



Interprofessional Student Education with an Otolaryngological Emphasis

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Editorial

Driven by concern about the lack of medical screening and treatment options available to uninsured members of the UNLV community, students and faculty from the UNLV Health Schools began in 2020 to investigate options for a UNLV Community Clinic that would provide free primary care to those who are uninsured. Timely screening, health education and understanding and ownership of disease is a relatively inexpensive path to prevention, early detection, and early treatment of disease. Focusing on these efforts would save patients, clinicians, and hospitals money by reducing morbidity and mortality. More importantly, the quality of America's patient care outcomes – which are recorded as the lowest among developed countries despite having the most money spent on healthcare, would improve.

Despite these well-known facts, there is less time spent on training health students in these areas, with most of the focus on diagnosis, care and treatment of acute, chronic, and multisystem disease and psychosocial disorders.

With the support of the Deans of the UNLV Health Schools, (Schools of Medicine, Nursing, Social Work, Public Health, Dental Medicine, Integrated Health Sciences, Departments of Couples and Family Therapy, Urban Affairs, Psychology and Psychiatry) UNLV has been developing a model for a free clinic, training volunteer students using volunteer faculty, while looking for financial support and a viable location for the clinic.

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The UNLV Community Clinic is planned to be an interprofessional primary care clinic, staffed by faculty and students representing ALL of UNLV's Health training programs and will include the following features:

- 1. Patient navigators** who greet each family or individual upon entering the clinic and assist them in clarifying their health needs and understanding interactions and instructions from the clinic staff.
- 2. Interprofessional student and resident teams** will serve as primary care providers, led by 4th year medical students or specialty residents, and supervised by interprofessional faculty teams. These teams will have trained together with patient cases and developed an understanding of team based patient care.
- 3. The integration into the primary care** setting of oral care, eye care, mental and behavioral health, OB/GYN, physical therapy, non-medicinal pain management, fall risk/occupational therapy, nutritional science, social services and patient and community health education programs.
- 4. Assistance in referrals, resource utilization** by graduate and undergraduate social work students under faculty supervision as well as partnerships with the many nonprofit organizations and government agencies currently providing medical, social, and legal services to underserved and uninsured populations in our community.

Planning a new model in outpatient care where different disciplines work together to bring the maximum experience and skills to the health issues at hand is not new, but using this many different students and faculty from different health schools, integrating multiple services into primary care, and adding community outreach became our challenging and

exciting goal.

Student Training: Otolaryngology

One of the first faculty members who contacted me to be involved with the clinic was Dr. Jo-Lawrence Bigcas from the Kirk Kerkorian School of Medicine at UNLV. Dr. Bigcas is the Residency Program Director and Assistant Professor for the Department of Otolaryngology- Head and Neck Surgery. Dr. Bigcas has had a particular interest in head and neck cancer, from early screening and diagnosis to complex head and neck reconstruction. After his Otolaryngology head and neck surgery residency at McGovern Medical School in the University of Texas Health Sciences Center, he completed a prestigious training program at the Vanderbilt University Medical Center in Nashville, TN, in head and neck surgical oncology, skull base surgery, and microvascular free flap reconstruction. He also has clinical interests in other subspecialties of otolaryngology including craniomaxillofacial reconstruction, advanced endoscopic sinus surgery, anterior and central skull base approaches, cerebrospinal fluid leak repair, facial reanimation, and surgical education for medical students, residents, and fellows.

Dr. Bigcas and Dr. Sonal Shah, a board-certified oral and maxillofacial pathologist who is an Associate Professor at the UNLV Dental School, had been working on creating a series of free screenings in the community for head and neck cancers. They did not have experience with our community and knew that as Associate Dean of Community Engagement for the new Kirk Kerkorian School of Medicine at UNLV, I had been taking students from different UNLV schools into the community to participate in a variety of health-related programs. Drs. Bigcas and Shah also wanted to include different health students at different levels in their effort. They felt this would give them an opportunity to teach future physicians, dentists, and other health students techniques for screening and share some of the new developments in the treatment of head and neck diseases. Dr. Bigcas participated in our student training sessions, which occurred on Saturdays, by giving an overview of his work and screening efforts for cancers, the importance of screening in saving lives and preserving quality of life and showed slides of some of the more dramatic surgical cases he has been involved with. On subsequent training days, we added training on routine oral screening for other diseases of the head and neck area, including ophthalmologic disorders, diabetes, malnutrition, eating disorders and findings associated with a variety of systemic disease. During the sessions, it was remarkable to see that in addition to faculty teaching students, the various students taught each other from their own different experiences and skills learned in their previous and current training. The nutrition students discussed signs of oral disease and behavioral signs in patients with eating disorders. Dental students discussed

systemic problems seen in edentulous patients. Behavioral health students talked about evaluation of facial and neck ticks. What we all realized is that the fields of healthcare have become so varied and specialized, that so many of the approaches to disease are currently done with blinders on to other disciplines, essentially in isolation. When sharing the information and working together, we were able to help prepare students who would see patients in their specific roles with tools giving maximum effectiveness for prevention, early diagnosis, and treatment of diseases.

A Wide Range of Student Training

We did not just focus on issues relevant to the Head and Neck. Other training our students have received includes faculty-led discussion groups on Medical Ethics and Policies, Clinic Operations, Patient and Community Education, Customer service and the effect of Clinic environment, Interprofessional team competencies, Community Outreach and social media, Social Service Resources, and Leadership and Teambuilding. In addition to required onboarding modules (HIPAA, Blood-borne pathogens, Public Health 101, CDC Covid information) we asked faculty from the different schools to create remote and in-person sessions with students – (also recorded) – discussing: patient navigation, motivational interviewing, trauma-informed care, interprofessional teams, substance abuse and SBIRT, “First Aid Mental Health”, BLS/ Stop the Bleed, Vaccination Training, Vital signs training, Training on the specific physical exams of different disciplines, History and Physical reference videos (Bates), details on Medicaid and Medicare, low cost/no cost transportation options, Safety net clinics, and managing the “difficult patient.” These were areas of training many of the students had not experienced nor would they experience in their future formal training courses. Finally, our clinical faculty and some community physicians presented lectures that were recorded and made available to all students on Diseases of the Eye, Office Pediatrics, Office Orthopedics, Behavioral health triage for Children and adolescents, Obstetrics and Gynecology, Endocrinology (Diabetes, Thyroid, Adrenal), Asthma- pediatric and adult, Cardiac disease, Personal Wellness, Relaxation/Stress reduction, Fall Risk and Occupational Therapy, Physical therapy and non-pharmacological pain management, Nutritional Science, Dermatology, and as mentioned: Oral Cancer Screening and Oral Pathology. With students training in all the different health fields – we felt it was wise to level the playing field somewhat with relevant information that they could use in their daily work to improve patient care.

Since UNLV is very involved already in community outreach programs, Dr. Bigcas has joined us at our community-based health and resource fairs to see what role he might play out in the community. We are currently

working out ways to incorporate Dr. Bigcas' knowledge and skills and hands-on experience in ways that will resonate with our students. As the mouth is the gateway to the body-there is so much they can do in screening for disease with just some basic knowledge, guidance and experience.

While we await final closure on our clinic location, we will continue to train, practice, and collaborate on creating

a primary care clinic with a variety of health students and residents who can work together and, in the end, deliver care that is better together than it would be on their own. The training options are endless, and we think by the time we actually have our clinic ready, that those involved, faculty and students will be better trained than many of our colleagues at other Institutions.

