

EDUCATIONAL AFFAIRS COMMITTEE SYMPOSIUM

“Interprofessional Education in Anatomy”

July 9th, 2018

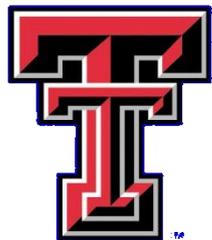
**Incorporating IPE into a
Preclinical Medical
Curriculum: Why and
How?**

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Overview of Presentation



- Introduction and rationale for incorporating Interprofessional Education (IPE) into your curricula
 - *Background and definitions*
- Description of Planning and Implementation of IPE learning activities into your curricula
 - *Components of an IPE curriculum*
 - *Initial challenges and solutions*
 - *Examples of what works and what doesn't*

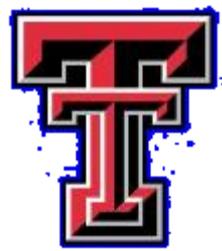


The Institute for Healthcare Improvement's Triple Aim Initiative



This is an approach to optimizing health care performance through the simultaneous pursuit of three aims:

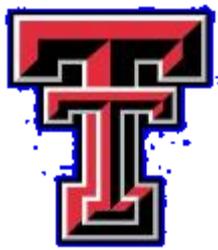
- Improving the patient experience of care (including quality and satisfaction)
- Improving the health of populations
- Reducing the per capita cost of health care



Interprofessional Collaborative Practice (ICP)



- Way to provide the BEST patient care
- Is accomplished by ‘TEAMS’ of health care professionals (HCP) rather than individuals



Definition - ICP



“When ***multiple*** health workers from ***different professional*** backgrounds provide comprehensive services by working with patients, their families, care givers and communities to deliver the ***highest quality of care*** across settings”

Lets talk about what is necessary for that “team” to win....



What team or individual characteristics contribute to success?

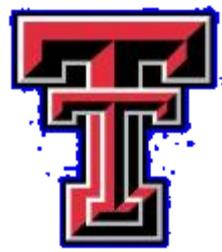
How does all this come about? Does it happen overnight?



Rational - Interprofessional Education



“When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes”



IPE should prepare students for collaborative practice



In 2011 the Interprofessional Education Collaborative published The Competencies for Interprofessional Collaborative Practice (IPCP) to guide curriculum development across health professions schools



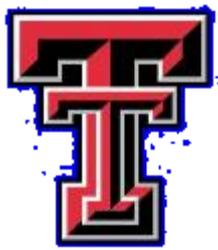
Updated 2016 competencies for ICP



Values/Ethics-“Work with individuals of other professions to maintain a climate of mutual respect and shared values.”

Roles/Responsibilities – “Use the knowledge of one’s own role and those of other professions to appropriately assess and address the health care needs **of patients** and **to promote and advance the health of populations.**”

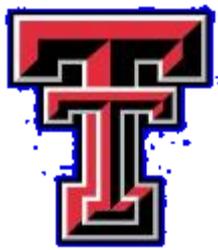
Communication - Communicate with patients, families, communities, **and professionals in health and other fields** in a responsive and responsible manner that supports a team approach to the **promotion and** maintenance of health and the **prevention and** treatment of disease.



Updated 2016 competencies for ICP



Teams and Teamwork - Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to **plan, deliver, and evaluate** patient/population-centered care **and develop population health programs and policies** that **are** safe, timely, efficient, effective, and equitable.



Importance of topics and sub-competencies

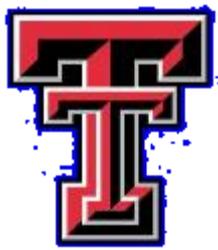


This is how you will assess the efficacy of your IPE learning activity

Poster, Tuesday morning #22 “Demonstration and Presentation of Pharyngeal Structures in an Interprofessional Educational Activity”

How to introduce IPECP into your curricula?





Components of an IPECP curriculum



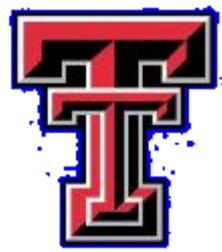
■ Introduction

- *Institutional IPECP modules*
- *Sim Center discharge scenario (concussion, broken wrist, polypharmacy) with graduate students in PH and GSBS as the SP; students from medicine, nursing, OT, SLP, AUD and Pharmacy residents*

■ Immersion activities

■ Summative assessment of core competencies

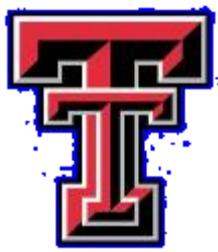
- *OSCE-type*
- *Some excellent, validated assessments can be found in the literature*



Immersion activities-getting started



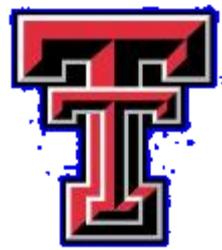
- Getting others to play in your sand box?
 - *Knock on doors*
 - *IPE activities are being driven by accreditation*
 - *However, if good, are student driven*



Early Bird Gets the Worm!



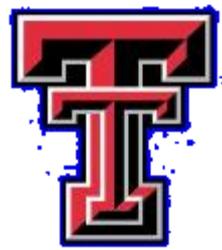
- Start planning early, last minute does not work!
Starting early helps mitigate problems caused by:
 - *Different start and stop times for different schools*
 - *Multiple campuses*
 - *Allows for reservation of classroom or room and standardized patients in a simulated environment*
 - *Allows for students in clinic to get relieved of duties*



Immersion activities: problems and solutions; lessons learned



- Easiest if done within a designated class time
 - *Extra credit; base exam questions off of activity, certificates for portfolio*
- Activity should include input from all HCP faculty
- Smaller the group the better (5 students)
 - *One profession should not be significantly over-represented*
 - More senior students from the other professions....



Problems and solutions; lessons learned continued



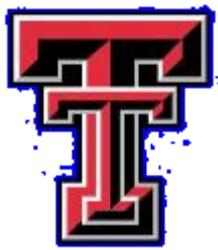
- *More senior students from the other profession can minimize the disparity in numbers.....*
 - Must be an extremely strong student
 - If knowledge is too disparate (especially in early preclinical years) activity is unpleasant and can be embarrassing for the student
- *Make the activity volunteer rather than mandatory*



Problems and solutions; lessons learned continued



- Type of activity is very important
 - *Case studies are easy*
 - Requires many facilitators
 - Poor facilitators are the “kiss of death”
 - Tend to be the “least popular” for students
 - *Interactive activities are most popular*
 - Especially in preclinical years if can involve patient populations



After pilot....then what?



- Listen to student feedback and be willing to change
 - *Don't throw the baby out with the bathwater!*
- Be open to continually improve the activity. Your dream IPECP activity may take years to reach.....and then



BEYOND
YOUR
CONTROL

BEYOND

CONTROL

BEYOND



QUESTIONS AND DISCUSSION?

Good Luck!