The Research Center of Intentional Learning and Outcomes in Healthcare professions, Patients and Communities (ILO-Healthcare)

Current research efforts of ILO-Health research center highlight following initiatives, which are focused on:

1. Patient / community education
2. Healthcare workforce education

1. The Current Research Efforts in Patient / Community Education:

Model Initiative Title:
PEACE (Patient Education and Communication Enhancement) and Community Health

The Aims of the PEACE and Community Health Initiative:
1) To form various supportive teams that may consist of researchers, patients, patient family members, community members, and/or other supporters, for studying developing, and offering advanced patient / community education models.
2) To identify significant predictors in personal and environmental dimensions addressing the expected patient / community adherence on their self-care behaviors throughout experiencing healthcare treatments, rehabilitation services, and longer time in lifespan.
3) To develop advanced patient education models designed to promote effective intentional learning that may incorporate multimedia-aid models; to reduce health literary challenges; and to strengthen patient / community adherence and other self-care behaviors.
4) To examine effects of strategic educational models on enhanced perception in patient- and family-centered care during experienced healthcare delivery and the impact on patient health outcomes.

Sample Projects in the PEACE and Community Health Initiative:

- **Patient Education And Communication Enhancement (PEACE):**
  As Founding Director and Principle Investigator, Dr. Park leads the PEACE education and research initiative. Along with the leadership support from the Department of Otolaryngology – Head and Neck Surgery (OHNS) for PEACE efforts, a few test models are designed for conducting future studies (A test model sample in laryngectomy: [http://goo.gl/6Xoua5](http://goo.gl/6Xoua5))

  Current research effort of PEACE 2016 is focused on:
  Oropharyngeal Cancer Patient Education in Jaw and Swallowing Exercises.
  The primary purpose of the PEACE 2016 research is to determine the effects of three patient education models designed to promote oropharyngeal cancer patients’ intentional learning, adherence on jaw and swallowing exercises, and health outcomes.
  The outcome measures include Patient-reported experience in patient- and family-centered care delivery and self-exercise efforts; Clinician-reported experience in patient education; and Patient physical statuses such as oral aperture (jaw opening). The core clinicians participating in the investigations of the PEACE 2016 are the faculty members of the Division of Speech Language Pathologists in the OHNS Department. ([Contact](http://contact))

- **Lay Health Worker (LHW) Training and Evaluation Model**
  Dr. Park designed the train-the-trainer model for the project entitled “Lay Health Worker
(LHW) Model to Reduce Liver Cancer Disparities in Asian Americans” (NIH R01 PI: Hee-Soon Juon, RN, Ph.D., The Thomas Jefferson University Sidney Kimmel Medical College).

The overall goal of the Dr. Juon’s team project is to implement culturally integrated, liver cancer prevention programs for Chinese, Korean, and Vietnamese Americans through outreach, screening, education, research, and training in the Baltimore-Washington Metropolitan Area. The specific aims are: (1) To develop a training protocol and certificate program for LHWs; (2) To assess the prevalence of HBV infection; (3) To implement intervention programs, based on screening test results; and (4) To evaluate the effectiveness of LHW intervention on adherence to HBV vaccinations among those unprotected.

Offering the LHW-led community education model was proposed to reduce liver center disparities among immigrant populations. It is designed to delivery by certified LHWs who should be capable linguistically and culturally to assist community members’ adherence on screening, vaccination, or treatment behaviors. Asian Americans have been identified as the higher risk population of Hepatitis B virus infection, which can lead to liver cancer. The LHW-led community education model has been implemented for Chinese-, Korean-, and Vietnamese-American communities in the Baltimore-Washington Metropolitan Area. The team investigations in the evaluation of LHW intervention effects are currently under-going.

2. The Current Research Efforts in Healthcare Workforce Education

Model Initiative Title:
Healthcare WORLD (Workplace Outcome Research of Learning and Development)

The Aims of Healthcare WORLD Initiative:

1) To facilitate scholarship teams in studying, developing, and offering advanced educational models employing intentional adult learning strategies.

2) To identify significant predictors in personal and environmental dimensions addressing the expected professional competencies of individuals and teams in medical, surgical and other healthcare professions.

3) To develop strategic educational models promoting intentional workplace learning and changes.

Sample Projects of Healthcare WORLD Initiative:

- **Faculty Development Initiative** in the Johns Hopkins University School of Medicine Department of Otolaryngology – Head and Neck Surgery (OHNS)
  As Co-Program Director of OHNS Faculty Development and Internal Consultant, Dr. Park developed a strategic conceptual model designed to support faculty-led innovation efforts in faculty development (see the figure 1). Based upon a series of need assessments and group discussions, the identified top 3 priority areas of faculty-led initiatives are Patient Centered Clinical Efficiency; Mentoring; and Understanding Changes in Health System. Each group projects are developing by lead faculty facilitators and group members. *(Note on Milestones)*

Current consultations are available to support for the first-year of planning and implementation team effort.
Note. To make a difference in OHNS capacity while meeting the updating workplace and societal demands by employing the following strategic model that highlights the professionalism strengthened by the 4-dimension related competency as a self, team member, member of profession, and patient-centered care provider.

Team RAISE (Research & Advancement In Surgical Education):
As the Founding Program Director and Internal Consultant for faculty-led and educational innovations and research, Dr. Park developed a collaborative scholarship team named RAISE. Along with Dr. Howard Francis’ leadership support, many surgical education leaders in multiple surgical departments have joined collaborative scholarship effort in surgical resident education.

Conceptual Framework of Learner-Centered Milestone Achievement (LCMA):
Dr. Park’s LCMA concept brief is available at [http://hichart.tv/3gA](http://hichart.tv/3gA).

Teaching LCMA Principles for a National Audience in Graduate Medical Education:
Dr. Park led a national workshop with RAISE team members about suggested learner-centered principles of LCME model. Park E, Francis H. *A framework of Learner Centered Milestone Achievement (LCMA)*. The Session 048 was offered with invited panelists LaPorte D & Jallo, G. (who are members of team RAISE), which was delivered to a national audience of over 300 medical education leaders participated at The 2013 The Accreditation Council for Graduate Medical Education (ACGME) Annual Educational Conference. Orlando, FL. The session brief is available [p. 29, SES048, A Framework of Learner-Centered Milestone Achievement (LCMA)]: [https://www.signup4.net/Upload/ACGM10A/ACGM15E/2013AECConferenceBrochure.pdf](https://www.signup4.net/Upload/ACGM10A/ACGM15E/2013AECConferenceBrochure.pdf)

Invention Disclosure of a Mobile-Technology Application - LCMA System (JHU Ref. No. C12476):
Based upon Dr. Park’s LCMA conceptual model, a mobile-technology based interactive system application for assessments and reflections was proposed for the targeted users of faculty-learners (e.g., surgical residents) to use for competency development and performance assurance needs in surgical care settings. The team leader/designer (Park E) and interested members/reviewers (Francis H, LaPorte D, Jallo G) are working with the Johns Hopkins Technology Ventures [http://ventures.jhu.edu](http://ventures.jhu.edu)
A recent study (Park et al, 2015) revealed the importance of personal factors:
Personal factors of individual residents (such as individual emotionality factor of global trait emotional intelligence and learner autonomy profile) can affect their improvement of overall competency. Practicing competency-based education should, therefore, include assessing individual resident factors as well as teaching clinical knowledge and technical skills. 
PubMed PMID: 26527584

Professional Competency Gain in Workplace Burnout:
Current investigations of the Healthcare-WORLD initiative include:
Examining Significant Predictors of Competency Gain in the Setting of Perceived Stress and Burnout. 
The testing global hypothesis is that personal factors like learner autonomy may be a significant role in workplace burnout reduction and competency gain. To understand occupational health issues such as physician burnout, it is suggested to pay attention on personal attributes in research and development of workplace learning models. The ILO-Health research center welcomes regional, national, and international collaborators to join a series of multi-site collaborations and funding support opportunities (Contact)

Development of a self-paced online learning module: Assessment and Evaluation in Inter-Professional Education (IPE-Assessment)
The Maryland Collaborative in Inter-Professional Education has been led by the education leaders of three collaborating schools in The Johns Hopkins University School of Nursing and The Johns Hopkins University School of Medicine, and The Notre Dame of Maryland University School of Pharmacy. Among many strategic projects, the collaborative has developed a series of self-paced online learning modules designed to introduce core concepts in inter-professional education. Currently, the Johns Hopkins University School of Nursing Professional Programs offers the self-paced modules including IPE-Assessment. Dr. Park provided the content of IPE-Assessment, which is available at: https://advance.nursing.jhu.edu/content/interprofessional-education-assessment-and-evaluation-ipe

Collaborative studies are welcomed; such as the development of psychometric assessment tools applied the assessment framework (See the figure, Park, 2013) (Contact)
A Framework for Assessment in IPE Contexts (Park 2013)

Environment of Practice Communities

Organization Support Environment for IPE
Do organizational infrastructure and policy promote or hinder IPE?

IPE Environment
Is the IPE a valid, reliable, and feasible model that is incorporated across the interacting communities of professionals?

Personal Factors
Beliefs, Attitudes, Behavioral Intentions, Past Behaviors

Results of IPE

Reaction to IPE
Learning in IPE
Learn about, from, with each other

Changed Behaviors

Before IPE
Learning Processes in IPE
IPE Action in Practices