

2017

## Integrative Workshops

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## INTEGRATIVE WORKSHOPS

As described in the Preface to this casebook, the MPH Program holds integrative workshops three times a year for its students. These day-long workshops present students with an opportunity to bring the knowledge they have gained in the Program to bear on a topical issue in public health. The following section provides an outline of each workshop held during 2015/16, with a view to sharing examples for others interested in this type of approach to teaching.

### INTEGRATIVE WORKSHOP #1 MIGRANT WORKERS' HEALTH FALL 2015

#### Speakers

Michelle Tew, RN BScN DOHS COHN(C), *Occupational Health Nurse*  
Occupational Health Clinics for Ontario Workers

Eduardo Huesca MSc, *Coordinator, Migrant Farm Worker Program*  
Occupational Health Clinics for Ontario Workers

Laura Comiskey, *Training & Language Services Coordinator*  
Across Languages, Translation and Interpretation Service

Derry McKeever, *Migrant Worker Advocate*  
Former Seasonal Worker

#### Scenario

Your learning team will assume the role of a consultancy that is applying for a contract to develop a research program into migrant workers' health with the Devonshire-on-Tyme county government. Organizations that serve the migrant workers consistently identify the need for engaging the community in migrant workers' health. The majority of county residents are not attuned to migrant workers' needs and view these individuals with mistrust and sometimes disdain. The resulting stigma only serves to enhance the difficulties faced by this population in accessing the health care services to which they are legally entitled.

#### Task 1:

Create a concept map depicting the stigma associated with migrant health workers and how this impacts their overall health. Identify research priorities on the health of migrant workers.

Your learning team will be addressing a town hall meeting. Your task is to present the following to those assembled:

- a) A concept map. (2 minutes)
- b) Your top three ranked research priorities to improve the health of migrant workers. (3 minutes)

Please upload a picture of your concept map and a document of your top three ranked priorities to Assignments in the MPH 9015Y OWL site by 11 a.m.

There will be 5 minutes of questions and feedback following each presentation.

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### Task 2:

Your learning team will be partnering with county representatives and researchers at Western University. Through this initiative the organization Occupational Health Clinics for Ontario Workers (OHCOW) will award up to \$150,000 for a successful proposal. Your task is to propose a study using qualitative, quantitative or mixed methodology. You may propose primary data collection or a secondary analysis based on existing datasets. We ask that you present the following components:

- a) Goals and Objectives (1 minute)
- b) Methods (3 minutes)
- c) Significance – why should this project be funded? (1 minute)

The following criteria that will be considered by the reviewers:

Are the objectives linked to the methods?  
 Is community engagement addressed?  
 Is the proposal feasible?

There will be 5 minutes of questions and feedback following each presentation. Please note that all time limits will be strictly enforced.

### Schedule

8:00-8:30	Arrival – tea and coffee	
8:30-8:55	Guest Speaker: Michelle Tew, RN BScN DOHS COHN(C)	Classroom
8:55-9:20	Guest Speaker: Eduardo Huesca, MSc	
9:20-9:45	Guest Speaker: Laura Comiskey	
9:45-10:10	Guest Speaker: Derry McKeever	
10:10-10:25	Break	
10:25-11:00	Instructions and prepare Deliverable 1	LT Rooms
11:00-12:20	8 10-minute presentations and feedback	Classroom
12:20-12:30	Instructions for Deliverable 2	LT Rooms
12:30-1:15	Lunch	
1:15-2:55	Prepare Deliverable 2	LT Rooms
2:55-3:10	Break	
3:10-4:30	8 10-minute presentations and feedback	Classroom

### INTEGRATIVE WORKSHOP #2 POLICY MEETS PRACTICE: IV DRUG USERS WINTER 2016

#### Speakers

Mr. Brandon Agnew, *Managing Director*  
London CARES

Ms. Sherine Fahmy, MPH, *Health Policy Analyst*  
College of Family Physicians of Canada

Dr. Sharon Koivu, MD, MCFP, *Site Chief*  
London Health Sciences Centre (University Hospital)

Ms. Donna Ladouceur, *Vice President, Patient Care*  
South West Community Care Access Centre

Dr. Michael Silverman, MD, FRCP, FACP, AAHIVMed,

- *Chair of Infectious Diseases*, Schulich School of Medicine & Dentistry, Western University
- *Chief of Infectious Diseases*, London Health Sciences Centre & St. Joseph's Health Care, London

#### Background

The City of London has a serious drug problem with high rates of addiction. Intravenous drug use in particular is on the rise. Narcotics are the most commonly injected drugs, and a higher proportion of injection drug users in London report sharing injection equipment in comparison to national levels.<sup>1</sup> In addition to blood-borne viral infections such as HIV and Hepatitis C and B, injection drug users can also contract bacteria which can result in infective endocarditis (IE). Left untreated, IE can result in life-threatening complications. Individuals with IE are typically hospitalized where the treatment for endocarditis is antibiotics administered intravenously (IV). Patients receiving IV antibiotics do not typically need to stay in hospital, and are often sent home.

In many jurisdictions, patients with endocarditis are treated through home care. In London, the South West Community Care Access Centre (CCAC) is responsible for delivering home care. The CCAC receives referral requests to help these patients. Together, physicians, the CCAC and the rest of the care team figure out the best course of action:

1. A patient is sent home with a peripherally inserted central catheter (a 'PICC'-line) and administers the antibiotic with the assistance of a nurse.
2. A patient is hospitalized and receives care in the hospital.
3. A patient receives no treatment.

When given a PICC-line in the first scenario, the patient (who is a known intravenous drug user) now has a new method for injecting drugs. This behaviour can be dangerous in the home care setting of the first scenario. In the second scenario, a patient will be hospitalized for 4-6 weeks, at a significant cost to the health care system. Additionally, it is often the case that both the

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<sup>1</sup> Middlesex-London Health Unit, *A Profile of the People Who Inject Drugs in London, Ontario (November 2013)*: [https://www.google.ca/?gws\\_rd=ssl#q=A+Profile+of+the+People+Who+Inject+Drugs+in+London%2C+Ontario+](https://www.google.ca/?gws_rd=ssl#q=A+Profile+of+the+People+Who+Inject+Drugs+in+London%2C+Ontario+)

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patient and his/her health care providers become frustrated with this scenario; patients can become disruptive, abusive, and noncompliant and often will choose to leave the hospital against medical advice or “AMA”. In the third scenario, the patient is sent home; however without proper treatment, many patients will die.

### Purpose

The purpose of this workshop is to introduce you to the concepts of policy development, analysis, and implementation. You will be using the skills and knowledge you have gained in the MPH Program to analyze a situation that involves the care of injection drug users in London, Ontario. The following objectives will be met:

1. Apply knowledge gained from MPH coursework in analyzing health care issues (for example, effectiveness and cost-effectiveness of models of delivering home care for different patient populations), particularly from a policy perspective.
2. Develop skills in producing plans to influence policy.
3. Gain an understanding of multiple stakeholder perspectives, roles, and responses with regard to health care dilemmas.

### Preparations

In your learning teams prepare three questions that you would like to pose to our speakers regarding the integrative workshop topic. Submit these questions by 5:00pm February 17<sup>th</sup> to Assignments in the MPH 9015Y Transforming Public Health OWL site.

#### *Required Readings:*

- Policy Brief – “A How to Guide”  
[http://www.idrc.ca/EN/Resources/ResearchDBs/Tools\\_and\\_Training/Documents/how-to-write-a-policy-brief.pdf](http://www.idrc.ca/EN/Resources/ResearchDBs/Tools_and_Training/Documents/how-to-write-a-policy-brief.pdf)
- “Bringing Care Home: Report of the Expert Group on Home and Community Care”  
March 2015. (read Executive Summary only)  
[http://health.gov.on.ca/en/public/programs/ccac/docs/hcc\\_report.pdf](http://health.gov.on.ca/en/public/programs/ccac/docs/hcc_report.pdf)

#### *Optional Readings:*

- Canadian Healthcare Association. 2009. “Home Care in Canada: From the Margins to the Mainstream”. Ottawa (read Executive Summary and List of Challenges only)

### Tasks

Presentations will be made by guest speakers from 8:45 to 11:00am and from 12:00-12:15, which will assist you with your tasks for the rest of the workshop. Each learning team will be assigned to join one other learning team. Thus, there will be a total of 4 teams formed for the integrative workshop day. Each assigned team will take on the role of one of four groups/organizations.

During the second break, teams should meet to determine which questions they would like to pose to the panel. These questions can be the same as the questions submitted previously, or they can be new. Each team will be able to ask **one** question per round. If time allows, we will have two rounds of questions. Teams should prepare their top three questions in case another group poses a similar question.

During the break-out session (12:45-3:00) teams will work toward two deliverables: 1) a plan of action; and, 2) a presentation on the plan. Teams should consider the planning models

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presented in the MPH courses and come up with a comprehensive plan which should include the actions you would take as your assigned group/organization to influence policy.

Presentations should be no more than 5 slides; the final slide should be a representation of the whole planning process (this can be a list, a diagram or whatever is most appropriate for the plan). It is not expected that every assigned member will present.

### Schedule

8:30-8:45	Introductions & Overview of the Workshop Day	Classroom
8:45-9:15	Guest Speaker: Brandon Agnew	
9:15-9:45	Guest Speaker: Michael Silverman	
9:45-10:00	Break	
10:00-10:30	Guest Speaker: Sharon Koivu	Classroom
10:30-11:00	Guest Speaker: Donna Ladouceur	
11:00-11:15	Break - Assigned Teams to Prepare Questions for Speakers	
11:15-11:55	Panel of Speakers - Assigned Teams to Ask Questions	Classroom
11:55-12:00	Overview of Assigned Team Tasks/Deliverables	
12:00-12:15	Guest Speaker: Sherine Fahmy – Report Back, Policy Observations	
12:15-12:45	Lunch	
12:45-3:00	Break-out Session: Teams to Discuss and Prepare Plan of Action and Presentations Team 1 - Board Room Team 2 - Classroom Team 3 - Foundation Lounge Team 4 - Student Lounge	Varies
3:00-3:40	Assigned Team Presentations (10 min each including time for questions)	Classroom
3:40-4:00	Guest Expert and Faculty Feedback	
4:00-4:10	Conclusion & Close of Workshop	