

# Oklahoma's Heart Disease Course for Multidisciplines

KIRK T. MOSLEY, M.D.

SCIENCE teaching has the responsibility of keeping workers in the field abreast of new developments. This task of communicating information to those responsible for translating scientific advances into health services for individuals, families, and communities is often complicated by the fact that this information cuts across many disciplines. Public health especially embraces a variety of services demanding broad understanding by many individuals working together to accomplish their purposes.

These people must be made to feel more competent in their own fields and to know how their services complement the services of workers in other disciplines.

Accordingly, a course on heart disease was offered at the University of Oklahoma, May 28–June 9, 1956, with the basic purpose of providing better services to heart disease patients through increasing the knowledge and skills of workers in various disciplines. The course was designed to show the importance of and give opportunities for a team approach by those with the various skills and technical abilities required to take care of the needs of the patients.

Representatives from voluntary and official agencies at local, State, and national levels participated in the planning meeting. National bodies represented were the American Heart Association, the National League for Nursing, and the Public Health Service. On the State

level those represented were the Oklahoma State Heart Association, Oklahoma League for Nursing, the Oklahoma State Health Department, and the School of Medicine, the School of Nursing, and the Extension Division of the University of Oklahoma. These State agencies subsequently became the co-sponsors of the course. Planning committee members included nurses, social workers, nutritionists, physicians, and educators.

The course of instruction, scheduled for 2 weeks, was offered by the department of preventive medicine and public health of the School of Medicine, through the Extension Division of the University of Oklahoma. Qualified students successfully completing the course received 2 hours of university credit.

Enrollment was limited to 30 with a special effort being made to enroll students representing a variety of disciplines. A total of 27 students attended all or part of the course. In this group were 8 physicians (health officers); 11 nurses, 5 of them from official health agencies, 4 from hospitals, 1 a private duty nurse, and 1 from a heart clinic; 4 dietitians; 1 nutritionist; and 3 social workers. Attendance at some sessions, counting resource persons from contributing agencies, rose to 50.

The faculty was provided by the School of Medicine and the School of Nursing of the University of Oklahoma, the Oklahoma State Health Department, the American Heart Association, the Oklahoma State Heart Association, and the Public Health Service.

The Oklahoma State Heart Association and the Oklahoma Department of Health each sponsored 15 tuition scholarships, and the lat-

---

*Dr. Mosley is chairman of the department of preventive medicine and public health, School of Medicine, University of Oklahoma, Oklahoma City.*

ter in addition paid for the maintenance of all department employees who attended. Secretarial help was provided by the heart association, the university, and the health department. Literature, films, slides, and mimeographed materials were provided by the heart association and health department. Classroom and other visual aid equipment was supplied by the medical school.

Instruction was offered in a variety of ways with emphasis placed on student participation and teamwork. Field visits, special conferences, and clinics occupied the morning sessions. After lunch the entire class assembled to hear lectures on subjects dealing with the physiology of the circulatory system, etiological factors and preventive aspects of heart diseases, and recent advances in research on the cardiac disorders. Following the lectures, students met in small groups for discussion and exchange of information about the field experiences in which they participated during the morning period. At a seminar session held the last hour of the day, students had an opportunity to discuss with a panel of appropriate experts a selected phase of the heart disease program.

### **Field Experience**

For the field experience, one of the most successful aspects of the program, the class was divided into 5 small groups, each with students from 2 or 3 disciplines. Each member of a group was assigned a different type field activity each day, and no two members of the same group participated in the same activity together. For example, during a morning period, one member of a group might be assigned to observe bedside nursing care of a cardiac patient in a hospital, another member to accompany a public health nurse on a home nursing visit to a cardiac patient, a third member to visit the vocational rehabilitation office for a conference on the role of this agency in the rehabilitation of cardiac patients, and a fourth member to visit the food clinic and confer on diets for cardiac patients.

This arrangement provided the group with varied experiences and encouraged the exchange of information between group members.

Among the institutions and facilities visited as a part of the field experience were the Oklahoma Medical Research Foundation, Oklahoma State Heart Association, Department of Public Welfare, State Industrial Commission, physical medicine department of the Oklahoma School of Medicine, Crippled Children's Commission, a nursing home, cardiac catheterization clinic, medical wards, social service and dietetics departments of the University Hospitals, cardiac conferences for children and for adults, heart station where electrocardiographic examinations are made, rheumatic fever clinic, and a convalescent hospital. During the visit students were given an opportunity through discussion and conference to obtain a better understanding about the role of the agency or facility in providing services to heart patients.

### **"Handout" Materials and Tests**

Three portfolios, Social Service Information, Nursing Information, and Nutritional Information, were distributed to each member of the class. Each of the portfolios contained 8 to 10 pieces of literature which had been obtained from the Public Health Service, heart association, or other sources. In addition to the literature, a carefully selected bibliography which included visual aid material was distributed. Thus, each student could take home from the course the most recent literature available for the various disciplines.

Tests before and after the course were given to gauge student progress. These tests comprised hypothetical family situations based on case material from the University Hospitals and health department files. The individual responses uniformly indicated an increasing knowledge about heart diseases and the problem of patients with heart diseases. The answers also revealed an increased awareness of the need to coordinate the services of professional workers responsible for the care of cardiac patients. The results of the tests reflected definite achievement toward the chief objective of the course, better care for the heart patient.

### **Followup Conferences**

Approximately a year after the course, about 14 persons met with one of the instructors from

the Public Health Service for a followup conference. Through this group approach an attempt was made to get tangible evidence of the value of the course expressed in terms of better patient care. The remainder of the class were contacted by letter. These are some of the experiences reported:

- A nursing supervisor, who participated as a resource person, reported she had had a feeling of frustration after the course because she had been made aware that nurses in the hospital were not "nursing the patient." She is now director of the Baptist School of Nursing in Oklahoma City.

- A private duty nurse, who for 1½ years had been caring for a patient with cirrhosis of the liver, said she understood better how to give her patient, a physician, a low sodium diet. The nurse prior to going on duty with her current patient had for 2 years taken care of cardiovascular disease patients only.

- A hospital dietitian, who is now an instructor in a school of nursing, reported that she had prepared teaching materials centered on the patient with cardiovascular disease rather than on the diet.

- One medical social worker, serving on a national committee, felt she was more helpful in selecting teaching materials for schools of social work. She had been active also in establishing communication between the new medical

social worker in the school of medicine and those in other disciplines.

- One of the health officers said that during the course he had learned for the first time that State health department nutritionists were interested in the problems of special diets for the cardiovascular disease patient and had begun using their services. Recently, he became the assistant to the director of the division of local health services in the Oklahoma Department of Health and now is serving as consultant throughout the State.

In Tulsa a different approach was used. The supervising nurse had shared her course of instruction with the nurses in the district to which she was assigned. These staff nurses reported their experiences to the group. One nurse asked a private physician regarding dietary problems of the patient for whom the physician had requested nursing service in giving a diuretic. At first the physician rejected the idea; later he acknowledged the visiting nurse's contribution by requesting visits to other patients. Nurses in other supervisory districts felt that they too would have benefited by instruction from the supervisor who attended the course session.

This followup evaluation added much to the significance of the course and provided useful information in planning future courses of instruction.

---

## How to Set Up a Heart Course

For schools wishing to offer a heart disease course for multidisciplines similar to the one at the University of Oklahoma, the Heart Disease Control Program of the Public Health Service has prepared the following outline describing step by step the development of the course. This outline may serve as a checklist; however, it is only suggestive since individual situations cannot be anticipated, and its chronology cannot possibly be more than relative.

### ASSUMPTIONS

That the course will be held at an established university or college for a minimum period of 2 weeks. That an approximate number hours of credit in the school will be given, if desired, to those who are eligible.

That a properly representative committee will take the leadership in effecting the course.

That the whole-hearted cooperation of all the necessary participant agencies will be attained.

That the need for, and interest in, the course will have been determined in advance.

That all of the requisite resources, both human and material, are available and can be fully utilized.

### **PRELIMINARY PHASE**

Appoint a "heart course" steering committee.  
Establish overall objectives.  
Select a course coordinator.  
Choose nonconflicting dates.  
Nominate faculty members and verify their acceptance.  
Assign responsibility for media publicity.  
See that participating agencies are personally briefed.  
Determine number and disciplines of students.  
Arrange for classrooms, housing, meals, and transportation, as necessary.  
Determine the financing of the course: tuition and registration fees, selective scholarships, and so forth.

### **INTERMEDIATE PHASE**

Determine course content, teaching methods, and format.  
Explore clinical facilities available for field experience and observation.  
Arrange for selected patients to be observed.  
Prepare and mail announcement brochures to predetermined list of prospective students.  
Choose and obtain visual aids and equipment.  
Check availability of library facilities for reading assignments.  
Assemble family and patient summaries from live case material selected from agencies sending students.  
Appoint a qualified writer to prepare proceedings of the course for subsequent publication.  
Arrange for secretarial and other such assistance.  
Prepare detailed schedule of classes, conferences, and observations which permits flexibility in meeting individual needs.

### **FINAL PHASE**

Prepare bibliographies, and select "hand out" literature.  
Prepare sheet of suggested problem areas for group work.  
Provide guide questions for observations.  
Prepare pretests and posttests, based on point 7 in "Intermediate Phase."  
Prepare a course "opinionnaire" for students.  
Supply applicants with advance reading assignments as desired.

### **COURSE BEGINNING**

Register students and distribute necessary instructional materials.  
Divide class into teams, each to include various disciplines.  
Permit each team to select a problem to study.  
Provide each team with a full-time counsellor, or consultant.  
Give students pretest.  
Obtain from students written statements of individual objectives in the course.  
Follow up on media publicity.  
Throughout course allow for group decisions and flexibility indicated by student reactions.

### **COURSE ENDING**

Give posttest.  
Distribute "opinionnaire" for completion.

### **POSTCOURSE**

Arrange for on-the-job followup of students to identify tangible results from the course.  
Reassemble group for followup evaluation conference if possible.  
Make resultant improvements in subsequent courses.