

Objective I: Serve as a thought incubator for collaborations among the community, university, and program partners, and regional AHEC centers to facilitate relationship building and communication.

Strategy I.I: Establish a bidirectional comprehensive communication plan among the Center for Interprofessional and Community Health Education, and regional AHEC centers, and partners.

Metric I.I.I: In conjunction with respective health professions programs and community partners evaluate available platforms conducive to bidirectional communication.

Metric I.I.II: Develop and evaluate a communication plan in conjunction with respective health professions programs and community partners.

Metric I. I. III: Develop, distribute, implement, and act upon an annual 360-degree Center for Interprofessional and Community Health Education Assessment to be anonymously completed by internal and external CICHE collaborators.

Methods:

- Identify an effective communication platform that will be accessible to current and potential campus and community constituents (i.e., Salesforce).
- Explore a unified platform for disseminating information via social media.

Strategy I.II: Convene college partners and regional AHEC centers to strategize how to improve communication around voluntary faculty appointments.

Metric: Not required; associated method will allow for the completion of Strategy I.II.

Methods:

- Explore options for an integrated database that is accessible by campus and community partners throughout the State (i.e., Salesforce, Navigator).

Strategy I.III: Develop a longitudinal quality improvement strategy utilizing rapid cycle quality improvement (RCQI).

Metric I.III.I: Collaborate with the University of Louisville to develop a statewide outcomes assessment strategy to facilitate demonstrating statewide quality improvement.

Metric I.III.II: Establish an assessment strategy and cadence.

Methods:

- Identify mutually agreeable variables to capture for each program type in all regional AHEC centers.

- Explore data collection strategies (databases) and timing.

Strategy I.IV: Explore and develop strategic partners for grant development and submission.

Metric I.IV.I: Track number of potential partners engaged, partnerships developed, and number of grants submitted.

Methods:

- Monitor Notices of Funding Opportunities (NOFOs) that involve some component of health workforce/team/collaboration. Work with key college, department, and regional AHEC center partners to promote services to write, administer, and evaluate opportunities.

Objective II: Develop and implement an integrated longitudinal interprofessional health curriculum from high school to post licensure.

Strategy II.I: Expand or enhance AHEC pathway opportunities, beginning at the high school level, to include exposure to professions and curriculum focused on team-based care throughout all pathway efforts.

Methods:

- Continue to build partnerships to collaborate to reach and impact students in addition to but including the UK Center of Excellence in Rural Health.
- Hone existing and potential partnerships with Public School systems and health facilities with special focus on Federally Qualified Health Centers.

Strategy II.II Collaborate with college and program partners to identify common curricula across professions.

Metric: Not required; associated method will allow for the completion of Strategy II.II.

Methods

- Engage the center's Academic Leadership committee to generate a list of topics (and faculty who teach (i.e., Social Determinants of health, Population Health, Health Equity)).
- Develop virtual asynchronous consultations among learners focused on identified complex patients to allow students to work together as a team to develop a holistic care plan for the person; include preceptors.

Strategy II.III: Engage faculty who teach common curricula and academic leadership partners to identify experiences and timing for experiential opportunities to bring curricula "to life."

Metric: Not required; associated method will allow for the completion of Strategy II.III

Methods:

- Work with faculty identified in strategy II.II and community partners to identify goals, objectives, sequencing, and evaluation strategies to engage

teams of students to experientially learn about, and potentially positively impact, the common curricular themes identified in II.II.

Strategy II.IV: Collaborate with regional AHEC centers, college, and program partners to survey the environment and identify potential interprofessional education settings.

Metric: Not required; associated method will allow for the completion of Strategy II.IV

Methods:

- In preparation for strategy II.III, develop, deliver, and analyze a survey to identify potential settings, maximum student numbers allowable, and types of professions needed for each population.
- Engage two (initially) identified sites and work with site leadership, AHEC regional center staff, and course directors of involved colleges/programs to develop interprofessional experiences that can be accomplished during the rotations that will supplement and not distract from the requirements of the rotations.

Strategy II.V: Strategize with course directors and regional AHEC centers to ensure a somewhat continuous 'flow' of clinical rotations to identified interprofessional education settings.

Strategy II.VI: In support of teaching and collaborative care, support strategic ongoing professional development opportunities for all faculty.

Methods:

- In partnership with course directors and regional AHEC centers, establish a systematic on-boarding strategy for new preceptors.
- Include content related to interprofessional collaborative care in annual Voluntary Faculty conference.
- When feasible, re-establish site visits to key training sites in partnership with course directors and regional center staff in order to determine preceptor needs, provide feedback, and increase community engagement.
- Survey course directors and voluntary faculty to determine faculty development and communication needs

Objective III: Optimize clinical rotations supported by AHEC.

Strategy III.I: Collaborate with college partners and AHEC regional AHEC centers to streamline onboarding processes for new preceptors.

Metric III.I.I: Develop a process to communicate amongst the university and the AHEC regional AHEC centers for recruitment, appointment, faculty development, and retention of clinical preceptors.

Methods:

- Implement value-stream to determine gaps and opportunities within the rotations process. Include those responsible for voluntary faculty appointment, course directors, UK, and regional student services personnel.
- Increase communication among, and support for, course directors who oversee community-based clinical rotations.

Strategy III.II: Develop student rotation database accessible by University of Kentucky partners and AHEC regional AHEC centers.

Metric: Not required; associated method will allow for the completion of Strategy III.II.

Methods:

- Incorporate into method for strategy I.II to include bi-directional communication among centers and campus partners.

Strategy III.III: Assess and develop a student rotation process that supports an advanced rotation schedule when feasible.

Metric: College/Department/Program satisfaction to be assessed during annual 360-degree program evaluation.

Methods:

- Value stream entire process to develop optimal process for effective rotations