The U.S. healthcare system is in the midst of complex change demanding new levels of collaboration to provide quality care, reduce health care costs and improve health outcomes. There is an increasing focus on moving to care of populations rather than individual care. However:

- Few clinical health professionals are trained in core principles underlying the care of populations; and
- Public health professionals routinely work at the population level but do not necessarily understand the clinical context and current healthcare reform and how they might play a role.

To address this gap, faculty at the University of North Carolina at Chapel Hill (UNC) have initiated the Healthcare PROMISE (Populations: Reformed Outcomes Management from Interprofessional Systems-Based Education) program with:

- Interprofessional education (IPE) offerings for both graduate health professional students and practicing health care providers and
- An interprofessional practice (IPP) experience where students and health professionals collaborate on quality improvement initiatives around population health issues.

This poster focuses on the IPP component for graduate health professional students and how it was operationalized across the UNC health affairs schools.

### Background

All students (≈23) utilized the same core content (based in a School of Nursing course). Public health students had the opportunity to enroll in another course within the UNC Gillings School of Global Public Health.

<table>
<thead>
<tr>
<th>Healthcare Course</th>
<th>Public Health Course</th>
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<tbody>
<tr>
<td>Housing in School of Nursing (SON)</td>
<td>Based in Public Health Leadership Program; open schoolwide</td>
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<tr>
<td>6 online modules covering topics such as population health, quality care, needs assessment, care coordination, patient and community engagement, cost/risk assessment</td>
<td>Classroom course (1 credit)</td>
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<tr>
<td>Monthly face-to-face class sessions focused on team-based case studies, interprofessional collaboration</td>
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<tr>
<td>Students formally enrolled in SON course also participated in online discussion forums and had additional assignments</td>
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<td>SON faculty as primary teaching lead with supplemental support from other Healthcare PROMISE faculty</td>
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### Core Content

- Healthcare Course
- Public Health Course

### Supplemental content
- Potential roles for public health engagement with healthcare sector, including clinical information, healthcare context, and ‘big picture’ of public health to facilitate engagement in core team-based case studies
- Taught by 3 public health faculty representing different disciplines
- Students from public health degree programs

### Core Content

- Healthcare Course
- Public Health Course

### Healthcare Course

- Housing in School of Nursing (SON)
- Hybrid course (3 credits)
- 6 online modules covering topics such as population health, quality care, needs assessment, care coordination, patient and community engagement, cost/risk assessment
- Monthly face-to-face class sessions focused on team-based case studies, interprofessional collaboration
- Students formally enrolled in SON course also participated in online discussion forums and had additional assignments
- SON faculty as primary teaching lead with supplemental support from other Healthcare PROMISE faculty
- Students from schools of medicine, nursing, pharmacy, social work and also nutrition departments

### Lesons Learned

- Key inputs for success: included a tenacious team leader, multi-school faculty commitment, student engagement and flexibility with piloting a new course, graduate student assistance for initial curriculum drafts, leveraging of resources
- Significant challenges of coordination
- High motivation of students to engage in IPE and to cover population health concepts
- Evaluation data showed increased understanding of skills/assets of different professions, particularly on roles of public health and social work
- Conceptualizing work in practice settings varied dependent on where students were in their curriculum
- Separate course for public health students supported important learning on healthcare context and public health/healthcare intersection but separated students from some interprofessional engagement opportunities

### Next Steps

- Change course structure to allow for a single course with profession-specific recitation sections that meet periodically
- Improve course coordination/logistics
- Move course towards sustainability and find additional opportunities to expand access to population health content beyond course
- Incorporate additional concepts based on student evaluation feedback
- Have faculty model interprofessionalism through more collaborative teaching
- Increase participation from public health students from different disciplines