Building a Longitudinal Curriculum for Community and Family Health Care with Interprofessional Education

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Faculty of Medicine, Public Health and Nursing
Universitas Gadjah Mada
2018
Curriculum Development

1. Problem Identification and General Needs Assessment
   - Health Care Problem
   - Current Approach
   - Ideal Approach

2. Targeted Needs Assessment
   - Learners
   - Learning Environment

3. Goals and Objectives
   - Broad Goals
   - Specific Measurable Objectives

4. Educational Strategies
   - Content
   - Method

5. Implementation
   - Obtaining
     - Political Support
     - Securing Resources
   - Addressing Barriers
   - Introducing the Curriculum
   - Administering the Curriculum

6. Evaluation and Feedback
   - Individual Learners
   - Program
Step 1
Problem Identification and General Need Assessment
Evidences on IPE

1. The importance of IPE in increasing knowledge, skill, and attitude toward interprofessional collaboration (Hammick et al., 2007; Reeves et al., 2008; Lapkin et al., 2011).

2. Objectively Measured Interprofessional Education Outcome and Factors that Enhance Program Effectiveness: A Systematic Review (Riskiyani, et al., paper accepted for publication at Nurse Education Today)
Values and Ethics
Professionalism
Increased knowledge
Hall et al.

Patient-oriented health care services
Ethical decision making
Increased knowledge
Wilhelm et al.

Awareness towards team dynamics and ability to develop shared value
Increased skills
Rozmus et al.

Roles and Responsibilities
Ability to delegate task
Increased skills
Sigalet et al.

Role clarity
Increased skills
Riesen et al.

Interprofessional communication
Providing information to patient using common language that is easy to understand
Increased skills
Davies et al.

Sharing of information
Increased skills
Sigalet et al.

Providing health education and promoting patient participation in care regimen
Behavior improvement
Rotz et al.

Patient satisfaction
Hallin et al.

Team and Teamwork
Patient hand over
Increased skills
Rotz et al.

Ability to delegate task and utilize resources effectively
Increased skills
Sigalet et al.

Ability to describe one’s own role and responsibilities and collaborate with other professions
Increased skills
Packard et al.

Ability of team functioning
Increased skills
Riesen et al.

Ability to perform leadership
Behavior improvement
Ralyea

Work together to deliver patient-oriented and specific health care
Patient outcome
Shiyanbola et al.
Step 2
Targeted Need Assessment
Learner

• Medical, Nursing, and Nutrition Students
• 1st - 4th year

Learning Environment

• Family and Community-based Program
• Similar Credit Semester Unit for all students
• Dedicated scheduled days for CFHC-IPE
• Class, Online, Community
Step 3

Goals and Objectives
Year 1:
Foundation of family and community health and IPE-IPC Concept

Year 2:
Discovery of family health problems and proposing simple intervention for addressing the problems

Year 3:
Discovery of community health problems and proposing simple intervention for addressing the problems

Year 4:
Developing community alert system for disaster and technical assistance for family disaster kit

Values/Ethics – Roles/Responsibilities – Communication - Teamwork

UGM.AC.ID
LOCALLY ROOTED, GLOBALLY RESPECTED
## Objectives

### Year 1

1. Explain the concept of Inter Professional Education and the CFHC-IPE Program
2. Communicate with group members among health professional students
3. Able to connect with the partner family
4. Comprehend individuals in partner families, role, family character, function and family interaction in society
5. Understanding on normal or healthy conditions in individual and family by referring to the family folder
6. Understanding on Healthy Indonesia Program with Family Approach (PIS-PK)
<table>
<thead>
<tr>
<th>Objectives</th>
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<tbody>
<tr>
<td><strong>Year 2</strong></td>
</tr>
<tr>
<td>1. Recognize and respect with culture and customs</td>
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<tr>
<td>2. Communicate well with family members and community leaders</td>
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<td>3. Identify lifestyle of partner families to find risk factors for health problems related to individual behavior, environment and bio-psycho-socio-eco-spiritual factors.</td>
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<tr>
<td>4. Collect data of risk factors and health problems and documentation into family folders</td>
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<td>5. Conduct simple health counseling and education.</td>
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<td>6. Convey information on observations and interventions to the village apparatus level</td>
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</tbody>
</table>
### Objectives

#### Year 3

1. Effective communication with team and community
2. Update the family folder
3. Identify and determine priority of community health problems
4. Analyze risk factors with triage epidemiology
5. Conduct simple need assessment
6. Develop a follow-up plan of intervention, create community health promotion media to support, develop a measurement tool
7. Carry out interventions
8. Evaluate the intervention
Objectives

Year 4

1. Comprehend of Emergency and Disaster in Community activities
2. Demonstrate BLS techniques
3. Implement the concept of Family Emergency Response Plan
4. Develop media of family emergency response plan
5. Develop Plan of Action for community service activities
6. Identify the needs of families in disaster situation
7. Implement the concept of Family Emergency Response Plan to the community
8. Make a report of activity devotion
Step 4

Educational Strategies
• Maintain congruence between objectives and methods
• Use multiple educational methods
• Choose educational methods that are feasible
• As assessment can drive learning, use the methods to internalization of assessment criteria
Learning Methods

Team Building

Role Play
Learning Method

Panel Discussion

Lecture

Group Discussion
Learning Methods

Discussion with family

Filling Family Folder
Learning Methods

Community Empowerment and intervention
Learning Methods

BTCLS

Community Service
Step 5
Implementation
• Obtaining political support
• Securing Resources
• Addressing Barries
• Introducing Curriculum
• Administering Curriculum
Around 1700 students, 100 lectures plus field instructors and cadres

Full Support from Dean
Sufficient annual budget from faculty
Daily Managers and Year coordinators
Collaboration with Health District Office and Health Centers, Community Leaders
Capacity building and continuing education for lecturer, field instructors as well as cadre
UNIT COMMUNITY AND FAMILY HEALTH CARE – INTER-PROFESSIONAL EDUCATION
(CFHC-IPE)
Laporan Triwulan 1 Tahun 2017:
Januari - Maret 2017
MEDIA INFORMASI CFHC-IPE FK UGM

Ringkasan Eksekutif

Community Family Health Care – Inter-professional Education (CFHC-IPE) merupakan program unggulan Fakultas Kedokteran Universitas Gadjah Mada (FK UGM) yang memiliki tujuan pada peningkatan kualitas keahlian dan komunikasi yang dilaksanakan secara edukasi antar profesi keluarga. CFHC-IPE melibatkan mahasiswa program sarjana dijelaskan dalam (1) pendidikan dasar; (2) lulusan program; dan (3) lulusan program. CFHC-IPE telah berjalan sejak fakultas FK UGM angkatan 2011 dan hingga tahun april 2016 telah terbukti pada empat angkatan mahasiswa.

Program CFHC-IPE dikatakan selama tujuh semester, terbagi dalam lima tahun: (1) tahun I mahasiswa dapat mengikuti dan memahami keluarga muda; (2) tahun II mahasiswa dapat mengikuti masalah keahlian keluarga muda dan melakukan intervensi sederhana; (3) tahun III mahasiswa dapat mengikuti masalah keahlian keluarga muda dan melakukan intervensi sederhana; (4) tahun IV mahasiswa dapat mengikuti masalah keahlian keluarga muda dan melakukan intervensi sederhana; (5) tahun V mahasiswa dapat mengikuti masalah keahlian keluarga muda dan melakukan intervensi sederhana.


Pada triwulan pertama tahun 2017, Tim CFHC-IPE multi melaksanakan amaran tersebut. Berbagai aktivitas berlangsung secara paralel dengan simulasi baik baik pelatihan kesehatan sehat dari semester pertama pada tahun 2016/2017, maupun pengembangan kecil-kecilan – kegiatan tersebut dibuatkan untuk mempertajam tata istilah program CFHC-IPE agar lebih cepat dan memperoleh kecanggihan penggunaan serta memperkuat kepentingan sistem di Fakultas Kedokteran UGM maupun pembuatan keikutsertaan keikutsertaan dalam program CHC-IPE.

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Step 6
Evaluation and Feedback
### Blue Print Assessment of Year 1

<table>
<thead>
<tr>
<th>Learning Objective</th>
<th>Learning Activity</th>
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<th>Assessment Methods</th>
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<tbody>
<tr>
<td></td>
<td>Lecture</td>
<td>Tutorial</td>
<td>Team Building</td>
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<tr>
<td>Understanding in IPE concepts and CFHC-IPE program</td>
<td>V</td>
<td>V</td>
<td>V</td>
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<tr>
<td>Able to communicate among health professionals students</td>
<td>V</td>
<td>V</td>
<td>V</td>
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<tr>
<td>Able to communicate with family as a partner</td>
<td>V</td>
<td>V</td>
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<tr>
<td>Understanding on the role, family character, family function and character in community</td>
<td>V</td>
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<tr>
<td>Understanding on normal or healthy conditions in individual and family as a partner earlier by referring to the family folder (understanding on the concept before ill)</td>
<td>V</td>
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</tr>
<tr>
<td>Understanding on Indonesian Health Program with family approach (PIS-PK)</td>
<td>V</td>
<td>V</td>
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2018
- In progress of CFHC-IPE as a strong and well-implemented program.

2019
- CFHC-IPE as a strong and well-implemented program.
- Enhanced man powers by sending to master and PhD programs.

2020
- CFHC-IPE as a strong and well-implemented program.
- Enhanced man powers by sending to master and PhD programs.
- Strong research areas in family health, community health, IPECP, and disaster management.

2021
- CFHC-IPE as a strong and well-implemented program.
- Strong research areas in family health, community health, IPECP, and disaster management.
- Initiating center of excellence and harvesting experts

2022
- Well established center of excellence
References:


Riskiyana, R. Claramita, M. Rahayu, GR (2018) Objectively Measured Interprofessional Education Outcome and Factors that Enhance Program Effectiveness: A Systematic Review. Paper accepted for publication at Nurse Education Today
Thank You