
A Model for Interdisciplinary Clinical Education: Medical and Legal Professionals Learning and Working Together to Promote Public Health

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Interdisciplinary training for professionals is becoming more common in higher education. Educators are beginning to understand the benefit of jointly training students in complex and interrelated skills that improve and complement the primary skills needed to succeed in a particular profession. Legal educators have recognized the value of encouraging flexible, collaborative

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thinkers who become better problem-solvers through interdisciplinary learning.² Many of these are also coming to realize the importance of interdisciplinary training as a component of readiness for professional practice.³ For many law students, law school clinics are the first opportunity they have to learn legal skills and to engage in problem-solving for real clients. This experiential learning opportunity is often powerful and transformative, and can imprint skills, values, and practice habits that stay with students throughout their professional careers. Incorporating interdisciplinary learning opportunities into the law school clinic experience affords opportunities for co-learning, holistic problem-solving, and community building during young professionals' formative years. Learning to be a lawyer in the context of an interdisciplinary law school clinic combines the experience of working with real clients and academic inquiry into the nature of the lawyering process itself and the ethical and fundamental practices of other professionals. Clinics serve as incubators for professional development. They provide opportunities for reflection on the practice of law, professionalism, social justice, and countless skills that help ready students for the profession of law.⁴ The HeLP Legal Services Clinic at Georgia State University College of Law aims to create an interdisciplinary dimension to such practice and inquiry, and thus influence the way in which the professional students from the law and medicine disciplines work together as learners and future professionals.

The Clinic is an innovative interdisciplinary education program at Georgia State University College of Law in which law students learn side-by-side with medical students, residents, attending physicians, and other health care providers, as well as social work and public health students. The education program is part of a medical-legal partnership known as the Health Law Partnership (HeLP). This unique educational collaboration helps students understand that health disparities experienced by minorities, individuals and families with low economic status, and those with low educational attainment contribute to poorer health outcomes. Law students and students from the health professions learn first-hand the effect that socioeconomic determinants have on health

2 Lawyer-social worker teams have been recognized as role models for student attorneys. For example, one American scholar calls them "a refined third wave therapeutic jurisprudential practice methodology, capable of addressing twenty-first century legal and social needs of the client." Christine A. Zawisza, *Two Heads are Better Than One: The Case-Based Rationale for Dual Disciplinary Teaching in Child Advocacy Cases*, 7 FLA. COASTAL L. REV. 631, 683 (2006). Others have noted the benefits of interdisciplinary collaboration for the University as a whole, insofar as such clinics "provide a public relations benefit to the university as well as opportunities for students to carry the public interest ethic into their careers as lawyers, legislators, or governmental administrators or in other professional occupations." Katherine C. Pearson & Lucy Johnston-Walsh, *Partners in Outreach and Advocacy: Interdisciplinary Opportunities in University-Based Legal Clinics*, J. HIGHER EDUC. OUTREACH & ENGAGEMENT, Sept. 2007, at 163, 171-72.

3 See C.K. Gunsalus & J. Steven Beckett, *Playing Doctor, Playing Lawyer: Interdisciplinary Simulations*, 14 CLINICAL L. REV. 439, 441 (2008) (describing an innovative interdisciplinary simulation course and the view that interactions with differently-trained professionals improves the acquisition of fundamental skills.)

4 Educators who collaborate in interdisciplinary learning environments have noted that problem-based learning, including the opportunity to practice lawyering skills with real clients in a supervised setting, is a valuable way to help students learn, insofar as students receive ongoing, ungraded feedback to help them improve their skills. Antoinette Sedillo Lopez et al, *A Medical/Legal Teaching and Assessment Collaboration on Domestic Violence: Assessment Using Standardized Patients/Standardized Clients*, 14 INT'L J. CLINICAL LEGAL EDUC. 61, 63-64 (2009).

and how to better address issues that can affect the health and well-being of low income families.⁵ The curriculum provides a multi-faceted interdisciplinary learning experience for students of multiple disciplines including, law, medicine, social work, public health, pediatric residents and other professionals.

The interdisciplinary components of the HeLP Clinic are multilayered, involving different activities and students from different professions. For example, fourth year medical students participate in the Clinic course as part of a four-week Law and Medicine elective offered through Morehouse School of Medicine. Clinic students also attend joint classes with third year medical students at Morehouse School of Medicine where they engage in group learning exercises. Residents from Emory School of Medicine attend the Clinic class case rounds to discuss ongoing Clinic cases and engage in interdisciplinary problem-solving. Clinic students attend patient rounds within the hospital and perform client intake in the hospital's Emergency Department and Primary Care Clinic. A masters in social work student from Georgia State University dedicates sixteen hours per week to the Clinic to meet the requirements for her practicum placement. A fellow from the Masters in Public Health program at Georgia State University spends twelve hours per week in the Clinic.

The article describes the how the authors have incorporated professional students from multiple disciplines into a law school clinic environment. It also provides examples of students' reactions to their interdisciplinary learning experiences. Finally, the article discusses the challenges and opportunities in using this clinic model.

Introduction to the HeLP Legal Services Clinic

The HeLP Legal Services Clinic was developed in 2006 as a component of the Health Law Partnership ("HeLP"). HeLP is a medical-legal partnership and interdisciplinary community collaboration among Children's Healthcare of Atlanta⁶, the Atlanta Legal Aid Society⁷, and

5 As one American scholar has noted, clinics provide students with a model for integrating social justice into their practice by ingraining in them a definition of social justice as empowering the powerless. This definition fuels their dedication to addressing social disparities through legal advocacy and helps direct their work towards achieving social justice. Spencer Rand, *Teaching Law Students to Practice Social Justice: An Interdisciplinary Search for Help Through Social Empowerment Approach*, 13 CLINICAL L. REV. 459, 463 (2006). Furthermore, clinical education that combines traditional skills-based curriculum with an emphasis on how particular systems (such as the health care system) function has been proposed as one means of resolving the traditional tension between teaching students lawyering skills and training them to think of the law as a practical tool for achieving social justice. Meredith J. Ross, *A 'Systems' Approach to Clinical Legal Education*, 13 CLINICAL L. REV. 779, 781 (2007).

6 Children's Healthcare of Atlanta formed in 1998 when Egleston Health Care System and Scottish Rite Medical Center merged forming one of the largest pediatric health systems in the United States. In 2006, Children's assumed administrative and managerial responsibilities for Hughes Spalding Children's Hospital. Children's now consists of three hospitals and seventeen neighborhood locations all designed to meet the health care needs of Georgia's children.

7 The Atlanta Legal Aid Society, established in 1924, provides free civil legal services to low-income individuals in Atlanta, Georgia. Attorneys work to help clients with some of life's most basic needs – safe housing, access to sufficient, nutritious food, access to a free and appropriate public education, access to quality, affordable health care services, personal safety, and protection against fraud.

Georgia State University's College of Law⁸ to address the socioeconomic barriers affecting the health and well-being of low-income children and their families. The defining characteristic of a medical-legal partnership is the integration of lawyers directly into the healthcare system by making attorneys part of the healthcare team.⁹ Thus, if a doctor, nurse, or social worker identifies a patient whose basic social needs are not being met, the medical provider can refer the patient's family to the lawyer working next door.¹⁰ The medical-legal partnership movement in the United States has spawned a number of partnerships between physicians, clinics, hospitals, lawyers and other care providers. Physicians, nurses, attorneys, and social workers are now partnered in more than 235 health institutions in the United States at 83 medical-legal partnership sites.¹¹ Most of these partnerships focus on the provision of direct legal services to low income clients who are patients of the partnering health provider. HeLP has expanded upon the characteristic delivery of legal services model to incorporate professional education programming, systemic advocacy, and a research agenda as part of its mission. HeLP's primary premise is that by combining the health care expertise of medical professionals with the legal expertise of attorneys, it can provide a multi-disciplinary, cooperative, and coordinated set of services to address the multiple determinants of children's health.

HeLP was born from a realization that the social and economic conditions in which children live can seriously affect their health.¹² For example, poor housing conditions, such as unsanitary conditions or lack of heat, can exacerbate health conditions like asthma or sickle cell disease.¹³ Poverty can prevent children or their families from obtaining needed medications and other medical treatment. Lack of protection from domestic violence can result in serious injury to children and family members. Failure to protect the legal rights of developmentally disabled children can lead to their inability to get remedial special education or other needed services. By partnering with medical providers, lawyers can intervene to address such issues and improve the physical, social, or economic environments in which many children live, resulting in their

8 Georgia State University's College of Law was established in 1982 to offer quality legal education to traditional, full-time day students as well part-time students primarily studying at night. The College of Law is committed to providing an excellent, affordable, and distinctive legal education to a diverse student body, to promoting legal scholarship and service, and to capitalizing on the unique environment in which the College is located in downtown Atlanta, Georgia.

9 Marybeth Musumeci, *Augmenting Advocacy: Giving Voice to the Medical-Legal Partnership Model in Medicaid Proceedings and Beyond*, 44 U. MICH. J.L. REFORM 857, 886 (2011).

10 *Id.*

11 MLP Network, NATIONAL CENTER FOR MEDICAL LEGAL PARTNERSHIP, [HTTP://WWW.MEDICAL-LEGALPARTNERSHIP.ORG/MLP-NETWORK](http://www.medical-legalpartnership.org/mlp-network) (last visited Apr. 4, 2012).

12 For a detailed discussion of the development of the Health Law Partnership and its components of direct legal service, education, advocacy and evaluation, as well as a template for developing a successful community collaboration and a medical-legal partnership, see Lisa Bliss, Sylvia Caley & Robert Pettignano, *An Interdisciplinary Collaborative Approach to Wellness: Adding Lawyers to the Healthcare Team to Provide Integrated Care for Patients*, INT'L J. HEALTH, WELLNESS & SOC'Y, no. 2, 2011 at 129.

13 Paying more than 50 % of the available household income on rent and/or living in substandard housing often results in poor health outcomes, especially in children. Monisha Cherayil et al, *Lawyers and Doctors Partner for Healthy Housing*, CLEARINGHOUSE REV. J. OF POVERTY L. & POL'Y, May-June 2005, at 65.

improved health and quality of life.¹⁴

The lawyers and doctors working together at HeLP recognized that focusing on changing the culture and professional attitudes of the next generation of physicians and lawyers is an opportunity to improve the socio-economic determinants of health.¹⁵ Training the next generation of physicians and lawyers to work together to enhance patient outcomes can positively impact the socio-economic determinants of health. Although a primary goal of medical-legal partnerships is to address the socio-economic barriers, and thereby improve client health and well-being through the provision of legal services, pursuing that goal in the context of interdisciplinary professional education inures to the benefit of all professions involved.¹⁶

The HeLP Legal Services Clinic was developed as a vehicle for delivering interdisciplinary collaborative training to professional students from law, medicine, social work, public health, and other disciplines. Advocates of medical-legal partnerships have noted that joint medical and legal education provides a unique opportunity to engage law and medical students in interdisciplinary problem-solving while also expanding their understanding of the complex issues of social justice and inequality in our legal and health care systems.¹⁷ Cited among the benefits of interdisciplinary education are: developing respect and appreciation among the disciplines, teaching team work and collaboration, developing a knowledge-base about other disciplines, teaching communication among disciplines, and teaching other disciplines' rules, beliefs, and ethical principles.¹⁸ Through the HeLP Clinic interdisciplinary education model, many of these benefits are being realized. HeLP Clinic students and faculty have both reported that their interdisciplinary experiences have deepened their understanding of the healthcare system, as well as their understanding of the training and problem-solving approaches of the medical field. Residents have remarked that attending the HeLP Clinic case rounds gave them a better understanding of the legal requirements for proving disability under the law and a better appreciation for the work that lawyers do. As the HeLP Clinic program has matured, the relationships among the law and medical faculty

14 Physicians are generally trained to inquire about the social history of their patients, but often are unfamiliar with the resources and solutions to conditions that contribute to health disparities. For example, pediatricians are generally trained to trace the biological causes of illnesses but are reluctant to inquire about housing conditions, violence, and other social conditions since they are unsure about how to rectify the problems such a line of inquiry might uncover. Chen Kenyon et al, *Revisiting the Social History for Child Health*, PEDIATRICS, Sept. 2007, at e734, e735.

15 David Schulman and colleagues have noted that “by understanding that social determinants are a frame for unmet legal need, public health legal services can bridge the gap to address the social determinants at their root. Public health legal services are an emerging revolution in service delivery for vulnerable populations in communities ... that seek to vigorously attack the social determinants of health that affect poor people.” David I. Schulman et al, *Public Health Legal Services: A New Vision*, 15 GEO. J. ON POVERTY L. & POL’Y 729, 729, 732 (2008).

16 Lisa Bliss & Sylvia Caley, *Medical-Legal Partnerships Connecting Law and Health Care to Improve the Health and Well-being of Low-Income Children: Promising Initiatives*, 20 HEC Forum 2, 102-106 (2010). See also C.K. Gunsalus & J. Steven Beckett, *Playing Doctor, Playing Lawyer: Interdisciplinary Simulations*, 14 CLINICAL L. REV. 439, 441; Elizabeth Tobin Tyler, *Allies Not Adversaries: Teaching Collaboration to the Next Generation of Doctors and Lawyers to Address Social Inequality*, 11 J. HEALTH CARE L. & POL’Y 249, 250 (2008). Gunsalus and colleagues note that law students do not generally interact with other professionals and thus have little opportunity to develop relationships with other professionals and engage in interdisciplinary collaboration despite shared values and goals. See Gunsalus, *supra* note 3, at 441.

17 Tobin, *supra* note 16, at 252-53.

18 *Id.* at 272.

collaborators have strengthened. This in turn has stimulated more interdisciplinary collaboration, including joint presentations and collaborative scholarship.¹⁹

Interdisciplinary learning can help improve the problem-solving abilities of all of the professions participating in the program. An interdisciplinary approach to learning helps law students prepare to deal with real-world situations – because real clients do not present problems with the cut-and-dried fact patterns of appellate cases.²⁰ Exposure to HeLP Clinic clients helps medical students and residents appreciate the barriers many patients experience when trying to comply with a prescribed treatment plan. Noncompliance may be caused by lack of funds, lack of understanding, or lack of transportation rather than disregard. Most of the interdisciplinary learning students engage in under the HeLP Clinic model takes place outside the classroom, and is reinforced during joint classes, interdisciplinary case rounds, and interdisciplinary team meetings. The goal of these varied interactions is to expand students' problem-solving abilities through exposure to the thinking process of different professions while working jointly to solve a single problem. The interdisciplinary approach also forces students from both the health and legal professions to consider their patient/client in the context of the client's life. For lawyers, this can mean understanding that the client has a medical condition that impacts the nature and purpose of the representation. For physicians, it can mean understanding that there may be legal remedies or legal issues intertwined with the client's illness.

The HeLP Clinic Course

The HeLP Clinic is structured as a one-semester, three credit course offered by Georgia State University College of Law to law students.²¹ Students who wish to continue beyond the first semester to deepen their learning may enroll for a second semester. Like most law school Clinics, the course is designed to teach lawyering skills by connecting theory and practice via direct client interactions. All cases referred to the HeLP Clinic come from the hospital based law offices of HeLP.²² Although the cases handled by the staff attorneys at HeLP cover a broad range of civil legal problems, the cases typically referred to the HeLP Clinic are limited to children's disability

19 See, Lisa Bliss, Sylvia Caley & Robert Pettignano, *Client and Patient Relationships: Understanding Cultural and Social Context*, in POVERTY, HEALTH AND LAW at 125-156 (Elizabeth Tobin Tyler et al. eds., 2011); Lisa Bliss, Sylvia Caley & Robert Pettignano, *An Interdisciplinary Collaborative Approach to Wellness: Adding Lawyers to the Healthcare Team to Provide Integrated Care for Patients*, INT'L J. HEALTH, WELLNESS & SOC'Y, no. 2, 2011, at 129; Lisa Bliss, Sylvia Caley & Robert Pettignano, *A Case for Including Lawyers on the Care Team*, PHYSICIANS EXEC. J., Mar.-Apr. 2011, at 34; Robert Pettignano, Sylvia Caley & Lisa Bliss, *Medical Legal Partnership: Impact on Patients with Sickle Cell Disease*, PEDIATRICS, Nov. 14, 2011, at e1.

20 Kim Diana Connolly, *Elucidating the Elephant: Interdisciplinary Law School Classes*, 11 WASH. U. J.L. & POL'Y 11, 37 (2003).

21 The course is open for cross-enrollment by students from the schools of nursing, psychology, and public health. To date, one public health student has enrolled in the clinic. Two additional public health students are working with HeLP and the HeLP Clinic as part of their educational requirements.

22 Healthcare providers at Children's Healthcare of Atlanta, including attending physicians, residents, social workers, nurses, and therapists refer patients and families experiencing legal problems affecting the health and well-being of the patient to HeLP. During the weekly new case acceptance meeting HeLP staff triage cases to determine whether the potential client is eligible for HeLP's free legal assistance and if yes, to decide placement of the case. Options include providing direct legal assistance, referring the case to a volunteer attorney, providing self-help assistance, and referring the case to the HeLP Legal Services Clinic for supervised student representation.

claims, Medicaid and other health insurance claims, housing conditions cases, education cases, and wills. Because the cases are referred to the Clinic through the main office of HeLP, all of the cases involve a child who has a health condition that is being treated by HeLP's partner, Children's Healthcare of Atlanta.²³

Students in the HeLP Clinic work in pairs under the close supervision of Clinic faculty. Pairs meet at least once a week with their assigned Clinical supervising faculty. Like many Clinical courses, the law students meet before the semester begins for a day-long orientation program, and the early course sessions are focused on interactive simulations to teach skills of interviewing, counseling and negotiation. Classes meet biweekly. The classroom simulations are specifically designed to incorporate issues that are common to the HeLP Clinic caseload. The simulations all involve matters in which a parent of a very ill child is seeking legal assistance for housing, access to care, educational services, employment, disability, or wills and advance directives.²⁴ Students are also specially trained to do interdisciplinary research using medical research databases. These resources can be helpful to law students in understanding their clients' diagnoses, and also in determining what evidence might be necessary to support their cases or claims.

The course emphasizes the development of skills in client interviewing and counseling, fact finding and analysis, legal research and document drafting, pursuit of administrative and other legal remedies where appropriate, and creative problem-solving for the benefit of clients.²⁵ However, through the HeLP Clinic model, students learn these skills in the context of interdisciplinary team and group work, with an emphasis on interdisciplinary collaboration and problem-solving.²⁶ This interdisciplinary collaborative work takes place in the classroom, in supervision meetings, at hearings, or in meetings with clients. Students also gain exposure to the terminology and culture of various healthcare disciplines, especially the medical profession.

Developing an Interdisciplinary Course

The HeLP Clinic was created as the result of an award of a grant to establish an experiential learning program for law students to address and develop the educational mission of the medical-

23 There is some debate about whether legal clinics best serve their dual mission of educating students and providing legal services via specialization or general practice. Despite a general trend towards specialized legal clinics, Antoinette Sedillo Lopes argues that clinics achieve their dual goals of legal skills training and social justice when they serve a particular community or client base. This approach provides both greater access to legal services for the community while enabling students to observe widespread inequalities in the legal system and develops creative problem-solving skills. Antoinette Sedillo Lopez, *Learning Through Service in a Clinical Setting: The Effect of Specialization on Social Justice and Skills Training*, 7 CLINICAL L. REV. 307, 325 (2001).

24 See also Gunsalus, *supra* note 3, at 444.

25 Clinical educators have noted that "one discreet skill that is essential and often under-emphasized" in traditional law school curriculum "is listening, especially as it relates to interviewing. Our experience shows that professional training related to interviewing, across disciplines, emphasizes the drafting of questions, acquiring methods of asking questions in order to obtain particular answers and efficiently documenting information obtained." V. Pualani Enos & Lois H. Kanter, *Who's Listening? Introducing Students to Client-Centered, Client-Empowering, and Multi-disciplinary Problem-Solving in a Clinical Setting*, 9 CLINICAL L. REV. 83, 90-91 (2002).

26 Such an approach also benefits the clients served by such clinics by enabling the lawyer and the treating medical professional to see the client's legal goals and health needs as interrelated, thus both empowering the client/patient while also providing therapeutic benefits. Susan Daicoff, *Law as a Healing Profession: The "Comprehensive Law Movement"*, 6 PEPP. DISP. RESOL. L.J. 1, 12 (2006).

legal partnership. From the outset the goal was to incorporate interdisciplinary learning into the Clinic. Building relationships and establishing trust are key to success in any collaborative venture. Because relationships take time to build and strengthen, the interdisciplinary components of the HeLP Clinic course were developed over time, through multiple connections. A pivotal event for the Clinic was the selection of a Medical Champion for HeLP.²⁷ The Medical Champion immediately became engaged in operationalizing the many interdisciplinary aspects of the HeLP Clinic.²⁸ As an initial matter interdisciplinary education meant creating collaborative experiences among different disciplines, invariably from different academic institutions. In addition to the College of Law, Georgia State University has schools of public health and social work, but no medical school. Therefore, the HeLP Clinic faculty reached out to the two medical schools located in Atlanta: Emory University School of Medicine and Morehouse School of Medicine.

Creating joint experiences with medical students and residents has proved challenging due to differences in schedules and program requirements for law students, medical students, and residents. Because the social work and public health students are also from Georgia State University, students from those disciplines have been more easily incorporated into the HeLP Clinic course. The willingness of the medical education partners from Morehouse School of Medicine and Emory University School of Medicine to be flexible and experiment with different kinds of joint learning opportunities has resulted in the development and growth of interdisciplinary education experiences for law students, medical students, and residents. There are natural complexities inherent in combining students from the three academic centers. Nevertheless, the positive response from law and medical students makes it clear that the interdisciplinary elements of the course should be continued.

Introducing Law Students to the Hospital Environment

Many law students have never set foot in a hospital. Those who have likely did so as a visitor. A small handful may have been admitted as patients, but almost none have participated on the provider side of health care. Even before the semester starts, law students are exposed to the pediatric hospital environment. In order to be allowed access to the hospital, hospital regulations require that HeLP lawyers, staff, and students obtain the same immunizations as required of other

27 “Medical Champion” is a term of art suggesting a person in the medical field (usually a physician) who is the lead medical partner in the partnership. The role of the medical champion varies; however, generally it encompasses responsibility for medical direction and interpretation of medical data as it relates to the cases referred to HeLP and the HeLP Clinic. In HeLP, the medical champion dedicates a significant amount of time to cultivating relationships to increase awareness of the partnership and its goals to all members of the medical staff.

28 The Health Law Partnership began as a lawyer-driven medical-legal partnership. Law faculty from Georgia State University College of Law, lawyers from Atlanta Legal Aid Society, and the General Counsel at Children’s Healthcare of Atlanta conceived the vision and worked to bring the project to life. While HeLP achieved great successes in the early years, dynamic progress began with the identification of the physician medical champion. This physician embraced the mission of HeLP and the HeLP Clinic and set about opening doors, creating opportunities, making introductions, cajoling colleagues, giving presentations, developing hospital experiences for law students, and attending clinic classes.

hospital personnel.²⁹ Children's at Hughes Spalding is conveniently located near the Georgia State University College of Law campus so students' introduction to the healthcare environment continues via a hospital tour by the Medical Champion for HeLP.³⁰ The tour includes the emergency department where the students later will hold office hours, the primary care Clinics, and the inpatient areas of the hospital. The Medical Champion also educates students about the history of the hospital, the demographics of the patient population served at Children's, and about the specialty Clinics and centers specifically developed to address the needs of children seen at this inner city hospital. The tour is the first chance for many Clinic students to be exposed to a pediatric hospital and to the referral source for their clients. Our goal in walking students through the hospital, and introducing them to the hospital environment, is to begin to help students become comfortable inhabiting another professional environment – one in which their service on legal matters is a component of patient service. The tour assists in accomplishing another goal: getting members of the hospital team familiar with seeing lawyers and law students in their surroundings. Bilateral familiarity facilitates communication, the identification of patients experiencing both medical and legal problems, the efficient referral of those in need of legal services to HeLP, and the establishment of interdisciplinary collaboration.

A Rounds Exchange: Pediatric Residents from Emory School of Medicine

Through the HeLP Clinic, law students learn about the training and professional lives of pediatric residents, and vice versa. Pediatric residents from Emory University School of Medicine collaborate with law students in the Clinic case rounds. HeLP Clinic case rounds provide an opportunity for the whole class to meet to discuss Clinic cases. All cases assigned to the Clinic may be discussed at case rounds at some point during the semester. These group discussions focus on legal, ethical, medical, and other issues arising from client representation in the context of a medical-legal partnership. During rounds, the group may collaborate to resolve a problem, debate an ethical issue, or collaborate in the performance and critique of mock counseling sessions, moot hearings, or other aspects of case work. Case rounds are held approximately seven times during the semester. The rounds classes help students explore and deepen their understanding of the benefits of interprofessional problem-solving.³¹ Pediatric residents attend rounds and participate in the case discussions. The discussions are focused on different educational goals for the Clinic

29 Because students will be in the hospital, in close proximity to members of the health team and to patients and their families, they must be tested to ensure they have not been exposed to tuberculosis, that they have adequate immunization against common childhood diseases and that they have immunization against flu and hepatitis B. Before being permitted to enroll, students are tested and must show proof of the required immunizations to the hospital's office of Occupational Health.

30 Dr. Robert Pettignano, the Medical Director for Children's at Hughes Spalding Hospital and HeLP's Medical Champion, orchestrates students' introduction to the hospital environment. He works closely with HeLP clinic faculty and law students to create an interdisciplinary learning environment at the hospital.

31 Rounds offer many benefits for legal education, insofar as students combine "what they know about research methods with the clients' experiences. In rounds, students explicitly build on one another's knowledge. Learning located in experience is powerful; once students integrate learning into prior experiences they recall it more readily and can use it effectively." Susan Bryant & Elliott S. Milstein, *Rounds: A "Signature Pedagogy" for Clinical Education?*, 14 CLINICAL L. REV. 195, 208 (2007).

and are geared toward problem-solving of both legal and medical issues for clients.³² By attending interactive case rounds, the residents learn about legal issues that affect their patient population, share medical knowledge pertinent to the Clinic cases, and gain a deeper understanding of the legal system. The de-identified clients and cases under discussion represent the very same patient population they are treating, complete with all the same challenges. The residents' attendance and participation in HeLP Clinic rounds satisfies two of the core competencies that they must attain during their three-year residency.³³ Emory residency program directors³⁴ require that each pediatric resident attend one case rounds class. However, many have returned voluntarily two, three or more times because they find the experience rewarding. These residents are the next generation of health care providers and expanding their awareness of the socioeconomic determinants of health is a best practices endeavor. Once exposed to the discussion of HeLP Clinic cases, residents often begin to appreciate the value of interdisciplinary discussion and holistic problem-solving. Students, residents, and faculty alike agree that case rounds is the most dynamic example of the interdisciplinary learning environment the HeLP Clinic aspires to achieve.

The rounds exchange is completed as law students make their way over to the hospital to join one of the faculty attending physicians³⁵ as he or she makes daily patient rounds with the pediatric residents. At the hospital, law students are exposed to the dialog, language, learning, and problem-solving process that takes place during rounds and medical training. They also learn about individual diseases and the process of diagnosis in medicine. Law students are invited to ask questions and participate actively in rounds. Their presence reminds the attending physician and residents that a previously untapped resource exists for families who may have a legal problem affecting the health or well-being of the patient. For example, students attending patient rounds have suggested to the attending physician or residents that an asthma patient's family be referred to HeLP for a consult regarding housing conditions that may be impacting the child's disease.

Law students generally react favorably to this experience. The rounds serve not only as an opportunity for the attending physician to teach residents, but also an opportunity for the residents and law students to teach and learn from one another. Participating in rounds allows law students to see how patient care is coordinated and how medical professionals communicate with one another to help patients get well. By joining patient rounds, law students gain a greater appreciation for what it is like to work in the hospital environment, and learn how medical professionals solve patient problems.

32 Goals to be achieved during case rounds include developing professional identity, appreciating the ethical frameworks of the different professions, focusing on client-centered lawyering techniques, understanding complex medical diagnoses that affect the legal services to be provided, developing and improving effective communication skills, and developing appropriate professional boundaries.

33 These competencies are set by the American Council of Graduate Medical Education, <http://www.acgme.org>.

34 The authors would like to extend their gratitude to Dr. Lynn Gardner, Associate Director, Pediatric Residency Training Program, Emory University School of Medicine, and Dr. Susie Buchter, Director, Pediatric Residency Training Program, Emory University School of Medicine, for their dedication to excellence in medical training and the pursuit of innovation in resident education.

35 An attending physician is one "having the privilege to admit patients to a particular hospital and to treat them during their stay at the hospital or a physician on the staff of a hospital, but not residing in the hospital, who treats patients admitted to the hospital by the hospital itself (rather than by a private practitioner) and also instructs the interns and residents with regard to treatment of such patients." J.E. SCHMIDT, ATTORNEY'S DICTIONARY OF MEDICINE (1997).

Intake Mondays: Law Students in the Hospital

In addition to attendance at hospital patient rounds, law students enrolled in the HeLP Clinic continue their hospital experience by taking turns covering shifts for a program called “Intake Mondays.” Law students are trained to perform initial client intake interviews and then are allowed to do so in the Emergency Department (ED) and the Primary Care Clinic at the hospital. During their shift, students set up in a dedicated workspace either adjacent to the main nurse’s station in the hospital emergency department or in the residents’ workroom. Students first greet the nurses to remind the nurses that they are available to conduct initial intake interviews with patients identified as having legal problems and in need of referral to HeLP. The law students are also available via an on-site wireless telephone for a referral from one of the other care Clinics inside the hospital. There is a private consultation room available for client interviews when a client is referred. The purpose of this exchange is twofold: to provide students with an opportunity to perform initial interviews of potential Clinic clients within the hospital, and to provide hospital patients with the opportunity to directly access legal services while their child is getting medical care. Students also learn communication skills since they are often asked by hospital visitors and staff why they are in the hospital. Law students are trained to educate anyone who may ask about the Health Law Partnership, the HeLP Clinic, and our goal of collaboration to address the socioeconomic determinants of health for children.

Encouraging healthcare providers in the hospital to use the law students as a resource to perform legal intakes has taken time. This is due to multiple factors including the fast pace and the number of patients seen in the ED and the Primary Care Clinic on a daily basis, the fact that performing a “legal checkup” has not been ingrained into the fabric of the medical interview, and the time it takes to educate the hospital staff about the purpose of the law students’ presence. In spite of the challenges, the program has proved beneficial to students, even in its early stages. During their time in the hospital, students observe the nurses and doctors in their interactions with each other and the patients and reflect on those observations in class.

Over time, the purpose of having law students in the hospital is becoming better understood by the hospital staff. Slowly they are becoming part of the fabric by which holistic service is delivered at Children’s at Hughes Spalding. Residents now take the time to chat with the law students on duty. Many of these residents have participated in Clinic case rounds at the law school and encountering the law students in the hospital further solidifies the benefits of interdisciplinary, holistic problem-solving on behalf of patients/clients. Law students and medical professionals are finding opportunities to learn from one another formally, as well as informally. As familiarity with the program has increased, the number of legal referrals and intakes also has increased.

Joint Classes: Third Year Medical Students from Morehouse School of Medicine

During the early development of the HeLP Clinic course, Clinic faculty approached the Director of Predoctoral Education at the Morehouse School of Medicine Department of Pediatrics to

explore collaborative opportunities.³⁶ The parties agreed to pursue the creation of joint class experiences for law and medical students. The collaboration began with four joint classes between HeLP Clinic students and third year medical students. All HeLP Clinic students go to Morehouse twice each semester and attend “Fundamentals of Medicine III,” a mandatory, year-long class for all third year medical students. Attendance at these joint sessions is also mandatory for HeLP Clinic students. The HeLP Clinic faculty and Morehouse faculty have collaborated to develop the curriculum for these joint sessions, which are co-taught by faculty from both schools. The classes are interactive, often involving small group work and discussion.

Bridging Professions: Introducing Law Students and Medical Students to One Another

Combining a class of medical students and law students requires an introductory activity to help bridge the gap between the two professions and help the students to become comfortable with the idea of collaborating with one another. Putting these two groups of students together is something akin to an arranged marriage: both sets of parents think the pairing will be a success based on attributes that the parties may have in common, but the actual introduction and beginning interaction between the parties can be awkward and uncomfortable. We expected this and created some activities to help create a bridge during the first meeting of the two groups.

The first exercise is called “Who are we?” In this exercise the students are asked to form small groups within their own disciplines. The law students are asked to brainstorm answers to the question, “As a patient, I would like my doctor to be _____.” The medical students are asked to brainstorm answers to the question, “As a client, I would like my lawyer to be _____.”

After a few minutes of small group work on this task, the whole group comes together. The faculty writes on the board “Doctors” and begins by asking law students to name the qualities they discussed in their small group that they would like to have in a doctor. Characteristics such as “educated,” “sensitive,” “caring,” “not charge too much,” “not make me wait,” etc. are quickly accumulated and written on the board. If a law student makes a comment that implies a judgment, negative assumption, or stereotype about the medical profession, he or she is pressed to say more about it and the assumption is explored.

Next, the faculty writes “Lawyers” on the board, and the medical students are asked to identify the qualities that, as a client, they would like to see in their lawyer. Similar ideas generally surface, and the faculty facilitator begins to make connections about the two professions and the clients and patients we serve. The medical students often state they would like their lawyers to be “tenacious,” “on my side,” “honest,” etc. Judgments, stereotypes and negative assumptions about the legal profession are similarly explored, and lines drawn between the similarities on both sides of the board. Finally, all students are asked to reflect and comment on why they think they were asked to perform this exercise. This is the point at which law and medical students begin to warm to one another, and begin to discover that they may share some common ground, not only in what they expect from one another, but what is expected of them. It is also here that the first examples of

36 The authors would like to thank Dr. David Levine, Professor of Medicine and Chief, Division of Predoctoral Education, Morehouse School of Medicine for embracing the opportunity to participate with HeLP Clinic faculty in creating interdisciplinary learning opportunities for medical students and law students.

the benefits of interdisciplinary education become evident.³⁷ After the first class, students begin to think about the other profession's rules and beliefs, and the window to develop appreciation and respect is opened.

A striking aspect of the joint sessions is the realization that the medical students and law students have much in common. Generally, they chose their professions because they wanted to help people. Most chose their specific school because of the focus on service and giving back to the community. Both groups of students are learning about health disparities and the effect of socioeconomic determinants on the health of vulnerable populations. The joint classes afford yet another opportunity to influence the professional development of the next generation and better prepare them for twenty-first century professional practice. These joint classes contribute to an overall program of best practices in professional education of law and medical students.

Elective Rotation in the HeLP Legal Services Clinic: Fourth Year Medical Students in “Law and Medicine”

Building upon the success of the joint classes in the third year, a subsequent course was developed for fourth year medical students from Morehouse School of Medicine. The course, “Law and Medicine,” is an elective rotation.³⁸ Students who choose “Law and Medicine” participate in the HeLP Clinic and HeLP activities for four weeks, forty hours per week. Up to three medical students are permitted to participate in any given rotation to ensure an optimal rotation. Because the medical school schedule does not sync perfectly with the law school schedule, medical students are given a brief training and then folded in to whatever activities are happening in the Clinic at the time of their rotation. This could be at the beginning, middle or end of the semester. The medical students are assigned to different supervisory teams and attend weekly team meetings with law students. They also engage in case work with students, do medical research, and interpret medical records and legal rules that may have a medical component. They attend case rounds, case hearing moots, and even case hearings. One group of medical students was able to attend a federal appellate court oral argument on a case dealing with an access to healthcare issue that affects many of HeLP's clients.

The Law and Medicine elective is part of a continuum. For Morehouse students, an integral aspect of the medical school curriculum is understanding and addressing health disparities. By the time HeLP Clinic faculty and students meet third year medical students in the “Fundamentals of Medicine III” class, the medical students already are developing awareness of the need for community solutions to patients' problems. The FOM class opens that window for collaborating directly with lawyers and law students to address health disparities more holistically. The entire third year class is exposed to the message. While fourth year medical students clearly self-select to enroll in the Law and Medicine elective and only a limited number do so, information about their experiences and the value of the time spent at HeLP and the HeLP Clinic spreads throughout

37 Some other benefits of interdisciplinary education have been identified as the development of “necessary analytical skills; necessary practical skills; teamwork training; future marketability; recognition of the increasing client desire for one-stop shopping; understand... roles... knowledge of the limitations of legal training; and adding fun to the classroom.” Connolly, *supra* note 20, at 36.

38 The authors, Lisa Bliss and Sylvia Caley, were appointed as Adjunct Assistant Professors in the Department of Pediatrics at Morehouse School of Medicine and are the Supervisors of this elective rotation.

the class. A form of indirect “learning by association” takes place. Morehouse graduates begin their professional careers as physicians and surgeons appreciating the utility of comprehensive solutions to patients’ problems. The law students, who experienced the opportunity to work shoulder-to-shoulder with medical students in the HeLP Clinic, feel both valued and hopeful that relationships between lawyers and doctors will be more collaborative in their generation of professional practice.

Student Assessment

The HeLP Clinic course is three credit hours of the ninety credit hours students must successfully complete to be eligible for a juris doctor degree. Unlike some experiential learning opportunities that are pass/fail, this course is graded. Law students in the Clinic are assessed in their performance of the multiple learning objectives of the course, including professionalism in relationships and client-centered practice, legal problem-solving, research and writing, professional identity and independent learning, ethical and professional practice, case management, and course participation and collaboration with legal and other professionals.

The only other professional students who receive formal assessment of their HeLP Clinic participation at this time are the Morehouse School of Medicine fourth year medical students who enroll in the Law and Medicine elective. The medical students are evaluated on Clinical utilization of knowledge, academic preparedness, oral presentations, case notes, interpersonal relationships, insight, student effort, reaction to supervision and overall performance. This elective is pass/fail.

Challenges of the HeLP Clinic Model and Opportunities for Further Development

Many of the components of the HeLP Clinic that make it unique and exciting also provide challenges in keeping the program manageable and cohesive. Involving medical students and residents from two different medical schools in different and meaningful ways can be difficult to coordinate. Law students, medical students, and even the residents sometimes experience a feeling of “culture clash,” when they are first asked to learn together. While the Clinical law students are required to journal about their experiences engaging with the medical culture and their observations, up until now there has been no formal journal requirement for the medical students. Medical school may not encourage this kind of reflection, but we have decided to incorporate a reflection component for the medical students participating in the four-week elective. The only feedback received from medical students taking the elective thus far is through the course evaluation forms. However, medical students have responded positively to the course overall. While their comments are encouraging and helpful, a more guided reflection about the experience of medical students may reveal more about the value of the course to them and the faculty.

Another challenge that has been identified is the cultural differences in the amount of class preparation engaged in by law students and medical students. Even though the preparation time required for the joint classes is deliberately kept to a minimum, some is expected. Generally, the law students arrive prepared to discuss a short reading or prepare in advance an assignment to write a brief paragraph that contains as much legal jargon as possible, which they will share with the medical students. By comparison, the medical students are not accustomed to doing a great deal of class preparation for this particular course, and are more likely to prepare on the spot while

class unfolds. Some law students have commented on the differences between the two professions on the issue of preparing for class.

Finding sufficient time to cover all the useful topics and to practice skills exercises remains a challenge. Given the small number of credit hours allocated to the HeLP Clinic course, it is difficult to approach the course itself with depth. An enormous amount of material is covered together with the multiple interdisciplinary experiences, which can be viewed as “too much of a good thing.” Although it may be possible to add more credit hours for the law students who enroll, it may not be possible to increase the amount of time spent by the medical students and residents, who have their own professional and educational requirements to satisfy.

Other challenges exist with the development of the Intake Monday rotation. Some students were able to do client intakes during their shift at the hospital and some were not. Some enjoyed being part of the busy ED and Primary Care units, but others felt the time spent was not meaningful unless they actually had a client, and there is no way to control for this possibility. On the other hand, while law students tend to see this experience only through the lens of how it may benefit their own experience, from the medical side the benefit of their presence is to remind medical providers that legal service is available for patients who need it. The intake program was retooled to incorporate the hospital primary care Clinic, while also serving ED patients when needed. Over time this location may be a richer source of referrals and thus client intake opportunities for students.³⁹

The best opportunities for deep, meaningful joint experience have arisen from the Morehouse School of Medicine Law and Medicine elective rotation for fourth year medical students and the rounds exchanges for pediatric residents from Emory University School of Medicine. The intensive immersion of students enrolled in the Law and Medicine elective allows the law and medical students to experience working together on cases, and to learn through experience how they can be of help to one another. It also gives them opportunities for informal, friendly conversations, which helps to build bridges between the professions. Occasionally, deeper bonds develop. In the age of social media, it may be significant that the law and medical students have become Facebook “friends,” and stay in touch with one another long after their time together in the Clinic has ended.

The future opportunities for development of the HeLP Clinic are unlimited. For the first time, during the fall semester 2011, the HeLP Clinic served as a placement for a Master of Social Work student who is working in the Clinic sixteen hours per week providing case management services on behalf of Clinic clients. This proved to be a valuable service for Clinic clients and another chance for law students to work side by side with another professional. Also, during the fall semester of the academic year 2011-12 two Master of Public Health students fulfilled their practicum placement requirements by working in the HeLP Clinic. Again, these students brought yet another perspective to the issues affecting low-income, chronically ill, or disabled clients. Beginning in

³⁹ Children’s Healthcare of Atlanta at Hughes Spalding hospital was constructed with an open floor plan on the first floor of the hospital to house the Emergency Department, the Urgent Care Center, and the Primary Care Center (PCC). Patients flow between the three areas based on the acuity of their health situation and patient census. If a patient presents in the ED in stable condition and also is treated in the Primary Care Center, the patient will be moved to the PCC for assessment and treatment with their primary care physician. The open flow provides a good opportunity for the law students to be easily accessible to both members of the healthcare team and families in multiple contiguous areas.

January 2012, a neonatologist attending physician working on a Master in Bioethics degree spent 150 hours working with HeLP Clinic faculty and students. The ethics discussions in case rounds were very rich. By building bridges, being open to opportunities, and effectively communicating the benefits of collaboration, the HeLP Clinic truly has become an interdisciplinary enterprise.

Conclusion

The course is evolving as the partners continue to deepen their relationships. Feedback in the form of formal course evaluations, the HeLP evaluation instrument, and informal exit interviews of the law and medical students assists the faculty in implementing changes and validating successes of particular class sessions. With the number of people participating, new ideas continually become apparent, and the faculty share a willingness to experiment with new ways of doing things. While this means that the course and its components are in a constant state of flux, and materials must be redeveloped on an ongoing basis, the rewards that come from seeing new ideas take root more than make up for the trouble it takes to reinvent things. The revelation that sprouts from the ever changing environment of interdisciplinary work is that it is never static, and the number of players and disciplines moving in and out of the project creates opportunities for invention. As such, it provides constant fertile ground for ideas to emerge about the development of education for each profession, and ways in which students can engage with one another to become better doctors, lawyers, social workers, and public health professionals. An ongoing opportunity exists therefore for each type of student to become prepared for the practice of their profession in a fast moving, ever changing modern world.