

Using Give-Get Grids to Evaluate Community-Engaged Interprofessional Education Partnerships

Leah Alexander, PhD, MPH¹

Christian Ketel, DNP, RN²

Carolyn Szetela, PhD³

Jacinta Leavell⁴

Amanda Waterman⁵

Jessica Jones⁶

Karen Winkfield, MD, PhD⁶⁻⁸

Affiliations:

¹Department of Public Health Practice, School of Graduate Studies, Meharry Medical College

²School of Nursing, Vanderbilt University

³School of Medicine, Meharry Medical College

⁴School of Dentistry, Meharry Medical College

⁵College of Health Sciences & Nursing, Belmont College

⁶Meharry Vanderbilt Alliance

⁷Department of Medicine, School of Medicine, Meharry Medical College

⁸Department of Radiation Oncology, Vanderbilt University Medical Center

Address correspondence to: Leah Alexander, PhD, MPH, Associate Professor, Department of Public Health Practice, Meharry Medical College, 1005 Dr. D.B. Todd Jr. Blvd, Nashville, TN 37208-3599. Phone: 615-327-5839. Email: lalexander@mmc.edu

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The authors have no potential conflicts of interest to disclose.

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ABSTRACT:

Background: Including community partners in Interprofessional Education (IPE) activities for healthcare trainees can engage students in learning experiences that engender an authentic appreciation for serving community health needs. While such endeavors aim for mutual benefit for all participating partners, tools to assess the value of engagement with community partners could enhance transparency and follow-through for assessing the benefits of participation for the community partners.

Objectives: Based on a Give-Get-Grid used to describe participants' expectations relative to IPE experiences, we developed a Gave-Got-Grid. It was used to evaluate community partners' experiences and outcomes after engaging in community-academic partnerships.

Methods: Initial Give-Get-Grids completed by community partners were used to develop a Gave-Got-Grid, which served as a template for interviewing key community partner leaders after receipt of the project deliverable. Qualitative interviews were conducted and evaluated for common themes.

Results: Four community partners completed Gave-Got interviews and noted that their contributions to the IPE program were substantial and acceptable in relation to their gains. They identified valuable participation outcomes, including fresh perspectives on their organizations' work, inspiration from diverse health professions trainees, trainees' expertise in bettering their community's health, and receiving essential deliverables for their community populations.

Conclusions: Developing transparent aims that clearly outline what each community partner will give and what they hope to receive prior to engaging students in a learning experience can be mutually beneficial in developing community partnerships for Interprofessional Education. Such practices can enhance mutual understanding, respect, and responsiveness among healthcare trainees, community organizations, and their constituents.

KEYWORDS: Community engagement, interprofessional education, service learning, Community-academic partnerships, evaluation

Background

Interprofessional Education (IPE) engages students in learning experiences that engender an authentic appreciation for other disciplines. When IPE extends to healthcare professional students, its goal is to improve the quality of care to patients/clients and to help students better understand and reflect on the respective interactions and strengths among multiple disciplines involved in healthcare. IPE allows students to learn "about, with, and from" one another (1,2). Several accrediting academic bodies require IPE for students as part of their accrediting standards(3,4). Numerous IPE models exist. Most include a combination of didactics, team building, and case-based problem-solving activities. The most effective IPE models focus on teamwork, leadership, communication, cultural competence, and shared responsibility for patient outcomes (5-12). When implemented well, IPE prepares health professions students to collaborate effectively in the real world.

Community-engaged service-learning opportunities have the potential to enrich IPE experiences significantly. Connors et al¹³ define service learning as "a structured learning experience which combines community service with preparation and reflection". In many instances, the course curriculum explicitly links didactic material to volunteerism (14). Adding a community-engaged approach to IPE training ensures that health professions students appreciate the life experiences of their clients and patients. Community-engaged IPE activities can also help students appreciate the powerful influence of the environment on health outcomes (2). Meeting the community's needs is valued, and program sustainability is a priority. Students learn "about, with, and from" the community in partnership when successful. Although rarely evaluated, community members also learn and benefit from the process.

Students and faculty engaged in IPE are encouraged to self-reflect and evaluate the experience. There are few examples where community members or representatives are encouraged to do the same. All vested participants can contribute to and benefit from community-engaged interprofessional education activities. The partnership becomes a critical component of success (15). Partnerships are bolstered when when parties acknowledge each other's strengths and agree to learn together (4).

Faculty at East Tennessee State University developed a simple tool, the Give-Get Grid, to assist in developing transparent, equitable partnerships, especially among parties that may not be familiar with one another (16-18). The Give-Get-Grid process is simple. First, each partner completes a 2 x 2 table highlighting expectations and contributions to the endeavor. Completing the table creates an opportunity to identify common interests and expectations, and eventually, they evaluate the partnership.

The Give-Get-Grid has enhanced engagement between community organizations and academic institutions (19). It facilitates clear and well-defined expectations between the parties, increasing the chances for a mutually beneficial endeavor and decreasing the risks of mismanaged relationships. Moreover, the Give-Get-Grid helps to protect the populations served by both types of organizations. However, using the Give-Get-Grid framework as an evaluation after completion of the community activity has not been well-defined.

As part of the Meharry-VanderbiltAlliance's (MVA) Interprofessional Education Collaborative (IEC), the Give-Get-Grid is foundational in community partner relations before IPE activities. All of the participants in the IEC use the Give-Get-Grid. These participants include students, community partners, and academic faculty. While the IEC conducts regular satisfaction and

quality improvement assessments with participants, prior to this analysis, it had never followed up with projected expectations and contributions of the stakeholders identified using the Give-Get-Grid.

A novel approach was used for this collaborative iteration to evaluate the community partner experience with the participating partners. The IEC used a modified version of the Give-Get-Grid after the completion of the project year to evaluate how well the Give-Get-Grid tool aligned with the lived experience of the community partner of completing the project with the IEC. The modified tool was aptly named the Gave-Got-Grid. This report presents the conversion of the Give-Get-Grid framework into a post-community engagement, Gave-Got-Grid.

Methodology

The following is a detailed description of the methodology used for the IEC student project. First, the section will describe the initiative's overall history and the IEC's current state. It will then describe how the IEC administered the Give-Get-Grid with the community partners. Finally, it will describe how the Gave-Got-Grid was developed, implemented, and analyzed. The Internal Review Board at Vanderbilt University approved this project and categorized it as a quality improvement initiative.

The Collaborative and Community Partners

The IEC is a multi-institutional partnership sponsored by the MVA. It comprises faculty from various academic programs throughout the Nashville, TN, area (see table 1). The MVA established the IEC in 2009. Since then, it has been through several iterations. It has been in its current form since 2015 (20). Prior to this, it was an inter-institutional case competition

sponsored by MVA. Since 2015, the project has convened interprofessional students on teams led by academic faculty and community partners to develop a population health deliverable to the community organizations in response to an identified need of the population served by that community partner. The community organizations serve vulnerable populations and communities in the Nashville, TN/Davison County area. IEC student project teams have created deliverables such as health education classes and events, population-specific community resource guides, and mini-documentary/education videos. Hosted over the Fall and Spring semesters in the 2017-2018 academic, the IEC collaborated with four community organizations that hosted five student teams (1 community partner hosted two teams).

Insert Table 1 here

This IEC student project program has three phases. The first phase is student recruitment. Each academic program recruits 2-3 students using their own process. Processes range from competitive applications to selective nominations within their academic program. For the most part, academic programs do not offer school credit or other incentives to participate in the IEC except for clinical hours. The program's second phase consists of four consecutive weekly didactic and discussion sessions designed to prepare students to work on an interprofessional team and to engage with community partners respectfully and productively (see table 2).

Insert Table 2 here

The third and most complex phase of the program involves engagement of each student team with a community partner to develop a deliverable or solution designed to meet the specific need. The community partners are deeply involved in describing the people they serve, their needs, and practicalities for successful projects. The four community partners involved in this project, along with their give-get expectations for the partnership, are:

1. St. Luke's Community House

St. Luke's Community House boasts 105 years of experience serving the West Nashville community. The organization was originally founded to assist families impacted by incarceration and has changed in response to the needs of the rapidly changing community. Today, the organization focuses on creating stability for the area's children, families, and seniors. The services provided by St. Luke's range from preschool and afterschool programs to mobile meals and recreational activities for seniors. When completing the Give-Get-Grid, representatives from St. Luke's were willing to contribute space, time, and interest to the IPE partnership. They also were willing to facilitate access to their client population and training for the students. In addition, they hoped to strengthen programs for clients and wanted data for program evaluation.

2. Urban Housing Solutions

Urban Housing Solutions (UHS) was founded in 1991 and is the largest nonprofit housing provider for homeless, low-income, and workforce populations in Nashville. In the early 1990s, UHS founder and community partners transformed a derelict hotel into an innovative, stable housing solution for people in need of affordable housing. Today, UHS provides several affordable options, including studios, apartments and townhomes,

and commercial space for neighborhood entrepreneurs. When completing the Give-Get-Grid, UHS representatives indicated they were willing to provide access to their population, a new lens for skill development and awareness of client needs, and a hands-on learning experience. In addition, they wanted to receive an authentic, functional, sustainable product, success stories, and informed healthcare providers.

3. Dismas House

Dismas House was founded in 1974 by a Catholic priest and the Vanderbilt Prison Project as a housing facility for individuals recently released from prison and college students. The initial goal of Dismas House back then was to support two distinct groups of people working to find footing in the community. Currently, the organization provides basic needs like shelter, food, transportation, life skills, legal support, and health/wellness education. Dismas House was a late addition to the community partner list, and they did not complete an initial Give-Get-Grid. However, a retrospective Gave-Got-Grid was used for evaluation.

4. Oasis Center

The Oasis Center was founded in 1969 as a community center for teens who have runaway from home. Since then, Oasis has grown into a formidable support organization for young people and their families. It implements more than 20 youth development programs and focuses on four foundational areas for youth success; safety, belonging, empowerment, and generosity. Oasis Center did not complete an initial Give-Get-Grid.

During the program's third and final phase, student teams work alongside faculty and their community partner to discuss the organization's specific needs and develop a deliverable. The student teams spend a minimum of 20 hours developing the deliverable tailored to their assigned community. After the program, students, faculty, and representatives from each community partner reunite for a formal presentation of all student team projects (see table 3).

In previous years, the IEC has received positive feedback from community partners regarding the program. They have also expressed appreciation for the deliverable created. However, there was no formal assessment of their satisfaction with the processes or outcomes after the project's completion. More importantly, IEC did not ask community partners for specific feedback on how their expectations of the partnership with the IEC aligned with the actual process and outcomes.

Methodology/Implementation

To assess whether expectations set by the Give-Get-Grid in the early stage of the project were met, a post-project evaluation using a Gave-Got-Grid was developed and administered via qualitative interviews with the community partners. First, the Gave-Got-Grid used the responses from the pre-project Give-Get-Grid to formulate questions about post-project expectations. Then, those questions were used to elicit the actual experiences of the community partner. The responses to the Gave-Got-Grid questions were then discussed in an interview with the community partner to assess the quality and quantity of alignment between the pre- and post-project expectations. Only two of the four community partners completed the Give-Get-Grids in the year of this project, reflecting some of the variations experienced working with multiple organizations. Where a Give-Get-Grid was lacking, the community partners were able to reflect on their prior give-get expectations in their Gave-Got interviews.

An IEC faculty member conducted individual interviews with a representative from each community partner. They were recorded and transcribed for qualitative content analysis. The first step in the analysis was identifying and applying a standard set of codes to the original Give-Get-Grids and the Gave-Got-Grid interview transcript data. After coding, the IEC faculty identified themes based on the codification. Next, the faculty analyzed the grids to consolidate common and repetitive words, phrases, and other coded content.

Results

The Give-Get-Grid facilitates open dialogue between partners to strengthen the partnership and encourage transparency related to expectations. During the process, individuals complete a 2 X 2 table specifying what they will contribute and what they hope to receive from the partnership. Before the IPE project, representatives from two community partners completed the Give-Get-Grid. Although five community organizations participated in the cohort, only four organizations completed the individual Gave-Got-Grid interviews to evaluate the partnerships and deliverables.

Insert Table 3 here

Post-Project Qualitative Interview

During the post-project interview, representatives from the community organizations completed 2x2 Gave-Got Grids. Additionally, they reflected on their participation and answered questions about what they learned and time committed to the project by their organization. Finally, the representatives shared opinions about the deliverables that resulted from the partnership.

Gave-Got-Grid Reflections

Overall, when reflecting on contributions to and benefits received from the partnerships, (the community representatives interviewed stated that they got more than they gave.

"I went in with a very open mind, not really expecting anything one way or the other. I was really not sure the first year I did it, but I kind of just decided to jump in the deep end of the pool and see what happened. What I learned was that I feel like I got way more out of it than I gave."

-Oasis

"I feel like what I get back is ten times what I had to offer them."

-Oasis

"Selfishly, I feel like we got a lot more than we gave."

-Dismas House

As one might expect, community representatives noted the types of structural contributions made by the community when collaborating with academia, such as meeting space and access to their expertise and populations.

"We gave an opportunity for people to learn about our organization specifically by visiting and learning and talking to some of our residents and hearing from them on their testimonial of their life, their time incarcerated, as well as their stay with us."

Dismas House.

"We also gave a sneak peek to the students on our constituents that are engaged with us and being accessible for the students to conduct some research with them and hear first-hand, candidly, what is going on in our judicial system, what is clogging up our court systems, and what they felt should be done, which was a lot of the basis of some of the material that was given from the students."

-Dismas House

"What we shared with the students... is this is what our fellow citizens are being faced with as they come home from incarceration, and these are the things that we provide for them to help successfully transition them back into society, and these are some barriers that we are faced with that everyone should know about."

-Dismas

House

"We gave (the students) access to information they may not have or don't know how to get."

-Oasis

"The real true thing that we gave was really just exposing this unique group of students with a societal issue that they might not have been privy to prior."

-Dismas

House

Interview participants also noted that they normalized creative freedom for the students and clients to allow fluidity in adapting the strengths of the student groups to meet the community's needs and deliverables.

"it is good for (our clients) to use their creativity, and they probably want to be more involved instead of saying, hey, do this, and they're stuck in a group, and they can't be open to it."

- Urban housing

"when working with these groups, I really like to give them creative freedom over everything. "

-Oasis

"I think it kind of morphed into that the students aren't the experts in the field and their benefit to the whole process would be doing the research." -

Dismas House

Several themes emerged when discussing what they received, including fresh perspectives on their work, resources, and positive interactions with students. Further, the organizations expressed an intrinsic benefit from healthcare students learning about their roles and the people they serve.

"it is great to have a fresh look at everything.

- Oasis

"some built-in manpower and sweat equity from these students to research and also present something that we find valuable for the expansion of our organization, our mission, moving forward."

-Dismas

House

"we got good attitudes from the students. They all had good attitudes. They were motivated, dedicated, and they was willing to help. So, we also got to work with students that was very into what they was doing.

-Urban

Housing

"to sit down somebody who is young, who is doing it, who looks like you, who might be from a neighborhood like yours, who might emulate something you want to be, and to have a normal conversation, I think is a priceless opportunity for our young people.

-Oasis

"to be able to have groups of students that are currently pursuing their dreams in the healthcare fields that very much mirror what our student population looks like and where some of them come from, and to be able to have them interact and really make it real for them so that it is beyond the positive experience."

-Oasis

Maybe that was the beauty of it all is we kind of shared what we do and what our needs were and kind of guided a little bit of framework and provided some resources, but for the most part, we feel like the students did the legwork and the research that was needed for us to come to the conclusion of these are the seminars that we will move forward and do.

-Dismas

House

During the interview, participants indicated that they learned personally beneficial information. They also noted that they gained more insights about their clients and the benefit of IPE.

"I gained knowledge on... how the residents really felt and how they really ate or prepared meals."

-Urban Housing

I (learned) more knowledge about different groceries stores in the neighborhood."

-Urban

Housing

"I saw that there were so many interdisciplinary people involved in the activity, not just dental, but medical and nutritional and all of those disciplines working together to give our school information about dentistry."

-St. Luke

"helping the parents see how important nutrition is involved in dentistry and the health of their teeth."

-St. Luke

"not only were both student groups that I have worked with over the last few years able to spend time with me, teach me a lot, and open my eyes to a lot of thing"

-Oasis

"each year, I have learned more. The first year I participated, it was great, and then this last year, it went even a step further. It was really cool to see that there was even more out there than I thought"

-Oasis

Time Commitment

Community partners commit substantial time for the IEC project. Logistics and scheduling conflicts create a real challenge for community-engaged IPE activities. Many of the IEC sessions were held in the evening, and some groups even met on the weekend. Expanding job expectations to serve the project was noted, and one participant experienced challenges:

"Yes. I believe we had several meetings of conference calls, in-face meetings ... I would say collectively it was around 40 hours or so of staff time and support of the students over the course of five or six months that we devoted toward guiding, supporting, and sharing our networks."

-Dismas

House

"but the nighttime it got kind of hard, a little bit, just because I am a parent, so it's like, I don't see my daughter all day (until) she come home from daycare."

-Urban

Housing

Overall, the participants noted that the time commitment was reasonable because it worth the effort.

"It was reasonable. I feel like, for what we got for the little bit of time I put in, it was very reasonable."

-St. Luke

"It was about right, but if more time (were) needed, I wouldn't mind spending more time. It's not something I have to do all the time."

-Urban

Housing

Deliverable

Deliverables were adapted to meet the needs of the community partners. Although the teams complete the deliverable within a short amount of time, they aim to make them meaningful and sustainable. All participants were pleased with the deliverable the student/community teams produced. Example comments are provided in Table 4.

Insert Table 4 here

Discussion/Conclusion

IPE is a well-established approach to preparing health professions students for collaborative practice. The World Health Organization first recognized its benefits in the late 1970s (21,22). Despite barriers like constrained institutional infrastructure, discipline-based hierarchies, and limited committed faculty, IPE bolsters mutual respect and effective communication among health care practitioners. It decreases discipline-specific stereotypes and can transform disjointed patient care into natural collaborations where power is shared, and patient/client needs and preferences are a priority. Preparing health professions students to work successfully on interprofessional teams has the potential to transcend the scope and skill of the healthcare workforce. As noted by Pecukonis and colleagues (23), IPE decreases "profession-centrism" in which health professionals value the importance of their own profession, discounting the necessity or effectiveness of others. It is the "preferred world view held by a profession, developed and reinforced through training experiences". Since 2015 the MVA has created an interprofessional environment for students, faculty, and the community to combat "profession-centrism".

Overall, completing Gave-Got-Grids in an interview format affirmed that partners perceived their contributions and gains as satisfactory and fulfilling. Further, the Gave-Got-Grid provided specific information to intentionally align expectations of reasonable goals and to address challenges. A positive light was shone on the remarkable work of the IPE student teams that exceeded the community partner's expectations of the processes and deliverables. On the other hand, the assessment revealed a heavy time-commitment to meet the IEC expectations, bringing light to the personal time burden that this project can impose and allowing for future modifications. For instance, to address the community partners' time-commitment, it may be beneficial to add additional faculty involvement to offset some of the time commitments

expected of the community partner. Alternatively, the MVA may consider increasing the honorarium provided to support the additional time needed to complete the work. The Gave-Got interviews revealed the achievement of shared benefit and deep value seen by the community partners, and will enrich these relationships moving forward.

The IEC Student Project accords with current models that promote comprehensive interprofessional healthcare as the more effective mode of patient care. It continues to evolve to meet the need of all the constituents: community, faculty, and students. This is a win-win situation since healthcare professionals interact directly with partners that impact the community. The training opportunity for students is maximized because they interact with peers from other disciplines, promoting understanding of their specific roles as healthcare providers.

Collaboration between faculty and students also creates bonds that enable students to emulate professional behaviors and learn about the importance of the various disciplines. The changing healthcare system requires innovative and community-focused solutions to treat patients with complex health needs adequately. The IEC Student Project provides the opportunity for students to gain requisite skills, including understanding the roles of multiple healthcare professionals.

These skills will serve as crucial preconditions to improving collaborative patient care that addresses community needs. The IEC has effectively improved interprofessionalism among various health professional students (24). In addition, this novel use of the Give-Get-Grid demonstrates that the IEC provides a qualitatively confirmed alignment between pre- and post-project expectations for participating community partners.

A core component of the IEC is its relationships with local community partners. Since 2015, the IEC has developed productive and sustained partnerships with various organizations that serve

medically and socially vulnerable populations. The IEC has diligently engaged these partners throughout this time, reflecting respect and sensitivity. The IEC accomplishes this by intentionally using evidence-based tools such as the Give-Get-Grid to guide its programming. In the past, satisfaction among the IEC's community partners was informally assessed in followup discussions. These conversations generally affirmed the success of the relationships. While these methods were valuable, the IEC developed a novel qualitative methodology to validate the expectations and experiences of its community partners by using a Gave-Got-Grid post-project. This provided a more formal and detailed evaluation of the value of the resources and commitment shared by the community partners from their perspectives.

Conclusion

This report highlights the importance of assessing community partnerships when engaging as a part of an academic IPE program. The IEC used a novel approach to assess the experience of community partners qualitatively. The evaluation used the evidenced-based Give-Get-Grid to assess community partners' expectations and projected contributions. The IEC took this tool one step further and has used it as a post-project tool to guide a qualitative experiential analysis, the Gave-Got-Grid. The analysis provided a rich set of qualitative information that confirmed alignment in overall experience expectations and reality, but it also provided valuable misalignments in expectations in the time commitments experienced by a community partner. The IEC will continue to employ this new strategy of administering the Give-Get-Grid and Gave-Got Grids with community partners before and after IPE projects. They provide valuable

insights for improving the IEC overall and its ability to serve its community through informed community partner relations.

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Table 1: Academic Institutions and Professions

| Academic Institution | Program or School | Profession |
|--------------------------------------|---|--|
| Belmont University | School of Nursing | Undergraduate Nursing (B.S.N) |
| | School of Occupational Therapy | Graduate Occupational Therapy (M.S.O.T & O.T.D) |
| | School of Physical Therapy | Graduate Physical Therapy (DPT) |
| Lipscomb University | College of Pharmacy | Graduate Pharmacy (PharmD.) |
| Meharry Medical College | School of Dentistry | Graduate Dental (D.D.S.) |
| | School of Medicine | Graduate Medical (M.D.) |
| | School of Graduate Studies and Research | Graduate Public Health (MSPH) and Biomedical Professional (Ph.D) |
| Tennessee State University | School of Graduate and Professional Studies | Undergraduate and Graduate Social Work (B.S.S.W., M.S.W.) |
| Vanderbilt University Medical Center | Dietetic Internship Program | Graduate Dietitian (R.D.) |
| Vanderbilt University | School of Divinity | Graduate Divinity (M.Div, M.T.S., Th.M., Ph.D.) |
| | School of Medicine | Hearing and Voice Sciences (M.S.-S.L.P., M.D.E., A.u.D. |
| | School of Nursing | Graduate Nursing (M.S.N., D.N.P., Ph.D) |

Table 2: IEC Sessions and Objectives

| Sessions | Objectives |
|---|---|
| 1: Introduction | <ol style="list-style-type: none"> 1. Understand the purpose & goals of the Interprofessional Education project 2. Participate in an evaluation of IPE competencies 3. Increase individual understanding of participating professional roles 4. Complete the Interprofessional Socialization and Valuing Scale (ISVS) |
| 2a. Community nonprofit services: organization and funding 2b. Community partner presentations | <ol style="list-style-type: none"> 1. Understand the process of nonprofit organization structure & development 2. Understand the purpose of nonprofit organizations concerning population health 3. Understand community partners, including the history, mission, population served, and identified "community need" or "organizational challenge" to be addressed. |
| 3: Team development | <ol style="list-style-type: none"> 1. Explore interpersonal and interprofessional team dynamics 2. Identify skills of various team members that will facilitate accomplishing the project goals 3. Evaluate team dynamics following a simulated application case |
| 4: Community Partner assignment "reveal" & project development planning | <ol style="list-style-type: none"> 1. Identify methods to address community partner needs 2. Brainstorm and begin planning to address a defined need for the assigned community partner |

Table 3: Community Partners and Deliverables

| Community Program | Primary Population | Student Deliverable |
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| St. Luke's Community Center (Senior Program) | Vulnerable elderly residents living in the Nashville Community. | Exercise Video |
| St. Luke's Community Center (Child/Family Program) | Children and Families living in the Nashville Community | Health and Wellness Fair |
| Urban Housing Solution (Mercury Courts Community) | Private, affordable housing organization transitioning individuals and families out of homelessness into sustained housing | Hard copy nutrition resource manual for newly housed residents as part of the "Move In" Welcome Pack. |
| Dismas House | Adult males re-entering into Nashville community post-incarceration | Research identifying pathways for post-incarceration individuals |
| Oasis Center | Homeless and vulnerable children and adolescent outreach and support with an emphasis on LGBTQ individuals | Health Professions employment resource website |

Table 4: Community Partners and Deliverables

| Community Organization | Student Deliverable | Comments |
|--|---|--|
| St. Luke's Community Center (Child/Family Program) | Health and Wellness Fair | <p>"It was wonderful. It was a wonderful event with the enthusiasm, the love, and the hard work".</p> <p>"We received educational materials in three different languages, English, Spanish, and Vietnamese, and we have a large population of each. So, that was really good for the students to see that and get that."</p> <p>"First, when they came in and saw those white coats, they kind of fell apart, but the students were able to comfort them and help them be able to come into the room, meet the students, and to learn about dentistry.... and then, just to have the love shown to our children ... they really appreciated that."</p> |
| Urban Housing Solution | Nutrition resource manual for newly housed residents as part of a move-in welcome pack. | <p>"We got an awesome cookbook"</p> <p>"The CEO thought it was so amazing that he told the HR person, or recommended, probably, to the HR person, to give this to all new residents who come... and we still have a copy of the book."</p> <p>"It went beyond my expectations. It was amazing!"</p> |
| Dismas House | Research identifying pathways for post-incarceration individuals | <p>"I think it exceeded our expectations because we came into it knowing there was a need. "</p> <p>"It was extremely worthwhile for us because it is going to benefit, not only the organization's impact on the community, but also a societal issue with the criminal court systems and declutter some of their caseload to be able to have an off-site seminar that will satisfy the court on behalf of these citizens that need some diversionary support."</p> |
| Oasis Center | Health professions employment resource website | <p>"I was excited by their idea through our conversations, and as we met and talked about it, it sounded great, but when you see the real thing, it went up 10 more levels. I was like, Whoa, this is perfect!"</p> <p>"...having the salary information attached with each of the different potential careers is really important because it helps convey, in a very real way, to our young people that in some of these careers, you are not going to make a lot of money, and if you invest a little more time and energy, you could potentially improve your earnings by a lot."</p> |