</li> </ul>	
EPA 3: Recommend and interpret common diagnostic and screening tests	This EPA describes the essential ability of the day one resident to select and interpret common diagnostic and screening tests* using evidence-based and cost-effective principles as one approaches a patient in any setting	<ul> <li>Recommend first-line, cost-effective diagnostic</li> <li>evaluation for a patient with an acute or chronic common disorder or as part of routine health maintenance.</li> <li>Provide a rationale for the decision to order the test.</li> <li>Incorporate cost awareness and principles of cost-effectiveness and pretest/post-test probability in developing diagnostic plans.</li> </ul>	

EPA 4: Enter and discuss orders and prescriptions and applicable Osteopathic treatments.	Writing safe and indicated orders is fundamental to a physician's ability to prescribe therapies or interventions beneficial to patients. It is expected that Osteopathic medical students will be able to do this without direct supervision when they matriculate to residency. Entering students will have a comprehensive understanding of some but not necessarily all of the patient's clinical problems for which they must provide orders. They must also recognize their limitations and seek review and guidance	<ul> <li>Interpret the results of basic diagnostic studies (both lab and imaging); know</li> <li>Common lab values (e.g., electrolytes).</li> <li>Understand the implications and urgency of an abnormal result and seek assistance for interpretation as needed.</li> <li>Elicit and consider patient preferences in making recommendations.</li> <li>Clinical Experiences</li> <li>Presentations</li> <li>COMAT</li> <li>Patient Care</li> <li>Knowledge for Practice</li> <li>Practice-Based Learning and Environment</li> <li>Interpersonal and Communication Skills</li> <li>Professionalism</li> <li>Osteopathic Principles and Practice (OPP)</li> </ul>
	for any orders and prescriptions they are expected to provide but for which they do not understand the rationale. The expectation is that learners will be able to enter safe orders and prescriptions in a variety of clinical settings (e.g., inpatient, ambulatory, urgent, or emergent care).	
EPA 5: Document a clinical encounter in the patient record.	Osteopathic medical students should be able to provide accurate, focused, and context-specific documentation of a clinical encounter in either written or electronic formats. Performance of this EPA is predicated on the ability to obtain information through history, using both primary and secondary sources, and physical exam in a variety of settings (e.g., office visit, admission, discharge summary, telephone call, and email).	<ul> <li>Patient Care</li> <li>Interpersonal and Communication Skills</li> <li>Professionalism</li> <li>Osteopathic Principles and Practice (OPP)</li> </ul>
<b>EPA 6</b> : Provide an oral presentation of a clinical encounter.	Osteopathic medical students should be able to concisely present a summary of a clinical encounter to one or more members of the health care team (including patients and	<ul> <li>Practice-Based         Learning and         Environment     </li> </ul>

	families) in order to achieve a shared understanding of the patient's current condition. A prerequisite for the ability to provide an oral presentation is synthesis of the information, gathered into an accurate assessment of the patient's current condition.	<ul> <li>Interpersonal and Communication Skills</li> <li>Professionalism</li> <li>Personal and Professional Development</li> </ul>
EPA 7: Form clinical questions and retrieve evidence to advance patient care.	It is crucial that students be able to identify key clinical questions in caring for patients, identify information resources, and retrieve information and evidence that will be used to address those questions. Osteopathic medical students should have basic skill in critiquing the quality of the evidence and assessing applicability to their patients and the clinical context. Underlying the skill set of practicing evidence-based medicine is the foundational knowledge an individual has and the self-awareness to identify gaps and fill them.	Knowledge for Practice     Practice-Based     Learning and     Improvement
EPA 8: Give or receive a patient handover to transition care responsibility.	Effective and efficient handover communication is critical for patient care. Handover communication ensures that patients continue to receive high-quality and safe care through transitions of responsibility from one health care team or practitioner to another. Handovers are also foundational to the success of many other types of interprofessional communication, including discharge from one provider to another and from one setting to another. Handovers may occur between settings (e.g., hospitalist to PCP, pediatric to adult caregiver, discharges to lower-acuity settings) or within settings (e.g., shift changes).	<ul> <li>Patient Care</li> <li>Practice-Based         Learning and         Environment</li> <li>Interpersonal and         Communication Skills</li> <li>Professionalism</li> </ul>
EPA 9: Collaborate as a member of an interprofessional team.	Effective teamwork is necessary to achieve the Institute of Medicine competencies for care that is safe, timely, effective, efficient, and equitable. Introduction to the roles, responsibilities, and contributions of individual team members early in professional development is critical to fully embracing the value that teamwork adds to patient care outcomes.	<ul> <li>Interpersonal and Communication Skills</li> <li>Professionalism</li> <li>Systems-Based Practice</li> <li>Interprofessional Collaboration</li> </ul>
EPA 10: Recognize a patient requiring urgent or emergent care and initiate evaluation and management.	The ability to promptly recognize a patient who requires urgent or emergent care, initiate evaluation and management, and seek help is essential for all physicians. New residents in particular are often among the first responders in an acute care setting, or the first to receive	<ul> <li>Patient Care</li> <li>Interpersonal and Communication Skills</li> </ul>

Page 4 of 11

EPA 11: Obtain informed consent for procedures/tests (under preceptor supervision).	notification of an abnormal lab or deterioration in a patient's status. Early recognition and intervention provide the greatest chance for optimal outcomes in patient care. This EPA often calls for simultaneously recognizing need and initiating a call for assistance.  All physicians must be able to perform patient care interventions that require informed consent. Osteopathic medical students may be in a position to obtain signatures for informed consent for interventions, tests, or procedures they order or perform (e.g., immunizations, central lines, contrast and radiation exposures, blood transfusions, and OMM) after risks and benefits have been explained by the physician caring for the patient.	<ul> <li>Patient Care</li> <li>Interpersonal and Communication Skills</li> <li>Professionalism</li> <li>Systems-Based Practice</li> <li>Personal and Professional Development</li> </ul>
EPA 12: Perform general procedures of a physician including applicable Osteopathic treatments.	All Osteopathic medical students must demonstrate competency in performing a few core procedures under supervision on completion of medical school in order to provide basic patient care.  These procedures include:  Basic cardiopulmonary resuscitation (CPR)  Bag and mask ventilation  Venipuncture  Inserting an intravenous line  Osteopathic manipulative medicine (OMM)	<ul> <li>Patient Care</li> <li>Interpersonal and Communication Skills</li> <li>Professionalism</li> <li>Systems-Based Practice</li> <li>Personal and Professional Development</li> <li>Osteopathic Principles and Practice (OPP)</li> </ul>
EPA 13: Identify system failures and contribute to a culture of safety and improvement.	Preventing unnecessary morbidity and mortality requires health professionals to have both an understanding of systems and a commitment to their improvement.  This commitment must begin in the earliest stages of health professional education and training.  Therefore, this EPA is critical to the professional formation of a physician and forms the foundation for a lifelong commitment to systems thinking and improvement.	<ul> <li>Knowledge for Practice</li> <li>Practice-Based         Learning and         Environment</li> <li>Interpersonal and         Communication Skills</li> <li>Professionalism</li> <li>Systems-Based         Practice</li> </ul>

The EPAs specifically addressed by this elective rotation are:

Course Learning Objectives	Methods of Assessment	Learning Activities
EPA 7: Form clinical questions and retrieve evidence to advance patient care	Preceptor feedback, online quizzes, writing assignments, oral presentation, preceptor evaluation	Directed study, completion of online modules, videos, meetings with local representatives and advocacy groups
EPA 9: Collaborate as a member of an inter- professional team	Preceptor feedback, online quizzes, writing assignments, oral presentation, preceptor evaluation	Directed study, completion of online modules, videos, meetings with local representatives and advocacy groups

EPA 13: Identify system failures and	Preceptor feedback, online quizzes,	Directed study, completion of online
contribute to a culture of safety and	writing assignments, oral presentation,	modules, videos, meetings with local
improvement	preceptor evaluation	representatives and advocacy groups

#### 5. Course Format and Logistics

Teaching for this elective rotation is presented through online coursework. Links to required modules can be found here:

- STFM Advocacy Modules: <u>STFM Advocacy Modules</u>
- EdX United States Health Policy Course: EdX US Health Policy Course
- EdX Fundamentals of Advocacy in Health Policy: EdX Fundamentals of Advocacy Course
- Project Implicit: Implicit Bias Testing

For research and selection of an advocacy topic, see <a href="https://www.apha.org/topics-and-issues">https://www.apha.org/topics-and-issues</a> or choose from the list below:

- Climate change
- Chronic disease
- Social determinants of health
- Food insecurity, food bank
- Affordable Housing, rental assistance, shelter
- Occupational health
- Gun violence
- Substance use disorders
- Reproductive health/women's rights
- Human trafficking
- Domestic violence
- Sexual assault

- Immigrant health/rights
- LGBTQ health/rights
- Mental health, support groups
- Legal assistance
- People with disabilities health
- Geriatric/senior health
- End of life care (Death with Dignity Act)
- Veterans Health
- Native American Health
- Environmental Health (pollution, clean energy, safe areas to walk/exercise, pesticide use and effects)

Depending on topic selection, additional coursework (online didactics, directed study) may be assigned.

6. Course	6. Course Calendar/Schedule			
Learning Activity Date	Subject Matter/Description	Learning Activity Type (Lab, Lecture, etc.)	Time	
Week 1	Explore topics for consideration: https://www.apha.org/topics-and-issues	Research online	Variable	
Week 1	Complete STFM Advocacy Modules 1-5: STFM Advocacy Modules  1. Getting Started in Advocacy 2. Prepare and Make Contact 3. The One Pager 4. The Visit 5. Maintaining the Relationship	Directed Study, End-of-module online quizzes	1 hour	
Week 1	Implicit Bias: Implicit Bias Testing Choose and take 3 Implicit Bias Tests	Directed Study, online tests	1 hour	
Week 1	Assigned Reading & Videos: social determinants of health, health equity  Required Articles  Health promotion, advocacy and health inequalities: a conceptual framework https://academic.oup.com/heapro/article/15/4/369/595953  WHO Report on, "Closing in the gap in a genderation: Health equity through action on the social determinants of health" https://www.who.int/social_determinants/thecommission/finalreport/en/	Research online, Directed Study	2 hours	

	Required Videos		
	TEDx talk, A Recipe for Health Equity in the 21st Century, Dr. Renaisa Anthony (18 minutes) <a href="https://www.youtube.com/watch?v=yw0JGnz0KGs">https://www.youtube.com/watch?v=yw0JGnz0KGs</a>		
	TEDx talk, A traditional Lakota approach to health equity, Dr. Donald Warne (19 minutes) <a href="https://www.youtube.com/watch?v=3phTundagzQ">https://www.youtube.com/watch?v=3phTundagzQ</a>		
	TEDx talk, Social Determinants of Health, Dr. Claire Pomeroy (15 minutes) https://www.youtube.com/watch?v=qykD-2AXKIU		
	IHI Triple Aim & Social Determinants of Health (4 minutes) https://www.youtube.com/watch?v=0tYf0RsSCTs		
	<ul> <li>IHI What is Health Equity, and Why does it Matter? (4 minutes) https://www.youtube.com/watch?v=CwBEkGurMiY</li> </ul>		
	Healthy People 2020: Social Determinants of Health https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health		
	<ul> <li>Healthy People 2020: Health Disparities &amp; Health Equity <a href="https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities">https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities</a></li> </ul>		
	• Institute for Healthcare Improvement (IHI) http://www.ihi.org/		
	<ul> <li>CDC Social Determinants of Health Research https://www.cdc.gov/socialdeterminants/index.htm</li> </ul>		
	AAFP EveryONE Project Toolkit <a href="https://www.aafp.org/patient-care/social-determinants-of-health/everyone-project/eop-tools.html">https://www.aafp.org/patient-care/social-determinants-of-health/everyone-project/eop-tools.html</a>		
By end of Week 1	Reflection 1: Social Determinants of Health Reflect on how implicit biases may influence social determinants of health, and contribute to health inequalities. Identify possible actions you can take address implicit bias and promote health equity in your community.	Writing Assignment	Variable
Weeks 1 - 2	EdX Course: United States Health Policy  EdX US Health Policy Course  Session 1.1: Intro to US Health Policy, 9 topics  Session 2.1: Medicare Parts A and B, 5 topics  Session 2.2: Medicare Parts C and D, 6 topics  Session 3.1: Medicaid, Part 1, 8 topics  Session 3.2: Medicaid, Part 2, 5 topics  Session 4.1: Basics of Health Care Financing and Payment, 6 topics  Session 4.2: Private Health Insurance, 7 topics  Session 5.1: Quality and the Challenges in High Quality Care, 4 topics  Session 5.2: Addressing Challenges in Quality, 4 topics  Session 6.1: Long-term Care Basics, 7 topics  Session 6.2: Behavioral Health Policy, 5 topics  Session 7.1: Pharmaceutical Policy, 7 topics  Session 7.2: US Public Health Policy, 8 topics  Session 8.1: Health Care Workforce, 6 topics	Directed Study, End-of-topic online assessments	50 hours
Weeks 1 - 2	<ul> <li>Session 8.2: Medical Liability as a Health Policy Issue, 7 topics</li> <li>Session 9.1: Public Opinion and US Health Policy, 4 topics</li> <li>Session 9.2: Oral Health Policy, 6 topics</li> <li>Session 10.1: Global Context of US Health Policy, 7 topics</li> </ul> EdX Course: Fundamentals of Advocacy in Health Policy		
vveeks I - Z	EdX Course: Fundamentals of Advocacy in Health Policy  EdX Fundamentals of Advocacy Course  Advocacy  Culturally Competent Evidence Based Advocacy Strategies	Directed Study, End-of topic online assessments	10-20 hours

Page 7 of 11

	Creating Health Policy Changes to Influence Quality		
Attend as available	Advocacy Activity 1: Find City Council Webpage and attend City Council meeting (if not possible watch recording online/review recent topics)  Reflection 2: City Council & Community Health, write a 1 page reflection on what you learned from the experience	Meeting, Writing assignment	Variable
Week 2	<b>Topic Selection</b> : Inform preceptor of chosen advocacy topic. Topic must be approved by preceptor and Course Director. Write a one-page paper that explains why you chose the topic, and identifies 3 local agencies addressing your chosen advocacy topic.	Directed Study, Writing assignment	Variable
By end of Week 2	Identify non-profits in the area related to your topic and contact 1-3 of them, or alternatively, contact the public health department. Arrange a meeting with a staff member at a non-profit/public health department to discuss how your topic affects your local community. Discuss talking points with preceptor prior to meeting.	Directed study	Variable
By end of course	Advocacy Activity 2: Meet with a local non-profit/public health department to discuss your topic.  Reflection 3: Health Advocacy Local Resources – reflect on what you learned about advocacy for your topic from your meeting.	Meeting, Writing assignment	Variable
Week 3	Advocacy Activity 3: Find district legislator's name and address/ Find US legislators for your state. Read what committees they serve on and what past legislation relevant to your topic they have written or co-sponsored. Read about policy related to your topic on the community or state level. Discuss talking points with preceptor prior to meeting with legislators.	Directed Study	Variable
By end of week 3	Complete The One Pager (review STFM Advocacy Module 3)  For more direction or if you would like to write a piece longer than a one-pager, please read "How to Write a Health Policy Brief" <a href="http://farleyhealthpolicycenter.org/wp-content/uploads/2018/06/Wong-et-al-2016-How-to-Write-a-Health-Policy-Brief.pdf">http://farleyhealthpolicycenter.org/wp-content/uploads/2018/06/Wong-et-al-2016-How-to-Write-a-Health-Policy-Brief.pdf</a>	Writing assignment	Variable
By end of course	Advocacy Activity 4: Meet with local representative - city council or state level, to discuss your topic and one pager. If it is impossible to meet in person, send an email to your representative discussing the issue.	Meeting	Variable
By end of course	Advocacy Activity 5: Give an oral presentation on your topic/what you learned from the course at didactics or to a preclinical club	Oral presentation, 20 minutes	Variable
By end of course	Advocacy Activity 6: Write an opinion-editorial and submit to local newspaper, or write a blog post and submit to The DO, PNWU blog, AAFP Blog (or similar) about your topic and experience  For more direction on writing an opinion-editorial (or OpEd), please view -"How To Write an Editorial" https://www.nytimes.com/video/opinion/100000002691088/how-to-write-an-editorial.html -"Tips For Aspiring Op-Ed Writers" https://www.nytimes.com/2017/08/25/opinion/tips-for-aspiring-op-ed-writers.html	Writing assignment	Variable
By end of course	Reflection 4: reflect on what you learned during this health advocacy elective, how it will impact your future clinical practice and professional goals, and how this course could be improved	Writing assignment	Variable

# 6. Course Format

This rotation is organized into weeks, scheduled from Monday of the first day through Sunday of the last day. Students must identify a preceptor for this rotation at least 2 weeks prior to starting – if needed, contact Dr. Sorrells for assistance in identifying a suitable mentor.

The approximate schedule for this rotation is highlighted above. The rotation is designed as an independent advocacy elective with no required attendance, but effort should be a minimum of 40 hours per week. Communicate with your preceptor with any questions, or for guidance on reflections and other course deliverables.

The Clinical Didactics longitudinal course takes place over the third and fourth years of medical school. It consists of two hundred hours of educational activities. Faculty-led components will be held on Wednesday afternoons. Attendance and completion of assigned tasks will be tracked and will be reviewed with the student's Assistant Dean on a periodic basis. Successful completion of the Clinical Didactics course is required for graduation. Details for educational activities will be shared with students on a weekly basis.

# 7. Course Logistics

All writing assignments, and the slides/outline for your oral presentation should be submitted via Moodle. Keep a daily work log reflecting your readings and activities in E\*Value. Completion of all online assessments associated with the STFM online modules and EdX coursework should be logged in E\*Value.

# 8. Learning Assessment

Formative Assessments			
Assessment	Туре	Due Date	Pass/Fail
Reflection 1	Writing Assignment	End of Week 1	Pass/Fail
Reflection 2	Writing Assignment	End of course	Pass/Fail
Advocacy topic selection	Inform Preceptor, One-page draft paper	End of Week 2	Pass/Fail
Reflection 3	Writing Assignment	End of course	Pass/Fail
The One Pager	Writing Assignment	End of Week 3	Pass/Fail
Oral Presentation	Submit slides and/or outline	End of course	Pass/Fail
Opinion-Editorial or Blog	Writing Assignment	End of course	Pass/Fail
Reflection 4	Writing Assignment	End of course	Pass/Fail

Summative Assessments	
Assessment	Pass/Fail
Preceptor Evaluation of Student Performance	Pass/Fail
Attendance/Participation (any unexcused absence constitutes a fail)	Pass/Fail

Grades for this course are Pass/Fail. All assessments must have a grade of "Pass" to pass a rotation. Any of the summative assessments with a "Fail" will require remediation of the rotation. Students who have not completed the rotation satisfactorily will be referred to Student Progress Committee for determination of remediation.

# 9. Exam Policy

No end-of-service examinations are given by PNWU during electives. Students in their fourth year should be preparing for COMLEX 2 CE & PE during their rotations.

10. Course Textbooks & Supplies	
Required Textbooks	
Title/ISBN	Author/Publisher/Edition
None. Refer to links above. Preceptor may recommend	
additional reading materials.	

# 11. Student Roles and Responsibilities

Links to current Student Catalog and Student Handbook:

https://www.pnwu.edu/students/student-catalog

https://www.pnwu.edu/students/student-handbook

#### a. Student Professionalism

Professional behavior is expected at all times during this course. It is important that students learn to discuss topics of a sensitive nature in a caring and professional manner. Use of cell phones or texting during class is prohibited. For further clarification of student professionalism expectations, see Student Catalog.

#### b. Honor Code

The highest standards of academic honesty are required of all PNWU-COM students at all times. It is expected that no PNWU student will be dishonest in any way, or give the impression of dishonest behavior, nor will PNWU students tolerate dishonesty in others. Disciplinary action may occur as a result of failure to comply with these standards.

#### c. Academic Support

Students who are having difficulty meeting the requirements of this course should discuss it with their Assistant Dean whenever a problem arises. Students in need of peer tutorial assistance are directed to contact the Learning Skills Specialist on campus through Student Affairs. Though Student Affairs strives to accommodate all tutorial assistance requests, priority will be given to students who demonstrate need based on their academic performance.

# The most successful students will practice the following behaviors:

#### First day

- Share contact information with the preceptor and learn what expectations of communication are.
- Ensure the preceptor has a copy of the PNWU syllabus for the course.
- Ask about the regular schedule, and notify the preceptor if there are any excused absence days.

#### <u>Daily</u>

- Be on time and prepared with what is needed.
- Read or do modules as assigned.
- Log every day the items you worked on. Be sure to verify completion of any online assessments in E\*Value.
- Be prepared to assist in any opportunities that present.
- Be enthusiastic. No matter what your area of future specialization is in your interest, a student will be exposed to cases and situations that may not be seen again in their career.

## <u>Weekly</u>

- Participate.
- Be prepared.
- Ensure progress towards your health advocacy topic goals.
- Review progress on logs and check-in with the growth of your understanding.

#### **End of Rotation**

• The student should ask for a final review of his/her performance during the last week of the rotation. Students should be receiving feedback from the preceptor informally daily on performance and areas needing improvement. Supplying the preceptor with a paper copy of the evaluation will help secure completion of the evaluation while the student's performance is fresh in the preceptor's mind. If the student has felt especially positive about the interactions, the student should consider asking the preceptor if he/she would be willing to write a strong letter of recommendation.