

Term Information

Effective Term Autumn 2022

General Information

Course Bulletin Listing/Subject Area Medicine, College of
Fiscal Unit/Academic Org Biomedical Education & Anatomy - D2502
College/Academic Group The College of Medicine
Level/Career Undergraduate
Course Number/Catalog 4660
Course Title Primary Care Across Countries
Transcript Abbreviation PrimCareXCountries
Course Description This participatory interdisciplinary seminar course will provide a broad perspective to those interested in various aspects of the delivery of primary care services. Specifically, the course will explore why access to high quality, consistent, and comprehensive primary care is central to achieving Health for All.
Semester Credit Hours/Units Fixed: 3

Offering Information

Length Of Course 14 Week, 12 Week, 8 Week, 7 Week, 6 Week, 4 Week
Flexibly Scheduled Course Never
Does any section of this course have a distance education component? No
Grading Basis Letter Grade
Repeatable No
Course Components Lecture
Grade Roster Component Lecture
Credit Available by Exam No
Admission Condition Course No
Off Campus Never
Campus of Offering Columbus, Lima, Mansfield, Marion, Newark, Wooster

Prerequisites and Exclusions

Prerequisites/Corequisites
Exclusions
Electronically Enforced No

Cross-Listings

Cross-Listings

Subject/CIP Code

Subject/CIP Code 51.1102
Subsidy Level Baccalaureate Course
Intended Rank Freshman, Sophomore, Junior, Senior

Requirement/Elective Designation

Health and Well-being

The course is an elective (for this or other units) or is a service course for other units

Course Details

Course goals or learning objectives/outcomes

- Critical/Problem Solving Skills: Students will develop their ability to formulate comprehensive questions to critically examine delivery of primary care services throughout the developed world.
- Additionally, students will explore how access to high-quality primary care can level the playing field of economic, educational, and social opportunities for vulnerable populations
- Students will have the opportunity to actively engage with primary care professionals, representing various groups and organizations, throughout the course of the semester
- Collaborative Skills: Students will cultivate an ability to work with others in a proactive and collaborative context, enhancing intellectual and social skills required for problem solving.
- Students will understand the benefits and limitations of different disciplinary perspectives as they critically examine different primary care systems in place throughout the developed world.
- Productive Creativity: Students will demonstrate an ability to see a project to completion, realizing a tangible end result (e.g. oral presentation) that can be shared and critiqued by interested others.

Content Topic List

- Primary Health Care: Theory and Practice, Defining Primary Care, Delivery and Organization of Primary Care Services in the US, Overview of the Primary Care Workforce in the US, Access to Primary Care Services and Health Disparities,
 - Evolution and Growth of Primary Care in the US, Cost of Primary Care Services in the US, Current US Primary Care Reform Initiatives, The Big Picture: What can the US Learn from Other Developed Countries Regarding the Delivery of Primary Care?
 - The Future of Primary Care Delivery in the US
- No

Sought Concurrence

Attachments

- MedColl4660_syllabus_GE_Health&Wellbeing.docx: Original Syllabus
(Syllabus. Owner: Ibarra, Lisa)
- MEDCOLL4660_GE_narrative.pdf: GE Theme Submission
(GEC Course Assessment Plan. Owner: Ibarra, Lisa)
- MedColl4660_GE_Response_CoverLetter.pdf
(Cover Letter. Owner: Ibarra, Lisa)
- MedColl4660_syllabus_GE_Health&Wellbeing.docx: Revised Syllabus
(Syllabus. Owner: Ibarra, Lisa)

Comments

- Please see Panel feedback email sent 04/25/2022. *(by Hilty, Michael on 04/25/2022 01:04 PM)*

COURSE REQUEST
4660 - Status: PENDING

Last Updated: Clinchot, Daniel Michael
05/03/2022

Workflow Information

Status	User(s)	Date/Time	Step
Submitted	Ibarra, Lisa	01/27/2022 03:30 PM	Submitted for Approval
Approved	Clinchot, Daniel Michael	01/27/2022 03:34 PM	Unit Approval
Approved	Clinchot, Daniel Michael	01/27/2022 03:34 PM	College Approval
Revision Requested	Hilty, Michael	04/25/2022 01:04 PM	ASCCAO Approval
Submitted	Ibarra, Lisa	05/02/2022 09:18 AM	Submitted for Approval
Approved	Clinchot, Daniel Michael	05/03/2022 09:18 AM	Unit Approval
Approved	Clinchot, Daniel Michael	05/03/2022 09:19 AM	College Approval
Pending Approval	Cody, Emily Kathryn Jenkins, Mary Ellen Bigler Hanlin, Deborah Kay Hilty, Michael Vankeerbergen, Bernadette Chantal Steele, Rachel Lea	05/03/2022 09:19 AM	ASCCAO Approval



April 29, 2022

RE: MEDCOLL 4660 (Primary Care across Countries)—General Education Health and Well-being Theme submission

Dear Health and Well-being Themes Review Panel Members,

Please find attached a copy of a revised **MEDCOLL 4660 (Primary Care across Countries)** course syllabus. **I have attended to the contingency and recommendations requested below.**

- **Contingency:** The reviewing faculty ask that all the GE Goals and ELOs be listed for the category. The General GE Goals and ELOs can be found on page 26 of the GE implementation report found here: <https://oaa.osu.edu/sites/default/files/uploads/general-education-review/implementation/report/GE-Implementation-Report-Summary.pdf> Additionally, they ask that ELO 3.2 be updated, as it recently has been revised.

GE Theme Goals and accompanying ELOs are now included on the revised syllabus. Please see page 2.

ELO 3.2 (1.2) has been updated to reflect the recent GE Theme revision. Please see page 3.

- **Recommendation:** The reviewing faculty recommend that the department consider potential student enrollment issues, as a three-hour course on a single day may deter students from enrolling within the course due to scheduling conflicts.

Thank you for raising this important recommendation. Beginning Spring 2023, MEDCOLL 4660 will meet on Tuesday and Thursday afternoons from 1:00-2:30 pm.

- **Recommendation:** The reviewing faculty recommend clarifying whether the final exam is take-home within the course syllabus.

Thank you for raising this important point. The revised syllabus includes further details regarding structure of the final course examination (please see pages 6 and 12).

In-Person Final Examination: December 9-15, 2022 (based upon OSU official final examination schedule)

[Final Examination](#)

A comprehensive in-person final examination will be held between December 9-15, 2022.

Thank you for your review and consideration. I look forward to hearing from you.

Sincerely,

Lorraine S. Wallace, PhD
Associate Professor of Biomedical Education & Anatomy



Instructor: Lorraine S. Wallace, PhD, Associate Professor

Department: Biomedical Education and Anatomy

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Phone Number: 614-685-3064 or 865-556-9332

Email: Lorraine.Wallace@osumc.edu

Office Hours: Mondays, 10:00-11:30 am
Tuesdays, 3:00-4:30 pm
I am also available by appointment and look forward to meeting with you.

Class Meeting Schedule:

Mondays, 1:30-4:30 pm (including 2 breaks)
1167 Graves Hall

Course Description:

MEDCOLL 4660 (*Primary Care across Countries*) is designed to acquaint students with primary healthcare delivery throughout the world. As defined by the World Health Organization (<https://www.who.int/news-room/fact-sheets/detail/primary-health-care>), "*Primary healthcare is a whole-of-society approach to health that aims at ensuring the highest possible level of health and well-being and their equitable distribution by focusing on people's needs and as early as possible along the continuum from health promotion and disease prevention to treatment, rehabilitation and palliative care, and as close as feasible to people's everyday environment.*" Many students go on to graduate school, professional school, and/or careers in medical/health-related fields. Hence, it is imperative for students to be cognizant of the nuances and functionality of the delivery of primary healthcare services throughout the world. This participatory course will provide a broad perspective to those interested in various aspects of the delivery of primary healthcare services. Specifically, the course will explore why access to high quality, consistent, equitable and comprehensive primary healthcare is central to achieving *Health for All*.

The organization and delivery of primary healthcare services in the US is unique—major strengths and weaknesses—as compared to that of other countries throughout the world. Special attention will be given to the status and implementation of current US healthcare reform legislation as it directly relates to the delivery and distribution of primary healthcare services. In seeking to thoroughly understand the landscape of primary healthcare services in the US, it is important to analyze primary healthcare systems comparatively, to understand how various countries address similar problems. Specifically, primary healthcare systems of advanced industrialized countries will be studied in depth. Students will gain an understanding of how primary healthcare

systems are constructed, the political, economic, multicultural, social and historical contexts of their development, and outcomes of each system on various segments of the society.

Credit Hours and Work Expectations:

This is a three-credit hour, graded course that meets once a week for three hours with two breaks. According to Ohio State rules, one credit hour translates to three hours per week of the average student's time. In this course, students should expect three hours per week spent on direct instruction (class sessions, instructor content, and Carmen activities, for example) and up to six additional hours completing reading and assignments, as outlined below.

General Education (GE) Themes: General

GOAL 1:

Successful students will analyze an important topic or idea at a more advanced and indepth level than the foundations.

Expected Learning Outcomes

1. Engage in critical and logical thinking about the topic or idea of the theme.
2. Engage in an advanced, in-depth, scholarly exploration of the topic or idea of the theme.

GOAL 2:

Successful students will integrate approaches to the theme by making connections to out-of-classroom experiences with academic knowledge or across disciplines and/or to work they have done in previous classes and that they anticipate doing in future.

Expected Learning Outcomes

1. Identify, describe, and synthesize approaches or experiences as they apply to the theme.
2. Demonstrate a developing sense of self as a learner through reflection, selfassessment, and creative work, building on prior experiences to respond to new and challenging contexts.

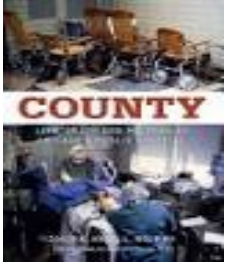
This course fulfills the GE Health and Well-being Theme requirement.

Theme: Health and Well-being		
Goal	Expected Learning Outcomes	Related Course Content
Students will explore and analyze health and wellbeing through attention to at least two dimensions of wellbeing (e.g., physical, mental, emotional, career, environmental, spiritual, intellectual, creative, financial).	<p>Successful students are able to:</p> <p>1.1 Explore and analyze health and wellbeing from theoretical, socio-economic, scientific, historical, cultural, technological, policy, and/or personal perspectives.</p>	<p>In this course, students will:</p> <ul style="list-style-type: none"> explore and analyze the role of primary healthcare in fostering health and wellbeing among diverse patient populations.
	<p>Successful students are able to:</p> <p>1.2 Identify, reflect on, and apply strategies for promoting health and well-being.</p>	<p>In this course, students will:</p> <ul style="list-style-type: none"> explore and reflect on evidence-based strategies to foster health and wellbeing among primary healthcare professionals. review and critically examine the role of primary healthcare professionals in guiding patients to improve their disease management skills, and health and well-being across the lifespan.

Specific Course Learning Outcomes:

By the end of this course, successful students will be able to:

- holistically and broadly define primary healthcare services and delivery.
- appraise historical and current ecology of medical care trends over the past fifty years.
- articulate an understanding of the intertwined complexities of social determinants of health and quality of life in relation to comprehensive access to primary healthcare across the lifespan.
- appraise the relationship between primary healthcare training and projected primary healthcare workforce needs in the United States.
- report on the importance of building and sustaining comprehensive and diverse primary healthcare clinical teams.
- evaluate primary healthcare workforce challenges—clinician shortages, burnout and attrition—in relation to quality of primary healthcare delivery.
- appraise evidence-based strategies to foster resilience among primary healthcare professionals.
- explore and analyze the role of primary healthcare in fostering health and wellness among diverse patient populations.
- assess the role of primary healthcare professionals in guiding patients to improve their disease management- and health-related resiliency.
- compare and contrast primary healthcare delivery across upper-middle and high-income countries throughout the world.

Required Course Materials:

Ansell, David. *County: Life, Death, and Politics at Chicago's Public Hospital*, 2011. Academy Chicago Publishers, Chicago, IL. ISBN13: 9780897336208
<https://www.amazon.com/County-Politics-Chicagos-Public-Hospital/dp/1455126098>

All other required course materials (e.g., peer-reviewed scientific readings, slide presentations) will be posted to CarmenCanvas (<https://carmen.osu.edu/>).

Class-wide Communications:

Class-wide communications will be sent through the CarmenCanvas Announcement tool. Please check your CarmenCanvas notification preferences to be sure you receive these messages.

This syllabus, course elements, policies and schedule are subject to change.

Date	Topic(s)	Reading(s)/Materials
Module 1: Introduction to Primary Healthcare and Ecology of Medical Care		
Week 1 08/29/2022	Course Introduction and Expectations Defining Primary Healthcare Ecology of Medical Care	Ellner et al. (2017) Green et al. (2001) Johansen et al. (2016) McAlister et al. (2020) White et al. (1961)
Week 2 09/05/2022	No class meeting: Labor Day	
Module 2: Current and Future US Primary Healthcare Workforce Issues		
Week 3 09/12/2022	Medical Student Primary Healthcare Career Interests and Trends Primary Healthcare Graduate Medical Education Trends and Projections	Phillips et al. (2014) Phillips et al. (2016) Stefani et al. (2020) Blanchard et al. (2016) Brotherton (2019) Knight et al. (2020) Petterson et al. (2015) Primary Care Physician Mapper
Week 4 09/19/2022	Building and Sustaining Primary Healthcare Clinical Teams	Barnes et al. (2020) Dai et al. (2019) Dewan et al. (2019) Gruver et al. (2020) Nyweide et al. (2020) Poghosyan et al. (2020)
Module 3: Building a Resilient Primary Healthcare Workforce		
Week 5 09/26/2022	Primary Healthcare Challenges: Clinician Shortages, Burnout and Attrition	Chung et al. (2020) Duvivier et al. (2019) Eden et al. (2020) Friedman et al. (2020) Ku & Druss (2020) Mui et al. (2020) Phillips et al. (2020)
Week 6 10/03/2022	Fostering Resilience among Primary Healthcare Professionals	Health Network— <i>Resiliency and Coping Skills for Healthcare Providers</i> Huey & Palaganas (2020) Matheson et al. (2016) Eley et al. (2018) Cheshire et al. (2017) Agarwal et al. (2020) Menzin et al. (2020)
Week 7 10/10/2022	Midterm Examination	

Module 4: Role of Primary Healthcare in Fostering Patient Health and Wellbeing		
Week 8 10/17/2022	Financial Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare	Brown et al. (2016) Kostelanetz et al. (2021) Melnikow et al. (2020) Perry et al. (2021) White et al. (2016) <i>County: Life, Death, and Politics at Chicago's Public Hospital</i>
Week 9 10/24/2022	Social and Physical Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare	Gaglioti et al. (2016) Habiyaaremye et al. (2021) Pourat et al. (2021) Webber et al. (2021) Wilfley et al. (2021)
Week 10 10/31/2022	Measuring and Fostering Resiliency among Primary Healthcare Patients	Barger et al. (2017) Goldstein et al. (2020) Jia et al. (2020) Travers et al. (2021) Wylie et al. (2020)
Module 5: Primary Healthcare Delivery across the Globe		
Week 11 11/07/2022	Overview of Primary Healthcare Delivery across the Globe	<i>Mirror, Mirror 2021: Reflecting Poorly</i> Primary Care International WONCA Global Family Doctor
Week 12 11/14/2022	<i>Primary Healthcare around the World</i> student presentations	Student presentations will be posted on CarmenCanvas Discussion Board
Week 13 11/21/2022	<i>Primary Healthcare around the World</i> student presentations	Student presentations will be posted on CarmenCanvas Discussion Board
Week 14 11/28/2022	<i>Primary Healthcare around the World</i> student presentations	Student presentations will be posted on CarmenCanvas Discussion Board
Week 15 12/05/2022	Primary Healthcare: Lessons Learned across the World Final Examination Review	TBD
In-Person Final Examination: December 9-15, 2022 (based upon OSU official final examination schedule)		

Reading Reference List (all full-text readings are available on CarmenCanvas):

Week 1:

Defining Primary Healthcare

Ellner & Phillips. The coming primary care revolution. *Journal of General Internal Medicine*, 2017, 32(4), 380-386.

Ecology of Medical Care

Green et al. The ecology of medical care revisited. *New England Journal of Medicine*, 2001, 344: 2021-2024.

Johansen et al. Reexamining the ecology of medical care. *New England Journal of Medicine*, 2016, 374: 495-496.

McAlister et al. The ecology of medical care for adults in Alberta, 2002/03 to 2016/17: a retrospective cohort study. *Canadian Medical Association Journal Open*, 2020, DOI:10.9778/cmajo.20190188.

White et al. The ecology of medical care. *New England Journal of Medicine*, 1961, 265: 885-892.

Week 3:

Medical Student Primary Healthcare Career Interests and Trends

Phillips et al. Educational debt in the context of career planning: a qualitative exploration of medical student perceptions. *Teaching and Learning in Medicine*. 2016, 3:243-251.

Phillips et al. A retrospective analysis of the relationship between medical student debt and primary care practice in the United States. *Annals of Family Medicine*, 2014, 12(6), 542-549.

Stefani et al. Choosing primary care: factors influencing graduating osteopathic medical students. *Journal of the American Osteopathic Association*, 2020, 120(6), 380-387.

Primary Healthcare Graduate Medical Education Trends and Projections

Blanchard et al. Characteristics and distribution of graduate medical education training sites: are we missing opportunities to meet US health workforce needs? *Academic Medicine*, 2016, 91(10), 1416-1422.

Brotherton & Etzel. Graduate medical education. *Journal of the American Medical Association*, 2019, 322(10), 996-1016.

Knigh. 2020 National residency match program results: where does family medicine stand and what is next? *American Family Physician*, 2020, 102(4), 202-204.

Petterson et al. Estimating the residency expansion required to avoid projected primary care physician shortages by 2035. *Annals of Family Medicine*, 2015, 13(2), 107-114.

Primary Care Physician Mapper (<https://www.graham-center.org/rgc/maps-data-tools/interactive/primary-care-physician.html>)

Week 4:

Building and Sustaining Primary Healthcare Clinical Teams

Barnes et al. Association between physician practice Medicaid acceptance and employing nurse practitioners and physician assistants: a longitudinal analysis. *Health Care Management Review*, 2020, DOI: 10.1097/HMR.0000000000000291.

Dai et al. Scope of practice and patient panel size of family physicians who work with nurse practitioners or physician assistants. *Family Medicine*, 2019, 51(4), 311-318.

Dewan & Norcini. Pathways to independent primary care clinical practice: how tall is the shortest giant? *Academic Medicine*, 2019, 94, 950-954.

Gruver & Gamber. Does exposure to primary care early in the didactic phase of the physician assistant curriculum influence field choice post-graduation? *Journal of Primary Care & Community Health*, 2020, 11, 1-4.

Nyweide et al. Accountable care organizations' increase in non-physician practitioners many signal shift for health care workforce. *Health Affairs*, 2020, 39(6), 1080-1086.

Poghosyan et al. Physician-nurse practitioner teamwork in primary care practices in New York: a cross-sectional survey. *Journal of General Internal Medicine*, 2020, 35(4), 1021-1028.

Week 5:

Primary Healthcare Challenges: Clinician Shortages, Burnout and Attrition

Chung et al. The relationship between primary care physician burnout and patient-reported care experiences: a cross-sectional study. *Journal of General Internal Medicine*, 2020, 35(8), 2357-2364.

Duvivier et al. Supply, distribution and characteristics of international medical graduates in family medicine in the United States: a cross-sectional study. *BMC Family Practice*, 2019, 20:47.

Eden et al. Burnout among family physicians by gender and age. *Journal of the American Board of Family Medicine*, 2020, 33(3), 355-356.

Friedman & Neutze. The financial cost of medical assistant turnover in an academic family medicine center. *Journal of the American Board of Family Medicine*, 2020, 33(3), 426-430.

Ku & Druss. Associations between primary care provider shortage areas and county-level COVID-19 infection and mortality rates in the USA. *Journal of General Internal Medicine*, 2020, DIO: 10.1007/s11606-20-06130-4.

Mui et al. What is the impact on rural area residents when the local physician leaves? *Family Medicine*, 2020, 52(2), 352-356.

Phillips et al. General practitioners in US medical practice compared with family physicians. *Annals of Family Medicine*, 2020, 18(2), 127-130.

Week 6:

Fostering Resilience among Primary Healthcare Professionals

Health Network—*Resiliency and Coping Skills for Healthcare Providers*

(<https://www.youtube.com/watch?v=mgkOaLHxIYc>)

Agarwal et al. Professional dissonance and burnout in primary care: a qualitative study. *JAMA Internal Medicine*, 2020, 180(3), 395-401.

Cheshire et al. GPs' perceptions of resilience training: a qualitative study. *British Journal of General Practice*, 2017, 67(663), e709-e715.

Eley et al. Professional resilience in GPs working in areas of socioeconomic deprivation: a qualitative study in primary care. *British Journal of General Practice*, 2018, 68(677), e819-e825.

Huey & Palaganas. What are the factors affecting resilience in health professionals? A synthesis of systematic reviews. *Medical Teacher*, 2020, 42(5), 550-560.

Matheson et al. Resilience of primary healthcare professionals working in challenging environments: a focus group study. *British Journal of General Practice*, 2016, 66(648), e507-e515.

Menzin et al. Toward the quadruple aim: impact of a humanistic mentoring program to reduce burnout and foster resilience. *Mayo Clinic Proceedings: Innovations, Quality & Outcomes*, 2020, 4(5), 499-505.

Week 8:

Financial Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare

Brown et al. Racial disparities in geographic access to primary care in Philadelphia. *Health Affairs*, 2016, 35(8): 1374-1381.

Kostelanetz et al. Health care professionals' perspectives on universal screening of social determinants of health: a mixed-methods study. *Population Health Management*, 2021, doi: 10.1089/pop.2021.0176.

Melnikow et al. Primary care access to new patient appointments for California Medicaid enrollees: a simulated patient study. *Annals of Family Medicine*, 2020, 18(3): 210-217.

Parry et al. Primary care-based interventions to address the financial needs of patients experiencing poverty: a scoping review of the literature. *International Journal of Health Equity*, 2021, 20(1): 219.

White et al. Effect of the economic recession on primary care access for the homeless. *Journal of Health Care for the Poor and Underserved*, 2016, 27: 1577-1591.

Week 9:

Social and Physical Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare

Gaglioti et al. Access to primary care in US counties is associated with lower obesity rates. *Journal of the American Board of Family Medicine*, 2016, 29(2): 182-190.

Habiyaaremye et al. Which children use school-based health services as a primary course of care? *Journal of School Health*, 2021, 91(11): 876-882.

Pourat et al. Trends in access to care among rural patients served at HRSA-funded health centers. *Journal of Rural Health*, 2021, doi: 10.1111/jrh.12626.

Webber et al. Health care disparities and access to video visits before and after the COVID-19 pandemic: findings from a patient survey in primary care. *Telemedicine and e-Health*, 2021, doi: 10.1089/tmj.2021.0126.

Wilfley et al. Implementation of a scalable family-based behavioral treatment for childhood obesity delivered through primary care clinics: description of the Missouri childhood obesity research demonstration study protocol. *Child Obesity*, 2021, 17(S1):S39-S47.

Week 10:

Measuring and Fostering Resiliency among Primary Healthcare Patients

Barger et al. Measuring resilience in the adolescent population: a succinct tool for outpatient adolescent health. *Journal of Pediatrics*, 2017, 189: 201-206.

Goldstein et al. Health risk behaviors and resilience among low-income, black primary care patients: qualitative findings from a trauma-informed primary care intervention study. *Family Community Health*, 2020, 43(3): 187-199.

Jia et al. Resilience and diabetes self-management among African-American men receiving primary care at an urban safety-net hospital: a cross-sectional survey. *Ethnicity & Health*, 2020, doi: 10.1080/13557858.2020.1849566.

Travers et al. Involving older people in co-designing an intervention of reverse frailty and build resilience. *Family Practice*, 2021, doi: 10.1093/fampra/cmab084.

Wylie et al. Reframing resilience: strengthening continuity of patient care to improve the mental health of immigrants and refugees. *International Journal of Mental Health Nursing*, 2020, 29(1): 69-79.

Week 11:

Overview of Primary Healthcare Delivery across the Globe

Mirror, Mirror 2021: Reflecting Poorly—Health Care in the US Compared to Other High-Income Countries. The Commonwealth Fund (<https://www.commonwealthfund.org/publications/fund-reports/2021/aug/mirror-mirror-2021-reflecting-poorly>)

Primary Care International (<https://pci-360.com/>)

WONCA Global Family Doctor (<https://www.globalfamilydoctor.com/>)

Weeks 12-14:

Primary Healthcare around the World student presentations

Student presentations will be posted on CarmenCanvas Discussion Board.

Grading and Evaluation:**Grading Scale**

A	A-	B+	B	B-	C+	C	C-	D+	D	E
>93%	92.9-90%	89.9-87%	86.9-83%	82.9-80%	79.9-77%	76.9-73%	72.9-70%	67.9-69%	66.9-60%	<60%

Student expectations for course assignments are as follows:

- **Independent Work (↑):** Strictly non-collaborative, original-individual work. You may discuss this assignment only with your instructor. Discussions with other individuals, either in person or electronically, are strictly prohibited.
- **Collaboration Required (↑↑↑):** An explicit expectation for collaboration among students either in-class or outside (i.e. group work).
- **Optional-Collaboration (↑↑):** Students are permitted, but not required, to discuss the assignment or ideas with each other. However, all submitted work must be one's original and individual creation.

Assignment/Examination	Points	Type	Due Date	Submission Platform
Attendance/Active Class Participation	150	↑↑↑	N/A	none
Discussion Board Responses—Week #3	25	↑↑	09/18/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #4	25	↑↑	09/25/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #5	25	↑↑	10/02/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #6	25	↑↑	10/09/2022 at 11:59 pm	Discussion Board
Midterm Examination	150	↑	N/A	none
Discussion Board Responses—Week #8	25	↑↑	10/23/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #9	25	↑↑	10/30/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #10	25	↑↑	11/06/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #11	25	↑↑	11/13/2022 at 11:59 pm	Discussion Board
Primary Care around the World (PCWorld) Presentation	250	↑↑↑	11/13/2022 at 11:59 pm	DropBox
PCWorld Presentation Peer Evaluations (4@15 points each)	60	↑	12/02/2022 at 11:59 pm	DropBox
Final Examination Review Questions	40	↑↑	12/04/2022 at 11:59 pm	DropBox
In-Person Final Examination	150	↑	N/A	none
TOTAL POINTS	1000			

Description of Course Assignments:

Attendance and Active Class Participation

Attendance at weekly scheduled course meetings, throughout the semester, are required elements of this course. I expect students to attend class sessions, be on time, and to be attentive in class. I will take attendance each week and each student may have one unexcused absence throughout the semester. I will excuse absences for illness with a physician's note or other form of official documentation. *More than three unexcused absences will lead to failure of the course.*

Discussion Board Responses

Discussion with your classmates is a vital part of learning. In this course, you will participate in eight (8) class discussions during the semester. Immediately following class meetings on September 12, 2022, September 19, 2022, September 26, 2022, October 3, 2022, October 17, 2022, October 24, 2022, October 31, 2022 and November 7, 2022, Dr. Wallace will post two (2) discussion prompts pertaining to material covered during class. To receive full credit for each discussion, you will need to post thoughtful, well-written responses to both prompts and respond to one of your classmates' answers. Late discussion board responses will not be accepted.

Midterm Examination

A midterm examination, covering all course material presented to date, will be held on October 10, 2022.

Primary Care around the World presentation

Students will work individually or in pairs to examine the primary care system of an upper-middle or high-income country. Please consult the World Bank Country and Lending Groups (<https://datahelpdesk.worldbank.org/knowledgebase/articles/906519>) to identify countries currently categorized as upper-middle or high-income.

Students will prepare and deliver a ≈30-minute presentation (20 minutes of presentation and 10 minutes of prepared group discussion questions) to inform the class of the country's primary healthcare system. The presentation should address such topics/issues/questions as:

- Country description (e.g., geography, maps, culture, photographs, economic data, present political situation, population-based sociodemographic characteristics).
- Overall health status indicators (e.g., average life expectancy, infant mortality rate, percentage of Gross Domestic Product spent on healthcare).
- Overview of the primary healthcare system.
- Discussion of how the primary healthcare system is financed (e.g., systems of remuneration, how is health care/insurance managed, average family premiums, co-payments, how physicians are paid).
- Scope of primary healthcare services available to diverse patient populations.
- Overview of training of primary healthcare professionals.
- What strategies has this country implemented to address primary healthcare workforce issues and/or foster a culture of primary healthcare professional resiliency?
- Are there current primary healthcare reform efforts underway?
- What can the US learn and incorporate from this country's primary healthcare system? What can this country learn from the primary healthcare system in the US?

Primary Care around the World presentation—Peer Evaluations

Students will provide four (n=4) Primary Care around the World peer evaluations. Students will provide their peers with meaningful and useful feedback (strengths and areas for improvement) on their Primary Care around the World presentation.

Final Examination Review Questions

A final examination review session will be held during our class meeting on December 5, 2022. Students are required to submit four (n=4) final examination review questions.

Final Examination

A comprehensive in-person final examination will be held between December 9-15, 2022.

Absence and Make-up Examination Policy:

Make-up exams will not be given except in case of a serious emergency for an extended time period. If so, you must contact the instructor before the event (or arrange for someone to do so) or as soon as possible. You must show evidence that you are physically unable to participate it, such as a clear and specific doctor's note mentioning the date, exam, and reason. Generally speaking, no make-ups will be granted for personal reasons such as travel, leisure, or to ease test week schedules, and no student will be permitted to take an exam beyond the scheduled and already-extended time period.

Course Technology:

For help with your password, university email, CarmenCanvas, or any other technology issues, questions or requests, contact the IT Service Desk, which offers 24-hour support, seven days a week.

Self-Service and Chat: go.osu.edu/it
Phone: 614-688-4357 (HELP)
Email: servicedesk@osu.edu

Plagiarism and Academic Misconduct:

"Academic integrity is essential to maintaining an environment that fosters excellence in teaching, research, and other educational and scholarly activities. Thus, The Ohio State University and the Committee on Academic Misconduct (COAM) expect that all students have read and understand the University's Code of Student Conduct, and that all students will complete all academic and scholarly assignments with fairness and honesty. Students must recognize that failure to follow the rules and guidelines established in the University's Code of Student Conduct and this syllabus may constitute Academic Misconduct. The Ohio State University's Code of Student Conduct (Section 3335-23-04) defines academic misconduct as: Any activity that tends to compromise the academic integrity of the University, or subvert the educational process. Examples of academic misconduct include (but are not limited to) plagiarism, collusion (unauthorized collaboration), copying the work of another student, and possession of unauthorized materials during an examination. Ignorance of the University's Code of Student Conduct is never considered an excuse for academic misconduct, so I recommend that you review the Code of Student Conduct and, specifically, the sections dealing with academic misconduct. If I suspect that a student has committed academic misconduct in this course, I am obligated by University Rules to report my suspicions to the Committee on Academic Misconduct. If COAM

determines that you have violated the University's Code of Student Conduct (i.e., committed academic misconduct), the sanctions for the misconduct could include a failing grade in this course and suspension or dismissal from the University. If you have any questions about the above policy or what constitutes academic misconduct in this course, please contact me." (Faculty Rule 3335-5-487). For additional information, see the Code of Student Conduct (<http://studentconduct.osu.edu/>).

Disability Services:

The University strives to make all learning experiences as accessible as possible. If you anticipate or experience academic barriers based on your disability (including mental health, chronic or temporary medical conditions), please let faculty know immediately so that we can privately discuss options. To establish reasonable accommodations, we may request that you register with Student Life Disability Services. After registration, make arrangements with me as soon as possible to discuss your accommodations so that they may be implemented in a timely fashion. SLDS contact information: slds@osu.edu; 614-292-3307; slds.osu.edu; 098 Baker Hall, 113 W. 12th Avenue.

Counseling and Consultation Services:

As a student, you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug problems, feeling down, difficulty concentrating and/or lack of motivation. These mental health concerns or stressful events may lead to diminished academic performance or reduce a student's ability to participate in daily activities. The Ohio State University offers services to assist you with addressing these and other concerns you may be experiencing.

If you are or someone you know is suffering from any of the aforementioned conditions, you can learn more about the broad range of confidential mental health services available on campus via the Office of Student Life's Counseling and Consultation Service (CCS) by visiting ccs.osu.edu or calling 614--292--5766. CCS is located on the 4th Floor of the Younkin Success Center and 10th Floor of Lincoln Tower. You can reach an on-call counselor when CCS is closed at 614-292-5766.

If you are thinking of harming yourself or need a safe, non-judgmental place to talk, or if you are worried about someone else and need advice about what to do, 24 hour emergency help is also available through the Suicide Prevention Hotline (Columbus: 614-221-5445 / National: 800-273-8255); or text (4hope to 741741); or at suicidepreventionlifeline.org.

Diversity:

"The Ohio State University affirms the importance and value of diversity in the student body. Our programs and curricula reflect our multicultural society and global economy and seek to provide opportunities for students to learn more about persons who are different from them. We are committed to maintaining a community that recognizes and values the inherent worth and dignity of every person; fosters sensitivity, understanding, and mutual respect among each member of our community; and encourages each individual to strive to reach his or her own potential. Discrimination against any individual based upon protected status, which is defined as age, color, disability, gender

identity or expression, national origin, race, religion, sex, sexual orientation, or veteran status, is prohibited."

The Ohio State University occupies ancestral lands called Ohi:yo by the Onodowaga and other First Nations, including the Shaawanwa lenaki, Twightwee, Lenni Lenape, and Wendat. This is where the skenq·tq (Scioto) and Olentangy Rivers have flowed since time immemorial. Treaties with the USA in 1768, 1784, 1785, 1795, and 1818 forced all First Nations people to cede this territory. This history of colonization informs our shared future of collaboration and innovation. Today, The Ohio State University respects the inherent sovereignty of the First Nations of Ohio.

Title IX:

All students and employees at Ohio State have the right to work and learn in an environment free from harassment and discrimination based on sex or gender, and the university can arrange interim measures, provide support resources, and explain investigation options, including referral to confidential resources. If you or someone you know has been harassed or discriminated against based on your sex or gender, including sexual harassment, sexual assault, relationship violence, stalking, or sexual exploitation, you may find information about your rights and options at titleix.osu.edu or by contacting the Ohio State Title IX Coordinator, Kellie Brennan, at titleix@osu.edu. Title IX is part of the Office of Institutional Equity (OIE) at Ohio State, which responds to all bias-motivated incidents of harassment and discrimination, such as race, religion, national origin and disability. For more information on OIE, visit equity.osu.edu or email equity@osu.edu.

Copyright:

©-The materials used in connection with this course may be subject to copyright protection and are only for the use of students officially enrolled in the course for the educational purposes associated with the course. Copyright law must be considered before copying, retaining, or disseminating materials outside of the course.



Instructor: Lorraine S. Wallace, PhD, Associate Professor

Department: Biomedical Education and Anatomy

Office Location: 056 Meiling Hall

Phone Number: 614-685-3064 or 865-556-9332

Email: Lorraine.Wallace@osumc.edu

Office Hours: Mondays, 10:00-11:30 am

Tuesdays, 3:00-4:30 pm

I am also available by appointment and look forward to meeting with you.

Class Meeting Schedule:

Mondays, 1:30-4:30 pm (including 2 breaks)

1167 Graves Hall

Course Description:

MEDCOLL 4660 (*Primary Care across Countries*) is designed to acquaint students with primary healthcare delivery throughout the world. As defined by the World Health Organization (<https://www.who.int/news-room/fact-sheets/detail/primary-health-care>), "*Primary healthcare is a whole-of-society approach to health that aims at ensuring the highest possible level of health and well-being and their equitable distribution by focusing on people's needs and as early as possible along the continuum from health promotion and disease prevention to treatment, rehabilitation and palliative care, and as close as feasible to people's everyday environment.*" Many students go on to graduate school, professional school, and/or careers in medical/health-related fields. Hence, it is imperative for students to be cognizant of the nuances and functionality of the delivery of primary healthcare services throughout the world. This participatory course will provide a broad perspective to those interested in various aspects of the delivery of primary healthcare services. Specifically, the course will explore why access to high quality, consistent, equitable and comprehensive primary healthcare is central to achieving *Health for All*.

The organization and delivery of primary healthcare services in the US is unique—major strengths and weaknesses—as compared to that of other countries throughout the world. Special attention will be given to the status and implementation of current US healthcare reform legislation as it directly relates to the delivery and distribution of primary healthcare services. In seeking to thoroughly understand the landscape of primary healthcare services in the US, it is important to analyze primary healthcare systems comparatively, to understand how various countries address similar problems. Specifically, primary healthcare systems of advanced industrialized countries will be studied in depth. Students will gain an understanding of how primary healthcare

systems are constructed, the political, economic, multicultural, social and historical contexts of their development, and outcomes of each system on various segments of the society.

Credit Hours and Work Expectations:

This is a three-credit hour, graded course that meets once a week for three hours with two breaks. According to Ohio State rules, one credit hour translates to three hours per week of the average student's time. In this course, students should expect three hours per week spent on direct instruction (class sessions, instructor content, and Carmen activities, for example) and up to six additional hours completing reading and assignments, as outlined below.

General Education:

This course fulfills the GE Health and Well-being Theme requirement.

<u>Theme: Health and Well-being</u>		
Goal	Expected Learning Outcomes	Related Course Content
Students will explore and analyze health and wellbeing through attention to at least two dimensions of wellbeing (e.g., physical, mental, emotional, career, environmental, spiritual, intellectual, creative, financial).	<p><i>Successful students are able to:</i></p> <p>1.1 Explore and analyze health and wellbeing from theoretical, socio-economic, scientific, historical, cultural, technological, policy, and/or personal perspectives.</p>	<p><i>In this course, students will:</i></p> <ul style="list-style-type: none"> • explore and analyze the role of primary healthcare in fostering health and wellbeing among diverse patient populations.
	<p><i>Successful students are able to:</i></p> <p>1.2 Identify, reflect on, and apply the skills needed for resiliency and wellbeing.</p>	<p><i>In this course, students will:</i></p> <ul style="list-style-type: none"> • explore and reflect on evidence-based strategies to foster resiliency among primary healthcare professionals. • review the role of primary healthcare professionals in guiding patients to improve their disease management- and health-related resiliency.

Specific Course Learning Outcomes:

By the end of this course, successful students will be able to:

- holistically and broadly define primary healthcare services and delivery.
- appraise historical and current ecology of medical care trends over the past fifty years.
- articulate an understanding of the intertwined complexities of social determinants of health and quality of life in relation to comprehensive access to primary healthcare across the lifespan.
- appraise the relationship between primary healthcare training and projected primary healthcare workforce needs in the United States.
- report on the importance of building and sustaining comprehensive and diverse primary healthcare clinical teams.
- evaluate primary healthcare workforce challenges—clinician shortages, burnout and attrition—in relation to quality of primary healthcare delivery.
- appraise evidence-based strategies to foster resilience among primary healthcare professionals.
- explore and analyze the role of primary healthcare in fostering health and wellness among diverse patient populations.
- assess the role of primary healthcare professionals in guiding patients to improve their disease management- and health-related resiliency.
- compare and contrast primary healthcare delivery across upper-middle and high-income countries throughout the world.

Required Course Materials:



Ansell, David. *County: Life, Death, and Politics at Chicago's Public Hospital*, 2011.

Academy Chicago Publishers, Chicago, IL. ISBN13: 9780897336208

<https://www.amazon.com/County-Politics-Chicagos-Public-Hospital/dp/1455126098>

All other required course materials (e.g., peer-reviewed scientific readings, slide presentations) will be posted to CarmenCanvas (<https://carmen.osu.edu/>).

Class-wide Communications:

Class-wide communications will be sent through the CarmenCanvas Announcement tool. Please check your CarmenCanvas notification preferences to be sure you receive these messages.

This syllabus, course elements, policies and schedule are subject to change.

Date	Topic(s)	Reading(s)/Materials
Module 1: Introduction to Primary Healthcare and Ecology of Medical Care		
Week 1 08/29/2022	Course Introduction and Expectations Defining Primary Healthcare Ecology of Medical Care	Ellner et al. (2017) Green et al. (2001) Johansen et al. (2016) McAlister et al. (2020) White et al. (1961)
Week 2 09/05/2022	No class meeting: Labor Day	
Module 2: Current and Future US Primary Healthcare Workforce Issues		
Week 3 09/12/2022	Medical Student Primary Healthcare Career Interests and Trends Primary Healthcare Graduate Medical Education Trends and Projections	Phillips et al. (2014) Phillips et al. (2016) Stefani et al. (2020) Blanchard et al. (2016) Brotherton (2019) Knight et al. (2020) Petterson et al. (2015) Primary Care Physician Mapper
Week 4 09/19/2022	Building and Sustaining Primary Healthcare Clinical Teams	Barnes et al. (2020) Dai et al. (2019) Dewan et al. (2019) Gruver et al. (2020) Nyweide et al. (2020) Poghosyan et al. (2020)
Module 3: Building a Resilient Primary Healthcare Workforce		
Week 5 09/26/2022	Primary Healthcare Challenges: Clinician Shortages, Burnout and Attrition	Chung et al. (2020) Duvivier et al. (2019) Eden et al. (2020) Friedman et al. (2020) Ku & Druss (2020) Mui et al. (2020) Phillips et al. (2020)
Week 6 10/03/2022	Fostering Resilience among Primary Healthcare Professionals	Health Network— <i>Resiliency and Coping Skills for Healthcare Providers</i> Huey & Palaganas (2020) Matheson et al. (2016) Eley et al. (2018) Cheshire et al. (2017) Agarwal et al. (2020) Menzin et al. (2020)
Week 7 10/10/2022	Midterm Examination	

Module 4: Role of Primary Healthcare in Fostering Patient Health, Wellbeing and Resiliency		
Week 8 10/17/2022	Financial Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare	Brown et al. (2016) Kostelanetz et al. (2021) Melnikow et al. (2020) Perry et al. (2021) White et al. (2016) <i>County: Life, Death, and Politics at Chicago's Public Hospital</i>
Week 9 10/24/2022	Social and Physical Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare	Gaglioti et al. (2016) Habiyaaremye et al. (2021) Pourat et al. (2021) Webber et al. (2021) Wilfley et al. (2021)
Week 10 10/31/2022	Measuring and Fostering Resiliency among Primary Healthcare Patients	Barger et al. (2017) Goldstein et al. (2020) Jia et al. (2020) Travers et al. (2021) Wylie et al. (2020)
Module 5: Primary Healthcare Delivery across the Globe		
Week 11 11/07/2022	Overview of Primary Healthcare Delivery across the Globe	<i>Mirror, Mirror 2021: Reflecting Poorly</i> Primary Care International WONCA Global Family Doctor
Week 12 11/14/2022	<i>Primary Healthcare around the World</i> student presentations	Student presentations will be posted on CarmenCanvas Discussion Board
Week 13 11/21/2022	<i>Primary Healthcare around the World</i> student presentations	Student presentations will be posted on CarmenCanvas Discussion Board
Week 14 11/28/2022	<i>Primary Healthcare around the World</i> student presentations	Student presentations will be posted on CarmenCanvas Discussion Board
Week 15 12/05/2022	Primary Healthcare: Lessons Learned across the World Final Examination Review	TBD
Final Examination: December 9-15, 2022 (based upon OSU official final examination schedule)		

Reading Reference List (all full-text readings are available on CarmenCanvas):

Week 1:

Defining Primary Healthcare

Ellner & Phillips. The coming primary care revolution. *Journal of General Internal Medicine*, 2017, 32(4), 380-386.

Ecology of Medical Care

Green et al. The ecology of medical care revisited. *New England Journal of Medicine*, 2001, 344: 2021-2024.

Johansen et al. Reexamining the ecology of medical care. *New England Journal of Medicine*, 2016, 374: 495-496.

McAlister et al. The ecology of medical care for adults in Alberta, 2002/03 to 2016/17: a retrospective cohort study. *Canadian Medical Association Journal Open*, 2020, DOI:10.9778/cmajo.20190188.

White et al. The ecology of medical care. *New England Journal of Medicine*, 1961, 265: 885-892.

Week 3:

Medical Student Primary Healthcare Career Interests and Trends

Phillips et al. Educational debt in the context of career planning: a qualitative exploration of medical student perceptions. *Teaching and Learning in Medicine*. 2016, 3:243-251.

Phillips et al. A retrospective analysis of the relationship between medical student debt and primary care practice in the United States. *Annals of Family Medicine*, 2014, 12(6), 542-549.

Stefani et al. Choosing primary care: factors influencing graduating osteopathic medical students. *Journal of the American Osteopathic Association*, 2020, 120(6), 380-387.

Primary Healthcare Graduate Medical Education Trends and Projections

Blanchard et al. Characteristics and distribution of graduate medical education training sites: are we missing opportunities to meet US health workforce needs? *Academic Medicine*, 2016, 91(10), 1416-1422.

Brotherton & Etzel. Graduate medical education. *Journal of the American Medical Association*, 2019, 322(10), 996-1016.

Knigh. 2020 National residency match program results: where does family medicine stand and what is next? *American Family Physician*, 2020, 102(4), 202-204.

Petterson et al. Estimating the residency expansion required to avoid projected primary care physician shortages by 2035. *Annals of Family Medicine*, 2015, 13(2), 107-114.

Primary Care Physician Mapper (<https://www.graham-center.org/rgc/maps-data-tools/interactive/primary-care-physician.html>)

Week 4:

Building and Sustaining Primary Healthcare Clinical Teams

Barnes et al. Association between physician practice Medicaid acceptance and employing nurse practitioners and physician assistants: a longitudinal analysis. *Health Care Management Review*, 2020, DOI: 10.1097/HMR.0000000000000291.

Dai et al. Scope of practice and patient panel size of family physicians who work with nurse practitioners or physician assistants. *Family Medicine*, 2019, 51(4), 311-318.

Dewan & Norcini. Pathways to independent primary care clinical practice: how tall is the shortest giant? *Academic Medicine*, 2019, 94, 950-954.

Gruver & Gamber. Does exposure to primary care early in the didactic phase of the physician assistant curriculum influence field choice post-graduation? *Journal of Primary Care & Community Health*, 2020, 11, 1-4.

Nyweide et al. Accountable care organizations' increase in non-physician practitioners many signal shift for health care workforce. *Health Affairs*, 2020, 39(6), 1080-1086.

Poghosyan et al. Physician-nurse practitioner teamwork in primary care practices in New York: a cross-sectional survey. *Journal of General Internal Medicine*, 2020, 35(4), 1021-1028.

Week 5:

Primary Healthcare Challenges: Clinician Shortages, Burnout and Attrition

Chung et al. The relationship between primary care physician burnout and patient-reported care experiences: a cross-sectional study. *Journal of General Internal Medicine*, 2020, 35(8), 2357-2364.

Duvivier et al. Supply, distribution and characteristics of international medical graduates in family medicine in the United States: a cross-sectional study. *BMC Family Practice*, 2019, 20:47.

Eden et al. Burnout among family physicians by gender and age. *Journal of the American Board of Family Medicine*, 2020, 33(3), 355-356.

Friedman & Neutze. The financial cost of medical assistant turnover in an academic family medicine center. *Journal of the American Board of Family Medicine*, 2020, 33(3), 426-430.

Ku & Druss. Associations between primary care provider shortage areas and county-level COVID-19 infection and mortality rates in the USA. *Journal of General Internal Medicine*, 2020, DIO: 10.1007/s11606-20-06130-4.

Mui et al. What is the impact on rural area residents when the local physician leaves? *Family Medicine*, 2020, 52(2), 352-356.

Phillips et al. General practitioners in US medical practice compared with family physicians. *Annals of Family Medicine*, 2020, 18(2), 127-130.

Week 6:

Fostering Resilience among Primary Healthcare Professionals

Health Network—*Resiliency and Coping Skills for Healthcare Providers*

(<https://www.youtube.com/watch?v=mgkOaLHxIYc>)

Agarwal et al. Professional dissonance and burnout in primary care: a qualitative study. *JAMA Internal Medicine*, 2020, 180(3), 395-401.

Cheshire et al. GPs' perceptions of resilience training: a qualitative study. *British Journal of General Practice*, 2017, 67(663), e709-e715.

Eley et al. Professional resilience in GPs working in areas of socioeconomic deprivation: a qualitative study in primary care. *British Journal of General Practice*, 2018, 68(677), e819-e825.

Huey & Palaganas. What are the factors affecting resilience in health professionals? A synthesis of systematic reviews. *Medical Teacher*, 2020, 42(5), 550-560.

Matheson et al. Resilience of primary healthcare professionals working in challenging environments: a focus group study. *British Journal of General Practice*, 2016, 66(648), e507-e515.

Menzin et al. Toward the quadruple aim: impact of a humanistic mentoring program to reduce burnout and foster resilience. *Mayo Clinic Proceedings: Innovations, Quality & Outcomes*, 2020, 4(5), 499-505.

Week 8:

Financial Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare

Brown et al. Racial disparities in geographic access to primary care in Philadelphia. *Health Affairs*, 2016, 35(8): 1374-1381.

Kostelanetz et al. Health care professionals' perspectives on universal screening of social determinants of health: a mixed-methods study. *Population Health Management*, 2021, doi: 10.1089/pop.2021.0176.

Melnikow et al. Primary care access to new patient appointments for California Medicaid enrollees: a simulated patient study. *Annals of Family Medicine*, 2020, 18(3): 210-217.

Parry et al. Primary care-based interventions to address the financial needs of patients experiencing poverty: a scoping review of the literature. *International Journal of Health Equity*, 2021, 20(1): 219.

White et al. Effect of the economic recession on primary care access for the homeless. *Journal of Health Care for the Poor and Underserved*, 2016, 27: 1577-1591.

Week 9:

Social and Physical Wellness: Patient Access to Consistent and Comprehensive Primary Healthcare

Gaglioti et al. Access to primary care in US counties is associated with lower obesity rates. *Journal of the American Board of Family Medicine*, 2016, 29(2): 182-190.

Habiyaaremye et al. Which children use school-based health services as a primary course of care? *Journal of School Health*, 2021, 91(11): 876-882.

Pourat et al. Trends in access to care among rural patients served at HRSA-funded health centers. *Journal of Rural Health*, 2021, doi: 10.1111/jrh.12626.

Webber et al. Health care disparities and access to video visits before and after the COVID-19 pandemic: findings from a patient survey in primary care. *Telemedicine and e-Health*, 2021, doi: 10.1089/tmj.2021.0126.

Wilfley et al. Implementation of a scalable family-based behavioral treatment for childhood obesity delivered through primary care clinics: description of the Missouri childhood obesity research demonstration study protocol. *Child Obesity*, 2021, 17(S1):S39-S47.

Week 10:

Measuring and Fostering Resiliency among Primary Healthcare Patients

Barger et al. Measuring resilience in the adolescent population: a succinct tool for outpatient adolescent health. *Journal of Pediatrics*, 2017, 189: 201-206.

Goldstein et al. Health risk behaviors and resilience among low-income, black primary care patients: qualitative findings from a trauma-informed primary care intervention study. *Family Community Health*, 2020, 43(3): 187-199.

Jia et al. Resilience and diabetes self-management among African-American men receiving primary care at an urban safety-net hospital: a cross-sectional survey. *Ethnicity & Health*, 2020, doi: 10.1080/13557858.2020.1849566.

Travers et al. Involving older people in co-designing an intervention of reverse frailty and build resilience. *Family Practice*, 2021, doi: 10.1093/fampra/cmab084.

Wylie et al. Reframing resilience: strengthening continuity of patient care to improve the mental health of immigrants and refugees. *International Journal of Mental Health Nursing*, 2020, 29(1): 69-79.

Week 11:

Overview of Primary Healthcare Delivery across the Globe

Mirror, Mirror 2021: Reflecting Poorly—Health Care in the US Compared to Other High-Income Countries. The Commonwealth Fund (<https://www.commonwealthfund.org/publications/fund-reports/2021/aug/mirror-mirror-2021-reflecting-poorly>)

Primary Care International (<https://pci-360.com/>)

WONCA Global Family Doctor (<https://www.globalfamilydoctor.com/>)

Weeks 12-14:

Primary Healthcare around the World student presentations

Student presentations will be posted on CarmenCanvas Discussion Board.

Grading and Evaluation:**Grading Scale**

A	A-	B+	B	B-	C+	C	C-	D+	D	E
>93%	92.9-90%	89.9-87%	86.9-83%	82.9-80%	79.9-77%	76.9-73%	72.9-70%	67.9-69%	66.9-60%	<60%

Student expectations for course assignments are as follows:

- **Independent Work (↑):** Strictly non-collaborative, original-individual work. You may discuss this assignment only with your instructor. Discussions with other individuals, either in person or electronically, are strictly prohibited.
- **Collaboration Required (↑↑↑):** An explicit expectation for collaboration among students either in-class or outside (i.e. group work).
- **Optional-Collaboration (↑↑):** Students are permitted, but not required, to discuss the assignment or ideas with each other. However, all submitted work must be one's original and individual creation.

Assignment/Examination	Points	Type	Due Date	Submission Platform
Attendance/Active Class Participation	150	↑↑↑	N/A	none
Discussion Board Responses—Week #3	25	↑↑	09/18/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #4	25	↑↑	09/25/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #5	25	↑↑	10/02/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #6	25	↑↑	10/09/2022 at 11:59 pm	Discussion Board
Midterm Examination	150	↑	N/A	none
Discussion Board Responses—Week #8	25	↑↑	10/23/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #9	25	↑↑	10/30/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #10	25	↑↑	11/06/2022 at 11:59 pm	Discussion Board
Discussion Board Responses—Week #11	25	↑↑	11/13/2022 at 11:59 pm	Discussion Board
Primary Care around the World (PCWorld) Presentation	250	↑↑↑	11/13/2022 at 11:59 pm	DropBox
PCWorld Presentation Peer Evaluations (4@15 points each)	60	↑	12/02/2022 at 11:59 pm	DropBox
Final Examination Review Questions	40	↑↑	12/04/2022 at 11:59 pm	DropBox
Final Examination	150	↑	N/A	none
TOTAL POINTS	1000			

Description of Course Assignments:

Attendance and Active Class Participation

Attendance at weekly scheduled course meetings, throughout the semester, are required elements of this course. I expect students to attend class sessions, be on time, and to be attentive in class. I will take attendance each week and each student may have one unexcused absence throughout the semester. I will excuse absences for illness with a physician's note or other form of official documentation. *More than three unexcused absences will lead to failure of the course.*

Discussion Board Responses

Discussion with your classmates is a vital part of learning. In this course, you will participate in eight (8) class discussions during the semester. Immediately following class meetings on September 12, 2022, September 19, 2022, September 26, 2022, October 3, 2022, October 17, 2022, October 24, 2022, October 31, 2022 and November 7, 2022, Dr. Wallace will post two (2) discussion prompts pertaining to material covered during class. To receive full credit for each discussion, you will need to post thoughtful, well-written responses to both prompts and respond to one of your classmates' answers. Late discussion board responses will not be accepted.

Midterm Examination

A midterm examination, covering all course material presented to date, will be held on October 10, 2022.

Primary Care around the World presentation

Students will work individually or in pairs to examine the primary care system of an upper-middle or high-income country. Please consult the World Bank Country and Lending Groups (<https://datahelpdesk.worldbank.org/knowledgebase/articles/906519>) to identify countries currently categorized as upper-middle or high-income.

Students will prepare and deliver a ≈30-minute presentation (20 minutes of presentation and 10 minutes of prepared group discussion questions) to inform the class of the country's primary healthcare system. The presentation should address such topics/issues/questions as:

- Country description (e.g., geography, maps, culture, photographs, economic data, present political situation, population-based sociodemographic characteristics).
- Overall health status indicators (e.g., average life expectancy, infant mortality rate, percentage of Gross Domestic Product spent on healthcare).
- Overview of the primary healthcare system.
- Discussion of how the primary healthcare system is financed (e.g., systems of remuneration, how is health care/insurance managed, average family premiums, co-payments, how physicians are paid).
- Scope of primary healthcare services available to diverse patient populations.
- Overview of training of primary healthcare professionals.
- What strategies has this country implemented to address primary healthcare workforce issues and/or foster a culture of primary healthcare professional resiliency?
- Are there current primary healthcare reform efforts underway?
- What can the US learn and incorporate from this country's primary healthcare system? What can this country learn from the primary healthcare system in the US?

Primary Care around the World presentation—Peer Evaluations

Students will provide four (n=4) Primary Care around the World peer evaluations. Students will provide their peers with meaningful and useful feedback (strengths and areas for improvement) on their Primary Care around the World presentation.

Final Examination Review Questions

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For help with your password, university email, CarmenCanvas, or any other technology issues, questions or requests, contact the IT Service Desk, which offers 24-hour support, seven days a week.

Self-Service and Chat: go.osu.edu/it
Phone: 614-688-4357 (HELP)
Email: servicedesk@osu.edu

Plagiarism and Academic Misconduct:

"Academic integrity is essential to maintaining an environment that fosters excellence in teaching, research, and other educational and scholarly activities. Thus, The Ohio State University and the Committee on Academic Misconduct (COAM) expect that all students have read and understand the University's Code of Student Conduct, and that all students will complete all academic and scholarly assignments with fairness and honesty. Students must recognize that failure to follow the rules and guidelines established in the University's Code of Student Conduct and this syllabus may constitute Academic Misconduct. The Ohio State University's Code of Student Conduct (Section 3335-23-04) defines academic misconduct as: Any activity that tends to compromise the academic integrity of the University, or subvert the educational process. Examples of academic misconduct include (but are not limited to) plagiarism, collusion (unauthorized collaboration), copying the work of another student, and possession of unauthorized materials during an examination. Ignorance of the University's Code of Student Conduct is never considered an excuse for academic misconduct, so I recommend that you review the Code of Student Conduct and, specifically, the sections dealing with academic misconduct. If I suspect that a student has committed academic misconduct in this course, I am obligated by University Rules to report my suspicions to the Committee on Academic Misconduct. If COAM

determines that you have violated the University's Code of Student Conduct (i.e., committed academic misconduct), the sanctions for the misconduct could include a failing grade in this course and suspension or dismissal from the University. If you have any questions about the above policy or what constitutes academic misconduct in this course, please contact me." (Faculty Rule 3335-5-487). For additional information, see the Code of Student Conduct (<http://studentconduct.osu.edu/>).

Disability Services:

The University strives to make all learning experiences as accessible as possible. If you anticipate or experience academic barriers based on your disability (including mental health, chronic or temporary medical conditions), please let faculty know immediately so that we can privately discuss options. To establish reasonable accommodations, we may request that you register with Student Life Disability Services. After registration, make arrangements with me as soon as possible to discuss your accommodations so that they may be implemented in a timely fashion. SLDS contact information: slds@osu.edu; 614-292-3307; slds.osu.edu; 098 Baker Hall, 113 W. 12th Avenue.

Counseling and Consultation Services:

As a student, you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug problems, feeling down, difficulty concentrating and/or lack of motivation. These mental health concerns or stressful events may lead to diminished academic performance or reduce a student's ability to participate in daily activities. The Ohio State University offers services to assist you with addressing these and other concerns you may be experiencing.

If you are or someone you know is suffering from any of the aforementioned conditions, you can learn more about the broad range of confidential mental health services available on campus via the Office of Student Life's Counseling and Consultation Service (CCS) by visiting ccs.osu.edu or calling 614--292--5766. CCS is located on the 4th Floor of the Younkin Success Center and 10th Floor of Lincoln Tower. You can reach an on-call counselor when CCS is closed at 614-292-5766.

If you are thinking of harming yourself or need a safe, non-judgmental place to talk, or if you are worried about someone else and need advice about what to do, 24 hour emergency help is also available through the Suicide Prevention Hotline (Columbus: 614-221-5445 / National: 800-273-8255); or text (4hope to 741741); or at suicidepreventionlifeline.org.

Diversity:

"The Ohio State University affirms the importance and value of diversity in the student body. Our programs and curricula reflect our multicultural society and global economy and seek to provide opportunities for students to learn more about persons who are different from them. We are committed to maintaining a community that recognizes and values the inherent worth and dignity of every person; fosters sensitivity, understanding, and mutual respect among each member of our community; and encourages each individual to strive to reach his or her own potential. Discrimination against any individual based upon protected status, which is defined as age, color, disability, gender

identity or expression, national origin, race, religion, sex, sexual orientation, or veteran status, is prohibited."

The Ohio State University occupies ancestral lands called Ohi:yo by the Onodowaga and other First Nations, including the Shaawanwa lenaki, Twightwee, Lenni Lenape, and Wendat. This is where the skenq·tq (Scioto) and Olentangy Rivers have flowed since time immemorial. Treaties with the USA in 1768, 1784, 1785, 1795, and 1818 forced all First Nations people to cede this territory. This history of colonization informs our shared future of collaboration and innovation. Today, The Ohio State University respects the inherent sovereignty of the First Nations of Ohio.

Title IX:

All students and employees at Ohio State have the right to work and learn in an environment free from harassment and discrimination based on sex or gender, and the university can arrange interim measures, provide support resources, and explain investigation options, including referral to confidential resources. If you or someone you know has been harassed or discriminated against based on your sex or gender, including sexual harassment, sexual assault, relationship violence, stalking, or sexual exploitation, you may find information about your rights and options at titleix.osu.edu or by contacting the Ohio State Title IX Coordinator, Kellie Brennan, at titleix@osu.edu. Title IX is part of the Office of Institutional Equity (OIE) at Ohio State, which responds to all bias-motivated incidents of harassment and discrimination, such as race, religion, national origin and disability. For more information on OIE, visit equity.osu.edu or email equity@osu.edu.

Copyright:

©-The materials used in connection with this course may be subject to copyright protection and are only for the use of students officially enrolled in the course for the educational purposes associated with the course. Copyright law must be considered before copying, retaining, or disseminating materials outside of the course.

GE THEME COURSES

Overview

Courses that are accepted into the General Education (GE) Themes must meet two sets of Expected Learning Outcomes (ELOs): those common for all GE Themes and one set specific to the content of the Theme. This form begins with the criteria common to all themes and has expandable sections relating to each specific theme.

A course may be accepted into more than one Theme if the ELOs for each theme are met. Courses seeing approval for multiple Themes will complete a submission document for each theme. Courses seeking approval as a 4-credit, Integrative Practices course need to complete a similar submission form for the chosen practice. It may be helpful to consult your Director of Undergraduate Studies or appropriate support staff person as you develop and submit your course.

Please enter text in the boxes to describe how your class will meet the ELOs of the Theme to which it applies. Please use language that is clear and concise and that colleagues outside of your discipline will be able to follow. You are encouraged to refer specifically to the syllabus submitted for the course, since the reviewers will also have that document. Because this document will be used in the course review and approval process, you should be *as specific as possible*, listing concrete activities, specific theories, names of scholars, titles of textbooks etc.

Accessibility

If you have a disability and have trouble accessing this document or need to receive it in another format, please reach out to Meg Daly at daly.66@osu.edu or call 614-247-8412.

Course subject & number

General Expectations of All Themes

GOAL 1: Successful students will analyze an important topic or idea at a more advanced and in-depth level than the foundations.

Please briefly identify the ways in which this course represents an advanced study of the focal theme. In this context, “advanced” refers to courses that are e.g., synthetic, rely on research or cutting-edge findings, or deeply engage with the subject matter, among other possibilities. (50-500 words)

Course subject & number

ELO 1.1 Engage in critical and logical thinking about the topic or idea of the theme. Please link this ELO to the course goals and topics and indicate *specific* activities/assignments through which it will be met. (50-700 words)

ELO 1.2 Engage in an advanced, in-depth, scholarly exploration of the topic or idea of the theme. Please link this ELO to the course goals and topics and indicate *specific* activities/assignments through which it will be met. (50-700 words)

Course subject & number

GOAL 2: Successful students will integrate approaches to the theme by making connections to out-of-classroom experiences with academic knowledge or across disciplines and/or to work they have done in previous classes and that they anticipate doing in future.

ELO 2.1 Identify, describe, and synthesize approaches or experiences as they apply to the theme.

Please link this ELO to the course goals and topics and indicate *specific* activities/assignments through which it will be met. (50-700 words)

ELO 2.2 Demonstrate a developing sense of self as a learner through reflection, self-assessment, and creative work, building on prior experiences to respond to new and challenging contexts.

Please link this ELO to the course goals and topics and indicate *specific* activities/assignments through which it will be met. (50-700 words)

Course subject & number

Specific Expectations of Courses in Health & Wellbeing

GOAL Students will explore and analyze health and wellbeing through attention to at least two dimensions of wellbeing. (Ex: physical, mental, emotional, career, environmental, spiritual, intellectual, creative, financial, etc.).

ELO 1.1 Explore and analyze health and wellbeing from theoretical, socio-economic, scientific, historical, cultural, technological, policy, and/or personal perspectives. Please link this ELO to the course goals and topics and indicate *specific* activities/assignments through which it will be met. (50-700 words)

ELO 1.2 Identify, reflect on, or apply strategies for promoting health and well-being. Please link this ELO to the course goals and topics and indicate *specific* activities/assignments through which it will be met. (50-700 words)