Community Needs Assessment to Inform the Ability of Future Physicians to Engage with the Community

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Abstract
The Medical College of Wisconsin-Central Wisconsin (MCW-CW) features a course called Physicians in the Community, which engages medical students in a two-year scholarly project with a community mentor. To identify strategies to strengthen the course, stakeholder interviews or focus groups were conducted with 30 community members. Many of the community stakeholders interviewed had served as student project mentors. Additional stakeholders were recruited to broaden the community perspective. Interview questions focused on identifying health concerns in central Wisconsin to ensure that student projects focus on local needs and skills students should develop through their projects to benefit them as future physicians and community members. Health concerns identified by the community stakeholders mostly aligned with the Marathon County Health Priorities and social determinants of health. Desired student competencies identified by community stakeholders included building relationships and better understanding of patient populations and skills such as leadership and strategic goal development. Many of the community stakeholders lack the time and resources to engage in research around evidence-based practice and found MCW-CW student partnerships to be mutually beneficial. The information collected from the community stakeholder interviews will assist in building stronger Physicians in the Community.

Methods

Interviews or focus groups were conducted with 31 community stakeholders with unique perspectives on health concerns in Central Wisconsin. All MCW-CW students participate in a 2-year scholarly project called Physicians in the Community. A demographic survey was administered to each interview subject following their interview. Interviews were recorded, transcribed, and coded. The protocol was reviewed by the MCW IRB PRO: 00023096.

Results

Community Health Concerns: Community stakeholders identified needs in Central Wisconsin and discussed how medical students might help address these needs.

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<thead>
<tr>
<th>Identified Priorities</th>
<th>Student Projects</th>
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<tbody>
<tr>
<td>Addiction: “We have a drug problem...I see it almost daily...the impact living with an addict has on a high school student.” CM15</td>
<td>Chris Grant M2 partnered with North Central Health Care to impact addiction recovery efforts. His needs assessment and presentations to county officials have led to plans for sober living facilities to open in central Wisconsin in 2020.</td>
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<td>“We are trying to work with the local doctors to make sure they understand med seeking behavior...they are seeking certain drugs.” CM14</td>
<td>Shannon Buhler M2 is working with the AOD Partnership to distribute Deterra drug disposal bags to elderly residents and evaluate whether they impact proper disposal of unused medications.</td>
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<td>Mental Health: “We have a lot of mental health issues...it is not always possible to get into a psychiatrist in a timely manner” CM14</td>
<td>Alexa Ernst M3, Hilary Steltepohl M2, and Lewi Papke M2 assisted with the administration of a mental health screener for junior high students. Data from the screener inspired the medical students to organize a mental wellness day for D.C. Everest Junior High students. The project data reinforced district needs for additional social worker and counseling staff. A second mental wellness day is currently being planned.</td>
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<td>With limited access to mental health providers, family primary care doctors must be educated in treating mental health disorders</td>
<td>Countytrey Schwebach M4, Aaron Weaver M3, and Krysten Rutinski M2 have served as mentors to students at Enrich, Excel, Achieve Learning Academy. Data has shown that despite the students’ high ACE scores, these high school students have maintained high life satisfaction and success.</td>
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<td>Trauma/Adverse Childhood Experiences (ACE): “There is a lot of trauma, abuse, neglect...generations are struggling with the same type of problem” CM11</td>
<td>Physicians will often encounter the effects of childhood trauma due to the increased frequency of chronic conditions associated with ACE’s.</td>
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<tr>
<td>“The impact of childhood trauma due to the increased frequency of chronic conditions associated with ACE’s.” CM12</td>
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Table 1. Stakeholder characteristics in comparison with Marathon County

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<th>Stakeholder Characteristics</th>
<th>Marathon County Population</th>
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<td>58%</td>
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<tr>
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References


Acknowledgements
Funding for Community Engagement Funds to support student projects was provided by Lillitch Family, Aspirus, River Valley State Bank, and the Dan Storey Foundation. We appreciate Kelly Mulder for her course coordination efforts. LM received funding from WI Area Health & Education Center through Community Health Internship Program, CN and AP received support from the Kern Institute. We would like to extend our thanks to all of our partners including Jeff Fritz, Brooke Davis, Shannon Young, Melissa Moore, and Laura Scudiere.

Future Directions
- Collect feedback from Hmong and other under-represented in this set of interviews
- Look for ways to measure and provide feedback to medical students regarding competencies
- Continue to develop relationships with its community partners to sustain and identify opportunities for student projects

Conclusions
- Regional medical schools can play a role in providing research and partnership with local organizations to tackle health concerns
- Community engagement during medical school helps medical students to develop skills desired by community members
- Community stakeholders desire engagement with physicians in local organizations as well as in the clinic.

Student Competencies for Community Engagement
Community Stakeholders were asked to identify student competencies that they desired current medical students to possess as they move into practice.

- Leadership Skills: “If they speak up about or draw attention to, or pressure their organization to address some of the things that they see in the community, or in their own practices, it could be a powerful force.” CM25
- Perspective/rural challenges: “We know many of the patients will be coming from rural communities. I think having a first-hand look into having the lack of resources, some of the barriers, health trends that impact rural communities is a positive thing.” CM6
- Knowledge of Community Resources: “I think the medical college is doing a great job engaging community partners...I see that as making them a more well-rounded physician...knowing referral services, and knowing how to provide full spectrum care...” CM10

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Figure 1. Physician in the Community Course Project Timeline

Figure 2. Meeting between community mentor and medical student to discuss Cycling Without Age

Figure 3. Projects have been influenced by the Marathon County Health Priorities

Figure 4, 5, 6. Students participating in Physicians in the Community activities

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