

**SWITCH: Student Wellness Initiative Toward Community Health**

**SWITCHpitch: Proposal for a Student-Run Clinic**

April, 2005



*“I pay tribute to the endless heroism of youth, whenever I am with energetic young people, I feel like a recharged battery.”*

*Nelson Mandela*

## **Student Wellness Initiative Toward Community Health (SWITCH)**

### **SWITCHpitch**

April, 2005

Ryan Meili, MD  
West Side Community Clinic  
631 20th St. W  
Saskatoon, SK  
S7M 0X9  
student\_clinic@yahoo.ca  
(306) 956-2518  
switch.usask.ca

### **Contents**

Executive Summary	2
Mission	7
History	7
Legal/ Organizational Structure	8
Committees	8
Partnerships	10
Product	15
Objectives	16
Community to be served	19
Marketing Plan	20
Other Services	21
Challenges/Opportunities	21
Financial Plan	23
Conclusion	24
Exhibits	24

# Executive Summary

**Vision:** To establish and operate an interdisciplinary student-run health clinic in Saskatoon's Core Neighbourhoods. Ultimately this will serve to improve the health of the community, the education of future health professionals and the relationship between the university and the community at large.

**Mission Statement:** Members of SWITCH recognize the intrinsic value of all people and their right to high quality health care. As future health care professionals, we strive to understand the social determinants of health, the principles of primary health care and the importance of socially responsive health promotion. Our vision will be based on local priorities, as determined through extensive communication with community groups and health professionals. After establishing this foundation, we will create and maintain a student-driven, interdisciplinary health centre to provide integrated and timely services to Saskatoon's underserved populations. SWITCH will provide an invaluable and sustainable link between students, health care professionals, community based organizations, the university, and the community. Students will benefit by gaining practical experience in an interdisciplinary setting and through exposure to unique clinical circumstances. The community will have access to a holistic approach to primary health care delivery. Within this mutually beneficial environment, opportunities exist to diminish barriers to health care, improve community relations, and make Saskatoon a healthier place for all.

**Rationale:** The concepts underlying the establishment of a student-run clinic encompass the following areas:

- 1 **Service** – SWITCH will provide health care to individuals and families in Saskatoon's Core Neighbourhoods. It will extend clinical and primary health care services available in the community to include some weekday evening and weekend hours. Services will be provided by health science student volunteers from the University of Saskatchewan under the supervision and guidance of practicing health care professionals. In addition to health services, the clinic will be a warm, safe environment for community members and students to interact and learn from one another.
- 2 **Interdisciplinary health care** – SWITCH will operate under the tenets of interdisciplinary health care delivery and education. Student and professional participants will include medicine, nursing, physiotherapy, pharmacy, nutrition, dentistry, clinical psychology, community health and epidemiology, and social work. Interdisciplinary teams have been promoted as the model toward which, in recognition of the multiple services which patients must access, future practice should be directed. This endeavour will enable us to begin providing service and learning in a team environment early in our health profession training.
- 3 **University & community partnership** – SWITCH will enhance partnerships between the University of Saskatchewan and both health and non-health related community organizations. All parties will benefit from working together. The University of Saskatchewan and community groups must maintain a dynamic, reciprocal relationship in order to mutually support and learn from one another.

- 4 **Community-based education** – SWITCH will provide health science students with a unique learning environment to complement their formal education process. Health science students are rarely exposed to settings beyond the confines of the university. In order to train well-rounded, socially responsible health care professionals, we must expand and enhance our formal education to include educational opportunities in a community setting such as a primary healthcare facility in Saskatoon's Core Neighbourhoods.
- 5 **Health promotion** – SWITCH will be an appropriate environment to provide health promotion and education to the community. Students will be able to apply knowledge gained through formal education in a community setting. Community members will benefit from the students' knowledge pertaining to health issues.
- 6 **Social environment** – SWITCH will provide a social context for dialogue between Saskatoon citizens who live in core neighbourhood areas and university students. Unlike more traditional healthcare settings such as a hospital or medical clinic, the student-run clinic will operate as a community resource and social environment where students speak with and actively listen to local residents. The image of healthcare professionals, and interactions between university students and the Saskatoon community at-large, may be enhanced by the outreach work of our clinic.

#### **Partners:**

The success of SWITCH will depend a great deal on the participation of its community, university and government partners. These partners will include the student volunteers, Health Sciences Educational Programs, The International Interdisciplinary Community University Partnership, community based organizations (CBOs), the Saskatoon Community Clinic, Saskatoon Health Region, Primary Health Services, White Buffalo Youth Lodge, faculty and professional mentors, and the residents of the core communities.

#### **The Product:**

SWITCH will open a clinic to be run by health science students. This will operate from the West Side Community Clinic and the White Buffalo Youth Lodge weekday evenings and weekend days. The services offered will not be restricted to acute clinical care but will be organized in response to the needs of the community and the skills offered by the students of the various colleges. Health education for clients will be an essential part of the offering. Part and parcel of the programming will be the interdisciplinary community health education of participants. Students, the health professions, the province, the university, and, most importantly, the core neighbourhoods, stand to benefit in numerous ways from this initiative.

SWITCH is currently on track to begin offering these services in October 2005.

#### **Objectives:**

The goals of SWITCH, to be further developed in the body of this document, include:

- 1) Open a student run clinic to serve Saskatoon's Core Neighbourhoods.
- 2) Respond to community needs in order to improve health services in the Core Neighbourhoods.

- 3) Recruit professional mentors and student volunteers.
- 4) Orient volunteers and mentors to the project.
- 5) Offer practical learning opportunities to future health professionals.
- 6) Develop stable financing relationships.
- 7) Evaluate the project on a continuing basis.
- 8) Create opportunities for public health education.
- 9) Improve connections between the university and the community.
- 10) Improve the health of the core neighbourhoods.

**The Community to be served:**

Saskatoon's Core Neighbourhoods of Riversdale, Pleasant Hill, King George, Westmount and Caswell Hill have numerous community-specific challenges. These areas have the lowest average household incomes in the city and the highest rates of unemployment and social assistance use. In particular the Aboriginal population of these areas has struggled in terms of income and suffered many of the social consequences of poverty. Despite this, there are fewer health services available in the area than in other areas of the city, particularly in the evening and on weekends. SWITCH has surveyed local CBOs to determine the services available and identify the gaps to be addressed. This information is supplemented by a review of the existing needs assessment literature in the area. College of Medicine students undertook a needs assessment class project, reviewing the literature pertaining to many aspects of this community. The Community Liaison committee has compiled this information into a foundational document, "Report on Saskatoon's Core Area: A summary of needs, services and recommendations for SWITCH", which SWITCH will use to help identify the services it will provide in the Core Neighbourhoods.

**Marketing Plan:**

We will utilize a focused marketing strategy to reach the public we intend to serve, as well as the students and mentors needed to offer services. Students and professionals will be reached through colleges and professional bodies. The community will be engaged through public events and media advertising campaigns.

**Other Services:**

Recognizing the need to avoid duplication of services, and the desire to work positively alongside other providers, SWITCH has surveyed the services presently offered in the community. These are further described in the surveying community needs.

**Challenges/Opportunities**

The challenges SWITCH will face include gaining community acceptance, involving students and mentors, developing a sustainable structure that will survive ongoing shifts in student population, and developing consistent funding relationships.

SWITCH has the opportunity to offer a service uniquely broad in its appeal. Increasing health services and health knowledge in an underserved community, improving the education of future

health professionals, advancing interdisciplinary cooperation and understanding and strengthening links between the university and the community are just the most obvious positive impacts of this project.

### **Financial Plan**

The funding to operate SWITCH will come from various sources. Start-up costs have been committed by the College of Medicine. Operational costs will be shared by partners of SWITCH, primarily the health science colleges and governmental sources. Saskatchewan Health and the University of Saskatchewan have each committed to ongoing funding over the next three years. SWITCH continues to explore other funding sources to ensure our sustainability as an organization and viability in meeting the identified needs of the community and the students.

## **SWITCHpitch**

### **MISSION**

**Vision:** To establish an interdisciplinary student-run health clinic in core neighbourhood Saskatoon. Ultimately this will serve to improve the health of the community, the education of future health professionals and the relationship between the university and the community at large.

**Mission Statement:** Members of SWITCH recognize the intrinsic value of all people and their right to high quality health care. As future health care professionals, we strive to understand the social determinants of health, the principles of primary health care and the importance of socially responsive health promotion. Our vision will be based on local priorities, as determined through extensive communication with community groups and health professionals. After establishing this foundation, we will create and maintain a student-driven, interdisciplinary health centre to provide integrated and timely services to Saskatoon's underserved populations. SWITCH will provide an invaluable and sustainable link between students, health care professionals, community based organizations, the university, and the community. Students will benefit by gaining practical experience in an interdisciplinary setting and through exposure to unique clinical circumstances. The community will have access to a holistic approach to primary health care delivery. Within this mutually beneficial environment, opportunities exist to diminish barriers to health care, improve community relations, and make Saskatoon a healthier place for all.

## **HISTORY**

SWITCH began as an initiative of health science students at the University of Saskatchewan. In October 2003, Dean of Medicine William Albritton brought to their attention a video produced by the Community Health Initiative by University Students (CHIUS). CHIUS is a student-run clinic at the University of British Columbia which serves Vancouver's downtown eastside. Inspired by this program U of S students began exploring the possibility of developing a similar clinic in Saskatoon to serve the urban underserved of the core neighbourhoods. Groups of medical students were shown the video, CBOs connected to the core communities were consulted and eventually a larger meeting open to all students was held. This has led to the development of SWITCH as it now stands, a group of 200 plus students from various health science disciplines working to transform their inspiration into a reality. These students have come together for meetings over the last several months to develop an organizational structure and strategic plan. They have chosen a name, developed mission statements, selected committees to work on specific aspects of planning and developed partnerships with the Saskatoon Health Region, Saskatchewan Health, The Saskatoon Community Clinic, White Buffalo Youth Lodge and the University of Saskatchewan. The students continue to work on creating positive relationships with all interested parties while developing their vision and planning for the operation of a student-run clinic.

## **LEGAL AND ORGANIZATIONAL STRUCTURE**

SWITCH is incorporated under the Non-Profit Corporations Act 1995. A partnership agreement between SWITCH and its principal partners is under development which will further define the roles of each of these partners.

This relationship is being modelled upon the Service Agreement between the Community Clinic and KidsFirst Saskatchewan Awasis Home Visitation Program in which it is the Accountable Partner, delivering funds provided by the Government of Saskatchewan and providing administrative support. This has proven to be a profitable, mutually beneficial relationship for both parties. KidsFirst maintains control over how their funds are spent while receiving the assistance of an experienced organization. The Community Clinic is able to participate in a

program designed to improve the health of children in their catchment area. A similar service agreement between the Government of Saskatchewan, Saskatoon Health Region, the Community Clinic and SWITCH would seem an appropriate method of administering funding for this project.

For the protection of clients, students and mentors, appropriate liability insurance will be a requirement for all participants in the clinical activities of SWITCH. SWITCH will use the relationships with its partners to facilitate coverage of these activities. SWITCH continues to meet with insurance agents of its partners to fine-tune the mechanisms of this coverage.

## **SWITCH COMMITTEES**

**Steering Committee:** coordinates the activities of the various committees, maintains continuity during times when the larger group is unable to meet (e.g., summer, holidays).

The Steering Committee consists of student representatives from each of the colleges and each committee. They work to coordinate the activities of the various committees. Representatives of the steering committee participate in meetings with SWITCH partners and other organizations.

**Community Liaison:** charged with assessing community needs and with developing an orientation module for future volunteers and mentors.

This committee has developed a questionnaire which has been completed by numerous organizations that offer services in Saskatoon's Core Neighbourhoods. This has helped to focus some of the planning of the project. The committee has reviewed the literature that exists in relation to the neighbourhoods in question. This committee has prepared the foundational document, "Report on Saskatoon's Core Area: A summary of needs, services and recommendations for SWITCH", which supplements information gleaned from previous Needs Assessments in the Core Neighbourhoods and the information collected by third-year medical students as part of their Community Health and Epidemiology course. A preliminary Program Evaluation plan has also been developed by a Psychology Graduate Student, and will form the basis for future planning and evaluation.

The other major component of this committee's mandate is the development of an orientation plan. This will consist of a module or manual, which all potential volunteers will receive, as well as an active community exposure aspect. This latter, more involved aspect of orientation is being developed in conjunction with IICUSP and community organizations along the "plunge" model in which students spend time in the community and work alongside service organizations located there to gain a better understanding of the community in which they will be working.

The Community Liaison committee is in the process of forming a Community Advisory Group, which will draw on members of the communities served by the clinic and representatives of appropriate community based organizations. The Advisory Group will provide feedback on the integration of SWITCH into the community it hopes to serve.



**Finance:** works to develop budgets and seek sources of funding.

This committee has developed budgets based on the CHIUS experience and perceived needs specific to Saskatoon. It has developed a funding relationships with Saskatchewan Health, the University of Saskatchewan, West Side Community Clinic, White Buffalo Youth Lodge, and the colleges that are involved. It is currently seeking out relationships with other partners and granting organizations.

**Public Relations:** develops promotional materials to reach potential partners, funders, mentors and volunteers.

The PR committee is currently working on the development of the SWITCH website: [switch.usask.ca](http://switch.usask.ca). The website has sections open to the public as well as private sections for communication between SWITCH members. The website will become a key element of our public face in the future. The committee has also developed a PowerPoint presentation, brochure, and a communication board in the Health Sciences Building to communicate updated SWITCH information.

**Networking:** forges links with community organizations, professional associations, faculty, students and other partners, and maintains communication networks.

The networking committee's somewhat nebulous mandate is one of the most important. Wading through the quagmire of key organizations and interested parties to develop strong, efficient partnerships is the only way that a project of such a diverse nature can hope to succeed.

**Operations:** works to define and organize the services provided by the student clinic. Members of this committee are responsible for identifying and addressing all of the issues pertaining to the efficient functioning of the clinic, including legal status and student liability insurance.

In conjunction with the Faculty Committee, the committee is determining how best to integrate student experience at SWITCH into the practical curricula. Faculty and students have been surveyed to develop a scope of practice document that outlines the potential contributions of students from each discipline and establishes guidelines for student practice based on educational level and degree of supervision. In the future, this committee will be responsible for developing policies and operating procedures for the SWITCH clinic. This will include further developing our relationship with the Westside Community Clinic in order to address administrative issues, such as the sharing of supplies and client files, and to ensure continuity of care for patients.

**Faculty Committee:** The Faculty Committee is composed of faculty members and students from

each of the participating colleges. Faculty representatives and students will work to develop relationships between SWITCH and various programs and outline how the student clinic experience can be incorporated into and supported by the educational programs.

**SWITCH Partners Planning Committee:** This committee consists of SWITCH, the university, and government and community partners. The role of this committee is to define and design the Partnership Agreement, to maintain connections between partners, and to provide ongoing guidance for the infrastructure operations of SWITCH.

## **PARTNERSHIPS**

Recognizing the complexity and importance of endeavouring to work in an underserved area, and our dependence on the expertise and aid of other organizations, SWITCH has endeavoured to develop strong partnerships. The envisioned principal partners of SWITCH would consist of The University of Saskatchewan, the Saskatoon Health Region, the Government of Saskatchewan, the Saskatoon Community Clinic, the International Interdisciplinary Community University Student Partnership and White Buffalo Youth Lodge.

The formal nature of the partnership will be different depending on the organization and its relation to SWITCH. At this time a draft partnership agreement has been developed between SWITCH, the University of Saskatchewan, Saskatoon Health Region, the Saskatoon Community Clinic, and the White Buffalo Youth Lodge.

### **1) The University of Saskatchewan**

[www.usask.ca](http://www.usask.ca)

#### **Relationship**

SWITCH would offer the University a site and curriculum to improve the education of Health Science students. The university has outlined in its Strategic Directions documents a commitment to service of the community, interdisciplinary cooperation, Aboriginal education and scholarship, and academic pre-eminence. SWITCH provides an opportunity to advance in all of these directions.

Numerous meetings have been held between SWITCH and various representatives of the University in general, specific programs, and the Health Science Dean's Committee have taken place. The College of Medicine has been a leader in developing relations of support and funding. The University, through the office of Provost and Vice President Academic Michael Atkinson, has offered SWITCH financial support of \$30,000 per year for a three year period starting April 1<sup>st</sup>, 2005. SWITCH continues to meet with the different academic health science programs via the Faculty Committee and through individual deans and program heads. This ongoing dialogue

is essential to creating a student-run clinic that reflects the goals of the University and the health science programs while responding to community needs.

### Role of the University

SWITCH would depend on the University, in particular the health sciences programs, for various aspects of its operations. One of these will be the support of student participation in the clinic, such as provision of insurance for practicum activities, or integration of SWITCH work into curricula to allow students to receive credit for their contributions. The colleges will also be asked to contribute by facilitating contact with potential professional mentors. In recognition of the service that SWITCH is providing by creating educational opportunities for their students, the University would be expected to contribute financially to the operations of the project; from the University in general, as well as via contributions from the individual colleges according to their means and usage of SWITCH services.

### Other Educational Institutions

Recognizing that the University of Saskatchewan is not the only institution which provides health care institutions, SWITCH is in the process of creating relationships with such educational institutions as SIAST Kelsey Campus, First Nations University of Canada, and University of Regina Social Work, Saskatoon division. This will not only broaden the range of services available to SWITCH clients, but also increase the scope and potential of interdisciplinary educational opportunities.

## **2) The Government of Saskatchewan**

[www.gov.sk.ca](http://www.gov.sk.ca)

### Relationship

The Government of Saskatchewan has the mandate to educate its people and provide for their health care. They have recognized, in documents such as the *Fyke Report* and the *Action Plan for Saskatchewan Health Care*, the importance of primary health care and interdisciplinary cooperation in improving health care delivery. In particular, the *Fyke Report* recommended establishing Primary Health Service Teams bringing together a range of health care providers including family physicians, ensuring that comprehensive services are available 24 hours a day, seven days a week, public health, health promotion, and disease and injury prevention strategies, and the development of strategies to address the broader determinants of health. *The Action Plan for Saskatchewan Health Care* outlines the four main priorities of the Government of Saskatchewan in relation to health care as:

- 1 doing more to support good health and prevent illness
- 2 providing better access to health services including primary care, hospital, and emergency care

- 3 improving health workplaces and addressing shortages of key health providers,
- 4 and placing a greater emphasis on quality, efficiency and accountability, in order to ensure the long-term sustainability of our Medicare system

SWITCH is a project which encompasses all four of the Saskatchewan government's current health priorities. A student-run clinic in the core neighbourhood Saskatoon will fill service need in an area that is currently underserved. Health promotion activities by health science students will "support good health and prevent illness" in the community while teaching students about the health concerns prevalent in that population. The government health plan "calls for the development of primary health care teams, where doctors, nurses, therapists and other frontline providers work together to meet the needs of patients." SWITCH will be an example of interdisciplinary teams of students, as well as health professionals working in supervisory and mentorship roles, working together to provide primary health care (see Appendix C for a further discussion of Primary Health Care). The importance of better integrating health science education and ensuring sufficient human resources in health is also highlighted in the province's plan by bringing "health training programs together in an integrated Academic Health Sciences Network" and "support[ing] the College of Medicine as a key resource in the delivery of health services, in meeting provincial training needs, and in conducting research." The sustainability of our Medicare system requires innovation in teaching as well as dedication to the principles of social responsibility in the provision of health services.

The Saskatoon Health Region's key objectives, as outlined in their Primary Health Strategic Plan (June 2003), include Accessibility, Population Health Promotion and Disease Prevention, Intersectoral Collaboration, Human Resources and Physician Recruitment, Community Involvement, Quality and Evaluation. As described above and indicated by the programs we intend to offer, SWITCH is a means to meet these recommendations, as well as to increase services to an underserved community in the region. One example is Human Resource and Physician Recruitment: SWITCH will expose students to the virtues of primary health care delivery and serving as a recruiting tool to keep Saskatchewan graduates in the province and in the fields which require them most. By involving practicing physicians from the community, SWITCH can serve as a means for the region to recruit practicing physicians into alternate payment schemes and primary care focussed practices.

### Role of the Government

SWITCH needs the support of the Government of Saskatchewan to finance this project and to facilitate the connections with Saskatchewan's various health agencies and services. As outlined in the budget section of this proposal, that this will be a relatively inexpensive project, with the salaries of all paid employees amounting to less than the cost of one salaried physician per annum. Considering the multiple ways in which this project will benefit the province and the

community in education, health services and community development, that's quite a bargain. This seems a natural extension of the government's role in other health facilities.

CHIUS, the student-run clinic in Vancouver's Downtown East-Side has developed a relationship in which the salaries of physicians, nurses and support staff are covered by the BC Coastal Health Authority, with the remaining costs covered by the university and granting organizations. This seems the natural way to go about a funding relationship, with the provincial government providing for the direct health services that are its mandate.

Primary Health Services Branch of Saskatchewan Health has agreed to provide SWITCH with \$30,000 per year to be directed towards the clinical supervision of students involved with SWITCH. This will be administered through the Saskatoon Regional Health Authority and the Community Clinic in accordance with the Partnership and Service Agreements between those parties and SWITCH.

### **3) The Saskatoon Community Clinic**

[www.saskatooncommunityclinic.ca](http://www.saskatooncommunityclinic.ca)

#### Relationship

SWITCH will increase the services provided to the clientele of the Community Clinic. The staff of the West Side clinic recognize the limitations of the services that they are able to provide. Relationships between the Community Clinic and the other partners, through their mutual involvement with SWITCH, will be strengthened. Exposure of future professionals to the Community Clinic model may serve as a recruiting tool. The relationship of the clinic to the community it serves would also be enhanced.

The relationship between SWITCH and the Community Clinic is quite strong. Patrick LaPointe, administrator for the Community Clinic, has been instrumental in helping SWITCH develop its plan and present it to other parties. Presentations have been hosted at both the West Side and Downtown clinics with staff learning about the project and contributing their views. A letter of intent to form a partnership between SWITCH and the Community Clinic is included with this document.

#### Role of the Community Clinic

The Community Clinic will provide SWITCH with significant logistical support. It will offer use of its facility at 631 - 20th Street West, along with appropriate access to health records relevant to clinic operation. It will also provide administrative support and access to its well-developed organizational structure in regards to such issues as financial management, human resources

support and volunteer development. The location of the West Side Community Clinic, and its established reputation in offering comprehensive health services will provide SWITCH with a natural entry point into the core community and speed its recognition among potential users of its services.

A Draft Service Agreement has been developed with the Community Clinic acting as Accountable Partner. This is modelled along the relationship that the Community Clinic has with the KidsFirst program. As Accountable Partner the Community Clinic would receive funding related to SWITCH and distribute that funding according to the directions developed by the persons responsible for managing SWITCH. They would also provide the accounting, human resources and management functions necessary to handling the financial and personnel affairs of SWITCH and in the recruitment and remuneration of staff.

#### **4) White Buffalo Youth Lodge**

[www.whitebuffalolodge.ca](http://www.whitebuffalolodge.ca)

##### Relationship

SWITCH offers White Buffalo yet another way to strengthen its connections in the community and offer greater services. Linking to the widened provision of primary health services and health education will help White Buffalo to achieve its mandate of promoting healthy lifestyles among Saskatoon youth. White Buffalo employs a primary health nurse to provide primary health services, as well as a dental therapist. The addition of further health services and greater connection to the West Side clinic located across the street is a natural for the youth lodge.

There have been two formal meetings with the management at White Buffalo and SWITCH representatives. White Buffalo has promised use of their facilities, a letter of support to that effect is included with this document. There has been immediate recognition of our joint purpose and the need to work in tandem to augment services while avoiding duplication.

##### Role of White Buffalo

White Buffalo can provide space to SWITCH for health education lectures to be provided by the students of various health disciplines. Additional space may be provided for counselling and physiotherapy rehabilitation treatments and exercise classes. Child care for clients of SWITCH may be located in the White Buffalo. The connection with White Buffalo, an established and valued presence in the core neighbourhood, will be a boon to SWITCH's credibility in the

community.

## **5) IICUSP- the International Interdisciplinary University Student Partnership**

### Relationship

This organization of community groups and the University of Saskatchewan works to develop practical learning programs for students in the health sciences. The member community organizations are the West Side Community Clinic, AIDS Saskatoon, QUINT Development Corporation, and the Child Hunger and Education Program (CHEP). SWITCH offers them a prime opportunity for student placements as well as a further strengthening of community-university relations.

IICUSP and SWITCH have been associated since early in SWITCH's inception. The work of the two organizations is strongly linked, both sharing the mandate of connecting students in the health sciences with Saskatoon's Core Neighbourhoods.

### Role of IICUSP

IICUSP offers SWITCH better links to community organizations and expertise in developing contacts with government and university partners. They are in the process of developing a community orientation program for students and educators coming to work in the core communities. A pilot orientation, or "plunge", took place on September 25th, 2004. Students from the SWITCH Steering Committee participate, along with nursing students on IICUSP practicum placements, in this pilot orientation. Discussion and workshops with CBO representatives from IICUSP were held, followed by a tour of the Core Neighbourhoods. IICUSP is seen as the key forum for connecting SWITCH to other service providers in the core neighbourhoods.

Recognizing the shared goals of the two organizations, IICUSP has dedicated \$5000 to help SWITCH hire a coordinator for summer 2005.

## **THE PRODUCT**

SWITCH will open an interdisciplinary primary health clinic to be run by health science students. This will operate from the West Side Community Clinic and the White Buffalo Youth Lodge weekday evenings and weekend days. Initially programming will run one evening and one weekend day per week, with plans for expansion of operating times as the clinic develops. While some piloting of services may take place prior, SWITCH intends to officially open its doors in October 2005.

### **Clinical Care**

SWITCH will provide Primary Health Care services to a presently underserved community. For more explanation of how SWITCH will exemplify Primary Health Care please see Appendix C. SWITCH will provide, via students supervised by qualified mentors, medical, nursing, psychology, social work, physiotherapy and other health services to clients of the West Side

Community Clinic and other members of the community. This will take place on an informal drop-in basis with mechanisms in place to ensure proper continuity of care. A common intake procedure will allow clients to be directed to the appropriate service team to meet their needs. Please see Appendix B: Clinic Flowchart for a visual description of this process. The White Buffalo Youth Lodge will be used to offer other therapies, such as brief intervention counselling or rehabilitation exercise programs. Through the strengths of location, student involvement and wide range of services offered, SWITCH will contribute to the improving health of the core communities.

### **Public Health Education**

Recognizing that much of the ground to be gained in health care is on the preventive end, SWITCH will develop educational programming on health issues important to the core communities. These will be presented in innovative, interactive ways, using the White Buffalo Youth Lodge as a base. This is a great opportunity to use the knowledge and enthusiasm of students to reach out to community members and help them to address their health needs.

### **Safe Social Environment**

SWITCH will use the lobby of the West Side clinic, a recognized safe place in the community, as their social epicentre. Clients will be able to come in and enjoy a sandwich and a beverage in a warm, safe environment. Students will mingle with members of the community on an informal basis. There will be no intake procedure unless health services are sought. To accommodate parents who wish to access clinical or educational services, child care will be provided at one of the sites. A receptionist and a security guard will be employed to ensure that this environment remains safe.

### **Interdisciplinary Community Health Education**

Students from different health disciplines will work together in health teams to provide services. Working together in this fashion will increase their knowledge about the activities of other health professionals and better prepare them to work collaboratively in their future careers. It will facilitate the development of more Primary Health Care practices as students are exposed to both the principles and the practice of Primary Health Care.

SWITCH will offer health science students a Service-Learning experience (Appendix D). Students will be exposed to practical experience in an underserved area. They will learn in a meaningful and memorable way about the social determinants of health and about strategies to address them. They will be introduced to a wider, more holistic view of health and the related provision of services. This will produce more thoughtful and capable practitioners.

## **OBJECTIVES**

### **1) Open a student run clinic to serve Saskatoon's West Side**

Ongoing relationships with the West Side Community Clinic and the White Buffalo Youth Lodge have developed into provisional offers of space and support. The location and the



reputation of these institutions in the core neighbourhood, and the community-oriented programming already offered from those sites, make for a natural fit with the mission of SWITCH. An office has been set up for SWITCH at the West Side Community Clinic to facilitate our organization's development, further our relationship with West Side, and increase our presence in the neighbourhood.

In order for the clinic to function, roles and services will need to be well-defined. To this end the Operations Committee has produced a preliminary Scope of Practice document outlining what the students of each Health Science discipline have to offer to the clinic. This committee will be charged with developing a model for the day-to-day operation and services to be offered by the clinic when running.

## **2) Respond to Community Needs**

Recognizing that Saskatoon's Core Neighbourhoods have been surveyed extensively in recent years, SWITCH will not initially undertake a widespread, formal needs assessment. The committee has performed a survey of Community-Based Organizations in the core neighbourhoods and is presently setting up a focus-group project. Along with the input from these focussed explorations of community needs, the committee will rely on the significant body of work already compiled about and with the target communities by the Health Region, the Department of Family Medicine, the City of Saskatoon and other agencies. Future investigation and collaboration with other interested parties on changing demographics and community needs will be an integral aspect of the project. An initial step in this direction was a collaborative project with the Community Health and Epidemiology (CH&E) department of the University of Saskatchewan. Dr. Bruce Reeder, head of the department teaches a CH&E class to third year medical students. These 60 students worked to obtain more needs assessment data and evaluate that already in our possession as part of a class project. This has been supplemented by the work of the Community Liaison Committee to form our foundational document: "Report on Saskatoon's Core Area: A summary of needs, services and recommendations for SWITCH".

**3) Recruit professional mentors and student volunteers.** To this point SWITCH has been very successful in garnering student interest in this project. Over a hundred students from various colleges have come together with very little in the way of a formal recruiting process. In the future more formality will be necessary to ensure that students are introduced to the project in a consistent, positive fashion. It will also be necessary to develop a coherent plan for seeking out the help of professional mentors. This will be the role of the Public Relations Committee and significant progress on this should be made in time for the fall session of university so that incoming students are met with SWITCH early on in their training. A Faculty Committee has been formed to facilitate recruitment of mentors through the college and in the community. Networking students will undertake mentor drives depending on project needs.

**4) Orient volunteers and mentors to the project.** Involving people in work in an underserved area requires a significant amount of orientation to both the practical aspects of operation and the theoretical knowledge required to work positively in an environment which can be exceedingly delicate.

- a) A module or manual is being prepared that each volunteer or mentor will receive prior to coming to work at SWITCH. This is being prepared by students on the Community Liaison Committee and will cover topics pertinent to the community such as diabetes, addictions, cultural sensitivity and the determinants of health.
- b) IICUSP has developed, in association with SWITCH, an orientation experience known as a plunge. This is a real life experience of the community, exploring its strengths and weakness with reflection on the theoretical issues. The first such plunge took place with the Steering Committee on September 25, 2004. The Community Liaison Committee and IICUSP will develop future direction on this method of orientation
- c) A third aspect will be orientation to the logistical aspects of work at the clinic, to which end a mix of printed material and on-site orientation curriculum will be prepared by the Community Liaison and Operations Committees.

### **5) Offer practical learning opportunities to future health professionals.**

The development of the roles of students as members of an interdisciplinary team will be a key goal of the project. Also important will be developing support for the initiative in the various colleges, to the point of having SWITCH become recognized curriculum with opportunities for credit to students who work at the clinic. Mentors will have the opportunity to work with various kinds of students and teach them in a small group practical setting. The most important aspect of this education will of course be the patients who will, while receiving appropriate care, teach students about life in the Core Neighbourhoods and offer opportunities for engagement with and understanding of the social determinants of health. The Operations and Faculty Committees will be responsible for the organization of programming to achieve this goal.

### **6) Develop stable financing.**

As in any project of this magnitude, this is an essential and contentious point. Resources are scarce in any sector. However, there are several reasons this project should be able to find funding. It offers numerous services: health, education and community development, at a very modest cost. The commitment, nationally and provincially, to the development of primary health care, means that projects of this type are in demand.

We have received a commitment for ongoing funding over three years from Saskatchewan Health and the University of Saskatchewan. The West Side Community Clinic and the White Buffalo Youth Lodge have also donated space within their facilities to operate the SWITCH clinic and SWITCH programs. Many of the colleges have donated money and graduate student time toward the development of SWITCH. We are currently pursuing other funding avenues.

The financial plan and the budget are further outlined in the financial section and Appendix A. The Finance Committee takes responsibility for budgeting, financial management and fundraising.

### **7) Evaluate the project on a continuing basis.**

Understanding the fluid nature of community needs and of organizational capacity, SWITCH will build a system of analysis and evaluation into its operating process.

This system will include mechanisms to address immediate concerns, daily debriefings, and periodic structured evaluations based on designated objectives and outcomes. A Psychology graduate student has developed an initial process evaluation and program logic model for a course in Program Evaluation. This is the first step toward the development of an ongoing evaluation process, and an exciting example of how SWITCH can involve students in all levels of its development process. Evaluation will fall under the auspices of the Operations and Community Liaison Committees as they develop programming and analyse the degree to which it is successful in meeting project and community objectives.

#### **8) Create opportunities for public health education.**

As well as offering clinical care, SWITCH recognizes the important role of prevention in primary health care. One of the means of preventing illness is educating the public about health matters. Through our arrangement with White Buffalo Youth Lodge we will have space to provide lectures and workshops on health issues relevant to community members. The knowledge brought by students of various disciplines will be employed to teach members of the public on a wide array of topics. Innovative, participatory methods of relaying this information will be employed. The Operations Committee aspect of programming will be organized.

#### **9) Improve connections between the university and the community.**

Building on the work done by IICUSP in linking the health sciences to community organizations, SWITCH will improve the presence of the university in the core communities. Students will be exposed to the health issues, needs and strengths of these communities. The university will develop relationships allowing for scholarship and knowledge translation, as well as having a positive face in the community that may serve to recruit more students from the Core Neighbourhoods to higher education. The community will benefit from applied research that addresses issues of importance in the area as well as the knowledge and services of the health science students.

#### **10) Improve the health of the core neighbourhoods.**

SWITCH is a new focus in health care education and delivery. We are moving upstream: addressing issues of prevention, employing interdisciplinary teamwork and evidence-based health care to serve and educate. The influx of well-planned interest and energy will not only increase the services available to the community, but will help to empower community members to take control of their own health. This goal informs all others: addressing the health needs of the core community will be SWITCH's guiding principle.

### **THE COMMUNITY TO BE SERVED**

Saskatoon's Core Neighbourhoods of Riversdale, Pleasant Hill, King George, Westmount and Caswell Hill have numerous challenges specific to the community context. These areas have the lowest average household incomes in the city and the highest rates of unemployment and social assistance use. In particular the aboriginal population of these areas have struggled in terms of

income and have suffered many of the consequences that poverty brings. Health services in the area are fewer than in other areas of the city, particularly in the evening and on weekends. SWITCH's mandate is to tailor our programs to respond to those needs according to our capacity.

In order to avoid further burdening a community which has been described as having been "surveyed to death", SWITCH has not undertaken a new needs assessment of the Core Neighbourhoods. Instead we have sought innovative ways to obtain the information we need to understand the strengths and challenges of these communities. The Community Liaison committee conducted surveys of CBOs in the area to get a sense of what those front line workers in the area felt was needed. In fall 2004, third year medical students in their Community Health & Epidemiology course undertook an extensive review of literature concerning the Core Neighbourhoods. They reviewed the existing literature, compiled and analyzed the completed CBO surveys, defined what services already exist in the area, etc. All of this work taught the students the learning objectives of their CH&E course while allowing them to help with the project: a great example of service-learning in action. Their findings have been compiled and, along with the other work done by the Community Liaison committee, will be used to form the foundational document, "Report on Saskatoon's Core Area: A summary of needs, services and recommendations for SWITCH". This will serve to identify the needs of the community and plan the services offered by SWITCH accordingly.

## **MARKETING**

SWITCH will be of little use if it remains a secret. While word of mouth has spread information about SWITCH quickly through those interested in community development and health, an organized marketing plan will be necessary to reach all concerned. A website, [switch.usask.ca](http://switch.usask.ca), has been developed which anyone with access to the internet can use for information. Specific marketing strategies are being developed by the Public Relations group to reach the different interested parties.

Potential partners in the project have been and will be reached by direct contact with student organizers and exposure to the principles of the project via formal presentations and documents such as this proposal. Student volunteers will continue to be recruited via presentations to classes, brochures and social events as well as the word of mouth that results from peer involvement. Professional mentors will be contacted via letters, brochures and presentations, professional associations, the health science colleges and direct contact by student organizers.

The public will be informed of our services in numerous ways. This initiative will garner considerable attention from the press, which will be useful for promotion. This has already begun with a front-page article in the Saskatoon Star Phoenix on February 10, 2005. Community members will be reached via existing newsletters such as QUINTessentials from the QUINT development corporation. A brochure drop-off in the surrounding area will take place nearer to the anticipated opening date. A public event as a kickoff will be planned for the opening. A SWITCH newsletter for continuous updates and community contact is being developed. We also

hope to work closely with the City of Saskatoon and the Community Associations in the Core Neighbourhoods to disseminate information.

## **OTHER SERVICES**

Recognizing the need to avoid duplication of services, and the desire to work positively alongside other providers, SWITCH has surveyed what services exist in the community and included that information in our "Report on Saskatoon's Core Area: A summary of needs, services and recommendations for SWITCH".

This overview includes a description of the type of health services available as well as their capacities and the times in which they operate. The survey was undertaken as part of the CH&E course needs assessment project. It is well recognized that the only after hours and weekend health services available in the area are at St. Paul's Hospital Emergency, a facility seen by many to be overloaded and to be seeing far too many cases that are not emergent. Available services in the community are many; SWITCH will operate where gaps in those services exist.

## **CHALLENGES/OPPORTUNITIES**

In an ambitious project of this sort, there are risks and challenges to be overcome:

**Over-promising and under-delivering:** If a big noise is made about a new project and nothing happens, there will be resentment from all parties, particularly students and the community. This will hamper future initiatives.

**Survey fatigue:** Assessments must be done in a fashion which will not impose on a population that feels too many studies have been done with too few results, nor impose on CBOs whose resources are already stretched.

**Damaging delicate community relations:** Bringing students into an unfamiliar cultural situation carries the risk of offence if appropriate cultural training is not worked into the orientation process.

**Negative experiences for students:** Instead of being excited about working in a novel context, students could be put off by the nature of the challenges they face.

**Security:** Violence does occur in these neighbourhoods and measures will have to be taken to ensure the safety of all participants.

**Insurance:** For students and mentors to provide health services in the Core Neighbourhood it will be necessary to insure all parties from professional and general liability. The SPPC and Steering Committees are giving significant attention to ensure SWITCH is properly insured.

Significantly outweighing the risks are the myriad, far-reaching possibilities of SWITCH:

**Flagship for Primary Health Care in Saskatchewan:** Operating on a primary health care model in a unique and engaging fashion, SWITCH offers opportunities for health agencies and government to promote a working model of Primary Health Care. This initiative is attractive on so many levels that it is sure to garner significant public and health service attention.

**Recruiting practicing and future health professionals to new model:** Observers of and participants in this process will see a viable model of primary care in action and be more likely to institute practices or follow future careers with the principles of primary care in mind.

**Changing Health Education:** This service-learning project moves health science education from the classroom to the community. Students learn in a dynamic, interactive fashion which is memorable and transformative. Students are exposed to much more than technical facts, learning about health systems, poverty, addiction, community and much more in a large-as-life setting. This will change the way becoming a nurse or a doctor, a physiotherapist or a psychologist, is viewed.

**Example to other programs:** As part of the academic world, the University of Saskatchewan Health Sciences programs can contribute to health care education elsewhere in the province and the world as a model of service-learning in action.

**Promoting interdisciplinary collaboration and understanding:** Students working and learning together will learn about each others roles and skills by exposure. They will learn, by starting to work together early in their training, to develop respect for other professions and their important roles in the provision of health services, as well as how to access services for their patients efficiently and completely.

**Improving the health of an underserved area:** Saskatoon's Core Neighbourhoods have many health challenges. The presence of SWITCH, operating at the presently neglected hours and offering a broad range of services, will help this community to address these challenges. SWITCH, if well-administered and properly supported, can be a great influence on the health of the community.

**Improving health knowledge and preventing illness:** SWITCH recognizes the importance of public education and prevention in promoting health. These will be integral parts of the services provided and be designed to fit the needs and means of the audience.

**Promoting higher education in the community:** The level of post-secondary education is lower in the core neighbourhoods than other communities in Saskatoon. Having students who are actively engaged in their education will be role models to the youth of the core community. Our location in White Buffalo will offer particular opportunities for such student-youth mentorship.

**Improving intercultural understanding in Saskatoon:** Connecting students, who hail from all over the province, with an Aboriginal population in an underserved area will go along way towards dispelling myths about other people and give greater understanding of the reality of present circumstances. Saskatoon has a highly segregated society: SWITCH is a human bridge.

**Connection between numerous community development and health service organizations:** Due to the wide range of interested parties and the services SWITCH will offer, there exist opportunities to involve many community organizations and improve the strength of the web of community services offered in the core neighbourhoods: integrating, augmenting and avoiding duplication.

## **FINANCIAL PLAN**

SWITCH's costs can be divided into three main categories:

**Start-up costs:** Supported by the College of Medicine, \$4,580.00 has been allocated to get SWITCH up and running.

**Operational costs:**

The general costs of running SWITCH include clinic overhead, research and development, volunteer orientation, administrative costs, and other program initiatives.

The operational costs of running SWITCH are to be covered by a mixture of revenue from funders and in-kind donations from our partners, as outlined in the budget (Appendix A).

**Compensation for Staff, Mentors:**

SWITCH will employ as paid staff a physician, a nurse, a receptionist and a security guard for each shift. A SWITCH coordinator will be employed to oversee SWITCH operations and act as a main contact person. Professional mentors will be paid on a per shift basis as outlined in the budget (Appendix A).

**Revenue**

The revenue for SWITCH will come from numerous sources. Saskatchewan Health and the University of Saskatchewan have each contributed \$30,000 a year for three years which makes up the core funding. Funding is also to be provided by the health science colleges. SWITCH is also seeking funding from various community and educational grants. The West Side Community Clinic and the White Buffalo Youth Lodge have donated space within their facilities to carry out SWITCH clinical operations and programming.

The SWITCH operational budget was based on the CHIUS clinic and the perceived needs of Saskatoon. We have solidified funding and support from most of the involved departments and have secured 3 year funding agreements from the U of S and Sask Health. SWITCH is always seeking new funding opportunities in order to insure the sustainability of this program. The costs as outlined for this project are quite modest considering the wide range of targets that are being met: primary health care, interdisciplinary care, increased services, improved education and recruitment.

**CONCLUSION**

The Student Wellness Initiative Toward Community Health is an exciting initiative of health science students. It encompasses many of our society's goals in regards to health and health care in a single project. SWITCH will be a flagship for Primary Health Care, Interdisciplinary Education and Practice, Preventive Health, Service Learning and more. As a relatively inexpensive project with a great deal of student, institutional and community support, SWITCH will take the lead in changing how health care is delivered in Saskatchewan in the future. The time for a SWITCH has come.

**EXHIBITS**

**Appendices:**

A Budgets

B Clinical Flowchart

C Primary Health Care  
D Service-Learning

**Letters of Support:**

Dr. Gill White, Primary Health Services, SaskHealth.

Michael Atkinson, Provost and Vice-President Academic, University of Saskatchewan.

Dr. William Albritton, Dean of Medicine, University of Saskatchewan.

Patrick LaPointe, Administrator, Saskatoon Community Clinic.

Dr. Liz Harrison, Associate Dean, Director, School of Physical Therapy, College of Medicine, University of Saskatchewan.

Karen Pine Cheechoo, Director, White Buffalo Youth Lodge.

Bob Faulkner, Dean of Kinesiology, University of Saskatchewan.

Dr. Beth Horsburgh, Dean of Nursing, University of Saskatchewan.

**Other:**

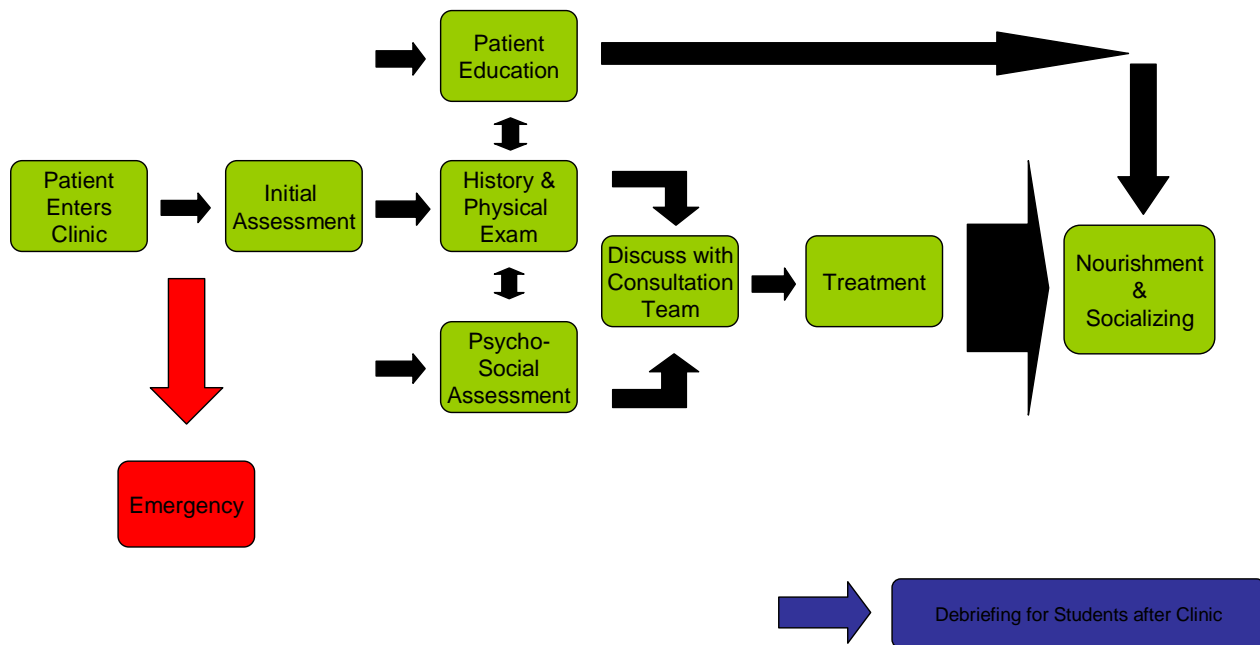
2 page pamphlet

A video outlining the CHIUS project and a PowerPoint presentation on SWITCH are available to interested parties for viewing.

**APPENDIX B**



# Clinical Flowchart



## Appendix C

### Definition of Primary Health Care

*Mary Kinloch, Medical Student*

The status of a person's health is not just measured by the absence of disease but the attainment of physical, social and mental well being. Primary Health Care (PHC) is essential in establishing a community that is "healthy". The services provided by Primary Health Services are designed to be:

- Promotive
- Preventive
- Curative
- Rehabilitative

These services are carried out to provide a high quality of health service guided by a set of principles that defines Primary Health Care. These principles are:

### Accessibility

Primary Health Care can not be successfully applied in a community unless it is universally accessible to individuals and families in the community. Accessibility is achieved when PHC is geographically, culturally and financially available to everyone in the community. Geographically, this includes providing a location that is easy for patients to get to and open at convenient times for them. It should be sensitive to the cultural differences within the patient demographic and free of charge. It should also provide access to all specialties in health care and therefore should offer a broad spectrum of services.

### Broad Spectrum of Services

A team of interdisciplinary health professionals, not simply physicians and nurses, should be available to all patients. This principle of PHC ensures that the “whole person” is considered and not just the disease. Therefore, the team of health care professionals will engage in preventative and rehabilitative support and not just curative measures.

### Community Run

PHC seeks to address the main health problems in the community and provides promotive, preventive, curative, and rehabilitative services accordingly. For PHC to be successful and survive it relies on participation and support from the community to maintain stages of development at a cost-effective level that is affordable. The services offered should reflect the needs and desires of the community to be served.

## **Why is PHC important?**

PHC goes beyond medical needs to improve quality of life. An increase in the quality of delivery improves the status of health within the community. This paradigm of a centralized location providing a multi-service network of providers will elevate accurate record keeping and keep the shuffling of patients to a minimum. Improved PHC eases the bottleneck effect suffered by the current health system at the emergency room level. By providing an alternative to the emergency room it appropriates health resources more efficiently. PHC creates self-reliance in the delivery of health within the community making the maximum use of allocated resources to the most needed health services. The alleviation of health problems through PHC development will promote social and economic development. It is everyone’s responsibility for the increase in primary health care. Similarly, everyone is rewarded by the increase in the social economic productivity of life when primary health care is developed and executed.

## **How is SWITCH Primary Health Care?**

Members of SWITCH recognize the intrinsic value of all people and their right to high quality health care. By embracing the principles of primary healthcare, the founders of SWITCH aim to provide a higher quality of healthcare to individuals and families in core neighbourhoods of Saskatoon. The following are examples of how SWITCH plans to provide primary health care

to Saskatoon within the aforementioned principles.

### SWITCH's Accessibility.

SWITCH is dedicated to provide accessibility to all individuals and families of the core neighbourhood of Saskatoon geographically, financially and culturally.

- The hours of SWITCH augment normal business hours of the West Side Community Clinic that shares its space. This will include some weekday evening and weekend hours. This is to ensure a convenient time for everyone to access SWITCH's services, responding to existing gaps in service availability.
- SWITCH is located in an area of Saskatoon that doesn't have access to the full gamut of health service and specialists outside of the emergency room.
- SWITCH would provide a broad spectrum of services in this area that are financially accessible to everyone. There are no user charges for SWITCH's services. The coverage of the financial costs is to be provided via funding sources and volunteer labour.
- Culturally, SWITCH is operating in a neighbourhood of Saskatoon that has a strong aboriginal focus. An integral part of our orientation process will be cultural sensitivity training. SWITCH will strive to provide an environment in which everyone can feel comfortable.

### SWITCH's Broad Spectrum of Services.

SWITCH's scopes of student and professional participant specialties include, but would not be limited to:

- Medicine
- Nursing
- Physiotherapy
- Pharmacy
- Nutrition
- Dentistry
- Community Health & Epidemiology
- Social Work

This interdisciplinary team is dedicated to address the concerns of the person as a whole and not focus on disease. This idea is understood best when it is applied to an example of a hypothetical patient that may come into SWITCH and how they would benefit from the broad spectrum of services:

An undiagnosed diabetic could come in complaining of nausea, sickness, and sores on his feet. Physicians at SWITCH would be able to **cure** the nausea and vomiting by controlling the patient's blood

sugar. **Rehabilitation** would be to have a nurse show the patient how to use insulin and regulate their own blood sugar. **Prevention** would include meeting with a nutritionist to discuss a change in dietary and physical lifestyle. And finally, a social worker would **promote** a healthy lifestyle and reassure the patient that he can live a normal life.

SWITCH would not be able to provide primary care without the help of professionals from various health disciplines. These specialists provide:

- education concerning prevailing health problems and methods of preventing and controlling them
- promotion of proper nutrition in disease management and preventive cases
- maternal and child health care including family health care
- immunization against major infectious diseases, prevention of locally endemic diseases
- appropriate treatment of common diseases and injuries
- provision of essential drugs

A mutually supportive referral system reinforces the importance of all health service professionals and allows patients to be treated centrally for any ailment.

#### SWITCH's Community Participation.

To be community run, SWITCH would have to respond to the needs of the Saskatoon community it intends to serve, maintain stages of development at a cost-effective level and be self-sufficient in long-term service.

- There are a number of partners of SWITCH involved in the community that SWITCH relies on for their participation to guarantee the continuing success of SWITCH's goals. These partners include: Health Science Colleges and Departments, IICUSP, Community Based Organisations (CBO's), the Saskatoon Community Clinic, Saskatoon Health Region, Primary Health Services White Buffalo Youth Lodge, faculty and professional mentors, and the residents of the core communities that SWITCH will serve.
- The health problems of the community that SWITCH intends to provide service to have been surveyed by local CBO's. The information supplied will help focus the efforts of SWITCH to the most deserving needs of the community. SWITCH is also beginning focus group studies and a survey of community service users to establish the gaps in the delivery of health care.
- SWITCH would provide the unique personnel of health-science student volunteers and supervisors. The volunteers help the clinic remain cost-effective and stay viable in the community.

An integrated system that depends on the contributions of health professionals providing a teaching role to students will make qualified and eager healthcare providers to the community.

#### **APPENDIX D**

##### **Service-learning**

*Reid McGonigle, Medical Student*

The Student Wellness Initiative Toward Community Health (SWITCH) will be a student-run health clinic working in downtown Saskatoon which has both service and educational

components. This unique project is a prime example of what is termed ‘service-learning.’ This document will define and discuss service-learning, examine how SWITCH will fulfill the requirements of a well-planned service-learning opportunity, and discuss some of the benefits of and ethical issues around university students working with underserved populations.

### **What is service-learning?**

Service-learning is an approach to education that brings students out of the traditional classroom setting and into the community around them. The Health Professional Schools in Service to the Nation (HPSISN) defines service-learning as:

a structured learning experience that combines community service with explicit learning objectives, preparation and reflection. Students engaged in service-learning are expected not only to provide direct community service but also to learn about the context in which the service is provided, the connection between the service and their academic coursework, and their roles as citizens

There are a number of differences between traditional university education models and service-learning projects. Most notably, the provision of community service becomes a focal component of educational learning objectives. Unlike the standard model of health science education, service-learning includes community members and community-based organizations as essential partners in training and educating students. This role goes beyond simply being the recipient of services delivered by students. Rather, one of the most important features of service-learning is an emphasis on addressing community-identified needs and involving community partners in the implementation of the project. Community partners are an essential part of assuring that service-learning experiences meet the needs of communities and are integrated appropriately into already existing services. Enhanced health services via a service-learning project such as SWITCH is a central benefit to the community, but increased access to human resources, community building and reciprocal learning are other important advantages of service-learning initiatives. In a structured community-based setting, the range of students’ learning goes far beyond that of didactic lectures of the traditional classroom and even problem-based learning programs. Service-learning provides an emphasis on developing citizenship skills and achieving social change, working in an interdisciplinary fashion and on reflective practice that cannot be replicated in classroom.

### **Why service-learning?**

Community-based education has become an essential component to training medical professionals in recent years and multiple national and international bodies have advocated educational components in community settings. The reasons underlying this focus on community-based education include the following:

- 1 Improving care for the types of patients seen primarily in outpatient settings;
- 2 Observing the natural and treated progression of diseases through continuity of care;
- 3 Practicing health-promotion and disease-prevention strategies;

- 4 Developing patient-communication and negotiation skills;
- 5 Dealing with social, financial, and ethical aspects of medical care;
- 6 Increasing student capacity for and interest in addressing the relevant health issues of rural and underserved communities.

Community involvement and service is part of the responsibility of the University of Saskatchewan and the student population. The importance of support for innovative service-learning projects such as SWITCH is implied in the university's 2002 strategic planning document, entitled *Renewing the Dream*:

True to the spirit of service in which this university was founded, we will nourish our strong tradition of public service and extension activities, and maintain our integral role in the cultural fabric of this province.

The Government of Saskatchewan recognizes in its *Action Plan for Saskatchewan Health Care*, released in December 2001, that innovation in health education is critical to the well-being of Saskatchewan citizens:

The future health system requires strong health sciences education to meet the needs for health services, academic training and research. New approaches are needed to reflect the priorities of the Saskatchewan health care system, including a focus on primary health care, core specialist services, rural health and Aboriginal populations. Two major reviews concluded that the College of Medicine and the recent report of the Commission on Medicare have...pointed out that the mandate of our academic institutions must reflect the nature and priorities of Saskatchewan health care. If health care professionals are expected to work together more closely, it makes sense for this teamwork to begin with joint planning and delivery of educational programs. Training programs for physicians, nurses and other providers would benefit from shared approaches and closer integration into health service delivery.

A considerable body of research exists which suggests that interdisciplinary efforts and service-learning programs are highly effective teaching practices. The SWITCH initiative is thus an exciting, innovative and valuable contribution on behalf of University of Saskatchewan health science students.

### **How does SWITCH meet the requirements of service-learning?**

Service-learning is fundamentally about partnerships. Each partner has responsibilities and benefits related to the development and establishment of a service-learning program. The following partners are involved in the service-learning aspect of SWITCH:

- 1 university students
- 2 the health science programs and faculty members
- 3 the University of Saskatchewan

- 4 community-based organizations
- 5 community members
- 6 the Government of Saskatchewan

The SWITCH project is first and foremost an initiative of University of Saskatchewan students. These students are committed to becoming the best health professionals that they can be. While obtaining a university education is a privilege, it is simultaneously a responsibility. The responsibility for learning goes beyond the purview of university coursework. The goal of SWITCH, as defined by our mission statement, is to benefit the community and address local needs of underserved populations through a service-learning project. Service-learning programs are “distinguished from other approaches to experiential education by their intention to equally benefit the provider and the recipient of the service as well as ensure equal focus on both the service being provided and the learning that is occurring” As such, the objectives of the clinic project include improving the health of the community through service delivery and health promotion, working together in interdisciplinary student groups with professional mentors and community members, and gaining experience in health planning.

The establishment and operation of SWITCH will comprise four essential elements which are critical to a successful service-learning program

- 1 Student Learning
- 2 Community Service and Partnership
- 3 Interprofessional Collaboration
- 4 Reflection

The Government of Saskatchewan is uniquely situated as a stakeholder from the perspective of service-learning as the provincial government is responsible for both post-secondary education and the delivery of health services in Saskatchewan. The SWITCH project integrates these two areas of government responsibility in a unique and exciting fashion. As outlined in *The Action Plan for Saskatchewan Health Care*, the four main government priorities are:

- 1 doing more to support good health and prevent illness
- 2 providing better access to health services including primary care, hospital, and emergency care
- 3 improving health workplaces and addressing shortages of key health providers,
- 4 and placing a greater emphasis on quality, efficiency and accountability, in order to ensure the long-term sustainability of our Medicare system

SWITCH is a project which encompasses all four of the Saskatchewan government’s current health priorities. A student-run clinic in the core neighbourhood Saskatoon will fill service need in an area that is currently underserved. Health promotion activities by health science students will certainly “support good health and prevent illness” in the community while teaching students about the health concerns prevalent in that population. The government health plan “calls for the development of primary health care teams, where doctors, nurses, therapists and other frontline providers work together to meet the needs of patients.” SWITCH will be an

example of interdisciplinary teams of students, as well as health professionals working in supervisory and mentorship roles, working together to provide primary health care (see Appendix C for a further discussion of Primary Health Care). The importance of better integrating health science education and ensuring sufficient human resources in health is also highlighted in the province's plan by bringing "health training programs together in an integrated Academic Health Sciences Network" and "support[ing] the College of Medicine as a key resource in the delivery of health services, in meeting provincial training needs, and in conducting research." The sustainability of our Medicare system requires innovation in teaching as well as dedication to the principles of socially responsible provision of health services.

Community service and partnership is one of the key goals of university education and central to the role of the University of Saskatchewan in this city and province. There is growing recognition within educational institutions of the need to further develop the traditional pillars of education, research and service through community partnerships. These developments are further supported by demands for increased accountability to the community-at-large in the context of publicly-funded institutions and the necessity of producing engaged social citizens. Service-learning initiatives such as SWITCH are central to the strategy for both preparing community-responsive and competent health professionals and for changing the relationship between communities and health professional schools, fostering citizenship, and achieving social change. The University of Saskatchewan recognizes the importance of nurturing positive relationships between itself and the community, and in particular certain sectors of the population who are underserved in education and health services. The University of Saskatchewan outlines this in *Renewing the Dream*:

Sense of community will be a hallmark of our operations. We will build on our enviable level of popular support to celebrate the university within the province and beyond. Partnerships will be fostered with community, industry, government, international, and other sectors, and especially with Aboriginal communities.

The partnership component of service-learning initiatives such as SWITCH emphasizes the responsibility of the university toward citizens of Saskatoon and the potential for substantial mutual benefit. Beneficial relationships between communities and academic institutions require collaboration to develop and implement any programs, including educational opportunities for students and faculty outside of the traditional classroom setting.

Part of the initiative behind SWITCH is a perceived need for students to learn how to better work with and provide health services for marginalized populations. Both the Government of Saskatchewan and the University of Saskatchewan College of Medicine specifically address the needs for expanded appropriate health services and educational focus on underserved populations. The government's health policy states that "primary health services will be expanded in partnership with First Nations and Métis peoples [to] ensure the needs of Aboriginal communities are addressed as primary health care networks and teams are established [and] areas with high-risk populations will be given priority in the development and implementation of expanded primary care services." The College of Medicine's integrated plan defines a key priority "to develop, promote and advance an interdisciplinary education and training model in the College of Medicine in conjunction with the other colleges" recognizing the "University is



uniquely positioned to develop pre-imminence in the field of primary health care through: research, enhancement of interprofessional undergraduate and graduate curricula and development of innovative community based resources.” This focus on innovative, interdisciplinary, primary health training initiatives, in addition to other College of Medicine priorities such as urban underserved populations, community health and aboriginal health, strongly suggests that a service-learning initiative such as SWITCH fits closely with clearly outlined identified needs on the part of the province and the University of Saskatchewan.

The interprofessional organization of SWITCH is an important component of many service-learning initiatives. Primary health care teams are an increasingly popular model of service delivery throughout Canada. Many health needs in under-served communities can be best met by “one stop shopping” where a variety of health services are available under one roof from a team of health professionals responsive to psychological, economic, social, cultural and physical health problems. However there are surprisingly few opportunities for University of Saskatchewan health science students to be able to learn and work together during their training. The model of service-learning being developed by SWITCH will help train future health professionals to better understand the strengths of other disciplines and the benefits of working in teams. Interprofessional service-learning projects hold great promise for exposing students to other health care professionals and helping them to develop the collaborative problem-solving skills necessary to effect significant change in the health of individuals and communities. Interprofessional service-learning projects are a unique educational tool through which to teach these skills and better prepare future health care professionals to meet the health needs of communities- especially those that are under-served and with special, perhaps challenging, needs.

One of the key elements that distinguish service-learning from volunteer work and clinical education is the emphasis on critical reflection. Students take the time to reflect not only on the experience they have had but also on how that experience relates to what they are learning in their coursework and to wider concepts of health. By drawing together their curricular education and service experiences students are able to increase their understanding of both. Recognizing that there are many approaches to reflection, it is important to develop an understanding of how successful reflection is defined. Those working in the service-learning field have recognized the four critical “C’s” of reflection: continuous, connected, challenging, and contextualized.

Reflection should be continuous in that it occurs before, during and after the experience. Connected reflection should link the action of service with the intellectual and academic work of the student in order to synthesize action and thought. Students should be challenged to engage issues in a critical way leading to challenging reflection through posing unfamiliar and even uncomfortable ideas for consideration. Finally, the reflection must be contextualized to be appropriate to the setting and context of a particular service-learning experience.

### **What is the appropriate balance between service and learning with regard to Saskatoon’s underserved populations?**

Education for health professionals requires that academic institutions, health service facilities, students and patients work on the basis of mutual trust and understanding. A delicate balance must be maintained between the need to maintain exceptionally high standards of care and to

offer adequate learning opportunities for future practitioners. Students must be provided access to real patients with real health needs under appropriate supervision to develop the skills necessary to become well-trained health professionals. Health science students already have access to patients in controlled educational environments and university programs, academic health service centres and regional health facilities of various types, all of which have strict ethical guidelines involving students and patient care. SWITCH has been aware of these ethical considerations throughout our planning process and will continue to keep these issues at the forefront of our student volunteer training, our supervisor and mentor selection and orientation process, as well as our future programming and operations. As discussed above, service-learning programs require collaboration between the community, students and the university. Throughout the planning and operation of SWITCH, a focus will be maintained on collaborative planning efforts with our partners, including in particular the IICUSP group, West Side Community Clinic and the White Buffalo Youth Lodge. There is a demonstrable need for health services in core neighbourhood Saskatoon. SWITCH will help to fill this need in a well-supervised, well-planned manner. Service-learning offers a tremendous opportunity for students to participate in their education in a unique fashion and to help ensure they become socially-responsible health professionals.