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INMED Master's Degree in International Health Syllabus

Program Director:

Nicholas Comninellis, MD, MPH, DIMPH
nicholas@inmed.us, 816-520-6900

Learner Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Overview:

The Master's Degree in International Health is a 32-credit hour graduate program designed for healthcare professionals and healthcare profession students to lead comprehensive disease intervention and health promotion efforts in low-resource and cross-cultural communities. Three specialty tracks are available: International Medicine, International Nursing, and International Public Health. MIH learners acquire advanced academic expertise and field experience in epidemiology, diseases of poverty, maternal newborn health, international public health, cross-cultural skills, disaster management, health leadership, healthcare education, research, and quality improvement.

Competency Objectives:

At the completion of the INMED Master's Degree in International Health learners will demonstrate through case studies, simulation, and actual practice ADVANCED:

- Application of epidemiological principles
- Management and prevention of leading diseases of poverty
- Care for the health of pregnant women and newborns
- Proficiency in clinical skills useful in low-resource settings
- Skill in community-wide health promotion and death/disability prevention
- Culturally appropriate healthcare
- Proficiency in disaster mitigation and response
- Design and implementation of team-lead healthcare interventions
- Transfer of healthcare skills to other personnel
- Research methodologies, interpretation, and quality improvement

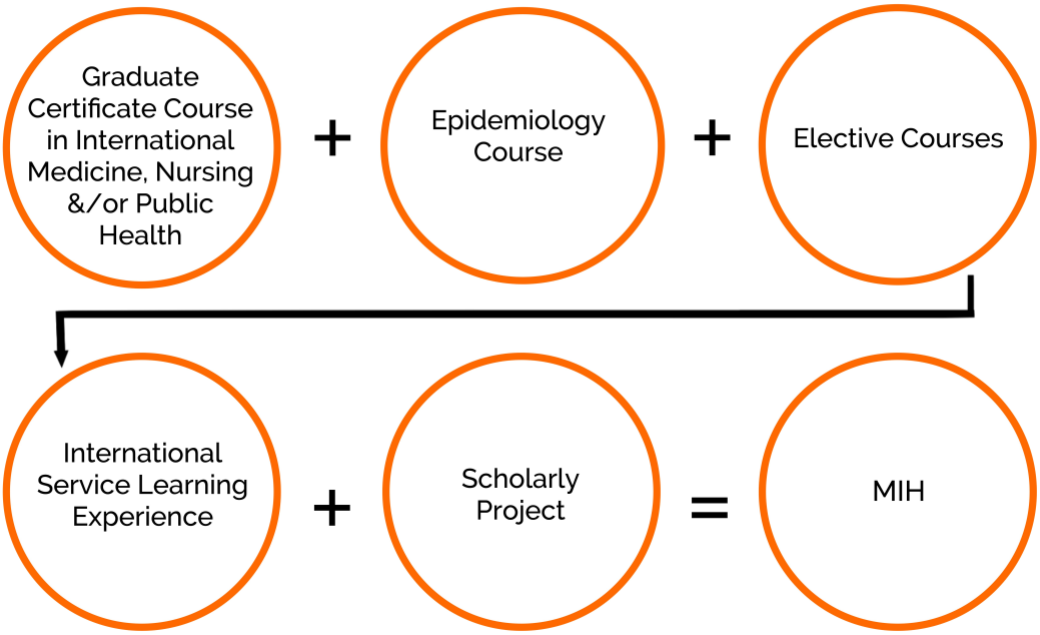
Admission Qualifications:

- Bachelor's degree from an accredited institution
- Curricula Vitae
- Letter of Recommendation from a faculty or supervisor
- Ability to read and write fluently in English. Students who self-identify as non-native English speakers will be required to submit, to INMED, either a TOEFL iBT® or MyBest® minimum score of 80 or an IELTS Band Score of 6.5 or higher. Admission will not be granted until after the test results are received.
- Submission of any undergraduate or graduate school diplomas already granted
- Submission of any professional certifications already granted
- Academic transcripts (for those whose undergraduate or graduate education is still in process)
- Applicants in a healthcare field which requires a license to practice must submit an active license

Educational Components:

Master's Degree in International Health candidates will achieve the program's learning objectives through the following educational components:

Master's Degree in International Health



1. Epidemiology – *6 credit hours*

This 8-week certificate is built around on-line learning, project completion, and examinations on the subjects of:

- Introduction to Epidemiology
- Measurement of Health and Disease
- Epidemiological Studies
- Basic biostatistics Concepts
- Causation in Epidemiology
- Epidemiology of Non-Communicable Diseases
- Epidemiology of Communicable Diseases
- Clinical Epidemiology
- Environmental and Occupational Epidemiology
- Health Policy, and Planning

For specific course offering dates, please refer to the Academic Calendar.

Applicants who have completed an epidemiology course within calendar four years prior to MIH application may submit the course syllabus and grade transcript. INMED will consider these for credit towards MIH requirements (Max of 6 credit hours for transfer). If transfer credit is accepted, payment of the Epidemiology Course tuition will be waived.

2. International Health – 10 credit hours

This 8-week Certificate course combines active on-line learning with virtual-classroom skill sessions, concluding with examinations on:

- Diseases of Poverty
- Maternal-Newborn Health
- Clinical Skills used in low-resource settings
- International Public Health
- Cross-Cultural Skills
- Disaster Management
- Health Leadership
- Healthcare Education

Three specialty tracts are available: International Medicine, International Nursing, and International Public Health. For specific course offering dates, please refer to the Academic Calendar.

3. Elective Courses – 6 credit hours

MIH learners will complement and focus their educational experience by selecting for elective credit from INMED courses relevant to their career aspirations. Some courses, such as Emergency Pandemic Control, are entirely online, while others, including Ultrasound for Primary Care, have both online and in-person sections. MIH elective credits must total at least 6 credit hours of elective courses. Options Currently include:

- Ultrasound for Primary Care (1-credit)
- Obstetrics Ultrasound (1-credit)
- Helping Mothers Survive (1-credit)
- Helping Babies Breathe (1-credit)
- Essential Care for Every Baby (1-credit)
- Hands-On Skills for Low-Resource Healthcare (1-credit)
- Emergency Pandemic Control (3-credits)
- International Refugee Care (3-credits)
- Healthcare Leadership & Management (3-credits)
- International Health Professions Education (3-credits)
- Healthcare for Marginalized Americans (3-credits)
- Self-Care for the Health Professional (3-credits)
- International Healthcare Ethics (3-credits)

Please visit the Academic Calendar for offering dates.

4. Service-Learning – 5 credit hours

INMED cooperates with health facilities around the world to provide INMED learners with exceptional educational experiences. Selection of INMED International Service-Learning Sites is made with attention to safety, accessibility, instructor credentials, ease of communications, and former learners' evaluations. On location, learners will be supervised by INMED faculty, and responsibilities may include health promotion projects, public health research, health system administration, medical and nursing education, and direct patient care.

Prerequisites: Completion of the Graduate Certificate Course in International Medicine, International Nursing, or International Public Health. Health profession students must also first complete their school's core clinical requirements prior to departure.

MIH International Service-Learning experience is a minimum of four weeks. Learners are encouraged to consider integrating their Scholarly Project with their International Service-Learning. Satisfactory completion of all International Service-Learning requirements (including on-site presentation, evaluation, and reflective essay) earns 5 credit hours.

Service-Learning Via Equivalency

INMED endeavors to recognize excellent international service-learning experiences provided by other institutions. MIH learners may apply for Service-Learning Via Equivalency for upcoming experience, or for Service-Learning Via Equivalency (Completed) for significant prior experience.

5. Scholarly Project – *5 credit hours*

MIH learners will select, design, and develop a scholarly project relevant to their career interests. An appropriate INMED faculty will be assigned to assist each learner with project selection and design, and to guide the learner through project completion. Scholarly projects may include:

- A literature review on a subject relevant to the learner's career
- A quality improvement plan related to the learner's career
- Original research suitable for publication

Prerequisites: Epidemiology course

Upon completion, learners will defend their scholarly project before a jury of INMED faculty, who may inquire regarding any component of the project or

of the MIH educational experience. Satisfactory completion of the Scholarly Project earns 5 credit hours.

Tracking Progress through the MIH

Each MIH learner receives a login to the MIH Dashboard where they can view the MIH details, track their degree requirements, and see recorded their completed MIH components.

Timetable

Learners may complete the degree requirements over a period of up to four years. However, continuous participation is preferred, and all components can be completed in as short as one year. Most MIH learners take one course at a time and complete the entire degree in about 18 months.

Cost and Tuition

INMED is committed to quality, affordable education. Consistent with this value, many INMED faculty volunteer their service. Note: tuition is subject to change.

Cost Per Credit Hour

Tuition per credit hour is currently: $295.

Cost Elements

- Master's degree in International Health Application Fee: $100, refundable. All payments made to INMED must be in US dollars
- Tuition for the Epidemiology Course – 6 Credit Hours: $1,770.
- Tuition for the Professional Certificate Course in International Medicine, International Nursing, or & International Public Health – 10 Credit Hours: $2,950.
- Elective Courses – 6 Credit Hours: $1,770
- Tuition for the International Service-Learning – 5 Credit Hours: $1475. Other expenses associated with the International Service-Learning experience are the responsibility of the learner. These normally include airfare, passport, visa, housing and meals at the Service-Learning Site.
- Scholarly Project – 5 Credit Hours: $1,475

Cost Summary

- Application fee: $100

- 32-credit hour tuition at $295/credit hour = $9,440. No additional fees.
- Notes: Service-Learning travel expenses are not included. Tuition and fees are subject to change

Grading:

Letter grades of A, B, C, D, and F are used. Temporary grade of IN (Incomplete) is treated as an F until removed.

Grade points are assigned as follows:

A = 4.0
B = 3.0
C = 2.0
D = 1.0
F = 0.0

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Grade Definitions

Following are definitions used for the assignment of grades.

A = Mastery of course objectives is at the highest level of expected achievement.

B = Adequate performance in attaining the course objectives has been achievement.

C = An inadequate level of course objective attainment has been achievement.

D = Only marginal inadequate performance towards the course objectives have been achieved.

F = Grossly inadequate performance has been demonstrated.

IN = Incomplete status. This is a temporary grade indicating that the learner has been given and the opportunity to submit outstanding requirements. IN

automatically converts to F at the end of eight weeks following the close of a term.

W = Withdrawal from a course without credit.

Service-Learning Experience

Graded as pass/fail. Successful pass requires:

- Satisfactory evaluation by Service-Learning Site supervisor
- Satisfactory group presentation
- Satisfactory reflective essay composition
- Completion of course evaluation at the course conclusion.

Scholarly Project

Graded as pass/fail. Successful pass requires:

Upon completion, learners will sit for a defense of their scholarly project before a jury of INMED faculty, who may inquire regarding any component of the project or of the MIH educational experience

Successful Completion of the MIH Degree:

1. Earn ≥80% in all course work.
2. Earn an accumulative grade of ≥80% in the program.
3. Earn a "Passing" grade for the skills lab, simulations, and service-learning rotation.
4. Earn a "Passing" grade in the scholarly project.

Certification and Graduation:

Participants who complete the above education components and achieve the competency objectives will be granted the Master's Degree in International Health (MIH). Verification of the educational experience will be provided to any learner's affiliated institution. Graduates are entitled to include with their name and signature the initials MIH.

Remediation:

If a learner does not complete any component and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire component within one year of the start date of the original course.

The learner will be offered only one opportunity to repeat the component without requiring repeat payment of tuition.

Academic Integrity:

Honesty is a fundamental necessity of life. This is a professional-level learning experience. All students are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty suspects a student has engaged in Academic Dishonesty, the INMED faculty may initiate the posted Academic Integrity Policy and Process.

Withdrawal and Refund Policy:

Please refer to the posted Withdrawal and Refund Policy.

Program Director:

Nicholas Comninellis, MD, MPH, DIMPH

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor*, *Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty coadvisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

Epidemiology Course
Syllabus

Course Faculty:

Joe LeMaster, MD, MPH, doclemaster@gmail.com

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Epidemiology is the most fundamental of the health sciences. This course will address introduction to epidemiology, measuring health and disease, epidemiology studies, basic biostatistical concepts, causation in epidemiology, epidemiology of non-communicable diseases, epidemiology of communicable diseases, clinical epidemiology, environmental and occupational epidemiology, and health policy and planning.

Competency Objectives:

At the completion of the INMED Epidemiology Course learners will be able to demonstrate using case-studies and simulation:

- Vision and achievements of epidemiology
- Primary measures of health and disease
- Types of epidemiology studies and their application
- Basic concepts of biostatistics and their application to research interpretation
- Establishing the cause of a disease
- Application of primary, secondary, and tertiary prevention
- Surveillance of and response to infectious diseases
- Analysis of natural history, prognosis, and treatment of disease

- Leading issues in environmental, occupational, and injury epidemiology
- Role of policy, health planning, and the planning cycle

Timeframes:

This intensive course includes 8 weeks of structured learning and required assignments due each Sunday night by midnight Central Time USA. Each week also includes a required virtual class with the faculty for discussions, simulations, case studies and final exams. Except for exceptional circumstances (in which case contact the course director) this weekly virtual class is required and may last up to 60 minutes.

Academic Credit:

Completion of this course and its requirements earns **six** credit hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals. Epidemiology is a fundamental basic in applied science to all healthcare professions.

Computing Requirements:

The following are the minimum computing requirements for participating in this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed. Note: a Zoom call-in option is available for those with unreliable internet connections. Lack of internet connectivity will not be accepted as a reason for non-participation in the weekly class call.
- Capability of viewing YouTube and Vimeo videos

Educational Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings
- Critical analysis
- Group discussions

Textbook Download:

World Health Organization: *Basic Epidemiology* (2nd ed) by R. Bonita, R. Beaglehole, T. Kjellström, and WHO; 2006.

Weekly Assignments:

Required weekly virtual class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Week One: Introduction to Epidemiology

Learning Content:
Lesson 1 What Is Epidemiology?
Lesson 2 Epidemiology and Public Health
Lesson 3 Achievements in Epidemiology

Blog post on week 1 reading assignment

Assignments to be completed by 11:55 pm, on Sunday

- Complete the Introduction to Epidemiology Pre-test
- Participate in the Introduction to Epidemiology Lessons 1-3
- Complete Introduction to Epidemiology Post-test
- Read the assigned journal article(s)
- Complete the Discussion Board Assignments: Self-introductory post and post responses to the questions posed regarding this week's journal article(s)

Week Two: Measuring Health and Disease

Learning Content:
Lesson 1 Defining Health and Disease
Lesson 2 Using Available Information
Lesson 3 Morbidity and Disability

Assignments to be completed by 11:55 pm, CT on Sunday

- Complete Measuring Health and Disease Pretest
- Participate in the Measuring Health and Disease content, Lessons 1-3
- Complete Measuring Health and Disease Post-test
- Read the assigned journal article(s)
- Complete the Discussion Board with responses to the questions posed regarding this week's journal article(s)

Week Three: Epidemiology Studies

Learning Content:
Lesson 1 Observational Epidemiology
Lesson 2 Experimental Epidemiology
Lesson 3 Potential Errors in Epidemiological Studies

Assignments to be completed by 11:55 pm, on Sunday

- Complete Epidemiology Studies Pre-Test
- Participate in the Epidemiology Studies content, Lessons 1-3
- Complete Epidemiology Studies Post-Test
- Read the assigned journal article(s)
- Complete the Discussion Board with responses to the questions posed regarding this week's journal article(s)

Week Four: Basic Biostatistics Concepts and Causation in Epidemiology

Learning Content:
Basic Biostatistical Concepts Content:
Lesson 1 Displaying Statistical Information
Lesson 2 Summary Numbers
Lesson 3 Statistical Inference
and
Causation in Epidemiology Content:
Lesson 1 The Concept of Cause
Lesson 2 Establishing the Cause of a Disease

Assignments to be completed by 11:55 pm, on Sunday

- Complete Basic Biostatistics Concepts Pre-Test
- Participate in the Basic Biostatistical Concepts content, Lessons 1-3
- Complete the Basic Biostatistics Concepts Post-Test
- Complete Causation in Epidemiology Pre-Test
- Participate in the Causation in Epidemiology content, Lessons 1-2
- Complete the Causation in Epidemiology Post-Test
- Read the assigned journal article(s)

- Complete the Discussion Board with responses to the questions posed regarding this week's journal article(s)

Week Five: Epidemiology of Non-Communicable Diseases

Learning Content:
Lesson 1 Scope of Prevention
Lesson 2 Levels of Prevention
Lesson 3 Screening for Disease

Assignments to be completed by 11:55 pm, on Sunday

- Complete Epidemiology of Non-Communicable Diseases Pre-Test
- Participate in the Epidemiology of Non-Communicable Diseases content, Lessons 1-3
- Complete the Epidemiology of Non-Communicable Diseases Post-Test
- Read the assigned journal article(s)
- Complete the Discussion Board with responses to the questions posed regarding this week's journal article(s)

Week Six: Epidemiology of Communicable Diseases and Clinical Epidemiology

Epidemiology of Communicable Diseases Content:
Lesson 1 Burden of Communicable Diseases
Lesson 2 Chain of Infection
Lesson 3 Investigation and Control of Epidemics
and
Clinical Epidemiology Content:
Lesson 1 Normality and Abnormality
Lesson 2 Effectiveness of Treatment

Assignments to be completed by 11:55 pm, Sunday

- Complete Epidemiology of Communicable Diseases Pre-Test
- Participate in the Epidemiology of Communicable Diseases content, Lessons 1-3
- Complete the Epidemiology of Communicable Diseases Post-Test
- Complete the Clinical Epidemiology Pre-Test
- Participate in the Clinical Epidemiology content, Lessons 1-2
- Complete the Clinical Epidemiology Post-Test
- Read the assigned journal article(s)
- Complete the Discussion Board with responses to the questions posed regarding this week's journal article(s)

Week Seven: Environmental and Occupational Epidemiology, and Health Policy and Planning

Environmental and Occupational Epidemiology Content:
Lesson 1 Environment and Health
Lesson 2 Exposure and Dose
Lesson 3 Assessing Risk
and
Health Policy and Planning Content:
Lesson 1 Health Policy in Practice
Lesson 2 Health Planning Cycle

Assignments to be completed by 11:55 pm, Sunday

- Complete for Environmental and Occupational Epidemiology Pre-Test
- Participate in the Environmental and Occupational Epidemiology content, Lessons 1-3
- Complete the Environmental and Occupational Epidemiology Post-Test
- Complete for Health Policy and Planning Pre-Test
- Participate in the Health Policy and Planning content, Lessons 1-2
- Complete the Health Policy and Planning Post-Test
- Read the assigned journal article(s)
- Complete the Discussion Board with responses to the questions posed regarding this week's journal article(s)

Week Eight: Final Exam

All learners will login together for the Epidemiology Final Exam during the final online class during the assigned date and time. The final class will be two hours in length- the first hour will include discussion of the final week's assignments, and the second hour, students will complete the final exam.

DATE, TIME Central Time, LINK, Passcode:

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including pre-tests, interactive questions, and post-tests.

Punctuality: This is an intensive, professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than

two weeks behind in submitting any assignment is subject to dismissal from the course. If dismissal occurs, the learner will be granted one opportunity to re-enroll in an upcoming course at no additional tuition payment.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week journal article(s) are presented for learners to critically review, including questions posed on the subjects of each article.

Weekly Post-Tests: Learners have only one opportunity to take the post test. No repeat is permitted.

Discussion Board Participation: Learners are required to post one response to each of these questions in their own words, using appropriate citations for other sources they use, and respond to at least one fellow classmate's responses, again in their own words, stating with what they agree or disagree in their response and why. A post that simply copies content from another source or agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Weekly Virtual Classroom Participation	20%
7 post-tests achieving	30%
7 satisfactory article discussion board posts	20%
Epidemiology Final Exam ≥80%	30%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on all post-tests **and** Epidemiology Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Final Exams: One comprehensive final exam will be conducted, composed of 60 multiple-choice questions. An excellent review for this exam is thorough mastery of the Certificate Course content.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Grade Definitions

Following are definitions used for the assignment of grades.

A: Mastery of course objectives is at the highest level of expected achievement.

B: Adequate performance in attaining the course objectives has been achievement.

C: An inadequate level of course objective attainment has been achievement.

D: Only marginal inadequate performance towards the course objectives have been achieved.

F: Grossly inadequate performance has been demonstrated.

IN: Incomplete status. This is a temporary grade indicating that the learner has been given and the opportunity to submit outstanding requirements. IN automatically converts to F at the end of eight weeks following the close of a term.

W: Withdrawal from a course without credit.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level, intensive learning experience. All learners are expected to be self-motivated, to perform all assignments with excellence and on-time, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of the course
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Joe LeMaster, MD, MPH
INMED Professor

Dr. Joseph LeMaster is a tenured full professor of Family Medicine and Community Health at Kansas University Medical Center (KUMC), where he is an active researcher (since 2011) and provides targeted primary care for refugees from the Himalayan nation of Bhutan. Himself a graduate of KUMC, Dr. LeMaster and his wife Judy lived in Nepal from 1990-2000, LeMaster in 1994 completed the Public Health in Developing Countries 1-year course from the London School of Hygiene And Tropical Medicine (a tool-box course for public health leaders in developing countries). He served first at Okhaldhunga Hospital (an affiliate of the United Mission to Nepal), the only medical care facility for 300,000 people, where they promoted maternal-child health and conducted leprosy research; and later at Anandaban Hospital, a facility operated by The Leprosy Mission International. He went

on to obtain a Master's in Public Health focused on epidemiology from the University of Washington School of Public Health.

Dr. LeMaster has been teaching with INMED since 2008, with special contributions in epidemiology, cross-cultural skills, public health leadership, and participatory health research. His research primarily focuses on improving healthcare for US primary care patients (mostly refugees and immigrants) who have limited English proficiency. He has received funding from the National Institutes of Health, the Patient-Centered Outcomes Research Institute, the Robert Wood Johnson Foundation and numerous other foundations. He currently Chairs the Committee on Advancing the Science of Family Medicine and is a Board member of the North American Primary Care Research Group; and directs the American Academy of Family Medicine National Research Network (a US-based nationwide practice-based research network. He is also the Medical Director and Local Health Officer for Johnson County, Kansas (population 613, 000), and was responsible for public health orders during the COVID-19 pandemic. He loves all things musical and is a self-confessed audiophile. His wife Judy, a retired obstetric and public health nurse, local leader of Community Bible Study, and is a member of the INMED Board. They live in urban Kansas City KS and are active members of and volunteers in the community.

INMED Graduate Certificate in International Medicine and Public Health Syllabus

Course Faculty:

Scott Armistead, MD, DIMPH
Scott@inmed.us, (804) 399-7117

Nicholas Comninellis, MD, MPH, DIMPH:
nicholas@inmed.us, 816-520-6900

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Promoting health in a low resource and/or cross-cultural setting presents special challenges and requires particular skills. This comprehensive course enhances expertise in diseases of poverty, maternal-newborn health, international public health, cross-cultural skills, disaster management, low-resource health leadership, and health professions education.

Competency Objectives:

At the completion of the INMED Graduate Certificate Course in International Medicine & Public Health learners will be able to demonstrate using case-studies and simulation:

- Management & prevention of the leading diseases of poverty
- Care for the health of pregnant women and newborns
- Skill in community-wide health promotion and death/disability prevention
- Culturally appropriate healthcare

- Proficiency in disaster mitigation and response
- Design and implementation of team-lead healthcare interventions
- Transfer of healthcare skills to other personnel

Timeframes:

This Graduate Certificate Course includes 8 weeks of structured learning and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly *required* virtual class may last up to 120 minutes.

Academic Credit:

Completion of this course requirements earns ten credit hours of academic credit.

Admissions Requirements:

The Course is open to healthcare professionals and healthcare profession students in the fields that routinely diagnose and treat disease, including physicians, dentists, physician assistants, pharmacists, resident physicians, and learners of these health professions.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational components:

- Interactive online presentations by expert professionals
- Case studies providing analysis
- Group discussions
- Projects for exploring personal application
- Skill stations to develop technical facility

Optional Reference Texts:

Handbook of Medicine in Developing Countries
Author: Dennis Palmer, DO, and Catherine E. Wolf, MD
Publisher: Christian Medical & Dental Associations

Note: This book is available for purchase from Christian Medical & Dental Associations. This book is for reference only and is not a required purchase for this course.

Anesthesia Off the Grid: A manual for humanitarian health care
Author: James Li, MD
Kindle and paperback

Note: This book is for reference only and is not a required purchase for this course.

Weekly Assignments:

Required weekly virtual class with course faculty for up to 120 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Week One: Diseases of Poverty, Part One

Learning Content:
Lesson One: Introduction to Diseases of Poverty
Lesson Two: Malnutrition
Lesson Three: Enteric Infections
Lesson Four: Viral Diseases
Lesson Five: Malaria
Lesson Six: Syndrome Management

Virtual Classroom Content:
Fighting the Diseases of Poverty Discussion

F-100 Formulation Exercise. Gather the following supplies in advance:

- Brown or whiter sugar 100 ml (75 gm)
- Full-cream (whole) cow's milk 850 ml

- Vegetable oil 20 ml (20 g)
- Mixing bowl one liter
- Measuring cup
- Spoon for mixing
- Drinking cup
- Towel for cleaning spills

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Diseases of Poverty content, Lessons 1-6
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete Syndrome Management Protocol Development Exercise #1

Week Two: Diseases of Poverty, Part Two

Lesson Seven: Tuberculosis
Lesson Eight: Bacterial Infections
Lesson Nine: Protozoal Diseases
Lesson Ten: Intestinal Helminth Infections
Lesson Eleven: Tissue Helminth Infections
Lesson Twelve: Chronic Non-Infectious Diseases

Virtual Classroom Content:
Tropical Medicine Case Studies Non-Surgical

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Diseases of Poverty content, Lessons 7-12, and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete Syndrome Management Protocol Development Exercise #2

Week Three: Maternal-Newborn Health

Learning Content:
Lesson One: Surviving Motherhood
Lesson Two: Pre & Post Natal Care
Lesson Three: Pregnancy Complications
Lesson Four: Pressing Women's Disability Issues
Lesson Five: Newborn Care Overview
Lesson Six: Healthy Newborn
Lesson Seven: Newborn Problems and Management
Lesson Eight: Maternal Newborn Future Vision

Virtual Classroom Content:
High-Risk Low-Resource Maternal Care Presentation

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Maternal-Newborn content
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the post-partum Maternal Postpartum Care and Newborn Care Exercise

Week Four: International Public Health

Learning Content:
Lesson One: Introduction to International Public Health
Lesson Two: Health and Social Context
Lesson Three: Strategy for Health
Lesson Four: Effective Health Promotion
Lesson Five: Effective Disease and Injury Intervention

Virtual Classroom Content:
From Disaster to Durability Discussion

Oral Rehydration Formulation Exercise. Gather the following supplies in advance:

- 1 liter of drinking water:
- Sugar - 6 level teaspoons (30 ml)
- Salt - 1/2 level teaspoon (2.5 ml)
- Mixing bowl one liter
- Measuring cup
- Spoon for mixing
- Drinking cup
- Towel for cleaning spills

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED International Public Health content and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the Personal Health Risk Assessment Exercise

Week Five: Cross-Cultural Skills AND Disaster Management

Learning Content:
Lesson One: Relevance of Cultures
Lesson Two: Basic Cross-Cultural Skills
Lesson Three: Healthcare Cross-Cultural Skills
Lesson Four: International Cross-Cultural Skills
AND
Lesson One: Introduction to Disaster Management
Lesson Two: Disaster Mitigation
Lesson Three: Disaster Preparedness
Lesson Four: Disaster Response
Lesson Five: Disaster Recovery

Virtual Classroom Content:
Cross-Cultural Skills Session

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Cross-Cultural Skills and Disaster Management content and complete the Post-Test for these subjects
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the selected Cross-Cultural Health Cases Exercise
- Complete the Complete the Personal Disaster Preparedness Exercise

Week Six: Health Leadership

Learning Content:
Lesson One: Introduction to International Health Leadership
Lesson Two: Strategy for Health
Lesson Three: Major International Health Initiatives
Lesson Four: How to Lead a Health System

Virtual Classroom Content:
Community Health Survey Exercise

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Health Leadership content and complete the Post-Tests for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the selected International Health Leadership Cases Exercises

Week Seven: Health Professions Education

Learning Content:
Lesson One: Skill Transfer and Empowerment
Lesson Two: Effective Learning
Lesson Three: Effective Teaching
Lesson Four: Feedback and Evaluation
Lesson Five: Instructional Design

Virtual Classroom Content:
Final Exam Review
Launching Your International Healthcare Career Discussion

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Health Professions Education content and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the Competency Objectives Composition Exercise

Week Eight: Comprehensive Final Exam

Final Exam:

All learners will login together for the comprehensive International Medicine and Public Health Final Exam on the assigned date and time. The official Class Photo will proceed the Final Exam. The exam consists of 120 multiple choice, matching, and true-false questions. Time allotted for the exam is 120 minutes. A score of ≥80% is required.

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course. If dismissal occurs, the learner will be granted one opportunity to re-enroll in an upcoming course at no additional tuition payment.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, journal articles are assigned for learners to critically review, including one posted question on the subject of each article.

Discussion Board Participation: Learners are required to post one response to each of these questions, and respond to at least one fellow classmate's responses, stating with what they agree or disagree with about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Exercises: Each week learners will complete an assigned exercise that requires application of the information studied. The completed exercise will then be submitted to the instructor.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Grading:

Letter grades of A, B, C, D, and F are used. Temporary grade of IN (Incomplete) is treated as an F until removed.

Grade points are assigned as follows:

A = 4.0
B = 3.0
C = 2.0
D = 1.0
F = 0.0

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Grade Definitions

Following are definitions used for the assignment of grades.

A: Mastery of course objectives is at the highest level of expected achievement.

B: Adequate performance in attaining the course objectives has been achievement.

C: An inadequate level of course objective attainment has been achievement.

D: Only marginal inadequate performance towards the course objectives have been achieved.

F: Grossly inadequate performance has been demonstrated.

IN: Incomplete status. This is a temporary grade indicating that the learner has been given and the opportunity to submit outstanding requirements. IN automatically converts to F at the end of eight weeks following the close of a term.

W: Withdrawal from a course without credit.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Virtual Classroom participation	20%
7 post-tests achieving ≥80%	20%
8 satisfactory article discussion board posts	20%
5 satisfactory exercise submissions	20%
Comprehensive Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the International Clinical Health and International Public Health Final Exams
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Learners whose evaluation is acceptable will receive the *INMED Graduate Certificate in International Medicine and Public Health*. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Scott Armistead, MD, DIMPH (INMED)
INMED Dean of Faculty
Garden of Eden Health Center, North Chesterfield, Virginia
Richmond Area Director, Christian Medical and Dental Associations (CMDA)

Dr. Armistead trained at the Medical College of Virginia and Truman East Family Medicine Residency in Kansas City, where he met Dr. Comninellis as a

faculty member. Dr. Armistead and his family lived in Pakistan from 1999-2015, providing medical care at Bach Christian Hospital, with a 1 1/2 year stint at Oasis Hospital in the United Arab Emirates when the security situation in Pakistan worsened.

Since 2021, Dr. Armistead has worked in Richmond Virginia in private practice most recently starting a clinic for refugees as an extension of the practice. From 2015 to 2021, Dr. Armistead taught family medicine at the Virginia Commonwealth University (VCU). He works part-time as a CMDA staff worker at VCU. He leads a month-long International Medical Mission elective for senior medical students during which he takes a group annually to Karanda Mission Hospital in Zimbabwe. He completed VCU's TIME (Teaching in Medical Education) certificate course. He loves teaching and has received teaching awards in the Practice of Clinical Medicine program at VCU and from the Society of Teachers of Family Medicine. He is very keen on the professional, moral, and spiritual formation of students. He is active with the Urdu-speaking S. Asian refugee and immigrant population in Richmond, Virginia. His wife, JoAnn, is an ESL teacher and they have three grown sons.

Nicholas Comninellis, MD, MPH, DIMPH
Institute for International Medicine

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor, Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

INMED Graduate Certificate in International Nursing and Public Health Syllabus

Course Faculty:

Micah Flint, MPH, RN, DINPH
flint.micah@gmail.com

Scott Armistead, MD, DIMPH
Scott@inmed.us, (804) 399-7117

Nicholas Comninellis, MD, MPH, DIMPH:
nicholas@inmed.us, 816-520-6900

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Promoting health in a low resource and/or cross-cultural setting presents special challenges and requires particular skills. This comprehensive course enhances expertise in diseases of poverty, low-resource HIV medicine, maternal-newborn health, clinical skills for low-resource settings, international public health, disaster management, cross-cultural skills, low-resource health leadership, and healthcare education.

Competency Objectives:

At the completion of the INMED Graduate Certificate Course in International Nursing & Public Health learners will be able to demonstrate using case-studies and simulation:

- Management & prevention of the leading diseases of poverty

- Care for the health of pregnant women and newborns
- Skill in community-wide health promotion and death/disability prevention
- Culturally appropriate healthcare
- Proficiency in disaster mitigation and response
- Design and implementation of team-lead healthcare interventions
- Transfer of healthcare skills to other personnel

Timeframes:

This Graduate Certificate Course includes 8 weeks of structured learning and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly *required* virtual class may last up to 120 minutes.

Academic Credit:

Completion of this course requirements earns ten credit hours of academic credit.

Admissions Requirements:

The Course is specially customized for nurses, including advanced practice nurses, master's degree level, and students of advanced practice nursing. Undergraduate nursing students will also benefit and may take this course for non-master's degree credit.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational components:

- Interactive online presentations by expert professionals
- Case studies providing analysis
- Group discussions
- Projects for exploring personal application
- Skill stations to develop technical facility

Optional Reference Texts:

Handbook of Medicine in Developing Countries
Author: Dennis Palmer, DO, and Catherine E. Wolf, MD
Publisher: Christian Medical & Dental Associations

Note: This book is available for purchase from Christian Medical & Dental Associations. This book is for reference only and is not a required purchase for this course.

Anesthesia Off the Grid: A manual for humanitarian health care
Author: James Li, MD
Kindle and paperback

Note: This book is for reference only and is not a required purchase for this course.

Weekly Assignments:

Required weekly virtual class with course faculty for up to 120 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Week One: Diseases of Poverty, Part One

Learning Content:
Lesson One: Introduction to Diseases of Poverty
Lesson Two: Malnutrition
Lesson Three: Enteric Infections
Lesson Four: Viral Diseases
Lesson Five: Malaria
Lesson Six: Syndrome Management

Virtual Classroom Content:
Fighting the Diseases of Poverty Discussion

F-100 Formulation Exercise. Gather the following supplies in advance:

- Brown or whiter sugar 100 ml (75 gm)
- Full-cream (whole) cow's milk 850 ml
- Vegetable oil 20 ml (20 g)
- Mixing bowl one liter
- Measuring cup
- Spoon for mixing
- Drinking cup
- Towel for cleaning spills

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Diseases of Poverty content, Lessons 1-6
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete Syndrome Management Protocol Development Exercise #1

Week Two: Diseases of Poverty, Part Two

Lesson Seven: Tuberculosis
Lesson Eight: Bacterial Infections
Lesson Nine: Protozoal Diseases
Lesson Ten: Intestinal Helminth Infections
Lesson Eleven: Tissue Helminth Infections
Lesson Twelve: Chronic Non-Infectious Diseases

Virtual Classroom Content:
Tropical Medicine Case Studies Non-Surgical

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Diseases of Poverty content, Lessons 7-12, and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete Syndrome Management Protocol Development Exercise #2

Week Three: Maternal-Newborn Health

Learning Content:
Lesson One: Surviving Motherhood
Lesson Two: Pre & Post Natal Care
Lesson Three: Pregnancy Complications
Lesson Four: Pressing Women's Disability Issues
Lesson Five: Newborn Care Overview

Lesson Six: Healthy Newborn
Lesson Seven: Newborn Problems and Management
Lesson Eight: Maternal Newborn Future Vision

Virtual Classroom Content:
High-Risk Low-Resource Maternal Care Presentation

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Maternal-Newborn content
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the post-partum Maternal Postpartum Care and Newborn Care Exercise

Week Four: International Public Health

Learning Content:
Lesson One: Introduction to International Public Health
Lesson Two: Health and Social Context
Lesson Three: Strategy for Health
Lesson Four: Effective Health Promotion
Lesson Five: Effective Disease and Injury Intervention

Virtual Classroom Content:
From Disaster to Durability Discussion

Oral Rehydration Formulation Exercise. Gather the following supplies in advance:

- 1 liter of drinking water:
- Sugar - 6 level teaspoons (30 ml)
- Salt - 1/2 level teaspoon (2.5 ml)
- Mixing bowl one liter
- Measuring cup
- Spoon for mixing
- Drinking cup
- Towel for cleaning spills

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED International Public Health content and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments

- Complete the Personal Health Risk Assessment Exercise

Week Five: Cross-Cultural Skills AND Disaster Management

Learning Content:
Lesson One: Relevance of Cultures
Lesson Two: Basic Cross-Cultural Skills
Lesson Three: Healthcare Cross-Cultural Skills
Lesson Four: International Cross-Cultural Skills
AND
Lesson One: Introduction to Disaster Management
Lesson Two: Disaster Mitigation
Lesson Three: Disaster Preparedness
Lesson Four: Disaster Response
Lesson Five: Disaster Recovery

Virtual Classroom Content:
Cross-Cultural Skills Session

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Cross-Cultural Skills and Disaster Management content and complete the Post-Test for these subjects
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the selected Cross-Cultural Health Cases Exercise
- Complete the Complete the Personal Disaster Preparedness Exercise

Week Six: Health Leadership

Learning Content:
Lesson One: Introduction to International Health Leadership
Lesson Two: Strategy for Health
Lesson Three: Major International Health Initiatives
Lesson Four: How to Lead a Health System

Virtual Classroom Content:
Community Health Survey Exercise

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Health Leadership content and complete the Post-Tests for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments

- Complete the selected International Health Leadership Cases Exercises

Week Seven: Health Professions Education

Learning Content:
Lesson One: Skill Transfer and Empowerment
Lesson Two: Effective Learning
Lesson Three: Effective Teaching
Lesson Four: Feedback and Evaluation
Lesson Five: Instructional Design

Virtual Classroom Content:
Final Exam Review
Launching Your International Healthcare Career Discussion

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Health Professions Education content and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the Competency Objectives Composition Exercise

Week Eight: Comprehensive Final Exam

Final Exam:

All learners will login together for the comprehensive International Nursing and Public Health Final Exam on the assigned date and time. The official Class Photo will proceed the Final Exam. The exam consists of 120 multiple choice, matching, and true-false questions. Time allotted for the exam is 120 minutes. A score of ≥80% is required.

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

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Assigned Articles: Each week, journal articles are assigned for learners to critically review, including one posted question on the subject of each article.

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Exercises: Each week learners will complete an assigned exercise that requires application of the information studied. The completed exercise will then be submitted to the instructor.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Grading:

Letter grades of A, B, C, D, and F are used. Temporary grade of IN (Incomplete) is treated as an F until removed.

Grade points are assigned as follows:

A = 4.0
B = 3.0
C = 2.0
D = 1.0
F = 0.0

A	90–100 %	4.00
B	80–89 %	3.00
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D	60–69 %	1.00
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Grade Definitions

Following are definitions used for the assignment of grades.

A: Mastery of course objectives is at the highest level of expected achievement.

B: Adequate performance in attaining the course objectives has been achievement.

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F: Grossly inadequate performance has been demonstrated.

IN: Incomplete status. This is a temporary grade indicating that the learner has been given and the opportunity to submit outstanding requirements. IN automatically converts to F at the end of eight weeks following the close of a term.

W: Withdrawal from a course without credit.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Virtual Classroom participation	20%
7 post-tests achieving ≥80%	20%
8 satisfactory article discussion board posts	20%
5 satisfactory exercise submissions	20%
Comprehensive Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the International Clinical Health and International Public Health Final Exams
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Learners whose evaluation is acceptable will receive the *INMED Graduate Certificate in International Nursing and Public Health*. Those learners whose

evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

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Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Micah Flint, MPH, RN, DIMPH

Micah completed his MPA in healthcare leadership and disaster management at Park University. He holds a nursing degree and bachelor's

degrees in science and liberal arts. He received his INMED Diploma in International Nursing & Public Health in 2008. Micah is INMED's erstwhile Chief Innovation Officer, where he oversaw the development of new INMED programs. He is an active member of the American College of Lifestyle Medicine and his clinical focus is in lifestyle health and sports medicine.

Micah has provided presentations at local and national conferences on topics ranging from Disaster Response, Cross-Cultural Skills, Health Leadership, and Simulation. He is the author of the Disaster Response: Pocketbook for Volunteers and Disaster Management in Limited Resource Settings, 2nd Edition.

Scott Armistead, MD, DIMPH (INMED)
INMED Dean of Faculty
Richmond Area Director, Christian Medical and Dental Associations (CMDA)

Dr. Armistead trained at the Medical College of Virginia and Truman East Family Medicine Residency in Kansas City, where he met Dr. Comninellis as a faculty member. Dr. Armistead and his family lived in Pakistan from 1999-2015, providing medical care at Bach Christian Hospital, with a 1 1/2 year stint at Oasis Hospital in the United Arab Emirates when the security situation in Pakistan worsened.

Since 2021, Dr. Armistead has worked in Richmond Virginia in private practice most recently starting a clinic for refugees as an extension of the practice. From 2015 to 2021, Dr. Armistead taught family medicine at the Virginia Commonwealth University (VCU). He works part-time as a CMDA staff worker at VCU. He leads a month-long International Medical Mission elective for senior medical students during which he takes a group annually to Karanda Mission Hospital in Zimbabwe. He completed VCU's TIME (Teaching in Medical Education) certificate course. He loves teaching and has received teaching awards in the Practice of Clinical Medicine program at VCU and from the Society of Teachers of Family Medicine. He is very keen on the professional, moral, and spiritual formation of students. He is active with the Urdu-speaking S. Asian refugee and immigrant population in Richmond, Virginia. His wife, JoAnn, is an ESL teacher and they have three grown sons.

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INMED Graduate Certificate in International Public Health Syllabus

Course Faculty:

Scott Armistead, MD, DIMPH
Scott@inmed.us, (804) 399-7117

Nicholas Comninellis, MD, MPH, DIMPH:
nicholas@inmed.us, 816-520-6900

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Promoting health in a low resource and/or cross-cultural setting presents special challenges and requires particular skills. This comprehensive course enhances expertise in diseases of poverty, maternal-newborn health, international public health, cross-cultural skills, disaster management, low-resource health leadership, and health professions education.

Competency Objectives:

At the completion of the INMED Graduate Certificate Course in International Public Health learners will be able to demonstrate using case-studies and simulation:

- Management & prevention of the leading diseases of poverty
- Care for the health of pregnant women and newborns
- Skill in community-wide health promotion and death/disability prevention
- Culturally appropriate healthcare

- Proficiency in disaster mitigation and response
- Design and implementation of team-lead healthcare interventions
- Transfer of healthcare skills to other personnel

Timeframes:

This Graduate Certificate Course includes 8 weeks of structured learning and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly *required* virtual class may last up to 120 minutes.

Academic Credit:

Completion of this course requirements earns ten credit hours of academic credit.

Admissions Requirements:

Admission is open to all healthcare professionals and healthcare profession students. This course is especially relevant for public health personnel, healthcare administrators, and students who are preparing for careers in healthcare, anthropology, and international relations and development. Undergraduate students will also benefit and may take this course for non-master's degree credit.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
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- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational components:

- Interactive online presentations by expert professionals
- Case studies providing analysis
- Group discussions
- Projects for exploring personal application
- Skill stations to develop technical facility

Optional Reference Texts:

Handbook of Medicine in Developing Countries
Author: Dennis Palmer, DO, and Catherine E. Wolf, MD
Publisher: Christian Medical & Dental Associations

Note: This book is available for purchase from Christian Medical & Dental Associations. This book is for reference only and is not a required purchase for this course.

Anesthesia Off the Grid: A manual for humanitarian health care
Author: James Li, MD
Kindle and paperback

Note: This book is for reference only and is not a required purchase for this course.

Weekly Assignments:

Required weekly virtual class with course faculty for up to 120 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Week One: Diseases of Poverty, Part One

Lesson One: Introduction to Diseases of Poverty
Lesson Two: Malnutrition
Lesson Three: Enteric Infections
Lesson Four: Viral Diseases
Lesson Five: Malaria
Lesson Six: Syndrome Management

Virtual Classroom Content:
Fighting the Diseases of Poverty Discussion

F-100 Formulation Exercise. Gather the following supplies in advance:

- Brown or whiter sugar 100 ml (75 gm)
- Full-cream (whole) cow's milk 850 ml

- Vegetable oil 20 ml (20 g)
- Mixing bowl one liter
- Measuring cup
- Spoon for mixing
- Drinking cup
- Towel for cleaning spills

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Diseases of Poverty content, Lessons 1-6
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete Syndrome Management Protocol Development Exercise #1

Week Two: Diseases of Poverty, Part Two

Lesson Seven: Tuberculosis
Lesson Eight: Bacterial Infections
Lesson Nine: Protozoal Diseases
Lesson Ten: Intestinal Helminth Infections
Lesson Eleven: Tissue Helminth Infections
Lesson Twelve: Chronic Non-Infectious Diseases

Virtual Classroom Content:
Tropical Medicine Case Studies Non-Surgical

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Diseases of Poverty content, Lessons 7-12, and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete Syndrome Management Protocol Development Exercise #2

Week Three: Maternal-Newborn Health

Learning Content:
Lesson One: Surviving Motherhood
Lesson Two: Pre & Post Natal Care
Lesson Three: Pregnancy Complications
Lesson Four: Pressing Women's Disability Issues
Lesson Five: Newborn Care Overview
Lesson Six: Healthy Newborn
Lesson Seven: Newborn Problems and Management
Lesson Eight: Maternal Newborn Future Vision

Virtual Classroom Content:
High-Risk Low-Resource Maternal Care Presentation

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED Maternal-Newborn content
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the post-partum Maternal Postpartum Care and Newborn Care Exercise

Week Four: International Public Health

Learning Content:
Lesson One: Introduction to International Public Health
Lesson Two: Health and Social Context
Lesson Three: Strategy for Health
Lesson Four: Effective Health Promotion
Lesson Five: Effective Disease and Injury Intervention

Virtual Classroom Content:
From Disaster to Durability Discussion

Oral Rehydration Formulation Exercise. Gather the following supplies in advance:

- 1 liter of drinking water:
- Sugar - 6 level teaspoons (30 ml)
- Salt - 1/2 level teaspoon (2.5 ml)
- Mixing bowl one liter
- Measuring cup
- Spoon for mixing
- Drinking cup
- Towel for cleaning spills

Assignments to be completed by 11:55 pm, on Sunday:

- Participate in the INMED International Public Health content and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the Personal Health Risk Assessment Exercise

Week Five: Cross-Cultural Skills AND Disaster Management

Learning Content:
Lesson One: Relevance of Cultures
Lesson Two: Basic Cross-Cultural Skills
Lesson Three: Healthcare Cross-Cultural Skills
Lesson Four: International Cross-Cultural Skills
AND
Lesson One: Introduction to Disaster Management
Lesson Two: Disaster Mitigation
Lesson Three: Disaster Preparedness
Lesson Four: Disaster Response
Lesson Five: Disaster Recovery

Virtual Classroom Content:
Cross-Cultural Skills Session

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Cross-Cultural Skills and Disaster Management content and complete the Post-Test for these subjects
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the selected Cross-Cultural Health Cases Exercise
- Complete the Complete the Personal Disaster Preparedness Exercise

Week Six: Health Leadership

Learning Content:
Lesson One: Introduction to International Health Leadership
Lesson Two: Strategy for Health
Lesson Three: Major International Health Initiatives
Lesson Four: How to Lead a Health System

Virtual Classroom Content:
Community Health Survey Exercise

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Health Leadership content and complete the Post-Tests for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the selected International Health Leadership Cases Exercises

Week Seven: Health Professions Education

Learning Content:
Lesson One: Skill Transfer and Empowerment
Lesson Two: Effective Learning
Lesson Three: Effective Teaching
Lesson Four: Feedback and Evaluation
Lesson Five: Instructional Design

Virtual Classroom Content:
Final Exam Review
Launching Your International Healthcare Career Discussion

Assignments to be completed by 11:55 pm, Sunday:

- Participate in the INMED Health Professions Education content and complete the Post-Test for this subject
- Read Assigned Articles
- Complete the Discussion Board Assignments
- Complete the Competency Objectives Composition Exercise

Week Eight: Comprehensive Final Exam

Final Exam:

All learners will login together for the comprehensive International Public Health Final Exam on the assigned date and time. The official Class Photo will proceed the Final Exam. The exam consists of 120 multiple choice, matching, and true-false questions. Time allotted for the exam is 120 minutes. A score of ≥80% is required.

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course. If dismissal occurs, the learner will be granted one opportunity to re-enroll in an upcoming course at no additional tuition payment.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, journal articles are assigned for learners to critically review, including one posted question on the subject of each article.

Discussion Board Participation: Learners are required to post one response to each of these questions, and respond to at least one fellow classmate's responses, stating with what they agree or disagree with about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Exercises: Each week learners will complete an assigned exercise that requires application of the information studied. The completed exercise will then be submitted to the instructor.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Grading:

Letter grades of A, B, C, D, and F are used. Temporary grade of IN (Incomplete) is treated as an F until removed.

Grade points are assigned as follows:

A = 4.0
B = 3.0
C = 2.0
D = 1.0
F = 0.0

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Grade Definitions

Following are definitions used for the assignment of grades.

A: Mastery of course objectives is at the highest level of expected achievement.

B: Adequate performance in attaining the course objectives has been achievement.

C: An inadequate level of course objective attainment has been achievement.

D: Only marginal inadequate performance towards the course objectives have been achieved.

F: Grossly inadequate performance has been demonstrated.

IN: Incomplete status. This is a temporary grade indicating that the learner has been given and the opportunity to submit outstanding requirements. IN automatically converts to F at the end of eight weeks following the close of a term.

W: Withdrawal from a course without credit.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Virtual Classroom participation	20%
7 post-tests achieving ≥80%	20%
8 satisfactory article discussion board posts	20%
5 satisfactory exercise submissions	20%
Comprehensive Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the International Public Health Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Learners whose evaluation is acceptable will receive the *INMED Graduate Certificate in International Public Health*. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Scott Armistead, MD, DIMPH (INMED)
INMED Dean of Faculty
Garden of Eden Health Center, North Chesterfield, Virginia
Richmond Area Director, Christian Medical and Dental Associations (CMDA)

Dr. Armistead trained at the Medical College of Virginia and Truman East Family Medicine Residency in Kansas City, where he met Dr. Comninellis as a faculty member. Dr. Armistead and his family lived in Pakistan from 1999-

2015, providing medical care at Bach Christian Hospital, with a 1 1/2 year stint at Oasis Hospital in the United Arab Emirates when the security situation in Pakistan worsened.

Since 2021, Dr. Armistead has worked in Richmond Virginia in private practice most recently starting a clinic for refugees as an extension of the practice. From 2015 to 2021, Dr. Armistead taught family medicine at the Virginia Commonwealth University (VCU). He works part-time as a CMDA staff worker at VCU. He leads a month-long International Medical Mission elective for senior medical students during which he takes a group annually to Karanda Mission Hospital in Zimbabwe. He completed VCU's TIME (Teaching in Medical Education) certificate course. He loves teaching and has received teaching awards in the Practice of Clinical Medicine program at VCU and from the Society of Teachers of Family Medicine. He is very keen on the professional, moral, and spiritual formation of students. He is active with the Urdu-speaking S. Asian refugee and immigrant population in Richmond, Virginia. His wife, JoAnn, is an ESL teacher and they have three grown sons.

Nicholas Comninellis, MD, MPH, DIMPH
Institute for International Medicine

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor, Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

INMED Emergency Pandemic Control Course
Syllabus

Course Faculty:

Joseph LeMaster, MD, MPH, DLSHTM, FAAFP
doclemaster@gmail.com, 573-999-3366

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview

Rapidly increasing international trade and travel predictably increases the likelihood of rapid transmission of infectious diseases. The devastation caused by the 1918 Spanish influenza epidemic and the worldwide alarm prompted by the 2004 SARS epidemic provide important insights into today's concerns surrounding COVID-19. This course emphasizes objective investigation to identify evidence-based answers to critical questions, including identifying the infectious agent, the mode of transmission, incubation period, and effective modalities for prevention, diagnosis, and treatment. This course also highlights how emergency pandemic control often requires deliberate intervention to address special ethical challenges: disease-associated racism, resistance to local and international cooperation, and extreme stress placed upon low-resource health systems.

Competency Objectives:

At the completion of the INMED Emergency Pandemic Control Course learners will be able to demonstrate using case-studies and simulation:

- Long-range mitigation of risk factors associated with epidemics
- Effective measures to investigate the causes of epidemics
- Reliable epidemic control interventions

Timeframes:

This course includes 8 weeks of structured learning, and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly *required* virtual class may last up to 60 minutes.

Academic Credit:

Completion of this course requirements earns three credit hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals. Emergency Pandemic Control is especially appropriate for public health personnel, public leaders and policymakers, laboratory scientists, infectious disease specialists, and those providing primary health care.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings
- Critical analysis
- Group discussions

- Essay composition
- Applied skills simulation

Mentored Discussion

Course faculty will schedule once-weekly discussion up to 60 minutes with course learners to discuss assigned chapters, articles, forum discussions and questions. The link for this discussion is provided below. Please note that lack of internet connectivity will not be accepted as a reason for non-participation, since there is a phone-in option for almost every country in the world.

Textbook Required:

The End of Epidemics, by Jonathan D. Quick
Scribe Publications, 2018
Available on Amazon.com

Weekly Assignments:

Required weekly virtual class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Emergency Pandemic Control Week 1: The Power of Seven, and Lessons from the Bush

- Lessons learned from Spanish flu, HIV/AIDS, Ebola, SARS, and Zika
- Dangers posed by fear, denial, complacency, and self-interest

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the video *What Was the 1918 Influenza Pandemic?* https://www.youtube.com/watch?v=L6jTMacxzkI
- Watch the video *Lessons Learned from AIDS Epidemic* *https://www.youtube.com/watch?v=REaP2MHXZB8*
- Read *The End of Epidemics*, Chapters 1 and 2
- Complete the Book Discussion Board assignments
- Read the assigned article(s)
- Complete the Article Discussion Board assignments

Please note that these assignments must be completed the Sunday -prior to- the FIRST on-line class session.

Emergency Pandemic Control Week 2: Lessons from the Barn, and The Triple Threat

- Threats posed by the global animal food industry
- Perennial influenza and mad cow: the first man-made epidemic
- Bioterrorism, bio-error, and unethical science

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the video *COVID-19 is a zoonotic disease. What are zoonotic diseases?* https://www.youtube.com/watch?v=5qh7ynC9F7Y
- Watch the video *What is Bioterrorism?* https://www.youtube.com/watch?v=eT1qaq7L8EQ
- Read *The End of Epidemics*, Chapters 3 and 4
- Complete the Book Discussion Board assignments
- Read the assigned article(s)
- Complete the Article Discussion Board assignments

Emergency Pandemic Control Week 3: The Costs of Complacency, and Lead Like the House Is on Fire

- Ricochet effect: scattered risks and amplified costs
- Aversion behavior and epidemic cascade
- The hit to education
- DA Henderson and the end of smallpox
- Pivotal leadership against AIDS, SARS, and Ebola

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the video *Lessons Learned from Ebola* *https://www.youtube.com/watch?v=yJ69wtuwIxw*
- Watch the video *What lessons can we take from COVID-19, to deal with monkeypox?* *https://www.youtube.com/watch?v=J1pA6bdB3Rc*
- Read *The End of Epidemics*, Chapter 5 and 6
- Complete the Book Discussion Board assignments
- Read the assigned article(s)
- Complete the Article Discussion Board assignments

Emergency Pandemic Control Week 4: Resilient Systems and Global Security, and Active Prevention and Constant Readiness

- Nigeria's response to Ebola
- Ethiopia's fight against AIDS
- Governmental, NGO, and faith-based health leadership
- Preventing mosquito-borne diseases
- Vaccines: our most powerful protection

- Early detection, rapid response, and protecting primary healthcare

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the video *DR Congo: How to Beat Ebola* https://www.youtube.com/watch?v=eQVVplaw-CA
- Watch the video *Stepping up momentum in Africa's fight against AIDS* https://www.youtube.com/watch?v=iDkcjk4THh8
- Read *The End of Epidemics*, Chapters 7 and 8
- Complete the Book Discussion Board assignments
- Read the assigned article(s)
- Complete the Article Discussion Board assignments
- Complete the Emergency Pandemic Control Mid-Term Exam

Emergency Pandemic Control Week 5: Fatal Fictions and Timely Truth, and Disruptive Innovation and Collaborative Transformation

- The psychology of fear and distrust
- The leadership-during-crisis tight rope
- How mainstream media can help
- Analysis and response to vaccine skepticism
- The proud history of innovation
- Vaccines, mosquito control, rapid tests, early warning systems
- Collaboration for critical innovations

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the public service video *Prevention and Control of Mosquito-Borne Disease* https://www.youtube.com/watch?v=9yWChBCAkWk
- Watch the video *200 Years of Vaccine Skepticism* https://www.youtube.com/watch?v=Stv3SZ7toPI
- Read *The End of Epidemics*, Chapters 9 and 10
- Complete the Book Discussion Board assignments
- Read the assigned article(s)
- Complete the Article Discussion Board assignments
- Begin developing a draft for the Emergency Pandemic Control Essay

Emergency Pandemic Control Week 6: Invest Wisely and Save Lives, and Ring the Alarm and Rouse the Leaders

- How "recency bias" trips us up
- The political case for action
- The business case for investments
- Fighting ignorance at the top

- AIDS denialism and the battle for HIV treatment
- From local campaigns to a global movement to end epidemics

Assignments to be completed by 11:55 pm, Sunday:

- Watch the video *An Early Warning System for the Next Pandemic* https://www.youtube.com/watch?v=vpByzTCvj-E
- Watch the video *Why did Canada's early pandemic warning system fail?* https://www.youtube.com/watch?v=ZOxqB9odFMM
- Read *The End of Epidemics*, Chapter 11 and 12
- Complete the Book Discussion Board assignments
- Read the assigned article(s)
- Complete the Article Discussion Board assignments
- Submit your draft for Emergency Pandemic Control Essay to receive instructor feedback

Emergency Pandemic Control Week 7:

Assignments to be completed by 11:55 pm, Sunday:

- Watch the video *Recency Bias* https://www.youtube.com/watch?v=fAetPKCkQyM
- Watch the video *China Struggles to Contain Frustration from Shanghai Covid Lockdown https://www.youtube.com/watch?v=HQxJBhR5ZzU*
- Submit your FINAL Emergency Pandemic Control Essay for grading.
- Prepare a presentation to give for class this week about your Emergency Pandemic Control Essay. Include no more than 8 slides and speak for no more than 10 minutes. Classmates will provide feedback on your presentation for no more than five additional minutes.

Emergency Pandemic Control Week 8:

- Final Exam

Essay Composition

Learners will compose an essay on the subject *How shall my nation (or other particular group) better prepare against pandemic threats?* Due dates for the draft submission (followed by feedback from the instructor) and final submission are posted above. An optional outline for that essay can be:

Introduction

- Define your nation's potential pandemic threats.

- Describe your nation's current preparedness.

Main body

- Recommend interventions to increase your nation's resilience to pandemic threats.
- Discuss the resources required, potential obstacles, and potential benefits of these interventions.

Conclusion(s)

- Present a plan necessary to implement your recommended interventions.
- Include a strategy for building support for this plan among relevant authorities.

The completed the essay conforming to the following specifications.

- Approximately 2500 words
- At least 10 references
- References may be in any recognized style (AMA, APA, etc.), and the same style should be used throughout style should be used throughout
- Footnotes are preferred over endnotes
- Prepare a five-minute peer presentation about your Emergency Pandemic Control Essay. Give this presentation to your classmates during the Week 8 class session. Include no more than 8 slides and speak for no more than 10 minutes. Classmates will provide feedback on your presentation for no more than five minutes.

Essay Grading Rubric

- Content – 60%
  - Background of the issue is reviewed
  - Rationales are logically organized
  - Alternate views are included
- Structure/organization – 20%
  - Strong introductory paragraph
  - Clear concluding statement
- References – 20%
  - Required minimum number are included
  - Organized in a recognized reference style

Final Exam Simulation

The Emergency Pandemic Control Final Exam Simulation will take place in an online meeting. Over a period of 120 minutes, learners will take part in a pandemic control simulation based upon the CDC Solve the Outbreak online web application. Each class participant in advance will be assigned to lead

the other learners through a particular outbreak investigation. Score on the final exam simulation will be tabulated based upon participation, leadership, and judgement – each weighed equally. A minimum score of ≥80% is required.

Simulation Exercise Grading Rubric

- Leadership – 40%
  - Learner effectively guides other participants
  - Learner speaks clearly and concisely with other participants
- Presentation – 40%
  - Presenter is organized
  - Rationales are logically organized
- Participation – 20%
  - Learner asks thoughtful questions of the other presenters
  - Learner makes recommendations to the other presenters

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, a journal article is assigned for learners to critically review, including questions posed on the subjects of each article. Articles are selected to represent a breath of relevant topics in contemporary healthcare administration, management and leadership. Articles originally published more than 10 years ago are intentionally selected for their ground-breaking impact and contributions to the fields of Management and Leadership. Up-to-date articles are preferentially selected when relevant.

Discussion Board Participation: Learners are required to post at least one response to each of the questions posed, and respond to at least one fellow classmate's responses, stating with what they agree or disagree about the response and why. A post that simply agrees with something someone else

said without further explanation is not satisfactory and will be counted as if there were no post.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Weekly classroom participation	20%
8 satisfactory book discussion board posts	10%
8 satisfactory article discussion board posts	10%
Emergency Pandemic Control Mid-Term Exam	20%
Emergency Pandemic Control Essay ≥80%	20%
Emergency Pandemic Control Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the Emergency Pandemic Control Essay and Emergency Pandemic Control Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Grade Definitions

Following are definitions used for the assignment of grades.

A: Mastery of course objectives is at the highest level of expected achievement.

B: Adequate performance in attaining the course objectives has been achievement.

C: An inadequate level of course objective attainment has been achievement.

D: Only marginal inadequate performance towards the course objectives have been achieved.

F: Grossly inadequate performance has been demonstrated.

IN: Incomplete status. This is a temporary grade indicating that the learner has been given and the opportunity to submit outstanding requirements. IN automatically converts to F at the end of eight weeks following the close of a term.

W: Withdrawal from a course without credit.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion. All sources used for course assignments must be used and cited appropriately.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course

10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Joseph LeMaster, MD, MPH, DLSHTM
Professor, Institute for International Medicine

Dr. Joseph LeMaster is a tenured full professor of Family Medicine and Community Health at Kansas University Medical Center (KUMC), where he is an active researcher (since 2011) and provides targeted primary care for Nepali-speaking refugees (now mostly new Americans) from the Himalayan nation of Bhutan. Himself a graduate of KUMC, Dr. LeMaster and his wife Judy lived in Nepal from 1990-2000, LeMaster in 1994 completed the Public Health in Developing Countries 1-year course from the London School of Hygiene And Tropical Medicine (a tool-box course for public health leaders in developing countries). He served first at Okhaldhunga Hospital, an affiliate of the United Mission to Nepal and the only medical care facility for 300,000 people, where he promoted maternal-child health; and later at Anandaban Hospital, a facility operated by The Leprosy Mission International, where he conducted research in leprosy (Hansen's Disease). He went on to earn a Master's in Public Health focused on epidemiology from the University of Washington School of Public Health.

Dr. LeMaster has been teaching with INMED since 2008, with special contributions in epidemiology, cross-cultural skills, public health leadership, and participatory health research. His research primarily focuses on improving healthcare for US primary care patients (mostly refugees and immigrants) who have limited English proficiency. He has received funding from the National Institutes of Health, the Patient-Centered Outcomes Research Institute, the Robert Wood Johnson Foundation and other private foundations. He currently Chairs the Committee on Advancing the Science of Family Medicine and is a Board member of the North American Primary Care Research Group; and directs the American Academy of Family Medicine National Research Network (a US-based nationwide practice-based research network). He is also the Medical Director and Local Health Officer for Johnson County, Kansas (population 613, 000), and was responsible for public health orders during the COVID-19 pandemic. He is an avid skier and a self-confessed audiophile. His wife Judy is a retired obstetric and public

health nurse, a local leader of Community Bible Study, and is a member of the INMED Board. They live in urban Kansas City KS and are active volunteers in the community.

Healthcare for Marginalized Americans Course Syllabus

Course Faculty:

Fred Loper, MD: fred@inmed.us, 405-664-7430

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Many people live on the margins of American society due to their race, language, ethnicity, income, immigration status, and more. The United States is distinct from other developed countries in that there is no single national health care system that provides access for all of its inhabitants. Also notable in America is the relative lack of attention to social needs which are so essential for health. As a result, marginalized people are frequently unable to access vital health care. This course explores the complex patchwork of ingredients which comprise American health care systems, with special attention to its deficiencies for marginalized people. The profound impact of the social determinants of health is examined. Existing health resources are evaluated. Obstacles to care are identified, along with "work around" solutions commonly used by marginalized people. Promising solutions to the healthcare dilemma for US marginalized people are explored. Course participants are challenged to advocate for a more equitable US health care system.

Competency Objectives:

At the completion of the INMED Healthcare for Marginalized Americans Course learners will be able to demonstrate using case-studies and simulation:

- Comprehension of the obstacles and resources which exist for US marginalized people in accessing health care
- Acquisition of skills, arising from an approach of cultural humility which will improve the care of marginalized people
- Effective strategies for addressing the social determinants of health in the lives of marginalized people.

Timeframes:

This course includes 8 weeks of structured learning, and assignments due each Sunday night. Each week includes a required virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly required virtual class may last up to 60 minutes.

Academic Credit:

Completion of this course requirements earns three hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals. Healthcare for Marginalized Americans is especially appropriate for public health personnel, public leaders and policymakers, social workers, and those providing primary health care.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings
- Critical analysis
- Group discussions
- Essay composition
- Applied skills simulation

Mentored Discussion

- Course participants will schedule once-weekly discussion up to 60 minutes with course faculty to discuss assigned chapters, articles, forum discussions and questions.
- Simultaneous cohorts may be scheduled in advance by course faculty.

Textbook Required:

- *The American Healthcare Paradox*, by Elizabeth H. Bradley and Lauren A. Taylor. PublicAffairs, 2013 (Note: Although this textbook was published in 2013, it remains a relevant, timely, and comprehensive resource. Changes have occurred, but the most basic structure of United States health care remains relatively untouched.)
- *Health Care Off the Books*, by Danielle T. Raudenbush. University of California Press, 2020.

Both books may be purchased at Amazon.com

Supplemental Textbooks / Optional Reading

How Neighborhoods Make Us Sick, by Veronica Squires and Breanna Lathrop
IVP Books, 2019

The Spirit Catches You and You Fall Down, by Anne Fadiman
Farrar, Straus and Giroux, 1997

Both available on Amazon.com

Upholding the Vision, Third Edition, by Multiple Contributors
Christian Community Health Fellowship, 2016.
Available from Christian Community Health Fellowship, www.cchf.org, 901-271-6400, info@cchfmail.org

Weekly Assignments:

Required weekly virtual class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Healthcare for Marginalized Americans Week 1: The Paradox, and Historical Perspectives

- The "Spend More, Get Less" paradox
- Capitalism, public health, American exceptionalism, imbalance of attention and spending on medical care vs. the broader determinants of health
- The rise of "organized" medicine and opposition to a national health care system
- Contrasts in US health care and social services systems

Assignments to be completed by 11:55 pm, on Sunday:

- Read The American Health Care Paradox, Chapters 1 and 2
- Complete the Book Discussion Board assignments
  - Question #1: Define the "spend more, get less" paradox of the American healthcare system. What common reasons are advanced for this paradox?
  - Question #2: Contrast the root causes of poverty as advanced by the charity organization (social Darwinism) movement and the settlement house movement. What are some downsides of both belief systems?
- Read the assigned article: Key Facts about the Uninsured Population
- Complete the Article Discussion Board assignments
  - Question #1: What percentage of the nonelderly uninsured come from a family with at least one full or part time worker? Given the fact that most people in the US obtain healthcare insurance through work, why do these people not have coverage?
  - Question #2: In 2019, the overall uninsured rate rose significantly. It was driven especially by drops in coverage of Hispanic people (57% of the total increase). Why was this? What role does the COVID-19 pandemic continue to play in this scenario?

Healthcare for Marginalized Americans Week 2: Front Line Insights

- US health care system bears the brunt of an inadequate social serices sector
- Front line healthcare personnel are stretched past the limits
- Need for more holistic care widely known and acknowledged

Assignments to be completed by 11:55 pm, on Sunday:

- Read The American Health Care Paradox, Chapter 3
- Complete the Book Discussion Board assignments
  - Question #1: If US caregivers could write prescriptions to address social, spiritual, or emotional needs; for what top reasons would they be written? List at least five.
  - Question #2: Do average US primary care providers have enough clinical time to fully address the needs of their patients? If not, what obstacles keep them from doing so?
- Read the assigned article: Health Disparities Affect Millions in Rural U.S. Communities
- Complete the Article Discussion Board assignments
  - Question #1: Contrast the number of medical specialists per 100,000 people in rural and urban areas. What are your thoughts about the cause of this discrepancy?
  - Question #2: How does Eastern Tennessee State University Quillen College of Medicine prepare students to practice in rural locations?

Healthcare for Marginalized Americans Week 3: Learning from Abroad and Home Grown Innovations

- Models for more effective health care systems, such as in the Scandinavian countries, exist.
- The definition of health differs in the US and Scandinavia
- Rationing of health care is part of both the US and Scandinavian systems
- American creativity in health care technology, organization and financing with front line models of such

Assignments to be completed by 11:55 pm, on Sunday:

- Read The American Health Care Paradox, Chapters 4 and 5
- Complete the Book Discussion Board assignments
  - Question #1: Approximately, what percentage of US health gains in the last century are due to improved medical care? Contrast :1) the per capita expenditure in the US and Scandinavia on healthcare 2) the primary health outcomes in the US and Scandinavia.
  - Question #2: What are the methods used in the US and Scandinavia for rationing health care?
  - Question #3: What key tasks do patients/ clients provide in running Errera Community Care Center? What benefits does the Center experience from this?
- Read the assigned article: Not Even Past: Social Vulnerability and the Legacy of Redlining

- Watch the assigned video: Housing Segregation and Redlining in America: A Short History, NPR
- Complete the Article Discussion Board assignments

Healthcare for Marginalized Americans Week 4: An American Way Forward and Continuing the Discourse

- Lessons from neighborhood/ community health centers and HMOs
- Collectively addressing social determinants of health requires a United States paradigm shift
- American individualism, mistrust of government, concepts of health, and massive financial investment in traditional medical care are immense obstacles to change

Assignments to be completed by 11:55 pm, on Sunday:

- Read The American Health Care Paradox, Chapters 6 and 7
- Complete the Book Discussion Board assignments
  - Question #1: The Neighborhood Health Centers which arose from President Lyndon Johnson's "War on Poverty" in the 1960s were opposed by mainstream medicine and conservative politicians on what grounds? What were the results of this opposition?
  - Question #2: Can the ever-expanding cost of proving medical care in the US be sustained? Can the cost be controlled by modifying the current healthcare sector in isolation? Why or why not?
- Read the assigned article: Care of the Homeless: An Overview
- Watch the assigned video: Tacoma Homeless Get Their Feet Washed, Clipped and Checked
- Complete the Article Discussion Board assignments
  - Question #1: Homeless persons tend to present with the same medical conditions as the general public but at more advanced stages. Discuss factors that contribute to this.
  - Question #2: Screening for depression and substance abuse (including alcohol) in homeless people is best done with which instruments? What is the first focus in treatment of mental illness and substance abuse in homeless people?
- Download, complete and submit the Mid-Term Exam

Healthcare for Marginalized Americans Week 5: Introduction: Health Care Access in America and the Formal-Informal Hybrid Health Care System and Access to Care in Jackson Homes

- Health disparities abound due to race, income, language, etc.
- Health care "safety net", emergency rooms, resources outside formal health care such as curanderisma.

- Formal-informal hybrid health care system
- Health care resources available to Jackson Homes are very heterogeneous and fraught with many obstacles

Assignments to be completed by 11:55 pm, on Sunday:

- Read Health Care Off the Books, Chapters 1 and 2
- Complete the Book Discussion Board assignments
  - Question #1: Please list and define four paths that the urban poor use to access treatment for their health problems.
  - Question #2: The "Tuskegee Study of Untreated Syphilis in the Negro Male" and other similar historical events are, to this day, major deterrents to medical care in many African American communities. Why is that?
  - Question #3: People living in poor communities such as Jackson Homes often believe their individual health is linked to that of others in the community. What are common narratives they believe? How might these narratives affect fear that people have about their health?
- Read the assigned articles
  - Health Care Issues for Children and Adolescents in Foster Care and Kinship Care
  - Improving Mental Health Access for Low-Income Children and Families in the Primary Care Setting
- Complete the Article Discussion Board assignments
  - Question #1: What are physiologic changes in individuals that can be caused by poverty? Does research contain suggestions that these changes might possibly be inherited?
  - Question #2: Why is early intervention and treatment so critically important for the children of poverty?
- Begin developing a draft for the Healthcare for Marginalized Americans Essay

Healthcare for Marginalized Americans Week 6: Sick, Poor and without Care and On the Poor Side of Things

- The emergence of a hybrid system
- Family, friends and the underground economy
- Hybrid systems exist because of the formal system

Assignments to be completed by 11:55 pm, Sunday:

- Read Health Care Off the Books, Chapters 3 and 4
- Complete the Book Discussion Board assignments

    - Question #1: What are some methods used to reduce risks of using intermediaries for treatment of health problems? What are potential harms?
    - Question #2: As a volunteer health care provider in a free clinic, you discover that one of your regular patients is selling most of her Neurontin prescription to neighbors and friends each month. Her Neurontin is legitimately prescribed by you for diabetic neuropathy. How would you deal with this behavior?
- Read the assigned articles:
    - Cultural Humility vs. Cultural Competence: A Critical Distinction in Defining Physician Training Outcomes in Multicultural Education
    - Cultural Competence in Health Care: Is it important for people with chronic conditions?
- Complete the Article Discussion Board assignments
    - Question #1: Why is personal humility an essential prerequisite of patient focused interviewing?
    - Question #2: Describe the atmosphere created by effective patient focused interviewing from both the patient and caregiver points of view.
    - Question #3: What are some ingredients of cross cultural, skill based approaches to increasing cultural competence (humility)? Why are these best combined with learning facts about specific cultural groups?
- Submit your draft for Healthcare for Marginalized Americans Essay to receive instructor feedback

Healthcare for Marginalized Americans Week 7: The Doctor Is In

- Intense role conflict for caregivers due to inadequate resources
- Risks of violating usual norms, rules and practices
- Reasons for using (or not) informal assistance to needy patients

Assignments to be completed by 11:55 pm, Sunday:

- Read Health Care Off the Books, Chapter 5,6, and 7
- Complete the Book Discussion Board assignments
    - Question #1: What seminal change in the doctor-patient relationship has occurred due to the managed care approach to healthcare financing? What are some negative effects of this change?
    - Question #2: Contrast the attitudes, thoughts, emotions of caregivers who use informal assistance strategies for needy patients with those who do not.
    - Question #3: Medical and sociological research often overlooks the heterogeneity of access to formal healthcare that exists in poor

communities. How does this heterogeneity contribute to the existence of a formal-informal hybrid healthcare system?

- Read the assigned article: Health Care Safety-Net Programs After the Affordable Care Act
- Complete the Article Discussion Board assignments
  - Question #1: Is a strong health care safety net an adequate substitute for insurance? What are some appropriate roles that the safety net can fill?
  - Question #2: What are some program changes made by free and charitable clinics in response to the Affordable Care Act? Have these enhanced or detracted from the day-to-day operations of these clinics?
- Submit your final Health Care for Marginalized Americans Essay for grading

Healthcare for Marginalized Americans Week 8: Final Exam

Final Exam Simulation

The Healthcare for Marginalized Americans Final Exam Simulation will take place in an online meeting. All course learners will login at the specified hour. Over a period of 120 minutes, learners will take part in the SPENT Simulation and in case studies on healthcare issues of marginalized persons that require analysis and solutions. Score on the final exam simulation will be tabulated according to the rubric below. A minimum score of ≥80% is required.

Simulation Exercise Grading Rubric

- Leadership – 40%
  - Learner effectively guides other participants
  - Learner speaks clearly and concisely with other participants
- Presentation – 40%
  - Presenter is organized
  - Rationales are logically organized
- Participation – 20%
  - Learner asks thoughtful questions of the other presenters
  - Learner makes recommendations to the other presenters

Essay

Learners will compose an essay on the subject Transforming American health care to improve end results for marginalized people. Due dates for the draft submission (followed by feedback from the instructor) and final submission are posted above. A suggested outline for this essay is:

Introduction

- Define healthcare needs of one marginalized American people group
- Describe existing resources for alleviating these needs

Main body

- Recommend new or improved interventions to increase health outcomes for these people
- Discuss the resources required, potential obstacles, and potential benefits of these interventions.

Conclusion(s)

- Present a plan necessary to implement your recommended interventions.
- Include a strategy for building support for this plan among relevant stakeholders.

The completed the essay must conform to the following specifications.

- Approximately 2500 words
- At least 10 references
- References may be in any recognized style (AMA, APA, etc.), and the same style should be used throughout style should be used throughout
- Footnotes are preferred over endnotes

Essay Grading Rubric

- Content – 60%
  - Background of the issue is reviewed
  - Rationales are logically organized
  - Alternate views are included
- Structure/organization – 20%
  - Strong introductory paragraph
  - Clear concluding statement
- References – 20%
  - Required minimum number are included
  - Organized in a recognized reference style

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, a journal article is assigned for learners to critically review, including questions posed on the subjects of each article. Articles originally published more than 10 years ago are intentionally selected for their ground-breaking impact and contributions to the field of Healthcare for Marginalized Americans. Up-to-date articles are preferentially selected when relevant.

Discussion Board Participation: Learners are required to post at least one response to each of the questions posed, and respond to at least one fellow classmate's responses, stating with what they agree or disagree about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Inadequate learner performance will be managed according to the Student Probation, Suspension, Dismissal, and Readmission Policy. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

Element	Weight
Weekly classroom participation	20%
7 satisfactory book discussion board posts	10%
7 satisfactory article discussion board posts	10%
HC for Marginalized Americans Mid-Term Exam	20%
HC for Marginalized Americans Essay ≥80%	20%
HC for Marginalized Americans Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in all weekly virtual classes
- Achievement of ≥80% on the Healthcare for Marginalized Americans Essay and Healthcare for Marginalized Americans Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Learners whose evaluation is acceptable will receive academic credit for the INMED Healthcare for Marginalized Americans Course. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course

* Day one = date enrollment agreement is signed or date on course registration receipt. “Day” refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Fred Loper, MD

Dr. Loper is a graduate of the University of Oklahoma School of Medicine. As a third-year medical student, he was part of the founding of Good Shepherd Ministries Medical Clinic-- a faith-based, not-for-profit clinic that serves the uninsured people of Oklahoma City to this day. After completing his residency at the University of Oklahoma, Dr. Loper served as a primary care physician at Central Oklahoma Medical Group (COMG). In 1986, he was appointed as the National Missionary for Medical Missions for a North American mission board, and in 2005, he became Executive Director of Baptist Medical Dental Fellowship, leading physicians, dentists and other health professionals in volunteer healthcare service in the US and abroad. In 2012, Dr. Loper returned to Good Shepherd Ministries Medical Clinic to serve as their full-time medical director and completed his active practice career as an Associate Physician at Community Health Centers of Oklahoma, a Federally Qualified Health Center.

Healthcare Leadership and Management Course Syllabus

Course Faculty:

Fred Loper MD; PFflyers@linuxmail.org, fred@inmed.us, 405-664-7430

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview

Global health systems are under tremendous pressure worldwide. Pandemics, the brain drain of health professionals from resource-limited countries, and unprecedented financial constraints are just a few issues that drive the need for constant change. Leadership by professionals with skills in administration, communication, clinical care and public health are vital to a healthy future. This course will provide several frameworks for understanding and approaching change. It will introduce tools to use in implementing sustainable and evidence-based organizational change in resource-rich and resource-limited situations. Focused study will include reading, discussion, application exercises and professional reflective writing.

Competency Objectives:

At the completion of the INMED Healthcare Leadership & Management Course learners will be able to demonstrate using case-studies, active discussion, and reflective writing:

- Application of effective change principles to the movement of people and processes toward a new vision.
- Demonstrate understanding of the differences in global health work in resource-limited settings and the individual patient centered models of care used in many resource-rich locations.

- Acquisition of new partnership and collaboration skills necessary for bringing about lasting global health changes in resource-limited settings.

Timeframes:

This course includes 8 weeks of structured learning, and assignments due each Sunday night. Each week includes a required virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly required virtual class may last up to 60 minutes.

Academic Credit:

Completion of this course requirements earns three credit hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals. Healthcare Leadership & Management is appropriate for all professionals seeking to increase value by reducing healthcare costs, improving quality, and both professional and patient experiences.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings

- Critical analysis
- Scheduled small group discussions
- Essay composition / Reflective writing
- Applied skills simulation

Mentored Discussion

- Course participants will schedule once-weekly discussion up to 60 minutes with course faculty to discuss assigned chapters, articles, forum discussions and questions.
- Simultaneous cohorts may be scheduled in advance by course faculty.

Textbooks Required:

- Chip Heath & Dan Heath. Switch: How to change things when change is hard. Broadway Book. New York. 2010.
- Kirk Scirto. Doing Global Health Work: Approaches that Really Make a Difference. Hesperian Health Guides, Oakland, CA. 2022. When ordering from Hesperian Health Guides, use coupon "INMED15" for a 15% discount. The book is also available as an e-book through Amazon Kindle.

Both these books may be purchased at Amazon.com. Doing Global Health Work can also be purchased a Hesperian Health Guides.

Articles Provided:

1. Stouten, J., Rousseau, D. M., & De Cremer, D. (2018). Successful organizational change: Integrating the management practice and scholarly literatures. Academy of Management Annals, 12(2), 752-788. doi:10.5465/annals.2016.0095
2. Does migration 'pay off' for foreign-born migrant health workers? An exploratory analysis using the global WageIndicator dataset, Human Resources for Health, 2016. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4920982/
3. Pfeffer, Jeffrey, and John F. Veiga. "Putting People First for Organizational Success." The Academy of Management Executive (1993-2005), vol. 13, no. 2, 1999, pp. 37–48. JSTOR, www.jstor.org/stable/4165538. Accessed 25 Nov. 2020.
4. Barsade, Sigal G., and Donald E. Gibson. "Why Does Affect Matter in Organizations?" Academy of Management Perspectives, vol. 21, no. 1, 2007, pp. 36–59. JSTOR, www.jstor.org/stable/4166286. Accessed 25 Nov. 2020.

5. Kerr, Steven. "On the Folly of Rewarding A, While Hoping for B." The Academy of Management Executive (1993-2005), vol. 9, no. 1, 1995, pp. 7–14. JSTOR, www.jstor.org/stable/4165235. Accessed 24 Nov. 2020.
6. Eyal N, Cancedda C, Kyamanywa P, Hurst SA. Non-physician Clinicians in Sub-Saharan Africa and the Evolving Role of Physicians. Int J Health Policy Manag. 2015 Dec 30;5(3):149-53. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4770920/
7. Mills, Anne. "Health Care Systems in Low- and Middle-Income Countries." The New England journal of medicine 370.6 (2014): 552–557. Web.
8. Papanicolas, Jha. "Challenges in International Comparison of Health Care Systems." JAMA: the journal of the American Medical Association 318.6 (2017): 515–516.

Weekly Assignments:

Required weekly virtual class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Healthcare Leadership & Management Week 1:

- Partnering to Meet Needs
- Global Health Approaches
- Health Care Systems and Training

Assignments to be completed by 11:55 pm, on Sunday:

- Read Switch Chapter 1 & 2
- Watch https://youtu.be/qmmwWxVzSsw (Optional)
- This video provides a summary of Switch: How to change things when change is hard (Broadway Book. New York. 2010) by Chip Heath & Dan Heath.
- Watch https://youtu.be/q_cp8nebs_A [Start: 5:15. End: 7:30] (Optional)
- This video provides a summary of Direct the Rider principles in Switch: How to change things when change is hard (Broadway Book. New York. 2010) by Chip Heath & Dan Heath.
- Read Doing Global Health Work, pages 1 – 18 (Partnering to Meet Needs, Global Health Approaches), and Part 1 (Health Care, Systems, and Training).
- Complete the Book Discussion Board assignments
- Question 1: What problem are you currently facing that appears to be a people problem but may actually be related to the situation they (or you) are in?

- Question 2: How can our medical education lead us astray, in fact, sometimes do harm, when attempting to do community health work in the United States or abroad?
- Read the assigned article
- Stouten, J., Rousseau, D. M., & De Cremer, D. (2018). Successful organizational change: Integrating the management practice and scholarly literatures. Academy of Management Annals, 12(2), 752-788. doi:10.5465/annals.2016.0095 (NOTE: Focus on Pages 22 (773) – 27 (778).
- Complete the Article Discussion Board assignments
- Question 1: Describe a current problem you are facing and discuss two of the ten key evidence-based principles in the context of a change to your situation.

Healthcare Leadership & Management Week 2:

- Reversing the Brain Drain
- Improving Suitcase Medicine

Assignments to be completed by 11:55 pm, on Sunday:

- Read Switch Chapters 3 & 4
- Read Doing Global Health Work, pages 19 – 27 and 171 - 186 (Reversing the Brain Drain and Appendix A: Improving Suitcase Medicine).
- Complete the Book Discussion Board assignments
- Question 1: When was the last time you were overwhelmed with too many options? How did you make the decision easier and overcome uncertainty?
- Question 2: Compare/ contrast the healthcare skills and abilities that you bring to a short term medical mission project in an underserved area to those of a local health worker.
- Read the assigned article
- Article: Does migration 'pay off' for foreign-born migrant health workers? An exploratory analysis using the global WageIndicator dataset, Human Resources for Health, 2016. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4920982/
- Complete the Article Discussion Board assignments
- Question 1: Most health care workers (other than physicians) who migrate to another country to work report a lower level of life satisfaction. Why is this? Have you encountered this in the lives of fellow health care workers in the US? If so, please share about it.

Healthcare Leadership & Management Week 3:

- Training Health Workers

Assignments to be completed by 11:55 pm, on Sunday:

- Read Switch Chapters 5 & 6
- Watch https://youtu.be/q_cp8nebs_A [Start: 0:00. End: 5:15] (Optional)
- This video provides a summary of Motivate the Elephant principles in Switch: How to change things when change is hard (Broadway Book. New York. 2010) by Chip Heath & Dan Heath.
- Read Doing Global Health Work, pages 29 – 40 (Training Health Workers).
- Complete the Book Discussion Board assignments
- Question 1: What example can you provide of an early success story related to any ongoing change you are actively participating in?
- Question 2: Given your personal healthcare training and skills, describe an ideal scenario in which you would see patients together with a local health worker. This needs to be in a setting of limited resources. You may choose the location and skill/ training level of the local health worker. Please describe the patients, clinical setting, ways of interacting with patients and local health worker, etc.
- Read the assigned article
- Pfeffer, Jeffrey, and John F. Veiga. "Putting People First for Organizational Success." The Academy of Management Executive (1993-2005), vol. 13, no. 2, 1999, pp. 37–48. JSTOR, www.jstor.org/stable/4165538. Accessed 25 Nov. 2020. (NOTE: Focus on Pages 5 (40) – 9 (44).
- Complete the Article Discussion Board assignments
- Question 1: Select one of the seven practices of 'producing profit through people' and provide an example of its implementation and outcome in your own context.

Healthcare Leadership & Management Week 4:

- Disaster Strikes
- Outsiders Arrive

Assignments to be completed by 11:55 pm, on Sunday:

- Read Switch Chapters 7
- Read Doing Global Health Work, pages 53 – 66 (Disaster Strikes: Outsiders Arrive).
- Complete the Book Discussion Board assignments

- Question 1: How does your school or workplace intentionally encourage a sense of identity and individual development?
- Question 2: How, during an overwhelming disaster, can disaster relief agencies best balance the creation of new parallel health systems with empowerment of existing local health services?
- Read the assigned article
- Barsade, Sigal G., and Donald E. Gibson. "Why Does Affect Matter in Organizations?" Academy of Management Perspectives, vol. 21, no. 1, 2007, pp. 36–59. JSTOR, www.jstor.org/stable/4166286. Accessed 25 Nov. 2020.
- Complete the Article Discussion Board assignments
- Question 1: Describe two examples of deliberate strategies pursued by your school or employer to encourage a dispositional affect that contributes to the mission.
- Submit the Healthcare Leadership & Management Mid-Term Exam

Healthcare Leadership & Management Week 5:

- Power to the People
- Agendas We All Have,
- Social Justice and Public Health

Assignments to be completed by 11:55 pm, on Sunday:

- Read Switch Chapters 8 & 9
- Read Doing Global Health Work", pages 67 – 91 (Power to the People, Agendas We All Have, Social Justice and Public Health).
- Complete the Book Discussion Board assignments
  - Question 1: Define the "Fundamental Attribution Error" and provide one illustrative example from your experience.
  - Question 2: Muhammad Yunus, founder of Grameen Bank's microloan program, notes that "Charity only perpetuates poverty by taking the initiative away from the poor. Charity allows us to go ahead with our own lives without worrying about the lives of the poor. Charity appeases our consciences." Do you agree or not? Why?
- Read the assigned article
  - Kerr, Steven. "On the Folly of Rewarding A, While Hoping for B." The Academy of Management Executive (1993-2005), vol. 9, no. 1, 1995, pp. 7–14. JSTOR, www.jstor.org/stable/4165235. Accessed 24 Nov. 2020.
- Complete the Article Discussion Board assignments
  - Question 1: Provide one example from your professional or personal context of a reward system conflicting with expected outcomes. How might these be better aligned?

- Begin developing a draft for Effective Change Management Essay

Healthcare Leadership & Management Week 6:

- Exotic Diseases and Social Injustice
- Poverty and Empowerment

Assignments to be completed by 11:55 pm, on Sunday:

- Read Switch Chapters 10 & 11
- Read Doing Global Health Work, pages 93 – 114 (Exotic Diseases and Social Injustice and Poverty and Empowerment).
- Complete the Book Discussion Board assignments
- Question 1: Provide an example (from current events, home, school or work) of the promotion or 'contagiousness' of desirable behavior. (Positive Peer Perception/Pressure)
- Question 2: Outsiders have quite a legacy of abuse, fostering dependence, and maintaining the status quo in resource-limited countries" is a quote from this week's reading. Please give an example of a time that you personally have worked (as part of a healthcare project) in a way that counteracts this legacy.
- Read the assigned article
- Eyal N, Cancedda C, Kyamanywa P, Hurst SA. Non-physician Clinicians in Sub-Saharan Africa and the Evolving Role of Physicians. Int J Health Policy Manag. 2015 Dec 30;5(3):149-53. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4770920/
- Complete the Article Discussion Board assignments
- Question 1: How does the training of physicians in Sub-Saharan Africa need to change in response to the growing roles of non physician clinicians? Do these changes need to also occur in the US? Why or why not?
- Submit your draft for Effective Change Management Essay

Healthcare Leadership & Management Week 7:

- Global Health Is Public Health
- Building Clinics Or Confidence?
- Doing Global Health Work to Really Make a Difference

Assignments to be completed by 11:55 pm, Sunday:

- Read Doing Global Health Work, pages 115 – 128 and 187 - 196 (Global Health is Public Health and Appendix B: Building Clinics…… Or Confidence?), plus pages 163 - 170 (Conclusion: Doing Global Health Work to Really Make a Difference).

- Complete the Book Discussion Board assignments
  - Question 1: On a scale of 1 to 10 (where 1 is poor and 10 is superb), rate your professional education in relationship to the issues of clean water, sanitation, and hygiene. What is the most important new thing that you learned about these topics this week? Why?
  - Question 2: In resource-limited countries, why is it often more difficult to bring improvement to a struggling local hospital than to build a brand new Western style hospital/ health system just down the road?
  - Question 3: You (the leader) and your healthcare mission team have arrived in the limited resource community in which you will serve. You have been invited to give an introductory speech to the local people explaining the work you have been led to do alongside of them. Please share in two to four sentences what you will say.
- Read the assigned articles
  - Mills, Anne. "Health Care Systems in Low- and Middle-Income Countries." The New England journal of medicine 370.6 (2014): 552–557. Web.
  - Papanicolas, Jha. "Challenges in International Comparison of Health Care Systems." JAMA: the journal of the American Medical Association 318.6 (2017): 515–516.
- Complete the Article Discussion Board assignments
  - Question 1: Describe one response from a low or middle-income country (LMIC) which might be applied with effect in the USA and one response from the US Healthcare System which might be applied with effect in a LMIC.
  - Question 2: Why can't the US just import or export Healthcare Systems? Explain two limitations of direct comparisons.
- Submit your final Effective Change Management Essay for grading

Healthcare Leadership & Management Week 8: Final Exam

Final Exam

The Healthcare Leadership & Management Final Exam/Essay Presentations will take place in an online setting. All course learners will login at the specified time. Over a period of 120 minutes, all individual learners must present their essay subject: "Which principles of effective change management may be applied to a specific problem I am facing?". Each presentation will last no longer than 10 minutes and consist of 10 slides or less. This will allow each learner to have adequate time for their presentation. Classmates will respond by offering analysis and suggestions. Grading will be according to the following rubric. A minimum score of ≥80% is required.

Presentation Grading Rubric

- Content – 40%
  - Rationales are logically organized
  - Includes recommendations and call to action
  - References are listed
- Presentation – 20%
  - Presenter is organized
  - Confident and knowledgeable of content
  - Speaks clearly and concisely
- Visual – 20%
  - PPT and/or other visuals are organized, formatting is clean and not busy
  - Graphs are viewable
  - Images are appropriate
- Participation – 20%
  - Learner asks thoughtful questions of the other presenters
  - Learner makes recommendations to the other presenters

Essay

Compose and submit an essay on the subject: *"Which principles of effective change management may be applied to a specific problem I am facing?*

You may choose a leadership/ management challenge that you have encountered, are facing currently, or plan to tackle in the future. Past challenges include those which might have had an improved outcome if your newly learned principles had been applied.

Successful essays will incorporate at least two frameworks and two perspectives regarding changes under consideration.

Here is a link to a document that describes ten of the common frameworks for change.
https://www.ashp.org/-/media/assets/practice-management/docs/Ten-Key-Frameworks-for-Effective-Change-Management.pdf

There are others which you can discover in your readings and research. Feel free to use the ones which resonate best for your essay.

Additionally, here is a link that defines six perspectives on change in higher education organizations; but, they could also apply to any organization. You may use these or others which you find.
https://ascnhighered.org/ASCN/change_theories/collection/6perspectives.html

Questions to consider include:

- What is the context and diagnostic process used to identify the problem?
- What are the objectives and vision for change?
- Who is involved in the change and what are the stakeholder perspectives?
- How would change strategies be implemented?
- How would success be defined and measured?

You will receive feedback from the instructor. At the completion of Healthcare Leadership & Management Week 7, you will submit your final essay conforming to the following specifications:

- Approximately 2500 words
- At least 10 references
- References may be in any recognized style (AMA, APA, etc.), and the same style should be used throughout
- Footnotes are preferred over endnotes

Essay Grading Rubric

- Content – 60%
    - Background of the issue is reviewed
    - Rationales are logically organized
    - Alternate views are included
- Structure/organization – 20%
    - Strong introductory paragraph
    - Clear concluding statement
- References – 20%
    - Required minimum number are included
    - Organized in a recognized reference style

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course.

If dismissal occurs, the learner will be granted one opportunity to re-enroll in an upcoming course at no additional tuition payment.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, a journal article is assigned for learners to critically review, including questions posed on the subjects of each article. Articles are selected to represent a breath of relevant topics in contemporary healthcare management and leadership. Articles originally published more than 10 years ago are intentionally selected for their ground-breaking impact and contributions to the fields of Management and Leadership. Up-to-date articles are preferentially selected when relevant.

Discussion Board Participation: Learners are required to post at least one response to each of the questions posed, and respond to at least one fellow classmate's responses, stating with what they agree or disagree about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.
Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

Element	Weight
Weekly classroom participation	20%
7 satisfactory book discussion board posts	10%
7 satisfactory article discussion board posts	10%
HC Leadership & Mgtmt Mid-Term Exam	20%
Effective Change Management Essay ≥80%	20%
Evidence-Based Change Mgtmt Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in all weekly virtual classes
- Achievement of ≥80% on the Effective Change Management Essay and Evidence-Based Change Management Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Learners whose evaluation is acceptable will receive academic credit. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to repeat.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. “Day” refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Fred Loper, MD

Dr. Loper is a graduate of the University of Oklahoma School of Medicine. As a third-year medical student, he was part of the founding of Good Shepherd Ministries Medical Clinic-- a faith-based, not-for-profit clinic that serves the uninsured people of Oklahoma City to this day. After completing his residency at the University of Oklahoma, Dr. Loper served as a primary care physician at Central Oklahoma Medical Group (COMG). In 1986, he was appointed as the National Missionary for Medical Missions for a North American mission board, and in 2005, he became Executive Director of Baptist Medical Dental Fellowship, leading physicians, dentists and other health professionals in volunteer healthcare service in the US and abroad. In 2012, Dr. Loper returned to Good Shepherd Ministries Medical Clinic to serve as their full-time medical director and completed his active practice career as an Associate Physician at Community Health Centers of Oklahoma, a Federally Qualified Health Center.

International Health Professions Education Course Syllabus

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH:
nicholas@inmed.us, 816-520-6900

Susan Radecky, MD, MPA
oviatt4@comcast.net

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview

Progress in health requires skilled personnel who can apply the appropriate knowledge and resources on behalf of people in need. But intentional transfer of such skill from one healthcare professional to another is frequently inadequate and inefficient. The purpose of this Professional Certificate Course in International Health Professions Education course is to equip healthcare educators with concepts and methods of effective learning and teaching that will improve their ability to equip national healthcare professionals to carry forward progress in health.

Competency Objectives:

At the completion of the INMED International Health Professions Education Course learners will be able to demonstrate using case-studies, active discussion, and academic writing:

- Express the importance of skill transfer and empowerment.
- List modalities to enhance effective learning.
- List principles of effective teaching.
- Describe evaluation of learning outcomes.

- Practice the principles of instructional design

Timeframes:

This Professional Certificate Course includes 8 weeks of structured learning, and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly *required* virtual class may last up to 60 minutes.

Academic Credit:

Completion of this course requirements earns three credit hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals. International Health Professions Education is appropriate for all professionals seeking to improve patient care through high quality education of health professionals.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings
- Critical analysis
- Scheduled small group discussions

- Essay composition
- Applied skills simulation

Mentored Discussion

- Course participants will actively participate in scheduled once-weekly seminar up to 60 minutes with course faculty to discuss assigned chapters, articles, forum discussions and questions.

Textbooks Required:

DiPietro M, et al *How Learning Works; 7 Research-Based Principles for Smart Teaching, 1st Edition*. Jossey-Bass, San Francisco, CA. 2010

Kern, DE., *Curriculum Development for Medical Education, A Six-Step Approach*. 3rd Edition. Johns Hopkins University Press. Baltimore MD, 2016

These books are available on Amazon.com

Articles Provided:

1. Buja LM., Medical education today: all that glitters is not gold. BMC Medical Education (2019) 19:110. https://doi.org/10.1186/s12909-019-1535-9
2. Kolanko, KM et al. Academic Dishonesty, Bullying, Incivility, and Violence: Difficult Challenges Facing Nurse Educators. Nursing Education Perspectives. Vol 27 no.1 2005 PMID 16613130
3. Gaur, U., et al. Challenges and Opportunities of Preclinical Medical Education: COVID-19 Crisis and Beyond. SN Comprehensive Clinical Medicine (2020) 2:1992-1997. https://doi.org/10.1007/s42399-020-00528-1
4. Lock J., Rainsbury, J., CLancey, T., Rosenau, P., Ferreira, C., (2018) Influence of Co-teaching on Undergraduate Students Learning: A Mixed-Methods Study in Nursing. Teaching & Learning Inquiry, 6(1) https://doi.org/10.20343/teachlearninqu.6.1.5
5. Gao Y, Zhang P-P, Wen S-F, et al. Challenge, opportunity and development: Influencing factors and tendencies of curriculum innovation on undergraduate nursing education in the mainland of China. Chin Nurs Res. 2017;4:113e116. http://dx.doi.org/10.1016/j.cnre.2017.07.003
6. Ralph, Nicholas, et al. "Settling for less": Designing undergraduate nursing curricula in the context of national accreditation." *Collegian* 24.2 (2017): 117-124. http://dx.doi.org/10.1016/j.colegn.2015.09.008

7. Raholm, Maj-Britt, et al. "Nurse Education--Role Complexity and Challenges." *International Journal for Human Caring* 20.2 (2016).
8. Yates, Victoria, and Emma Lillie. "Challenges in healthcare delivery in developing nations." *Anaesthesia & Intensive Care Medicine* 20.9 (2019): 532-535. https://doi.org/10.1016/j.mpaic.2019.07.007

Weekly Assignments:

Required weekly virtual class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

International Health Professions Education Week 1: Activate Prior Knowledge,

- Students' prior knowledge can help or hinder learning.
- Prior knowledge helps learning when activated, sufficient, appropriate and accurate.
- Curriculum development is dynamic, interactive and never ends.

Assignments to be completed by 11:55 pm, on Sunday:

- Read How Learning Works Intro & Chapter 1
- Watch the video "Turning medical education inside out and upside down." https://www.youtube.com/watch?v=YpSd5u_di9w
- Read Curriculum Development Intro & Chapter 1
- Complete the Book Discussion Board assignments
  - Question 1: Provide an example of a time when you or your students completely failed to grasp or correctly apply the intended knowledge. Why didn't it connect?
  - Question 2: Which one of the 6 steps is most often neglected? What is the consequence?
- Read the assigned article
  - Article: Buja LM., Medical education today: all that glitters is not gold. BMC Medical Education (2019) 19:110.
- Complete the Article Discussion Board assignments
  - Question 1: Why is clinical expertise based on deep understanding of biomedical science and the pathologic basis of disease important?

International Health Professions Education Week 2: Organize new knowledge,

- How students organize knowledge influences how they learn and apply what they know.
- Expert learners have rich, meaningful knowledge structures that support performance.

- The difference between the current and ideal approach is part of the problem.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *How Learning Works* Chapter 2
- Read *Curriculum Development* Chapter 2
- Complete the Book Discussion Board assignments
  - Question 1: Provide one example of a recent class in which a learning activity was designed to create lots of associations with previous skills.
  - Question 2: What problem in your context could be addressed through more effective teaching & learning?
- Read the assigned article
  - Article: Kolanko, KM et al. Academic Dishonesty, Bullying, Incivility, and Violence: Difficult Challenges Facing Nurse Educators. Nursing Education Perspectives. Vol 27 no. 1 2005
- Complete the Article Discussion Board assignments
  - Question 1: Academic dishonesty appears to be on the rise. What is driving this trend and what are two proposed solutions?

International Health Professions Education Week 3: Value the goals & activities.

- Students' motivation generates, directs, and sustains what they do to learn.
- The difference between the current and ideal characteristics of the learner and their environment is part of the solution.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *How Learning Works* Chapter 3
- Read *Curriculum Development* Chapter 3
- Complete the Book Discussion Board assignments
  - Question 1: Which two strategies to build value and expectancy best serve to increase your or your students motivation to learn?
  - Question 2: What are the most effective methods of assessing learners at the *start* of a class or course?
- Read the assigned article
  - Gaur, U., et al. Challenges and Opportunities of Preclinical Medical Education: COVID-19 Crisis and Beyond. SN Comprehensive Clinical Medicine (2020) 2:1992-1997
- Complete the Article Discussion Board assignments

- Question 1: COVID-19 changed the face of global health professions education. How has your context changed their educational approach and which strategies do you think will outlive COVID-19?

International Health Professions Education Week 4: Break down the steps to mastery.

- To develop mastery, students must acquire component skills, practice integrating them, and know when to apply what they have learned.
- Goals are broad, objectives are specific and measurable.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *How Learning Works* Chapter 4
- Read *Curriculum Development* Chapter 4
- Complete the Book Discussion Board assignments
  - Question 1: Do experts always make the best teachers? Explain your rationale.
  - Question 2: Write three learning objectives using action verbs incorporating all five elements; who/will do/how much/of what/by when? Improve one objective of one other class participant.
- Read the assigned article
  - Lock J., Rainsbury, J., CLancey, T., Rosenau, P., Ferreira, C., (2018) Influence of Co-teaching on Undergraduate Students Learning: A Mixed-Methods Study in Nursing. Teaching & Learning Inquiry, 6(1)
- Complete the Article Discussion Board assignments
  - Question 1: Describe three of the current practices, benefits, and challenges for co-teaching in nursing education.
- Submit the International Health Professions Education Mid-Term Exam

International Health Professions Education Week 5: Deliberate practice is the heart of mastery,

- Goal-directed practice coupled with targeted feedback are critical to learning.
- Curricular content flows from specific measurable objectives.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *How Learning Works* Chapter 5
- Read Curriculum Development Chapter 5
- Complete the Book Discussion Board assignments
  - Question 1: What characterizes the most effective feedback you give and receive?

    - Question 2: Describe your favorite learning style. What are the most effective strategies for your learning and retention?
- Read the assigned article
    - Gao Y, Zhang P-P, Wen S-F, et al. Challenge, opportunity and development: Influencing factors and tendencies of curriculum innovation on undergraduate nursing education in the mainland of China. Chin Nurs Res. 2017;4:113e116.
- Complete the Article Discussion Board assignments
    - Question 1: According to this article, the Chinese current undergraduate nursing curriculum has a larger proportion of basic medical courses, which brings great challenges for nursing educators. What are some of your recommendations for the development, and innovation of healthcare professional educations?
- Submit draft curriculum development project; Step 1 *Problem Identification* & Step 2 *Targeted Needs Assessment*.

International Health Professions Education Week 6: No-one's a blank slate,

- Students' current level of development interacts with the social, emotional, and intellectual climate of the course to impact learning.
- Are the required resources available?

Assignments to be completed by 11:55 pm, on Sunday:

- Read *How Learning Works* Chapter 6
- Read *Curriculum Development* Chapter 6
- Complete the Book Discussion Board assignments
    - Question 1: Provide one story from your own past or context where the learning environment helped or hindered learning?
    - Question 2: Provide one example of less than successful implementation due to lack of sufficient support or resources.
- Read the assigned article
    - Ralph, Nicholas, et al. "Settling for less": Designing undergraduate nursing curricula in the context of national accreditation." *Collegian* 24.2 (2017): 117-124.
- Complete the Article Discussion Board assignments
    - Question 1: In Australia, designing a nursing curriculum in the context of national accreditation might mean "settling for less". What is the potential impact of accreditation requirements on curriculum design in your own contexts of teaching and care?
- Submit draft curriculum development project; Step 3 *Goals & Objectives* & Step 4 *Educational Strategies*.

International Health Professions Education Week 7: Lifelong learners teach themselves,

- To become self-directed learners, students must learn to assess the demands of the task, evaluate their own knowledge sand skills, plan their approach, monitor their progress, and adjust their strategies as needed.
- Evaluation compares with a standard of acceptability.

Assignments to be completed by 11:55 pm, Sunday:

- Read *How Learning Works* Chapter 7 & Conclusion
- Read Curriculum Development Chapter 7
- Complete the Book Discussion Board assignments
  - Question 1: Describe one strength and one weakness of your own approach to studying for *this* course. How could you improve both?
  - Question 2: Describe the difference between evaluation and feedback and provide one example of each from the same scenario.
- Read the assigned article
  - Raholm, Maj-Britt, et al. "Nurse Education--Role Complexity and Challenges." *International Journal for Human Caring* 20.2 (2016).
- Complete the Article Discussion Board assignments
  - Question 1: Describe your ideal role as a healthcare educator? In your opinion, what competencies are central for the profession in the future?
- Submit draft curriculum development project; Step 5 *Implementation* & Step 6 *Evaluation & Feedback*.

International Health Professions Education Week 8: All things improve or perish,

- Static curricula decline and die. Successful curricula continually develop.
- Sustainable curricula are relevant and vibrant.

Assignments to be completed by 11:55 pm, Sunday:

- Read Curriculum Development Chapter 8 & 9
- Complete the Book Discussion Board assignments
  - Question 1: What is meant by the "hidden curriculum" and how does this effect the learning environment?
  - Question 2: Describe the most effective strategies for faculty development in your context.
- Read the assigned article
  - Yates, Victoria, and Emma Lillie. "Challenges in healthcare delivery in developing nations." *Anaesthesia & Intensive Care Medicine* 20.9 (2019): 532-535.

- Complete the Article Discussion Board assignments
  - Question 1: Based on this article and your own personal and professional healthcare experiences, please identify, summarize and address challenges to the delivery of healthcare, education, and training, and implementation of change in developing countries.
- Complete and Submit final curriculum development project.
- Complete and Submit Presentation Slides for curriculum development project. (Due on scheduled final exam/presentation date).

Curriculum Development Project

Individual learners will complete a new proposal in curriculum development incorporating all 6 steps described in the text *Curriculum Development for Medical Education*. Sub-section drafts will be submitted as assigned for feedback from the instructors, conforming to the following specifications.

- Organized by and incorporating *all 6 steps* described in the text *Curriculum Development for Medical Education.*
- Questions to consider include those at the end of each chapter and the following:
  - Step 1: What is the problem this curriculum is designed to address?
  - Step 2: What are the identified needs of targeted learners?
  - Step 3: What are the goals, outcomes and competency-based objectives for the curriculum?
  - Step 4: What educational strategies and activities will best facilitate learning?
  - Step 5: What implementation barriers exist, and assets are available?
  - Step 6: How will you know learning has occurred and the curriculum improved?
- Approximately 2500 words
- 5 - 10 references listed as footnotes in any recognized and consistent style (AMA, APA, etc.).
- Draft submissions *must* be submitted for feedback according to the following schedule:
  - Steps 1 & 2; End of Week 5
  - Steps 3 & 4; End of Week 6
  - Steps 5 & 6; End of Week 7
- Final submissions *must* be submitted for feedback by end of Week 8
- Learners will prepare peer presentations including no more than 8 slides and in no more than 8 minutes will present all components of their curriculum development proposal. Learners will receive feedback from their peers for no more than 5 minutes on opportunities to enhance their proposal.

Project Grading Rubric

- Content – 60%
  - Background of the issue is reviewed
  - Rationales are logically organized
  - Alternate views are included
- Structure/organization – 20%
  - Strong introductory paragraph
  - Clear concluding statement
- References – 20%
  - Required minimum number are included
  - Organized in a recognized reference style

Project Presentation

Each course participant with make their International Health Professions Education Project Presentation over a period of 10 minutes, followed by five minutes for questions and feedback from peers. Each presentation should include up to 10 PowerPoint slides. Score on the final project presentation will be tabulated based upon the following grading rubric. A minimum score of ≥80% is required.

Project Presentation Grading Rubric

- Content – 40%
  - Rationales are logically organized
  - Includes recommendations and call to action
  - References are listed
- Presentation – 20%
  - Presenter is organized
  - Confident and knowledgeable of content
  - Speaks clearly and concise
- Visual – 20%
  - PPT is organized, formatting is clean and not busy
  - Graphs are viewable
  - Images are appropriate
- Participation – 20%
  - Learner asks thoughtful questions of the other presenters
  - Learner makes recommendations to the other presenters

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, a journal article is assigned for learners to critically review, including questions posed on the subjects of each article. Articles are selected to represent a breath of relevant topics in contemporary International Health Professions Education. Articles originally published more than 10 years ago are intentionally selected for their ground-breaking impact and contributions to the fields of teaching and learning. Up-to-date articles are preferentially selected when relevant.

Discussion Board Participation: Learners are required to post at least one response to each of the questions posed, and respond to at least one fellow classmate's responses, stating with what they agree or disagree about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

Assessment of the learner's performance will be based upon:

- Demonstration of the competency objectives using case-studies and simulation
- Completion of ALL Chapter Discussion Board assignments
    - Non-completion of >2 weeks Chapter Discussion Board will require remediation for passing grade.
- Completion of ALL Article Discussion Board assignments
    - Non-completion of >2 weeks Article Discussion Board will require remediation for passing grade.
- Attendance and active participation in weekly faculty seminars.
    - Attendance is required at 4/7 scheduled seminars.

- Absence of >3 seminars, without excused absence from course faculty, will require remediation for passing grade.

Course Grade Determination:

Element	Weight
Weekly didactic participation	15%
Book discussion board posts	20%
Article discussion board posts	20%
Health Professions Education Mid-Term Exam ≥80%	10%
Health Professions Education Project Paper ≥80%	20%
Health Professions Education Project Presentation ≥80%	15%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the Mid-Term Exam, Project Paper, and Project Presentation
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Grade Definitions

Following are definitions used for the assignment of grades.

A: Mastery of course objectives is at the highest level of expected achievement.

B: Adequate performance in attaining the course objectives has been achievement.

C: An inadequate level of course objective attainment has been achievement.

D: Only marginal inadequate performance towards the course objectives have been achieved.

F: Grossly inadequate performance has been demonstrated.

IN: Incomplete status. This is a temporary grade indicating that the learner has been given and the opportunity to submit outstanding requirements. IN automatically converts to F at the end of eight weeks following the close of a term.

W: Withdrawal from a course without credit.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
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30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. “Day” refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH
Institute for International Medicine

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor, Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

Susan Radecky MD, MPA

Dr. Radecky is a Family Physician with a passion for teaching and serving internationally. She graduated from Northwestern University Medical School and the Grand Rapids Family Medicine Residency training program affiliated with Michigan State University College of Human Medicine. She was Director of that program from 1987 until 2006, leading the faculty and guiding young professionals on their journey to Family Medicine. She is an accomplished speaker with involvement with the American College of Physician Executives, the Society of Teachers of Family Medicine, and national Board Review courses. Serving in short term medical missions has been part of her work throughout her career. She and her Hematologist husband, David have served in many hospitals in Asia and Africa for blocks of time at mission hospitals, learning, encouraging and supporting their ministries.

International Healthcare Ethics Course Syllabus

Course Faculty:

Scott Armistead, MD, DIMPH: sarmistead123@gmail.com

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview

Healthcare as a profession has inherent underlying and often inadequately examined ethical assumptions and principles from which ethical decisions are made. In the US, nearly all health-care professionals are taught at least the four basic principles of autonomy, beneficence, non-maleficence, and justice. In diverse international contexts and among some populations within the US, these principles are sometimes not assumed or are seen differently. In this course learners will first focus on Western ethical principles and then broaden the perspective by critiquing these Euro-American ethical perspectives by looking at bioethics from the perspective of other cultural approaches - voices from within the US and internationally. An anthropological approach will be introduced. Questions surrounding a universal morality, moral status and obligation, individualism and communalism, globalism vs "statism", etc. will be explored. Course graduates will gain an understanding of the breadth of cultural complexity from which ethical decision-making occurs in an international context. In the final essay, there will be the opportunity to take a particular case from an international context and apply the principles learned.

Competency Objectives:

At the completion of the INMED Professional Certificate Course in International Healthcare Ethics, learners will be able to demonstrate using

case-studies and simulation:

- Western principles of ethics related to healthcare
- Complexities of healthcare ethics in the non-Western international cultural context
- Analytical skills to understand and speak into ethical issues across cultures

Timeframes:

This Professional Certificate Course includes 9 weeks of structured learning and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, required answering of weekly reflection questions on the readings, a final essay, and final exam/presentation related to the essay. This weekly *required* virtual class may last up to 60 minutes.

Academic Credit:

Completion of this course requirements earns three credit hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals. International Healthcare Ethics is especially appropriate for healthcare professionals, public health specialists, public leaders and policymakers.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings
- Critical analysis
- Group discussions
- Essay composition and group presentation

Textbook Required:

Principles of Biomedical Ethics, by Beauchamp and Childress, 7th edition (Note that an 8th edition is available but is prohibitively expensive.

Available on amazon.com

Weekly Assignments:

Required weekly virtual class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

International Healthcare Ethics Week 1: Ethics and morality: Do universal norms exist?

Beauchamp and Childress's (B&C) foundational textbook, now in its 8th edition, presents four foundational principles of bioethics which are nearly universally taught in educational institutions in the US: respect for autonomy, nonmaleficence, beneficence and justice. This categorization of primary ethical obligations came to be called "principlism". Beauchamp and Childress based their principles on what they think to be a common or universal morality. Others, considering the possibility of an agreed-upon universal morality as the basis for bioethics, have concluded that in the post-modern world of moral pluralism, there is no basis for a common morality. Indian philosopher and social reformer Vishal Mangalwadi, for instance, in critiquing the US Declaration of Independence (which refers to a universal understanding of equality as "self-evident"), points out that there is nothing self-evidential about the equality of men. He writes " 'We hold these truths to be self-evident, that all men are created equal…' But human equality has never been self-evident. Virtually every society throughout history kept slaves and made women inferior to men. Inequality is self-evident. My ancestors were not dumb, but for them, inequality was obvious. They explained it with the ideas of karma and reincarnation, and they institutionalized it in caste and sex discrimination. Souls are born unequal-into different castes and sexes-because of their good or bad karma in

previous lives." Englehardt, similarly, finds B&C's assumptions of a common morality to be foundationless in the morally pluralistic secular West. Englehardt's thoughts are presented in the second reading. Another writer, African-American bioethicist Cheryl Sanders, similarly finds B@C's assumptions to be out of synch with her own culture's ethos.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Principles of Biomedical Ethics*, Chapter 1, Ethics and Morality
- Read the assigned article: Bioethics Critically Reconsidered: Living after foundations, H. Tristan Engelhardt Jr., Theoretical Medicine and Bioethics (2012) 33:97-105.
- Read the assigned article: European-American Ethos and Principlism: An African-American Challenge; Cheryl J. Sanders in On Moral Medicine pp. 76-81
- Complete the Discussion Board questions

Discussion Board Questions: choose three of the following to answer.

- Do you agree with Beauchamp and Childress that there is a common, universal morality upon which contemporary bioethics can be built? Why or why not?
- What do you think of Englehardt's critique of Beauchamp and Childress's position and of his argument that morality itself is deflated in a morally pluralistic world and that morality and bioethics degenerate into biopolitics?
- Is the de-emphasis on virtues in our contemporary culture, which Beauchamp and Childress lament, a result of what Engelhardt calls the groundlessness of contemporary morality?
- African-American ethicist Cheryl Sanders offers her critique of B&C's principlism from an African-American perspective, noting significant cultural values more characteristic of African-Americans which she contrasts with dominant European-American ones that prevail in B&Cs book. Comment on these values and how they might inform a view of "common morality"?

International Healthcare Ethics Week 2: Moral status within the relationship: To whom is one obliged and who has rights?

In 1889, Freidrich Nietzsche wrote in a moral code for physicians: "The invalid is a parasite on society. In a certain state it is indecent to go on living. To vegetate on in cowardly dependence on physicians and medicaments after the meaning of life, the right to life, has been lost ought to entail the profound contempt of society. Physicians ought to be the communicators of this contempt, . . . to create a new responsibility . . . in all cases in which the

highest interest of life, of ascending life, demands the most ruthless suppression and sequestration of degenerating life – for example, in determining the right to reproduce, the right to be born, the right to live."
Source: *Twilight of the Idols, or, How to Philosophize with a Hammer* (German: Götzen-Dämmerung, oder, Wie man mit dem Hammer philosophiert) is a book by Friedrich Nietzsche, written in 1888, and published in 1889.
Nietzsche posits a view of the "invalid" as "parasite" whose persistence should produce "contempt" by both physician and society. For him, the "invalid" has no moral status. The questions of "who has moral status?", "who counts?", and "to whom do we have moral obligations?" are of paramount importance in medicine.
Assignments to be completed by 11:55 pm, on Sunday:

- Read *Principles of Biomedical Ethics*, Chapters 3 and 8 (excluding pp 331-340 (7th ed) on "research ethics", Moral status in the professional-patient relationship.
- Read the assigned article: Facing Covid-19 in Italy – Ethics, Logistics, and Therapeutics on the Epidemic's Front Line at https://www.nejm.org/doi/full/10.1056/NEJMp2005492
- Complete the Discussion Board questions

Discussion Board Questions: Choose *two* of the following to answer:

- In chapter 5, Beauchamp and Childress (B&C) present five theories of moral status, with a critique of each. Critique each theory on your own. In your thinking, which theory/theories has/have the greatest coherence?
- Do you agree or disagree with B&C's inclination against using the language of "person", "personhood" and "respect for persons" in bioethical discussion (pp 67-68, 7th ed)? Is it a term we should discard and with what could it be replaced?
- In light of Englehart's critique of moral pluralism, do you think moral status is undermined by moral pluralism?
- In B&Cs chapter on the Professional-Patient Relationship, they note that, in the case of epidemics, care for the sick has often been considered praiseworthy and virtuous, but not obligatory? (p 325, 7th ed). Do you consider this to be so? In light of the NEJM article, is the embrace of some degree of risk in caring for the sick inherent to the practice of being in a healing profession?

International Healthcare Ethics Week 3: What is the place of autonomy among the principles? What about the professional's autonomy? How might autonomy be viewed differently in less individualistic cultures?

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Principles of Biomedical Ethics*, Chapter 4 on Autonomy, pp 101-115 (excluding 116-141, 7th ed).
- Read the assigned article: Patient and Physician Autonomy: Conflicting Rights and Obligations in the Physician-Patient Relationship in The Philosophy of Medicine Reborn – Edmund D. Pellegrino. pp 204-227.
- Read the assigned editorial: "Are We Still Professionals?", Scott Armistead in RAMifications (Richmond Academy of Medicine), Winter, 2022: vol 29, #1, p4.
- Review week 1 reading: European-American Ethos and Principlism: An African-American Challenge; Cheryl J. Sanders in On Moral Medicine pp. 76-81
- Complete the Discussion Board questions

Discussion Board Questions:

- Edmund Pellegrino points out that historically, until the 1950s, beneficence was the first among the principles in ethical medical practice. In the 1960s, it came to be seen as paternalistic and autonomy came to be first, eclipsing all other moral principles. Though B&C respond to other's criticism of the idea of autonomy as first among the four principles in bioethics (p99 and 143), what do you think of the place of autonomy in the actual practice of medicine in the US? For those who have worked internationally, how weighty has autonomy played a role in your experience?
- B@C speak predominantly of patient autonomy in their chapter. Pellegrino writes of the doctor/patient relationship, indeed any ethical relationship, as having two autonomies flowing bilaterally between the parties. Pellegrino also writes of the necessity of a healthy interplay of beneficence and autonomy in the doctor/patient relationship. What do you think of Pellegrino's critique of his perceived imbalance in modern medicine and his reassertion of the prioritization of beneficence?
- How might Sanders perceive the place of autonomy in an African-American context vs a Euro-American one?

International Healthcare Ethics Week 4: Nonmaleficence/Anthropological approach and an inquiry into the telos of medicine

If one was asked "what is the purpose of medicine?", what would your response be? Kass presents a focused approach which centers on the right functioning (health) of the human organism. B&C (and the WHO, as Kass points out) see it more broadly. The anthropological approach is similarly an attempt to see bioethics in a more broad way than B@C's principlism, taking

into account vast cultural differences such as those seen among the Maasai in East Africa.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Principles of Biomedical Ethics:* Chapter 5, Nonmaleficence (may exclude 186-193)
- Read the assigned article: Regarding the End of Medicine and the Pursuit of Health. Leon Kass in The Public Interest, Summer, 1975. pp 11-33 (NOTE- *may stop at page 33*).
- Read the assigned article: The Anthropological Approach Challenges the Traditional Approach to Ethical Dilemmas: A Kenyan Maasai Perspective. Thikra Sharif, John Bugo in African Health Sciences, Vol 15, Issue 2, June 2015 Complete the Discussion Board questions.
- Submit the International Healthcare Ethics Mid-Term Exam.

Discussion Board Questions:

- In the chapter on Nonmaleficence, *Principles of Biomedical Ethics* presents a view of the goals of medicine as broader than the maintenance of health and the restoration to health, which Kass posits as the telos of medicine. B&C call this an "unduly narrow way of thinking about what the physician has to offer the patient" (p.185, in 7th edition). Instead, they find physician-assisted death as consistent with the principles of autonomy and beneficence. How might Kass's more traditional telos and B&C's more contemporary one be perceived in a developing world context such as Kenya, among the Maasai?
- The Kenyan authors of the article assigned find the principlism of B&C's classic text inadequate for a full understanding of ethical decision-making in their context. What is the anthropological approach? Is it relevant for any context or just for "special" ones, such as working among tribal people such as the Maasai?

International Healthcare Ethics Week 5: Beneficence – the pivot of the principles?

For most of the history of Western medicine, beneficence was considered the pivot on which medical ethics operated with nonmaleficence subsumed under the banner of beneficence. Since the 1960s, some would argue that autonomy has taken precedence over beneficence.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Principles of Biomedical Ethics,* Chapter 6, Beneficence

- Read the assigned article: Moral Choice, the Good of the Patient, and the Patient's Good in The Philosophy of Medicine Reborn– Edmund D. Pellegrino, pp 163-186.
- Complete the Discussion Board questions
- Begin developing a draft for your International Healthcare Ethics Essay

Discussion Board Questions:

- *Principles of Biomedical Ethics,* Chapter 6, states that "principles of beneficence are not sufficiently broad or foundational, in our account, that they determine or justify all other principles" (p.203 in 7th edition and 218 in 8th edition). Do you agree or disagree? How might one's view of "the good" lead to differing conclusions about the prioritization of the principles?
- A middle-aged, wealthy, highly-educated female patient comes to you asking for a unilateral left mastectomy in order to improve her golf swing. The breast size is not excessive and there are otherwise no indications for this procedure. Using principles studies thus far (autonomy, nonmaleficence, beneficence), last week's discussion about the telos of medicine and Pellegrino's suggestions on making moral choices based on a four-fold understanding of the patient's good, how would you process this request ethically? Having processed the request, what would you say to this patient?

International Healthcare Ethics Week 6: What about Justice?

Justice is at the heart of the debates about allocation of health care resources. For some, justice is pivotal, ordering all other principles and virtues, as charity or autonomy might be the pivot for others. B&C identify one formal principle of justice: equality, four traditional theories of justice: utilitarian, libertarian, communitarian, egalitarian – and two recent theories: .capabilities and well-being.

Assignments to be completed by 11:55 pm, Sunday:

- Read *Principles of Biomedical Ethics*, Chapter 7, Justice
- Read the assigned article: Exploitation in the Global Medical Enterprise: Bioethics & Social Injustice, Michael J. Sleasman and Paige Comstock Cunningham, Oct 2012, The Center for Bioethics and Human Dignity, Trinity International University. https://cbhd.org/content/exploitation-global-medical-enterprise-bioethics-social-injustice
- Complete the Discussion Board questions

Discussion Board Questions:

- Our society has recently seen much angst over past and persisting injustices, manifesting as inequities and disparities in multiple arenas, including health care. Do you see this as evidence that justice is increasingly seen as the pivot on which all other principles turn? Do you think that in bioethics justice deserves this place, in the sense that it is rights-oriented, practical and prudential? Why or why not?
- Which among the theories identified by B&C do you think is most operative in our present health care system in the US? With which one do you resonate most and why?
- *Principles of Biomedical Ethics*, Chapter 7, writes of seeing theories of justice globally or seeing them as "statist" or only locally-applying (p 276 in 7th edition and p 297 in 8th edition). The disparities in the application of theories of justice at a global level are pointed out in the assigned article, which presents the realities of global reproductive tourism, reproductive trafficking, and human organ trafficking. What are some ways in which, in our increasingly globalized world, issues of more equitable application of justice can be ensured in the arenas discussed in the article? What principles need to be greater emphasized at a global level for this to happen?

International Healthcare Ethics Week 7: Moral Theories and Methods. How, in the final analysis, are ethical decisions made?

In chapter 9, B&C clarify and evaluate the four dominant theories presented in various forms earlier in the text: utilitarianism, Kantianism, rights theory and virtue ethics. They do not rank them in order of importance and recognize that some are best utilized when looking at specific types of moral considerations. Up until the mid-20th century, the cultivation of virtues within the physician as the dominant means of ensuring ethical behavior received the most attention. After the mid-20th century, medical ethics became quandary ethics, predominantly a problem-solving skill, capable of helping us make moral choices.
In their final chapter, B&C write about means of justifying moral conclusions. They present various models of how ethical decisions could be made: top-down models, bottom-up models, the reflective equilibrium model, and common morality theory. They return in their final chapter to their belief in a common morality and attempt to justify this morality's existence. They conclude that reflective equilibrium, informed by a common morality, is the path of choice for making ethical decisions.

Assignments to be completed by 11:55 pm, Sunday:

- Read *Principles of Biomedical Ethics,* Chapters 9 *Moral Theories* and 10 *Method and Justification* (with the exception of pp 416-424, 7th edition.)
- Read the assigned article: Respirators, our rights, and right and wrong: Medical ethics in an age of coronavirus, by Dr. Daniel Sulmasy. https://www.nydailynews.com/opinion/ny-oped-respirators-right-and-wrong-20200322-niu3aosa7ffzjfg7led3lymb7a-story.html
- Complete the Discussion Board questions.
- Submit your Draft International Healthcare Ethics essay for feedback.

Discussion Board Questions:

- How would you evaluate the place of the three quandary-focused theories – utilitarianism, Kantianism and rights theory juxtaposed to the place of virtue ethics in our present medical education system and health system?
- In Dr. Sulmasy's NY Daily News editorial refers to several of the ethical theories presented in B&Cs textbook. Sulmasy insists on some while rejecting others. Analyze his admonitions to the people and health-care workers of NYC during the epidemic found in his editorial.
- How might the B@C concept of reflective equilibrium function in an international medical context? What additional factors might need to be taken into consideration in making ethical judgments?

International Healthcare Ethics Week 8: Consolidation and essay preparation

Assignments to be completed by 11:55 pm, Sunday

- Submit your final International Healthcare Ethics essay for grading

Essay Composition:

Learners will compose an essay on the subject described below. Due dates for the draft submission (followed by feedback from the instructor) and final submission are posted above.

Scenario: You are practicing medicine as a general surgeon at a mission hospital in a village in northern Pakistan. Khalida is a 22-year-old female from a village north of you who presents to your outpatient clinic at the hospital. She is accompanied by her older sister who tells you that she is from a conservative Muslim family, unmarried, pregnant, close to term (@35 weeks by dates and US), having hid the pregnancy from her father, and in danger (along with the baby) of being a victim of an honor killing by her father if he finds out about the pregnancy. They have chosen your hospital because it is far from their village and there are "foreigners" who are somewhat removed from the culture. They know that secrecy is necessary. The sister explains

that she wants you to pretend that Khalida has an abdominopelvic tumor that needs to be surgically removed and to present this story to the parents when they come for the surgery. After the C-section, the sister explains that the baby is yours to find a home for.

You discuss this case with your colleagues who would be involved. The European Ob/Gyn, who has been serving at the hospital for many years, says she will not a do a C-section without a clear medical indication and, thus, refuses to do the procedure. You discuss the case with the Pakistani OR and Ward In-charge nurses, who are willing to falsify the chart, withhold the story from the patient's father, and care for the mother and baby without revealing the true story to any family members.

Questions regarding this scenario you might use for exploration in your essay are included below. You do not need to answer each question. Rather, the goal is for you to look at the ethical scenario from the range of principles and considerations presented in the course:

1. Using the four principles presented in B&C's Principles of Biomedical Ethics, discuss how each of these principles impacts your ethical decision-making process in this patient scenario.
a. Consider Pellegrino's observation of the two "autonomies" of the doctor/patient relationship and how this might play out in this situation.
b. In this scenario, which among the principles takes priority in your thinking. Why?
c. Comment on the interplay of beneficence and justice in this case, taking into account B&C's discussion of global justice vs local or "statist" justice.

2. What are the limits to the "Euro-American" principles presented in B&Cs text which apply to this scenario? How might Sander's African-American critique of B@C's Euro-American ethos speak into this ethical situation?

3. How might an anthropological approach contribute to the decision-making process?

4. Analyze the phenomenon of "honor killings" in light of our discussions about moral pluralism and the observation by T. Englehardt about the deflation of morality in a morally pluralistic world? Can one decisively condemn the idea of "honor killings" in a morally pluralistic world? How does this question relate to the issue of the existence of or lack of a universal common morality?

5. Analyze the response of the Ob/Gyn who refused to do the C-section? By what criteria is she making her decision and by what criteria might one critique her refusal? Was she under obligation to perform the C-section,

even though there was some risk (of an "unnecessary" procedure and perhaps of a dishonored, irate father, should he have discovered her complicity)?

6. Though not discussed in great detail in this course, the concept of the virtues of the health care professional play a significant role in this scenario. Do you think virtues get adequate attention in professional formation of US-trained workers?

7. How do you see the "reflective equilibrium" informed by a "common morality" approach used in the ethical decision-making of this case? What are the issues needing reflection and needing equilibrium?

Your completed essay must conform to the following specifications.

- Approximately 2500 words
- At least 10 references
- References may be in any recognized style (AMA, APA, etc.), and the same style should be used throughout style should be used throughout
- Footnotes are preferred over endnotes

Essay Grading Rubric

- Content – 60%
  - Background of the issue is reviewed
  - Rationales are logically organized
  - Alternate views are included
- Structure/organization – 20%
  - Strong introductory paragraph
  - Clear concluding statement
- References – 20%
  - Required minimum number are included
  - Organized in a recognized reference style

Final Exam:

The International Healthcare Ethics Final Exam/Essay Presentations will take place in an online setting. All course learners will login at the specified time. Over a period of 120 minutes, all individual learners must present their essay subject and receive feedback from their peers. Score on the final exam essay presentation will be tabulated according to the rubric below. A minimum score of ≥80% is required.

Presentation Grading Rubric:

- Content – 40%
    - Rationales are logically organized
    - Includes recommendations and call to action
    - References are listed
- Presentation – 20%
    - Presenter is organized
    - Confident and knowledgeable of content
    - Speaks clearly and concise
- Visual – 20%
    - PPT is organized, formatting is clean and not busy
    - Graphs are viewable
    - Images are appropriate
- Participation – 20%
    - Learner asks thoughtful questions of the other presenters
    - Learner makes recommendations to the other presenters

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, an article(s) is assigned for learners to critically review, including questions posed on the subjects of each article. Articles originally published more than 10 years ago may be intentionally selected for their ground-breaking impact and contributions to the field of healthcare ethics. Up-to-date articles are preferentially selected when relevant.

Discussion Board Participation: Learners are required to post at least one response to each of the questions posed, and respond to at least one fellow classmate's responses, stating with what they agree or disagree about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Weekly Virtual Class participation	20%
8 satisfactory discussion board posts	30%
International Healthcare Ethics Essay ≥80%	30%
International Healthcare Ethics Final Presentation ≥80%	20%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the International Healthcare Ethics Essay and International Healthcare Ethics Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Learners whose evaluation is acceptable will receive the *INMED Professional Certificate in International Healthcare Ethics*. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

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Course Faculty:

Scott Armistead, MD, DIMPH (INMED)
INMED Adjunct Professor
Garden of Eden Health Center, North Chesterfield, Virginia
Richmond Area Director, Christian Medical and Dental Associations (CMDA)

Dr. Armistead trained at the Medical College of Virginia and Truman East Family Medicine Residency in Kansas City, where he met Dr. Comninellis as a faculty member. Dr. Armistead and his family lived in Pakistan from 1999-2015, providing medical care at Bach Christian Hospital, with a 1 1/2 year stint at Oasis Hospital in the United Arab Emirates when the security situation in Pakistan worsened.

Since 2021, Dr. Armistead has worked in Richmond Virginia in private practice most recently starting a clinic for refugees as an extension of the practice. From 2015 to 2021, Dr. Armistead taught family medicine at the Virginia Commonwealth University (VCU). He works part-time as a CMDA staff worker at VCU. He leads a month-long International Medical Mission elective for senior medical students during which he takes a group annually to Karanda Mission Hospital in Zimbabwe. He completed VCU's TIME (Teaching in Medical Education) certificate course. He loves teaching and has received teaching awards in the Practice of Clinical Medicine program at

VCU and from the Society of Teachers of Family Medicine. He is very keen on the professional, moral, and spiritual formation of students. He is active with the Urdu-speaking S. Asian refugee and immigrant population in Richmond, Virginia. His wife, JoAnn, is an ESL teacher and they have three grown sons.

INMED International Refugee Care
Course Syllabus

Course Director:

Nicholas Comninellis MD, MPH, DIMPH. nicholas@inmed.us. 816-520-6900

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Today's world has more international refugees seeking relief and asylum than at any time since the end of WWII. Eighty-six percent of refugees are hosted in developing countries, severely straining existing social infrastructures. This course will introduce the principles of international refugee care, including the recognized phases: pre-emergency/mitigation phase, emergency phase, post-emergency/maintenance phase, and the resolution/repatriation phase. Throughout these phases, refugee care leaders must attend to complex issues over security, dependency, mental health, location of settlements, and host-refugee relationships.

Competency Objectives:

At the completion of the INMED International Refugee Care Course learners will be able to demonstrate using case-studies, active discussion, and simulation:

- Describe the scope of the worldwide refugee crisis
- Identify the basic issues involved in meeting the needs of refugees
- Design comprehensive refugee care interventions for specific populations
- Explain crisis resolution alternatives

Timeframes:

This Course includes 8 weeks of structured learning, and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly *required* virtual class may last up to 60 minutes.

Academic Credit:

Completion of this course requirements earns three hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals. International Refugee Care is especially appropriate for public health personnel, humanitarian relief leaders, policymakers, and those providing primary health care.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings
- Critical analysis
- Scheduled small group discussions
- Essay composition / Reflective writing
- Applied skills simulation

Textbooks Required:

The New Odyssey: The Story of the Twenty-First Century Refugee Crisis, by Patrick Kingsley (Liveright Publishing Corp, 2017).

Available on Amazon.com

Weekly Assignments:

Required weekly virtual class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

International Refugee Care Week 1: Global Refugee Crisis: Regional Destabilization & Humanitarian Protection

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the video *International Refugee Care*: https://vimeo.com/495503650
- Watch the video *World Refugee Day: Syria to Myanmar, 5 Largest Refugee Crises Outside of Europe* https://www.youtube.com/watch?v=a_ZMMUoDNFU
- Read the assigned article:
  Lischer, Sarah Kenyon. Global Refugee Crisis: Regional Destabilization & Humanitarian Protection. Daedalus, 2017
  https://www.amacad.org/publication/global-refugee-crisis-regional-destabilization-humanitarian-protection
- Complete the Article Discussion Board assignments
  Question 1: Describe the tension that often exists between the interests of host state security and refugee security.
  Question 2: Today's global refugee crisis is exacerbated by what other national and international weaknesses?
- Read *The New Odyssey,* Prologue & Chapter 1, *A Birthday Interrupted, Hashem's Flight From Syria*.
- Complete the Book Discussion Board assignments:
  Question 1: What are the major factors that forced Hashem to flee from Syria?
  Question 2: Describe the impact of Hashem's flight upon his immediate and extended family.

International Refugee Care Week 2: The End of the 1951 Refugee Convention? Dilemmas of Sovereignty, Territoriality, and Human Rights

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the videos *The UN Refugee Convention of 1951,* https://www.youtube.com/watch?v=i5fnRd2_gB4, and *James C. Hathaway on the 1951 Refugee Convention*, https://www.youtube.com/watch?v=p9dYwmnBphs
- Read the assigned articles:
  United Nations Convention and Protocol Relating to the Status of Refugees
  Benhabib, Seyla. The End of the 1951 Refugee Convention? Dilemmas of Sovereignty, Territoriality, and Human Rights. Jus Cogens 2, 75–100 (2020). https://doi.org/10.1007/s42439-020-00022-1
  https://link.springer.com/article/10.1007/s42439-020-00022-1
- Complete the Article Discussion Board assignments
  Question 1: Which, in your opinion, are the most important elements of the 1951 Refugee Convention?
  Question 2: What are the most powerful factors today that threaten application of the 1951 Refugee Convention?
- Read *The New Odyssey,* Chapter 2, *The Second Sea, The Desert Routes through the Sahara*.
- Complete the Book Discussion Board assignments:
  Question 1: Describe some of the dangers and uncertainties faced by migrants passing through North Africa.
  Question 2: What are the motivations that compel migrants to face the dangers of crossing the Mediterranean Sea?

International Refugee Care Week 3: The Syrian Refugee Crisis and Foreign Policy Decision-Making in Jordan, Lebanon, and Turkey, AND The Refugee Crisis in Europe: Shortening Distances, Containment and Asymmetry of Rights

Assignments to be completed by 11:55 pm, on Sunday:

- Watch these videos:
  - *Crisis in Syria: Refugees in Idlib camps face war, weather and Covid* https://www.youtube.com/watch?v=w7qiENo0d_0
  - *Migrant crisis: Is the EU ignoring human suffering?* https://www.youtube.com/watch?v=FZ8zvpchgD4
  - *Comparing Ukrainian refugee crisis with Syrian refugee crisis* https://www.youtube.com/watch?v=0S30JLr1Dn8
- Read the two assigned articles:
  Tsourapas, Gerasimos, The Syrian Refugee Crisis and Foreign Policy Decision-Making in Jordan, Lebanon, and Turkey, *Journal of Global Security Studies*, Volume 4, Issue 4, October 2019, Pages 464-481, https://doi.org/10.1093/jogss/ogz016
  https://academic.oup.com/jogss/article/4/4/464/5487959

Piguet, Etienne. The 'refugee crisis' in Europe: shortening distances, containment and asymmetry of rights—a tentative interpretation of the 2015–16 events, *Journal of Refugee Studies*, feaa015, https://doi.org/10.1093/jrs/feaa015. https://academic.oup.com/jrs/advance-article/doi/10.1093/jrs/feaa015/5835406

- Complete the Article Discussion Board assignments
  Question 1: Cite at least two examples of nations taking advantage of refugee crises to extract some national gain. What, in your opinion, would be a more just approach to managing refugee crisis without prioritizing national gain?
  Question 2: Describe at least one key factor that provoked the 2015 European refugee crisis. What is the impact of closing national borders upon refugee migration?
- Read *The New Odyssey,* Chapters 3, *Trading in Souls, Smuggling Networks on the North African Coast, AND* Chapters 4, *SOS, Hashem's Departure from Egypt and His Sea Voyage towards Italy.*
- Complete the Book Discussion Board assignments:
  Question 1: What factors motivate the trafficking and smuggling trade in North Africa?
  Question 2: Describe the role that Egypt's state bureaucracy played in molding Hashem's decision to take to sea.

International Refugee Care Week 4: Approaches to the Design of Refugee Camps

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the videos *Greece: Thousands Moved to New Refugee Camp*, https://www.youtube.com/watch?v=3FAVo75FEXw, and *How to Build a Better Refugee Camp,* *https://www.youtube.com/watch?v=wXgsFceYD8g*
- Read the assigned article:
  Jahre, M., Kembro, J., Adjahossou, A. and Altay, N. (2018), Approaches to the Design of Refugee Camps: An Empirical Study in Kenya, Ethiopia, Greece, and Turkey, Journal of Humanitarian Logistics and Supply Chain Management, Vol. 8 No. 3, pp. 323-345. https://doi.org/10.1108/JHLSCM-07-2017-0034 https://www.emerald.com/insight/content/doi/10.1108/JHLSCM-07-2017-0034/full/pdf?title=approaches-to-the-design-of-refugee-camps-an-empirical-study-in-kenya-ethiopia-greece-and-turkey
- Complete the Article Discussion Board assignments
  Question 1: What are the major factors to be considered in the design of a refugee settlement?

Question 2: Compare the advantages and disadvantages of urban versus rural refugee encampments.

- Read *The New Odyssey,* Chapters 5, *Shipwreck, How People Drown at Sea and How They Are Saved.*
- Complete the Book Discussion Board assignments:
  Question 1: Was the Italian Navy just or unjust in terminating its marine rescue Operation Mare Nostrum? Explain your opinion.
  Question 2: What advantages in disadvantages do non-government organizations, such as Médecins Sans Frontiéres (MSF), have compared with governments in marine rescue operations?
- Submit the International Refugee Care Mid-Term Exam

International Refugee Care Week 5: Migrant and Refugee Populations: A Public *Health and Policy Perspective on a Continuing Global Crisis, AND The Health Impacts of the Refugee Crisis*

Assignments to be completed by 11:55 pm, on Sunday:

- Watch the video *Inside Syrian Refugees' Battle To Get Healthcare*, https://www.youtube.com/watch?v=jn3ZNM2AcGI,
- Watch the video *How MSF Builds its Field Hospitals*, https://www.youtube.com/watch?v=JxF_kCZNY_g
- Read the assigned two articles:
  Abbas M, Aloudat T, Bartolomei J, et al. Migrant and Refugee Populations: a Public Health and Policy Perspective on a Continuing Global Crisis. Antimicrob Resist Infect Control. 2018;7:113. Published 2018 Sep 20. doi:10.1186/s13756-018-0403-4.
  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6146746/
  Blundell H, Milligan R, Norris SL, et al. WHO Guidance for Refugees in Camps: Systematic Review. BMJ Open 2019;9:e027094. doi:10.1136/bmjopen-2018-027094
  https://bmjopen.bmj.com/content/bmjopen/9/9/e027094.full.pdf
- Complete the Article Discussion Board assignments
  Question 1: What are the major health conditions to which refugees are especially likely to suffer?
  Question 2: Describe the interventions that refugee managers and host governments often must take to assure refugee health.
- Read *The New Odyssey,* Chapter 6, *Promised Land? Hashem's First Steps in Europe, AND* Chapter 7 *Between the Woods and the Water, The Beginnings of the Balkan Route.*
- Complete the Book Discussion Board assignments:
  Question 1: What are some of the challenges facing migrants like Hashem in Europe? In your opinion, what accommodation (if any) should European nations offer to migrants like Hashem?

Question 2: The Greece receives many migrants in addition to Syrians: Afghans, Sudanese, Somali, Bangladeshi, Moroccans and Senegalese. Why is this the case? Greek law forbids unauthorized bystanders from aiding refugees. In your opinion, is this warranted or unjust, and why?
- Begin developing a draft for the International Refugee Care Essay

International Refugee Care Week 6: Refugee Mental Health and Child Health

Assignments to be completed by 11:55 pm, Sunday:

- Watch the videos *How We Can Bring Mental Health Support to Refugees*, https://www.youtube.com/watch?v=0g0S34XE2b8, and *Refugee Life: Through a Child's Eyes*, https://www.youtube.com/watch?v=tkkVnQEB1mE
- Read the assigned two articles:
  Silove D, Ventevogel P, Rees S. The Contemporary Refugee Crisis: an Overview of Mental Health Challenges. World Psychiatry. 2017;16(2):130-139. doi:10.1002/wps.20438
  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5428192/
  Lawrence, J.A.; Dodds, A.E.; Kaplan, I.; Tucci, M.M. The Rights of Refugee Children and the UN Convention on the Rights of the Child. Laws 2019, 8, 20.
  https://www.mdpi.com/2075-471X/8/3/20
- Complete the Article Discussion Board assignments
  Question 1: Which acute, short-term mental health interventions are generally most appropriate for refugee populations?
  Question 2: In what ways are refugee children's basic human rights most often violated?
- Read *The New Odyssey,* Chapters 8, *To Sweden? Hashem's Last Push Towards Scandinavia*
- Complete the Book Discussion Board assignments:
  Question 1: What are the mental stressors that have burdened Hashem during his travel through Europe?
  Question 2: What is the current state of Hashem's mental health?
- Submit International Refugee Care Draft Essay

International Refugee Care Week 7: Primary Care for Refugees: Challenges and Opportunities AND Resolution & Repatriation

Assignments to be completed by 11:55 pm, Sunday:

- Watch the videos *Refugee Clinical Health Project: Improving Immigrant Health*, https://www.youtube.com/watch?v=07qO9zb25S8, and *High-Quality Health Care Services for Resettled Refugees: A Sustainable Model*, https://www.youtube.com/watch?v=AZi8re3mbmg

- Watch the videos *Rohingya Refugees Refuse Repatriation to Myanmar*, https://www.youtube.com/watch?v=uzclbHMZvGk, and *Somali refugees in Kenya: Repatriation to be entirely voluntary,* https://www.youtube.com/watch?v=SRwl-x_ht4o
- Read the assigned three articles:
  Mishori R, Aleinikoff S, Davis D. Primary Care for Refugees: Challenges and Opportunities. Am Fam Physician. 2017 Jul 15;96(2):112-120. PMID: 28762707.
  https://pubmed.ncbi.nlm.nih.gov/28762707/
  Walden J, Valdman O, Mishori R, Carlough M. Building Capacity to Care for Refugees. Fam Pract Manag. 2017 Jul/Aug;24(4):21-27. PMID: 28812857.
  https://www.aafp.org/fpm/2017/0700/p21.html
  Crisp J, Long K. Safe and Voluntary Refugee Repatriation: From Principle to Practice. JMHS Volume 4 Number 3 (2016): 141-147.
  https://journals.sagepub.com/doi/pdf/10.1177/2331502416004003 05
- Complete the Article Discussion Board assignments
  Question 1: Newly resettled refugees in a host nation frequently require what special healthcare services?
  Question 2: Enumerate some of the ways that healthcare providers can incorporate refugee care into their practice.
  Question 3: In your opinion, which principle is most important in guiding refugee repatriation?
  Question 4: When repatriation is not possible, what are potential alternatives?
- Read *The New Odyssey,* Chapter 9, *A Gate Clangs Shut, The Explosion of the Balkan Route, Europe's Mortal Crisis, and the Closure of the Hungarian Border, AND* Chapter 10, *Status Pending, Hashem's Anxious Wait for Asylum.*
- Complete the Book Discussion Board assignments:
  Question 1: In what ways does the European refugee crisis challenge the future of the European Union?
  Question 2: What factors may cause a major refugee migration route to rapidly open or close?
  Question 3: The Swedish government provided Hashem with a living stipend while his asylum application was in process. In your opinion, was such a stipend justified?
  Question 4: If Hashem was not granted refugee status in Sweden, what might have become of him?
- Submit International Refugee Care Final Essay

International Refugee Care Week 8: Final Exam

Final Exam

The International Refugee Care Final Exam will take place in an online setting, with course learners logging in at the specified time. Learners will each give a 10-minute presentation, including PowerPoint slides, summarizing their essay composition on the subject *How shall my nation (or other unit) better respond to refugee needs?* Classmates will respond by offering analysis and suggestions. Grading will be according to the following rubric. A minimum score of ≥80% is required.

Final Exam Presentation Grading Rubric

- Content – 40%
    - Rationales are logically organized
    - Includes recommendations and call to action
    - References are listed
- Presentation – 20%
    - Presenter is organized
    - Confident and knowledgeable of content
    - Speaks clearly and concise
- Visual – 20%
    - PPT is organized, formatting is clean and not busy
    - Graphs are viewable
    - Images are appropriate
- Participation – 20%
    - Learner asks thoughtful questions of the other presenters
    - Learner makes recommendations to the other presenters

Essay

Learners will compose an essay on the subject *How shall my nation (or other unit) better respond to refugee needs?* Focus the essay on a particular refugee population and develop that subject. The draft essay submission (followed by feedback from the instructor) is due at the end of Week 6 and final essay submission is due at the end of Week 7. A suggested outline for the essay is:

Introduction
- Define the needs of a refugee population
- Describe your nation's current policy and involvement

Main body
- Recommend interventions to increase your nation's response to the needs of this refugee population.
- Discuss the resources required, potential obstacles, and potential benefits of these interventions.

Conclusion(s)

- Present a plan necessary to implement your recommended interventions.
- Include a strategy for building support for this plan among relevant authorities.

The completed the essay conforming to the following specifications.

- Approximately 2500 words
- At least 10 references
- References used throughout using any one recognized style (AMA, APA, etc.)
- Footnotes are preferred over endnotes

Essay Grading Rubric

- Content – 60%
  - Background of the issue is reviewed
  - Rationales are logically organized
  - Alternate views are included
- Structure/organization – 20%
  - Strong introductory paragraph
  - Clear concluding statement
- References – 20%
  - Required minimum number are included
  - Organized in a recognized reference style

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, a journal article is assigned for learners to critically review, including questions posed on the subjects of each article. Articles are selected to represent a breath of relevant topics in contemporary healthcare administration, management and leadership.

Articles originally published more than 10 years ago are intentionally selected for their ground-breaking impact and contributions to the fields of Management and Leadership. Up-to-date articles are preferentially selected when relevant.

Discussion Board Participation: Learners are required to post at least one response to each of the questions posed, and respond to at least one fellow classmate's responses, stating with what they agree or disagree about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Weekly classroom participation	20%
7 satisfactory book discussion board posts	10%
7 satisfactory article discussion board posts	10%
International Refugee Care Mid-Term Exam	20%
International Refugee Care Essay ≥80%	20%
International Refugee Care Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the International Refugee Care Essay and International Refugee Care Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00
C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Learners whose evaluation is acceptable will receive academic credit.. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor, Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

Self-Care for Healthcare Professionals Course Syllabus

Course Faculty:

Micah Flint, MPA, RN, DINPH: micah@thehealthlounge.org, 816-506-1777

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

This course gives learners the tools and skills needed to integrate self-care and healthy lifestyle skills into practice. Health professionals are susceptible for neglecting their own care for the service of others. This leads to unhealthy habits, physical and emotional neglect, compassion fatigue, and ultimately will have a direct affect on the personal and professional life of the health professional. This course aims at promoting the well-being of health professionals through education and behavior change that promotes a healthy lifestyle.

Competency Objectives:

At the completion of the INMED Self-Care for the Healthcare Professional Course learners will be able to:

- Complete a personal health status analysis.
- Analyze your personal health assessments.
- Develop a personal health and self-care plan that addresses nutrition, stress reduction, sleep hygiene, community and activity.
- Implement behavior change models into your personal health and self-care plan.

Timeframes:

This Course includes 8 weeks of structured learning, and assignments due each Sunday night. Each week includes a *required* virtual class with the faculty for discussions, simulations, case studies and final exams. This weekly *required* virtual class may last up to 60 minutes.

Academic Credit:

Completion of this course requirements earns three credit hours of academic credit.

Enrollment Qualifications:

This course is open to all healthcare professionals and healthcare profession students, as well as non-healthcare professionals.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Assigned book and article readings
- Critical analysis
- Group discussions
- Data collection and assessment
- Applied skills simulation

Textbook Required:

Stick with It. A Scientifically Proven Process for Changing Your Life – For Good, by Sean D. Young, PhD (HarperCollins, 2017)

Available on amazon.com

Supplemental Textbooks (optional reading for those interested):

The Science of Sleep. What it is, how it works, and why it matters, by Wallace B. Mendelson (University of Chicago Press, 2017)

Available on amazon.com

Weekly Assignments:

Weekly required class with course faculty for up to 60 minutes to discuss assigned lessons, chapters, articles, forum discussions and questions.

Self-Care Week 1: Lifestyle Health Overview

- Healthy lifestyle isn't all about knowledge
- Your health and your career
- Are you healthy?

Assignments to be completed by 11:55 pm, on Sunday:

- Read:
  - Lifestyle Medicine: A Brief Review of Its Dramatic Impact on Health and Survival
  - Caring for oneself to care for others: physicians and their self-care. J Support Oncol. 2013 June; 11(2): 75-81
  - Chronic Disease Prevalence and Healthy Lifestyle Behaviors Among U.S. Health Care Professionals
- Complete the Article Discussion Board assignments
- Complete and submit the Health Lifestyle Assessment: https://form.jotform.com/INMEDCME/healthy-lifestyle-survey

Self-Care Week 2: Lasting Health Change

- Forces behind lasting change.
- Change models: steps, goals and dreams.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Stick With It*, Chapters 1 and 2
- Complete the Book Discussion Board assignments

- Read the assigned article
- Complete the Article Discussion Board assignments

Self-Care Week 3: Nutrition. Not a diet program

- What are you eating?
- Fads, trends and diets.
- Evidence-based nutrition for health.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Stick With It*, Chapter 3
- Complete Book Discussion Board assignments
- Read the assigned article
- Complete the Article Discussion Board assignments
- Complete and submit the Nutrition Diary https://form.jotform.com/INMEDCME/nutrition-diary

Self-Care Week 4: Fitness is the Goal

- Read Sedentary is killing us.
- Health and healing through movement.
- Act is in activity.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Stick With It*, Chapter 4
- Complete Book Discussion Board assignments
- Read the assigned article
- Complete the Article Discussion Board assignments
- Submit the Mid-Term Exam

Self-Care Week 5: Sleep is Medicine

- Healthcare and sleep.
- Don't wake the sleeping killer.
- Falling a sleep and staying a sleep.

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Stick With It*, Chapter 5
- Complete Book Discussion Board assignments
- Read the assigned article
- Complete the Article Discussion Board assignments

- Complete and submit the Sleep Assessment: https://form.jotform.com/INMEDCME/modified-pittsburgh-sleep-quality-i

Self-Care Week 6: Stress Management, Burnout and Fatigue

- The physiology of stressing.
- It's all connected.
- Create a self-care plan

Assignments to be completed by 11:55 pm, on Sunday:

- Read *Stick With It*, Chapter 6
- Complete the Book Discussion Board assignments
- Read the assigned article
- Complete the Article Discussion Board assignments
- https://www.aafp.org/fpm/2000/0400/p39.html?printable=fpm
- Submit your draft for *Lifestyle Health: Overcoming Challenges and Situational Stressers* to receive instructor feedback.

Self-Care Week 7: A Health Community

- Friends with health benefits.
- Frienship, community and service.
- Our relational need.

Assignments to be completed by 11:55 pm, Sunday:

- Read *Stick With It*, Chapters 7 and 8
- Complete the Book Discussion Board assignments
- Read the assigned article
- Complete the Article Discussion Board assignments
- https://www.mayoclinic.org/healthy-lifestyle/adult-health/in-depth/friendships/art-20044860#:~:text=Friends%20also%20play%20a%20significant,body%20mass%20index%20(BMI).
- Watch: https://www.youtube.com/watch?v=RcGyVTAoXEU
- Submit final essay on the subject Assessing Personal Health Lifestyle and Implementing Change

Self-Care Week 8: A, B, C's Model of Behavior Change

- Understand the A, B, C's Model of Behavior Change.
- Implement two-step process change.

Assignments to be completed by 11:55 pm, Sunday:

- Read *Stick With It*, Chapter 9
- Complete the A, B, Cs two-step process for change

Essay Composition

Learners will submit a written draft for their essay on the subject *Lifestyle Health: Overcoming Challenges and Situational Stressers*. After receiving feedback from the instructor, learners will proceed to complete the essay conforming to the following specifications.

- Organized according to the outline submitted in advance
- Approximately 2500 words
- At least 10 references
- References may be in any recognized style (AMA, APA, etc.), and the same style should be used throughout
- Footnotes are preferred over endnotes

Essay Grading Rubric

- Content – 60%
  - Background of the issue is reviewed
  - Rationales are logically organized
  - Alternate views are included
- Structure/organization – 20%
  - Strong introductory paragraph
  - Clear concluding statement
- References – 20%
  - Required minimum number are included
  - Organized in a recognized reference style

Final Exam:

The Self-Care Final Exam will take place in an online setting. All course learners will login at the specified hour. Over a period of 90 minutes, learners will provide a 15 minute ppt presentation that includes results of all course personal health assessments, identify at least three (3) areas of needed change, and an A, B, C two-step process for each identified area of change. The exam will require application of all concepts addressed throughout this course. Scores on the will be tabulated based upon participation, leadership, and judgement. A minimum score of 80 percent is required.

Presentation Grading Rubric

- Content – 40%
  - Rationales are logically organized
  - Includes recommendations and call to action
  - References are listed
- Presentation – 20%
  - Presenter is organized
  - Confident and knowledgeable of content
  - Speaks clearly and concise
- Visual – 20%
  - PPT is organized, formatting is clean and not busy
  - Graphs are viewable
  - Images are appropriate
- Participation – 20%
  - Learner asks thoughtful questions of the other presenters
  - Learner makes recommendations to the other presenters

Explanation of Assignments:

Due Dates: All assignments are due on Sunday at 11:55 pm of the week they are assigned.

Participation: Learners are required to fully participate in the course content, including readings, discussions, and essay.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time. Any learner who becomes more than two weeks behind in submitting any assignment is subject to dismissal from the course. If dismissal occurs, the learner will be granted one opportunity to re-enroll in an upcoming course at no additional tuition payment.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Assigned Articles: Each week, a journal article is assigned for learners to critically review, including questions posed on the subjects of each article.

Discussion Board Participation: Learners are required to post at least one response to each of the questions posed, and respond to at least one fellow classmate's responses, stating with what they agree or disagree about the response and why. A post that simply agrees with something someone else said without further explanation is not satisfactory and will be counted as if there were no post.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Evaluation Methods:

Assessment of the learner's performance will be based upon:

- Demonstration of the competency objectives using case-studies and simulation
- Completion of all Chapter Discussion Board assignments
- Completion of all Article Discussion Board assignments
- Achievement of ≥80% on the Lifestyle Health Essay
- Achievement of ≥80% on the Self-Care Final Exam
- Complete evaluation and credit claims forms at the course conclusion.

Learners whose evaluation is acceptable will receive academic credit. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to repeat.

Requirements for Successful Completion & Course Grade Determination:

Element	*Weight*
Weekly classroom participation	20%
8 satisfactory book discussion board posts	10%
8 satisfactory article discussion board posts	10%
Self-Care Mid-Term Exam	20%
Lifestyle Health Essay ≥80%	20%
Self-Care Final Exam ≥80%	20%

In addition, course completion also requires:

- Participation in a*ll* weekly virtual classes
- Achievement of ≥80% on the Lifestyle Health Essay and Self-Care Final Exam
- Cumulative course score ≥80%
- Complete course evaluation and credit claims forms at the course conclusion.

Course grades will be assigned according to the INMED Course Grading System:

A	90–100 %	4.00
B	80–89 %	3.00

C	70–79 %	2.00
D	60–69 %	1.00
F	0–59 %	0.00

Learners whose evaluation is acceptable will receive academic credit for the INMED Self-Care for the Healthcare Professional Course. Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

100% refund: 1st day – 3rd day*
75% refund: 4th day to the day before the course starts
50% refund: 1st week of course
30% refund: 2nd week of course
20% refund: 3rd week of course
10% refund: 4th week of course
No refund: following 4th week of course
* Day one = date enrollment agreement is signed or date on course registration receipt. “Day” refers to a business day and excludes weekends and holidays.

INMED reserves the right to cancel individual sessions or the entire course. In the event of a course cancellation, a full tuition refund will be made.

Course Director:

Micah C Flint, MPA, RN, DINPH

Micah completed his MPA in healthcare leadership and disaster management at Park University. He holds a nursing degree and bachelor's degrees in science and liberal arts. He received his INMED Diploma in International Nursing & Public Health in 2008. Currently, Micah is the Chief Innovation Officer, where he oversees the development of new INMED programs. He is an active member of the American College of Lifestyle Medicine and his clinical focus is in lifestyle health and sports medicine.

Micah has provided presentations at local and national conferences on topics ranging from Disaster Response, Cross-Cultural Skills, Health Leadership, and Simulation. He is the author of the Disaster Response: Pocketbook for Volunteers and the Disaster Management in Limited Resource Settings, 2nd Edition.

INMED Professional Qualification Course in Essential Care for Every Baby and Essential Care for Small Babies Syllabus

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH: nicholas@inmed.us, 816-520-6900

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Overview:

Every baby requires warmth, hygiene, umbilical cord care, eye care, early and exclusive breastfeeding, and proven-effective medications and immunizations. But many babies around the world go without. The INMED Professional Qualification Course in Essential Care for Every Baby and Small Babies (ECEB-ECSB Master Trainer Course) is an evidence-based educational program to prepare learners to teach basic baby care techniques in low-resource locations to benefit midwives, mid-level providers, and community health workers. ECEB-ECSB can also be effectively combined with other elements of the Helping Babies Survive series, such as Helping Babies Breathe (HBB). ECEB-ECSB is an initiative of the American Academy of Pediatrics (AAP) in collaboration with the Laerdal Global Health and Save the Children.

The INMED Professional Qualification Course in Essential Care for Every Baby and Small Babies is a hybrid experience that combines online preparation followed by a one-day, in-classroom event to master hands-on skills and assess achievements. Academic credit earned is 1 credit hour. Sample the INMED learning experience with this 15-minute Free Demo Online Course.

Participants will receive access to the INMED Maternal-Newborn Health Online Course, one day of supervised hands-on ultrasound skill development, and upon satisfactory participation and skill demonstration, the INMED Professional Qualification in Helping Babies Breathe. Please note that accommodations and meals are not included.

Competency Objectives:

At the completion of the INMED Professional Qualification Course in Helping Babies Breathe learners will be able to:

- Provide essential care needed by every newborn
- Identify danger signs in newborns who require special care
- Provide feeding for small babies
- Educate parents in home care
- Transfer baby healthcare skills to other providers

Timeframes:

This Professional Qualification Course is a hybrid experience that combines an online learning experience followed by a one-day, in-classroom event to master hands-on skills and assess achievements.

Academic Credit:

Completion of this course requirements earns one credit hour of academic credit.

Admission Requirements:

- Enrolled in a current health science degree program, including public health and health administration (or)
- Current healthcare professional, educator or administrator

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Interactive online learning techniques
- Interactive live presentations
- Skill stations for increasing technical proficiency
- Teaching opportunities to enhance skills transfer

Assigned Maternal-Newborn Health Lessons:

Assignments to be completed prior to the in-person classroom event: Participate in the Maternal-Newborn Health content, Lessons 1-8, and complete the Pre-Test and Post-Test for this content.

Learning Content:

Lesson 1	Surviving Motherhood
Lesson 2	Pre and Post Natal Care
Lesson 3	Pregnancy Complications
Lesson 4	Pressing Women's Disability Issues
Lesson 5	Newborn Care Overview
Lesson 6	Healthy Newborn
Lesson 7	Newborn Problems and Management
Lesson 8	Maternal Newborn Future Vision

In-Person Classroom Event:

1:00pm	Preparation for a Birth
1:30	Routine Newborn Care
2:30	Identification of Danger Signs
3:00	Feeding and Special Care for Small Babies
4:00	Educating Parents in Home Care
4:30	Transfer Baby Healthcare Skills to Other Providers
5:00	Conclusion

*In-Person Classroom Event schedule is subject to change

Grading:

This course is graded pass/fail. Successful pass requires:

- Maternal-Newborn Health Post-Test ≥80%
- Satisfactory demonstration of all required skills
- Complete course evaluation and credit claims forms at the course conclusion.

Final Exam:

Learners will each demonstrate their skills throughout the day under supervision of the faculty, who will evaluate learners using a standardized skills checkoff list. Learners must demonstrate satisfactory attainment of all required skills.

Explanation of Assignments:

Participation: Learners are required to fully participate in the course content, including interactive content, pre-test, post-test, and in-person classroom hands-on activities.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Learners whose evaluation is acceptable will receive the *INMED Professional Qualification in Essential Care for Every Baby and Small Babies.* Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to repeat.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH
Institute for International Medicine

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are Shanghai Doctor, Where Do I Go from Here, and INMED International Medicine & Public Health. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

INMED Professional Qualification Course in Hands-On Skills for Low-Resource Healthcare Syllabus

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH: nicholas@inmed.us, 816-520-6900

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

The INMED Professional Qualification Course in Hands-On Skills for Low-Resource Healthcare is designed to provide learners a review of most commonly needed clinical skills in settings with a shortage of specialists. Included are hands-on sessions covering wound care and suturing, extremity trauma and immobilization, complicated obstetrics, newborn resuscitation, tropical fever evaluation, and community health survey techniques.

Participants will receive access to the Hands-On Skills for Low-Resource Healthcare Course, one day of supervised hands-on skill development, and upon satisfactory participation and skill demonstration, the INMED Professional Qualification in Hands-On Skills for Low-Resource Healthcare. Please note that accommodations and meals are not included.

Competency Objectives:

At the completion of the INMED Professional Qualification Course in Hands-On Skills for Low-Resource Healthcare learners will be able to demonstrate:

- Wound evaluation and urgent management including repair

- Extremity trauma evaluation and management including immobilization
- Tropical fever evaluation and management
- Management of common obstetrics complications
- Newborn resuscitation techniques
- Community health survey techniques

Timeframes:

This Professional Qualification Course is a hybrid experience that combines an online learning experience followed by a one-day, in-classroom event to master hands-on skills and assess achievements.

Academic Credit:

Completion of this course requirements earns one credit hour of academic credit.

Admission Requirements:

Enrollment is open to all healthcare professionals and healthcare profession learners, including physicians, midwives, advanced practice nurses, and physician assistants.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Interactive online learning techniques
- Interactive live presentations
- Skill stations for increasing technical proficiency
- Teaching opportunities to enhance skills transfer

Assigned Online Lessons:

To be completed prior to the in-person classroom event are the Hands-On Skills for Low-Resource Healthcare Pre-Test, Lessons 1-6, and the Post-Test.

Learning Content:

Lesson 1	Wound Assessment and Suturing Technique
Lesson 2	Extremity Trauma Evaluation and Management
Lesson 3	Tropical Fever Evaluation and Management
Lesson 4	Management of Common Obstetrics Complications
Lesson 5	Newborn Resuscitation
Lesson 6	Community Health Assessment

In-Person Classroom Workshop:

8:00am	Wound evaluation and urgent management including repair
9:30	Extremity trauma evaluation, management, and immobilization
11:00	Tropical fever evaluation and management
12:00	Lunch/Poverty Meal (provided)
1:00	Management of common obstetrics complications
2:30	Newborn resuscitation
4:00	Community health survey
5:00	Conclusion
	*Schedule is subject to change

Final Exam:

Learners will each demonstrate their skills throughout the day under supervision of the faculty, who will evaluate learners using a standardized skills checkoff list. Learners must demonstrate satisfactory attainment of all required skills.

Explanation of Assignments:

Participation: Learners are required to fully participate in the course content, including interactive content, pre-test, post-test, and in-person classroom hands-on activities.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Learners whose evaluation is acceptable will receive the *INMED Professional Qualification in Hands-On Skills for Low-Resource Healthcare.* Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to repeat.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

This course is graded pass/fail. Successful pass requires:

- Hands-On Skills for Low-Resource Healthcare Post-Test ≥80%
- Satisfactory demonstration of all required skills
- Complete course evaluation and credit claims forms at the course conclusion.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

You may choose to defer a course enrollment to a future course date. If you do not defer to a future course date, you may withdraw from currently enrolled courses at any time and receive the following refund rates:

100% refund 1st day – 3rd day*
No refund If any course materials have been accessed.
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are Shanghai Doctor, Where Do I Go from Here, and INMED International Medicine & Public Health. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

INMED Professional Qualification Course in Helping Babies Breathe (HBB) / Essential Newborn Care 1 Syllabus

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH: nicholas@inmed.us, 816-520-6900
Rebecca Schmitt, MD, rebeccaschmitt427@gmail.com

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Some one million newborns die each year from the inability to breathe at birth. The INMED Professional Qualification Course in Helping Babies Breathe (HBB Master Trainer Course, 2nd Edition) is an evidence-based educational program to prepare learners to teach basic neonatal resuscitation techniques in low-resource locations to benefit midwives, mid-level providers, and traditional birth attendants. In such settings, HBB also can be effectively combined with other teaching, such as management of maternal delivery and early neonatal care. Helping Babies Breathe (HBB) is an initiative of the American Academy of Pediatrics (AAP) in collaboration with the World Health Organization (WHO), US Agency for International Development (USAID), Saving Newborn Lives, and the National Institute of Child Health and Development.

Participants will receive access to the INMED Maternal-Newborn Health Short Self-Paced Course, one day of supervised hands-on skill development, and upon satisfactory participation and skill demonstration, the INMED Professional Qualification in Helping Babies Breathe. Please note that accommodations and meals are not included.

Competency Objectives:

At the completion of the INMED Professional Qualification Course in Helping Babies Breathe learners will be able to:

- Identify delivery risks for mothers and newborns
- Mitigate delivery risks for mothers and newborns
- Provide for the healthcare needs of newborns at delivery, include ventilatory support when appropriate
- Transfer newborn healthcare skills to other providers

Timeframes:

This Professional Qualification Course is a hybrid experience that combines an online learning experience followed by a one-day, in-classroom event to master hands-on skills and assess achievements.

Academic Credit:

Completion of this course requirements earns one credit hour of academic credit.

Admission Requirements:

- Enrolled in a current health science degree program, including public health and health administration (or)
- Current healthcare professional, educator or administrator

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Interactive online learning techniques
- Interactive live presentations
- Skill stations for increasing technical proficiency
- Teaching opportunities to enhance skills transfer

Assigned Maternal-Newborn Health Lessons:

Assignments to be completed prior to the in-person classroom workshop: Participate in the Maternal-Newborn Health Short Self-Paced Course content, Lessons 1-8, and complete the Pre-Test and Post-Test for this content.

Learning Content:

Lesson 1	Surviving Motherhood
Lesson 2	Pre And Post Natal Care
Lesson 3	Pregnancy Complications
Lesson 4	Pressing Women's Disability Issues
Lesson 5	Newborn Care Overview
Lesson 6	Healthy Newborn
Lesson 7	Newborn Problems and Management
Lesson 8	Maternal Newborn Future Vision

In-Person Classroom Workshop:

8:00am	Introduction to Helping Babies Breathe
9:00	Dialogue – Causes of Neonatal Death; Intro to HBB Program
9:30	Ventilation with Bag and Mask
10:00	Preparation for a Birth
11:00	Routine Care (learning with the neonatal simulator)
12:00	Lunch
1:00pm	The Golden Minute® (clear airway and stimulate breathing)
1:30	The Golden Minute (ventilation)
2:30	Continued Ventilation with Normal and Slow Heart Rate
3:00	Participant Evaluations – Mastering the Action Plan
4:00	Evaluation of Learner Knowledge and Performance
4:30	Implementation of HBB in resource limited setting
5:00	Conclusion

*Schedule is subject to change

Final Exam:

Learners will each demonstrate their skills throughout the day under supervision of the HBB faculty, who will evaluate learners using a standardized skills checkoff list. Learners must demonstrate satisfactory attainment of all required skills.

Explanation of Assignments:

Participation: Learners are required to fully participate in the course content, including interactive content, pre-test, post-test, and in-person classroom hands-on activities.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Learners whose evaluation is acceptable will receive the *INMED Professional Qualification in Helping Babies Breathe.* Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to repeat.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

This course is graded pass/fail. Successful pass requires:

- Maternal-Newborn Health Post-Test ≥80%
- Satisfactory demonstration of all required skills
- Complete course evaluation and credit claims forms at the course conclusion.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

You may choose to defer a course enrollment to a future course date. If you do not defer to a future course date, you may withdraw from currently enrolled courses at any time and receive the following refund rates:

100% refund 1st day – 3rd day*
No refund If any course materials have been accessed.
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are Shanghai Doctor, Where Do I Go from Here, and INMED International Medicine & Public Health. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

Rebecca Schmitt, MD

Dr. Rebecca Schmitt is a board-certified general pediatrician practicing at Froedtert Holy Family Memorial in Manitowoc, WI. She completed her pediatric residency at New York-Presbyterian Brooklyn Methodist. She was born and raised in Green Bay, WI and excited to have returned to the area to serve her pediatric patients. She has always had a special interest in global health and medicine, both educating and serving those around the world in most need. Her biggest global health passions are newborn care and clean water projects. She has taught Helping Babies Breathe with INMED both domestically and internationally, serving the people of Roatan, Honduras.

INMED Professional Qualification Course in Helping Mothers Survive (HMS) Syllabus

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH:
nicholas@inmed.us, 816-520-6900

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

The Helping Mothers Survive (HMS) Master Trainer Course is designed to improve the results of pregnancy and delivery by equipping healthcare professionals and learners the most essential, evidence-based skills in pre-natal and obstetric care. HMS skills are especially applicable for low-resource and cross-cultural healthcare settings. HMS is an educational experience created by Jhpiego.

Participants will receive access to the INMED Maternal-Newborn Health Short Self-Paced Course, one day of supervised hands-on skill development, and upon satisfactory participation and skill demonstration, the INMED Professional Qualification in Helping Mothers Survive. Please note that accommodations and meals are not included.

Competency Objectives:

At the completion of the INMED Professional Qualification Course in Helping Mothers Survive learners will be able to demonstrate:

- Proficiency in essential care for labor and birth

- Management of bleeding after birth
- Management of pre-eclampsia and eclampsia
- Management of threatened preterm birth
- Management of prolonged labor

Timeframes:

This Professional Qualification Course is a hybrid experience that combines an online learning experience followed by a one-day, in-classroom workshop to master hands-on skills and assess achievements.

Academic Credit:

Completion of this course requirements earns one credit hour of academic credit.

Admission Requirements:

- Enrolled in a current health science degree program, including public health and health administration (or)
- Current healthcare professional, educator or administrator

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Interactive online learning techniques
- Interactive live presentations

- Skill stations for increasing technical proficiency
- Teaching opportunities to enhance skills transfer

Assigned Maternal-Newborn Health Lessons:

Assignments to be completed prior to the in-person classroom workshop: Participate in the Maternal-Newborn Health Short Self-Paced Course content, Lessons 1-8, and complete the Pre-Test and Post-Test for this content.

Learning Content:

Lesson 1	Surviving Motherhood
Lesson 2	Pre and Post Natal Care
Lesson 3	Pregnancy Complications
Lesson 4	Pressing Women's Disability Issues
Lesson 5	Newborn Care Overview
Lesson 6	Healthy Newborn
Lesson 7	Newborn Problems and Management
Lesson 8	Maternal Newborn Future Vision

In-Person Classroom Workshop:

8:00 am	Essential Care for Labor & Birth Action Plan Details & Simulation
9:00 am	Bleeding After Birth Action Plan Details
10:00 am	Bleeding After Birth Action Plan Simulation
11:00 am	Threatened and Preterm Labor Action Plan and Simulation
12:00 pm	Lunch
1:00 pm	Pre-Eclampsia and Eclampsia Action Plan Details
2:00 pm	Pre-Eclampsia and Eclampsia Action Plan Simulation
3:00 pm	Prolonged and Obstructed Labor Action Plan Details
3:30 pm	Prolonged and Obstructed Labor Action Plan Simulation
5:00 pm	Finish

*Schedule is subject to change

Final Exam:

Learners will each demonstrate their skills throughout the day under supervision of the HBB faculty, who will evaluate learners using a standardized skills checkoff list. Learners must demonstrate satisfactory attainment of all required skills.

Explanation of Assignments:

Participation: Learners are required to fully participate in the course content, including interactive content, pre-test, post-test, and in-person classroom hands-on activities.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Learners whose evaluation is acceptable will receive the *INMED Professional Qualification in Helping Mothers Survive.* Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to repeat.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

This course is graded pass/fail. Successful pass requires:

- Maternal-Newborn Health Post-Test ≥80%
- Satisfactory demonstration of all required skills
- Complete course evaluation and credit claims forms at the course conclusion.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

You may choose to defer a course enrollment to a future course date. If you do not defer to a future course date, you may withdraw from currently enrolled courses at any time and receive the following refund rates:

100% refund 1st day – 3rd day*
No refund If any course materials have been accessed.
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

Course Faculty:

Nicholas Comninellis, MD, MPH, DIMPH

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor, Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

INMED Professional Certificate Course in Obstetrics Ultrasound
Syllabus

Course Faculty:

John Gibson, MD: jgibsonmd@gmail.com

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Obstetrics care requires critical information about the mother and baby. Ultrasound is an essential technology to supply such vital information. This course develops skills in early pregnancy ultrasound (confirmation, location) and third trimester ultrasound (parity, pulse, pocket, placenta, presentation, postpartum evaluation). This course requires that participants already have attained basic obstetrics skills and experience. The INMED Professional Qualification Course in Obstetrics Ultrasound is a hybrid experience that combines online preparation followed by a one-day, in-classroom event to master hands-on skills and assess achievements. Academic credit earned is 1 credit hour.

Competency Objectives:

At the completion of the INMED Professional Certificate Course in Obstetrics Ultrasound learners will be able to:

- Confirm early pregnancy diagnosis and location
- Identify common gynecological pathology
- Identify the 6 Ps of late pregnancy: parity, pulse, pocket, placenta, presentation, postpartum evaluation

Timeframes:

This Professional Certificate Course is a hybrid experience that combines an online learning experience followed by a one-day, in-classroom workshop to master hands-on skills and assess achievements.

Academic Credit:

Completion of this course requirements earns one credit hour of academic credit.

Admission Requirements:

Enrollment in the INMED Professional Qualification Course in Obstetrics Ultrasound is open to healthcare professionals and healthcare profession learners, including physicians, midwives, advanced practice nurses, and physician assistants.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following education methods:

- Interactive online learning techniques
- Interactive live presentations
- Skill stations for increasing technical proficiency
- Case studies for developing clinical judgment

Assigned Obstetrics Ultrasound Lessons:

Assignments to be completed prior to the in-person classroom event include Obstetrics Ultrasound Pre-Test, Lessons 1-5, and Post-Test.

Lesson 1 Obstetrics Ultrasound Principles
Lesson 2 Normal Pregnancy
Lesson 3 Early Pregnancy Complications
Lesson 4 Later Pregnancy Complications
Lesson 5 Fetal Heart Ultrasound

In-Person Classroom Workshop:

Each major topic will begin with a rapid review of anatomy and examples of normal scan planes, followed by supervised, hands-on scanning experience to achieve normal scan planes, ultrasound techniques and equipment control.

8:00am	Principles of US equipment use and image optimization
8:20	Early pregnancy diagnosis/confirmation and location
8:40	Hands-on Clinical Sessions
12:00	Lunch
1:00	2-3rd Trimester Ultrasound Evaluation. Late pregnancy fetal parity (number)/pulse (fetal heartbeat)/ pocket (fluid)/ placenta (location)/ fetal presentation/ post-partum evaluation/ late pregnancy placenta (location)/ fetal presentation/ post-partum evaluation.
1:40	Basic gynecological ultrasound (ovarian cysts and uterine masses)
2:00	Hands-on Clinical sessions
3:00	Evaluation of hypotension or shock related to obstetrical hemorrhage
5:00	Conclusion
	*Schedule is subject to change

Final Exam:

Learners will each demonstrate their skills throughout the day under supervision of the ultrasound faculty, who will evaluate learners using a standardized skills checkoff list. Learners must demonstrate satisfactory attainment of all required skils.

Explanation of Assignments:

Participation: Learners are required to fully participate in the course content, including interactive content, pre-test, post-test, and in-person classroom hands-on activities.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Learners whose evaluation is acceptable will receive the *INMED Professional Certificate in Obstetrics Ultrasound..* Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

This course is graded pass/fail. Successful pass requires:

- Maternal-Newborn Health Post-Test ≥80%
- Satisfactory demonstration of all required skills
- Complete course evaluation and credit claims forms at the course conclusion.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the

entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

You may choose to defer a course enrollment to a future course date. If you do not defer to a future course date, you may withdraw from currently enrolled courses at any time and receive the following refund rates:

100% refund 1st day – 3rd day*
No refund If any course materials have been accessed.
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

Course Faculty:

John Gibson, MD, DIMPH

Dr. Gibson is Director of Rural and Global Health Education at University of North Texas Health Sciences Center. He is also teaches ultrasound for both UNTHSC medical students and for family medicine residents at John Peter Smith Hospital, including obstetrical ultrasound applications. Dr. Gibson lived in Thailand from 1984-2004, training medical personnel and providing care for marginalized people throughout the nation. Dr. Gibson is a certified diagnostic ultrasound instructor.

INMED Professional Certificate Course in Ultrasound for Primary Care
Syllabus

Course Faculty:

David Culpepper, MD: dculpeppermd@gmail.com

Learning Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

Quality medical care in low-resource settings is often hampered by lack of objective clinical information. ultrasonography is a useful technology in such settings, providing vital data to support patient care decision-making. This course enhances performance and interpretation for ultrasonography of carotid, thyroid, heart, lung, aorta, abdomen, urinary tract, DVT screening, joint and venous access, and eFAST exam. The INMED Professional Certificate Course in Ultrasound for Primary Care is a hybrid experience that combines online preparation followed by a one-day, in-classroom event to master hands-on skills and assess achievements.

Participants will receive access to the INMED Ultrasound for Primary Care Short Self-Paced Course, one day of supervised hands-on skill development, and upon satisfactory participation and skill demonstration, the INMED Professional Qualification in Ultrasound for Primary Care. Please note that accommodations and meals are not included.

Competency Objectives:

At the completion of the INMED Professional Certificate Course in Ultrasound for Primary Care learners will be able to:

- Apply the basic principles of ultrasonography to clinical settings
- Perform basic ultrasonography of carotid, thyroid, heart, lung, aorta, abdomen, urinary tract, DVT screening, and joint and venous access
- Interpret basic ultrasonography of carotid, thyroid, heart, lung, aorta, abdomen, urinary tract, DVT screening, and joint and venous access
- Perform eFAST (Extended Focused Assessment with Sonography for Trauma) Exams
- Interpret eFAST (Extended Focused Assessment with Sonography for Trauma) Exams

Timeframes:

This Professional Certificate Course is a hybrid experience that combines an online learning experience followed by a one-day, in-classroom event to master hands-on skills and assess achievements.

Academic Credit:

Completion of this course requirements earns one credit hour of academic credit.

Admission Requirements:

Enrollment is open to healthcare professionals and healthcare profession learners, including physicians, midwives, advanced practice nurses, and physician assistants.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari
- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following education methods:

- Interactive online learning techniques
- Interactive live presentations
- Skill stations for increasing technical proficiency
- Case studies for developing clinical judgment

Assigned Ultrasound for Primary Care Lessons:

Assignments to be completed prior to the in-person classroom event: Participate in the Ultrasound for Primary Care content, Lessons 1-15, and complete the Pre-Test and Post-Test for this content

Learning Content:
Lesson 1 Ultrasound Physics
Lesson 2 Thyroid
Lesson 3 Carotid
Lesson 4 Pulmonary
Lesson 5 Cardiac
Lesson 6 Hepatobiliary
Lesson 7 Spleen
Lesson 8 Renal
Lesson 9 Inferior Vena Cava
Lesson 10 Abdominal Aorta
Lesson 11 Bladder
Lesson 12 Musculaskeletal
Lesson 13 Vascular Access
Lesson 14 eFAST
Lesson 15 Deep Venous Thrombosis

In-Person Classroom Workshop:

Each major topic will begin with a rapid review of anatomy and examples of normal scan planes, followed by supervised, hands-on scanning experience to achieve normal scan planes, ultrasound techniques and equipment control.

8:00am	Principles of US equipment use and image optimization
9:00	Thyroid & Carotid
10:00	Limited Echo & Thoracic
11:00	Abdominal, Renal, Urinary & eFAST
12:00	Lunch
1:00pm	DVT Screening
2:00	Joint Space Access (Glenohumeral, Superiolateral Knee)

3:00	Venous Access (IJV, SCV, Basilic, Common Femoral)
5:00	Finish
	*Schedule is subject to change

Final Exam:

Learners will each demonstrate their skills throughout the day under supervision of the ultrasound faculty, who will evaluate learners using a standardized skills checkoff list. Learners must demonstrate satisfactory attainment of all required skils.

Explanation of Assignments:

Participation: Learners are required to fully participate in the course content, including interactive content, pre-test, post-test, and in-person classroom hands-on activities.

Punctuality: This is a professional level course. All assignments are expected to be submitted on time.

Professionalism Requirement: This is a learning experience for professionals. Assignments are expected to be completed with excellence.

Learners whose evaluation is acceptable will receive the *INMED Professional Certificate in Ultrasound for Primary Care.* Those learners whose evaluation is not acceptable will receive a certificate of participation and the opportunity to remediate.

Inadequate learner performance will be managed according to the *Student Probation, Suspension, Dismissal, and Readmission Policy*. This policy is located within the Student Resources tab on the INMED website.

Requirements for Successful Completion & Course Grade Determination:

This course is graded pass/fail. Successful pass requires:

- Ultrasound for Primary Care Post-Test ≥80%
- Satisfactory demonstration of all required skills
- Complete course evaluation and credit claims forms at the course conclusion.

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the

component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course. The learner will be offered only one opportunity to repeat the course without requiring repeat payment of tuition.

Academic Integrity:

This is a professional-level learning experience. All learners are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty determines that a learner has committed academic dishonesty by plagiarism, cheating or in any other manner, the faculty member has the right to 1) fail the learner for the particular assignment, project and/or exam, 2) fail the learner for the entire course, 3) discharge the learner from any future INMED learning experience, including degree, diploma, or certificate completion.

Withdrawal and Refund Policy:

You may choose to defer a course enrollment to a future course date. If you do not defer to a future course date, you may withdraw from currently enrolled courses at any time and receive the following refund rates:

100% refund 1st day – 3rd day*
No refund If any course materials have been accessed.
* Day one = date enrollment agreement is signed or date on course registration receipt. "Day" refers to a business day and excludes weekends and holidays.

Course Faculty:

David Culpepper, MD, FACP

Dr. Culpepper is an internist and Point of Care Ultrasound Fellow with Ultrasound Leadership Academy. Trained at the University of South Carolina School of Medicine, he practiced general internal medicine for three decades, and today continues with Access Med in Lexington, KY. Dr. Culpepper has provided volunteer medical services to marginalized people in Brazil, Peru, Bolivia, Romania, Kenya, and refugees in Greece. His professional passion is teaching point of care ultrasound skills to those serving around the world in low resource communities.

INMED International Service-Learning Course Syllabus

Course Directors:

Nicholas Comninellis, MD, MPH, DIMPH
nicholas@inmed.us, 816-520-6900

Scott Armistead, MD, DIMPH
scott@inmed.us, 804-399-7117

Course Coordinator:

Amy Gilmore, amy@inmed.us, 816-444-6400

Learner Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

INMED International Service-Learning is a preceptor-led, teaching-learning experience that earns academic credit. Service-learning strengthens student's critical thinking skills as they engage in experiential healthcare activities that are aligned with the academic program's competency objectives. At the same time, local community members also benefit from assistance that may otherwise not be available.

Competency Objectives:

At the completion of the INMED International Service-Learning learners will demonstrate through simulation and actual practice *increasing skill in*:

- Management and prevention of leading diseases of poverty
- Proficiency in clinical skills useful in low-resource settings

- Skill in community-wide health promotion and death/disability prevention
- Culturally appropriate healthcare
- Transfer of healthcare skills to other personnel
- Appropriate personal adjustments for living in this context.

Depending upon the nature of the specific Service-Learning site, learners may *also* demonstrate through simulation and actual practice *increasing skill in*:

- Care for the health of pregnant women and newborns
- Proficiency in disaster mitigation and response
- Design and implementation of team-lead healthcare interventions

Service-Learning Site Selection & Responsibilities:

INMED cooperates with established health facilities to provide INMED learners with exceptional educational experiences. Site selection is done with attention to safety, accessibility, instructor credentials, ease of communications, and the evaluations of former students.

Service-Learning Sites are available in multiple nations and include those that are community-based and emphasize preventive care, as well as those that are hospital-based and provide more advanced therapeutic services. Learner responsibilities depend upon the site selected, may include inpatient care, outpatient clinic, procedures, obstetrics, night duty, and participation in research, public health, and primary care activities. Full preceptor supervision is provided.

For current descriptions of available training - including photos, transportation, and accommodation sites - please visit INMED Service-Learning Sites.

Timeframes:

A minimum of four weeks is required at the Service-Learning Site. For learners with exceptional circumstances, INMED offers a Service-Learning Reduced Duration Pathway that is comprised of two weeks service-learning plus a quality improvement project.

Academic Credit:

Completion of the course requirements earns five credit hours of academic credit.

Enrollment Qualifications:

This course is open to INMED learners in the Master's Degree in International Health and in the Graduate Diplomas in International Medicine, International Nursing, and International Public Health. Prerequisites include completion of the corresponding Graduate Certificate Course in International Medicine, International Nursing, or International Public Health

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

Preceptor Supervised Clinical Teaching

- Case-based patient care
- Critical analysis

Preceptor Lectures and Conferences

- Case-based presentations
- Topic-based presentations
- Journal article critiques
- Clinical and community-based instruction from preceptors

Learner Presentation

- With the assistance of preceptors, INMED learners will select a relevant health-related subject and give a presentation on this subject for the benefit of the service-learning site personnel.

Optional Reference Texts:

Handbook of Medicine in Developing Countries
Author: Dennis Palmer, DO, and Catherine E. Wolf, MD
Publisher: Christian Medical & Dental Associations

Note: This book is available for purchase from Christian Medical & Dental Associations. This book is for reference only and is not a required purchase for this course.

Schedule:

Arrival:

- Learners will be provided with an orientation at the beginning of their service-learning that includes responsibilities, orientation of facility, schedules, personal safety, and emotional wellbeing resources.

Duty Hours:

- Learners are expected to work no more than 40 hours per week, averaged over any four (4) week period.
- Learners will have at least one (1) day off in seven (7), averaged over a four (4) week period.
- Post-call learners are excused from work responsibilities.

Absences

- Any absences must be approved by the onsite preceptor.
- In case illness, the learner must notify the onsite preceptor.
- Unexcused absences may result in failure of the service-learning course, at the discretion of the on-site preceptor.

Explanation of Assignments:

International Health Essay Composition: A service-learning experience is often profound and life-changing. This guided, reflective essay is an important process for incorporating the experience into the learner's career. Submission of the international health essay, along with the Post-Service-Learning INMED Evaluation, is due within two weeks of completing service-learning.

Professionalism:

INMED learners will follow the current Student Handbook requirements.

Guidelines for professional conduct include, but not limited to:

- Professional Attire
    - Dress in a professional and cultural appropriate manner (INMED and preceptors will provide direction to attire for your service-learning site).
- Punctuality
    - Learners are expected to be on time for all commitments.
    - Chronic tardiness will not be tolerated and will result in unfavorable evaluation.
- Responsibility
    - Learners will not make independent decisions regarding patient care.

    - Learners are expected anticipate diagnosis assessment and treatment plan and discuss with faculty.
    - Clinical responsibilities may include (not limited to):
        - Work rounds on all assigned patients
        - Patient care tasks assigned by preceptors
        - Presentation of patients on staff rounds
        - Writing healthcare documentation
        - Continual assessment of assigned patients
        - Continual discussions with preceptors regarding patients
        - Other responsibilities assigned by preceptors
- Politeness, cultural sensitivity, and respect
    - Be respectful, culturally sensitive and be polite to patients, families, community, and healthcare partners/team.
    - If a learner feels that a patient or another health professional partner is inappropriate, the learner should leave the situation and contact the preceptor.
- Patient Confidentiality
    - Maintain patient privacy.
    - Patient information is on a need-to-know basis only.

Debriefing/Counseling Services

INMED provides academic, professional, and post-service-learning counseling to current INMED learners. Please contact student support services to request these services.

Student Support Services	On-Call Support
Leda Rivera	Amy Gilmore
816-444-6400	816-444-6400 ext. 1
leda@inmed.us	amy@inmed.us

Requirements for Successful Completion & Course Grade Determination:

This course is graded pass/fail. Successful pass requires:

- Satisfactory evaluation by Service-Learning Site preceptor
- Satisfactory learner presentation
- Satisfactory international health essay composition
- Completion of course evaluation

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the

component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course.

Academic Integrity:

Honesty is a fundamental necessity of life. This is a professional-level learning experience. All students are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty suspects a student has engaged in Academic Dishonesty, the INMED faculty may initiate the posted Academic Integrity Policy and Process.

Withdrawal and Refund Policy:

Please refer to the posted Withdrawal and Refund Policy.

Course Directors:

Nicholas Comninellis, MD, MPH, DIMPH

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor, Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

Scott Armistead, MD, DIMPH (INMED)
Richmond Area Director, Christian Medical and Dental Associations (CMDA)

Dr. Armistead trained at the Medical College of Virginia and Truman East Family Medicine Residency in Kansas City, where he met Dr. Comninellis as a faculty member. Dr. Armistead and his family lived in Pakistan from 1999-2015, providing medical care at Bach Christian Hospital, with a 1 1/2 year

stint at Oasis Hospital in the United Arab Emirates when the security situation in Pakistan worsened.

Since 2021, Dr. Armistead has worked in Richmond Virginia in private practice most recently starting a clinic for refugees as an extension of the practice. From 2015 to 2021, Dr. Armistead taught family medicine at the Virginia Commonwealth University (VCU). He works part-time as a CMDA staff worker at VCU. He leads a month-long International Medical Mission elective for senior medical students during which he takes a group annually to Karanda Mission Hospital in Zimbabwe. He completed VCU's TIME (Teaching in Medical Education) certificate course. He loves teaching and has received teaching awards in the Practice of Clinical Medicine program at VCU and from the Society of Teachers of Family Medicine. He is very keen on the professional, moral, and spiritual formation of students. He is active with the Urdu-speaking S. Asian refugee and immigrant population in Richmond, Virginia. His wife, JoAnn, is an ESL teacher and they have three grown sons.

INMED Scholarly Project Course Syllabus

Course Directors:

Nicholas Comninellis, MD, MPH, DIMPH
nicholas@inmed.us, 816-520-6900

Scott Armistead, MD, DIMPH
scott@inmed.us, 804-399-7117

Learner Support:

Leda Rivera: leda@inmed.us, 816-444-6400

Library Services:

Kitty Serling: ksmo80@yahoo.com

Overview:

The Scholarly Project is the capstone of the Master's Degree in International Health. Learners will select, design, and develop a scholarly project relevant to their career interests. An INMED faculty will be assigned to assist with each step of the process, guiding the learner through project completion within six months after registering. Scholarly projects may include any one of the following three types:

- Literature review
- Quality improvement plan
- Original scientific research

Upon completion, learners will present their scholarly project before a quorum of INMED faculty, who may inquire regarding any component of the project or of the MIH educational experience.

Competency Objectives:

At the completion of the INMED Scholarly Project learners will demonstrate through composition and defense:

- Application of epidemiological principles
- Research methodologies, interpretation, and quality improvement

Depending upon the nature of the specific Scholarly Project, learners *may also* demonstrate through composition and defense:

- Management and prevention of leading diseases of poverty
- Care for the health of pregnant women and newborns
- Skill in community-wide health promotion and death/disability prevention
- Proficiency in disaster mitigation and response
- Design and implementation of team-lead healthcare interventions

Timeframes:

Registration for the Scholarly Project need not be confined to the beginning of a Term. The project must be complete within six months of registering for the course.

Academic Credit:

Completion of the course requirements earns five credit hours of academic credit.

Enrollment Qualifications:

This course is open to INMED learners in the Master's Degree in International Health. Epidemiology course completion is a prerequisite for registering for the Scholarly Project.

Computing Requirements:

The following are the minimum computing requirements for participating this course. Students must have ready access to and be functionally proficient with:

- A personal computer with an up-to-date operating system and ample memory for downloads. A rectangular monitor (desktop or tablet) is highly preferable for course navigation.
- A web browser, preferably the most up-to-date version of Chrome, Internet Explorer, Firefox, or Safari

- Applications capable of opening and editing Microsoft Word documents and of viewing PDFs
- An Internet connection, preferably high speed
- Capability of viewing YouTube and Vimeo videos

Education Methods:

Learners will achieve the course competency objectives through the following educational methods:

- Review of authoritative resources
- Critical analysis
- Small group discussions
- Essay composition / Reflective writing
- Essay composition and group presentation

Journal Articles Required:

These are posted within the Scholarly Project online course content.

Scholarly Project Steps:

Early in the MIH degree program, learners are encouraged to begin considering potential Scholarly Projects, especially those relevant to their interests, experience, career commitments, and future professional plans.

Step One: Learners will register for the Scholarly Project course, and then be assigned an INMED Faculty whose profession and scholarly interests approximate those of the learner.

Step Two: Learners will meet with their INMED Faculty as many times as necessary to discuss potential scholarly projects and make a final selection.

Step Three: Learners will next formally submit the Scholarly Project Proposal using one of the three available tracts: Quality Improvement, Literature Review, or Original Scientific Research.

Step Four: Learners will proceed with developing their Scholarly Projects, accompanied by INMED faculty guidance. Typically, several written drafts of the project will be exchanged between the learner and their faculty throughout the development process. The project must be complete within six months of registering for the Scholarly Project course.

Step Five: Learners will formally submit the final Scholarly Project confirming to the specifications in the respective Literature Review

Guidelines, Quality Improvement Plant Guidelines, or Original Scientific Research Guidelines.

Step Six: Upon completion and acceptance by the faculty, learners will present their scholarly project before a quorum of INMED faculty, who may inquire regarding any component of the project or of the MIH educational experience.

Requirements for Successful Completion & Course Grade Determination:

This course is graded pass/fail. Successful pass requires:

- Satisfactory evaluation by Scholarly Project faculty
- Satisfactory evaluation by quorum of INMED faculty

Remediation:

If a learner does not complete this course and achieve the required competencies, the faculty may require the learner to 1) remediate the component(s) that the learner did not satisfactorily complete, or 2) repeat the entire course within one year of the start date of the original course.

Academic Integrity:

Honesty is a fundamental necessity of life. This is a professional-level learning experience. All students are expected to be self-motivated, to perform with excellence, and to be thoroughly honest throughout their process of learning. If any INMED faculty suspects a student has engaged in Academic Dishonesty, the INMED faculty may initiate the posted Academic Integrity Policy and Process.

Withdrawal and Refund Policy:

Please refer to the posted Withdrawal and Refund Policy.

Course Directors:

Nicholas Comninellis, MD, MPH, DIMPH

Nicholas Comninellis is President and Professor of INMED, the Institute for International Medicine. He is also faculty at Research Medical Center Family Medicine Residency. Over two years Dr. Comninellis served inner-city citizens at Shanghai Charity Hospital. Over another two years, he led a healthcare ministry in the war-besieged nation of Angola in southern Africa. Dr. Comninellis next served for six years in the Kansas City public hospital

before launching INMED in 2003. He graduated from the University of Missouri-Kansas City (UMKC) School of Medicine and Saint Louis University School of Public Health and was a family medicine resident at John Peter Smith Hospital. Dr. Comninellis also earned a professional diploma in tropical medicine from the Walter Reed Army Institute of Research and became board certified in both public health and family medicine. Among his authored books are *Shanghai Doctor, Where Do I Go from Here*, and *INMED International Medicine & Public Health*. Dr. Comninellis is a classical guitarist and faculty advisor for UMKC Cru. He was recognized as the 2009 United Nations Association of the United States World Citizen and the 2015 University of Missouri-Kansas City Alumni of the Year.

Scott Armistead, MD, DIMPH (INMED)
Richmond Area Director, Christian Medical and Dental Associations (CMDA)

Dr. Armistead trained at the Medical College of Virginia and Truman East Family Medicine Residency in Kansas City, where he met Dr. Comninellis as a faculty member. Dr. Armistead and his family lived in Pakistan from 1999-2015, providing medical care at Bach Christian Hospital, with a 1 1/2 year stint at Oasis Hospital in the United Arab Emirates when the security situation in Pakistan worsened.

Since 2021, Dr. Armistead has worked in Richmond Virginia in private practice most recently starting a clinic for refugees as an extension of the practice. From 2015 to 2021, Dr. Armistead taught family medicine at the Virginia Commonwealth University (VCU). He works part-time as a CMDA staff worker at VCU. He leads a month-long International Medical Mission elective for senior medical students during which he takes a group annually to Karanda Mission Hospital in Zimbabwe. He completed VCU's TIME (Teaching in Medical Education) certificate course. He loves teaching and has received teaching awards in the Practice of Clinical Medicine program at VCU and from the Society of Teachers of Family Medicine. He is very keen on the professional, moral, and spiritual formation of students. He is active with the Urdu-speaking S. Asian refugee and immigrant population in Richmond, Virginia. His wife, JoAnn, is an ESL teacher and they have three grown sons.