

## **Urban Health Institute Rotation Goals and Objectives**

### **Educational Purpose and Goals:**

In order to practice effectively in the community, the residents must get to know the community, be willing to explore alternative ways of delivering health care based on the community's needs and characteristics, and learn to partner with other health care resources. Johns Hopkins Urban Health Institute (UHI) supports the east Baltimore community health worker (CHW) program. By the end of the rotation, residents will have learned ways to both minimize barriers to care and maximize care opportunities, will have participated in home CHW led interventions, and will run morning CHW rounds. Residents will also meet various leaders in the community.

### **Patient Care**

1. Participate in home-based CHW interventions to assess patients' home environment and to provide on-going care.
2. Develop an understanding of the affect of home environment on health care
3. Treat medical illnesses in settings outside the typical clinic environment

### **Medical Knowledge**

1. Expand knowledge of the treatment of common health problems (e.g. Hypertension, diabetes, COPD)

### **Interpersonal and Communication Skills**

1. The resident will be able to integrate patient-centered and doctor-centered communication skills to effectively communicate how and why the treatment and prevention of disease is important
2. The resident will be able to use similar skills in relating effectively to CHW members to effectively deliver care
3. The resident will communicate appropriately with community leaders

### **Professionalism**

1. In sometimes-difficult situations, the resident will be able to always exhibit respect, understanding of the patient's vantage point, acknowledge the patient's plight, and find something praiseworthy about the patient.
2. The resident will be able to become patient's ally, provide support and counsel in a primary care setting, and provide information and other resources needed.
3. The resident will be able to be sensitive to cultural, disability, lifestyle, and gender differences.
4. The resident will be able to articulate, understand, and practice in a way consistent with ethically sound, patient-centered practices.

### **Practice Based Learning and Improvement**

1. Residents will partner fully with the community to develop specific strategies and approaches for answering the needs of the community
2. Residents will reflect on the effectiveness of their communication skills
3. Residents will reflect on whether they are delivering evidence-based care

## **Systems Based Practice**

1. Develop an understanding for practice models in which health education, disease prevention, primary care, community health programs and government services work together to effectively improve health outcomes
2. Determine how to minimize barriers to care.
3. Expand understanding of complex health care delivery programs, resources, and health screening/immunization guidelines by running morning CHW rounds
4. Raise the level of community health knowledge through community service programs, including school-based initiatives, and equip the community to advocate for health promotion and disease prevention through leadership training.
5. Meet leaders in the community to improve the bond between health care providers and the community and to further understand the needs of the community
6. Review metrics for how to evaluate CHW performance and effectiveness.
7. Develop an understanding for research and education in urban health to stimulate new ideas for research and curriculum development to address urban health needs

### **Community Snapshot Community-Based Participatory Research Requirement**

A comprehensive understanding of the urban community, its working systems, and challenges is needed to create effective new care delivery systems. Physician engagement with the communities that they serve can spur the development of new models of health care delivery and address important community needs. An important step in successful community engagement is “knowing” the target community: assessing who makes up the community, determining what resources are in place, and understanding the continuing needs. If this step is skipped or performed superficially, incorrect assumptions can lead to inappropriate interventions, service duplications, or lack of sustainability.

#### **Goals and Specific Measurable Objectives:**

There are three goals of this project:

- I. Undertake a community assessment.
- II. Community Leader engagement
- III. Create a community project based on the community assessment.

#### **I. Community Assessment.**

The purpose of the initial community assessment is to have the participants become familiar with the East Baltimore community. Using a ‘Community Snapshot’ worksheet, the residents will familiarize themselves with resources and possible hazards to health in East Baltimore. The community assessment was modeled after the Work Group for Community Health and Development at the University of Kansas and the Community Medicine and the Anne E. Dyson Community Pediatrics Training Initiative and the University of California San Diego<sup>7</sup>. The residents will describe the demographic make-up of the community, including key-leaders, and learn East Baltimore history. This will help provide a context for Goal II, focus group with the community stakeholders. Various sources will be utilized: local people/patient, internet, and direct observation. Using this information, the residents will describe the strengths and problems they heard about as well as what matters to people in the community, (e.g., safety, education, housing, health). An understanding of the barriers and available resources will help the group select and state the priority issue (or issues) to be addressed.

#### **II. Community Leader Engagement**

The Johns Hopkins Urban Health Institute (UHI) serves as an interface between Johns Hopkins and the East Baltimore community in which it resides. Once the Community Snapshot data has been gathered, the UH program will work with the UHI to create project oversight groups comprised of key community stakeholders: community residents, community health workers, local clergy, local leaders, local business representatives, city officials, and UHI faculty. The key stakeholders will discuss the community project proposals, current projects, what is and is not working well, and intervention approaches. The key stakeholders vary depending on the project.

#### **III. Create a community project based on the community assessment**

The objective of Goal I and II is to recognize the existence of disparities or barriers amenable to intervention and improve physician understanding of the community. Grounded in social and clinical science, the Ecologic Model of Health (EMHC) reflects the complex interactions between a patient's individual characteristics, their lifestyle, social networks, and larger community context. By emphasizing the linkages and interconnections between the EMHC determinants, interventions geared towards improving the health of the East Baltimore community can be created. The UH residents and the East Baltimore community will collaborate on a community intervention, or novel health delivery system, geared towards improving the health and well-being of the community.

**Methods:**

**Goal I**

- Complete Community Snapshot worksheet
- Photovoice: Visually represent the community through a specific photographic technique.
  - record and reflect the community's strengths and problems
  - promotes dialogue about important issues
  - graphically represents a neighborhood map.

**Goal II**

- Community oversight groups
- Outline an intervention project
- Meet with the key community stakeholders and discuss their proposed intervention.

**Goal III**

- Create a community project based on the community assessment,

**Evaluation Methods:**

- Learner reflections will be presented to the UH group as a whole.
- Community leaders and the patients who are affected by the proposed intervention will be surveyed regarding satisfaction with the intervention.
- Pre- and post-intervention health measures can be obtained from the electronic medical record at the East Baltimore Community Center or from a participant survey

**Dissemination:**

- The project methods and interventions will be presented at national conferences, and published in peer reviewed journals.
- The residents will be required to produce scholarly work based on some aspect of the project (assessment, community engagement, development, or outcomes). Their work will be part of the annual resident research retreat and presented at regional and national meetings