

2019 ASAHP Annual Conference – Poster Presentation Abstracts**THURSDAY, OCTOBER 17, 2019 (6:30pm-8:00pm)****INNOVATIONS IN REHABILITATION**

EXPLORING SERVICES FOR OLDER ADULTS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES WITHIN A COMMUNITY; Karin Barnes (University of Texas Health San Antonio); Ashley Cronin (University of Texas Health San Antonio); Donald Grant (University of Texas Health San Antonio); Haley Needham (University of Texas Health San Antonio); Hena Patel (University of Texas Health San Antonio); Anna Pollard (University of Texas Health San Antonio)
Hypothesis/Issue to be addressed: Older adults with Intellectual/Developmental Disabilities (I/DD) have social isolation vulnerability and unique health needs. Explored are community settings/services related to WHO/AARP standards of healthy living for older adults and current literature; aiming to increase knowledge and address their needs and services.

Question: What services are provided by an urban agencies serving older adults with I/DD, in relation to the WHO/AARP standards of healthy living for older adults? Method: Descriptive and qualitative design. Interviews and observations of community agencies serving older adults with I/DD are conducted. Information about services in varied community settings are compiled. Descriptive and qualitative data are used to describe and analyze services for clients within different settings. Findings are analyzed in relation to WHO/AARP standards and current literature.

Observations/Outcomes: Presented data describes scope of services provided to clients within different community settings. Services are analyzed in relation to WHO/AARP standards and current literature.

Conclusion: Analysis of services are reviewed related to WHO/AARP standards and current literature about the population.

THE ACUTE AND RESIDUAL EFFECTS OF IASTM AND MASSAGE STICK ON HAMSTRING RANGE OF MOTION; Valerie Herzog (Weber State University); John Lee, MS, LAT, ATC (Weber State University); Annie Young, MS, LAT, ATC (Weber State University); Noah John Erb (Weber State University)

Hypothesis/Issue to be Addressed: Injuries can result in fascial adhesions, reducing ROM and causing pain. We hypothesized that IASTM would increase ROM more than The Stick immediately and 48 hours after a single treatment.

Methods: The independent variables were IASTM using stainless-steel instruments and The Stick. Sixteen (8M, 8F) recreationally-active participants were randomly assigned to either IASTM or The Stick treatment for 3.5 minutes on the hamstring of their dominant leg with the other intervention applied to the hamstring of their non-dominant leg. Active knee extension and passive hip flexion were measured pre-treatment, immediately post-treatment, and 48hrs-post-treatment using a digital inclinometer.

Observations/Outcomes: Both IASTM and The Stick produced statistically significant increases in AROM and PROM immediately and this was sustained for 48 hours. However, there was no difference between treatments at any of the time points for AROM or PROM.

Conclusion: ROM was increased and sustained regardless of the treatment type. IASTM and The Stick were equally effective, but The Stick is more affordable and can be self-administered.

LEADERSHIP

NOT CAVING INTO THE FEAR OF FAILURE: THE PURSUIT OF A DOCTORAL DEGREE; Tammy Webster (University of Nebraska Medical Center); Betsy Becker (University of Nebraska Medical Center); Faye Haggar (University of Nebraska Medical Center); Karen Honeycutt (University of Nebraska Medical Center); Sarah McBrien (University of Nebraska Medical Center); Jill Skrabal (Nebraska Medicine)

Issue to be addressed: Identify motivational factors and common barriers associated with the pursuit of a doctoral degree; identify components of a successful writing and support group.

Method: Mixed methods design capturing quantitative metrics and personal reflections from the doctoral journey of 6 women faculty representing multiple disciplines.

Outcomes:

1. Strategies for overcoming the fear of failure such as: work-life-school balance, maintenance of personal relationships, self-care.
2. Key components to a successful support group.
3. Utilization of networking connections to facilitate success and overcome common challenges.

Conclusion: An organic team built on mutual trust and respect without official financial support from College/University; ongoing relationships after dissertation process for advancement of women; serve as model for other young faculty members who are interested in forming similar groups; the value of sharing connections across disciplines.

PERCEIVED BARRIERS, CHALLENGES, SUCCESSES, AND REWARDS OF LEADERSHIP POSITIONS IN SCHOOLS AND COLLEGES OF HEALTH PROFESSIONS IN HIGHER EDUCATION – A SURVEY OF ADMINISTRATORS; Ericka P. Zimmerman (Western Carolina University); April L. Harkins (Marquette University); Francine M. Seruya (Mercy College); Rafael E. Bahamonde (Indiana University Purdue University Indianapolis)

Abstract: This study explored perceived barriers, challenges, successes, and rewards of leadership positions in schools of health professions from an administrator's perspective.

Method: The study utilized an exploratory, survey design with convenience sampling, electronically disseminated to academic representatives in the 115 ASAHP member institutions.

Results: 310 responses were collected, 268 participants completed the entire survey and 131 participants identified as current administrators. Top perceived barriers were time demands, concerns about increased workload, and family obligations. Faculty personnel issues, time management/workload demands, resource constraints and maintaining scholarly responsibilities were reported as the top perceived challenges. Experience, confidence, prior faculty experience, and being challenged were primary perceived successes associated with leadership. The most rewarding responsibilities included making an impact, advancing the department/school/ institution, and professional growth.

Conclusion: Institutions should consider professional development on personnel issues, time management, and workload demands.

MODELS OF EXCELLENCE AND CREATIVE APPROACHES FOR ENHANCING IPE/IPA

AROUND TOWN: A SIMULATED COMMUNITY REINTEGRATION INTERPROFESSIONAL LEARNING EXPERIENCE; Sarah Blaylock (Nova Southeastern University); Kimberly Smith (Dr. Pallavi Patel College of Health Care Sciences), Nardia Aldridge (Dr. Pallavi Patel College of Health Care Sciences), Rania Margonis (Dr. Pallavi Patel College of Health Care Sciences)

Issue: Occupational therapy (OT) and physical therapy (PT) both address patient function in the community, providing an opportunity for a needed interprofessional education (IPE) activity.

Method: Faculty created six cases with varying co-morbidities. Twenty-two teams consisted of one OT/one PT student serving as “therapists” and one PT student serving as “patient.” Each team had 90-minutes to examine the patient within the community environment and develop a plan of care, specifying each discipline’s role. Students completed the Interprofessional Collaborative Competencies Attainment Survey (ICCAS-Revised) and a pre-post survey exploring IPE competencies.

Outcomes: Twenty-two OT students and 42 PT students provided survey responses. Post scores were significantly higher than pre-survey scores for all IPEC competencies: communication, $t(-6.01)$, $p < 0.00$; teamwork, $t(-5.85)$, $p < 0.00$; roles/responsibilities, $t(-5.29)$, $p < 0.00$; and values/ethics, $t(-3.89)$, $p < 0.00$. Post ICCAS scores (Mdn = 5) were significantly higher than pre scores (Mdn = 4); $Z = -25.58$, $p < 0.00$.

Conclusion: This community-based IPE simulation activity supported development of collaborative practice competencies.

INTER-PROFESSIONAL SCHOOL-BASED PRACTICE: UNDERSTANDING ROLES AND RESPONSIBILITIES; Donna Bowers (Sacred Heart University); Rhea Paul; Ellen Massucci; Jamie Marotto; Pat Carl-Stannard; Joan Sauvigne-Kirsch; Kristin Rainville

Authors hypothesized that a brief, focused experience in interprofessional practice would result in positive change in perceptions of IP collaboration. The project engaged OT, PT, SLP, Social Work, and Education students. Griffin (2017) discussed the continuing difficulties in accomplishing IP collaboration in school settings. This project involved thirty-five students from Sacred Heart University’s graduate programs, who participated in a 3-hour activity in which students worked in groups with faculty facilitators. Groups discussed their own fields’ roles and responsibilities, and overlap/intersection among the professions in school settings. They applied these insights to a student with complex needs. The case was a catalyst for discussing collaborative service planning. Outcomes, across all disciplines, showed a significant difference between pre and post scores on the Interdisciplinary Education Perception Scale, designed to measure attitudes regarding professional roles and responsibilities. Authors concluded that this IPE experience led to changes in students’ perceptions related to collaborative school-based practice. Brief, intensive events may lead to increased competence in collaboration in future school-based personnel.

ENCOURAGING INTERPROFESSIONAL COLLABORATIVE PRACTICE THROUGH SIMULATION WITH MEDICAL LABORATORY SCIENCE STUDENTS, PHYSICIANS, AND PHYSICIAN ASSISTANTS; Michelle Brown (University of Alabama at Birmingham); Brianna V. Miller (UAB); Justin Goebel (UAB); Heather Hallman (UAB); Neena Xavier (UAB)

Effective teamwork is necessary for optimal delivery of healthcare. With providers dependent on rapid turn-around times for blood components, it is essential that the medical laboratory scientists (MLS) in the transfusion service communicate delays. In order to emphasize the necessity of interprofessional (IP)

communication, we use an activity called transfusion medicine rounds. Students are provided with a patient history and analyze the results of the transfusion testing. They then present the case to a panel of MLSs with information that is important to a coworker. Next, they call a provider to convey information important to the clinical team. The providers on call respond with questions they commonly have in clinical practice. A survey given of the students (n=16) revealed that 100% strongly agree the activity emphasized the importance of IP communication and helped them understand what information is important to providers. Likewise, 81% strongly agree and 19% agree they are more confident in their IP communication skills. Having two distinct conversations enables the students to distinguish between information important to a laboratorian versus that which is important to a provider.

INTEGRATING UNDERGRADUATE AND GRADUATE INTERPROFESSIONAL EDUCATION; Leigh Cellucci (East Carolina University); Chris Lysaght (East Carolina University); Jason Mose (East Carolina University); Audrey Eaves (East Carolina University); Elizabeth Locklear (East Carolina University); Ann Mannie (East Carolina University); Heather Panczykowski (East Carolina University); Kim Stokes (East Carolina University); Paul Toriello (East Carolina University); Allyson Turnage (East Carolina University); and Kate Willson (East Carolina University)

The College of Allied Health Sciences established an interprofessional commons to foster an innovative environment that values interprofessional education (IPE) and helps build students' team skills. While allied health IPE research has focused on graduate students, we included both undergraduate and graduate students representing eight disciplines in an integrated two-semester IPE course. The purpose of this study was to determine if student status (undergraduate or graduate) affected their learning experience. Questions addressed if the course added benefit to their IPE learning and to identify impediments they encountered regarding team assignments. From analysis of two end-of-semester surveys, the findings indicate that class status did not influence student perceptions significantly. The students found the IPE course to be beneficial, and they desired more opportunities for teamwork. However, they reported a major impediment was their ability to schedule team meetings. The findings suggest that while class status does not affect IPE student learning, the need exists for IPE protected hours as well as continued assessment of the influence of student on-line or face-to-face status on IPE team experience.

HYBRID CROSS-LEVEL INTERPROFESSIONAL PEER-ASSISTED LEARNING IN ANATOMY & PHYSIOLOGY LABORATORY; Jean Chappell (Piedmont Virginia Community College); Les P. Keniston (University of Maryland Eastern Shore); George A. Steer (University of Maryland Eastern Shore)

Interprofessional Education (IPE) is required by healthcare program accreditors and is challenging to integrate into curricula without loss of developing key competencies. Student attrition in basic sciences ranges from 40-70%. Integrating Cross - Level Peer Assisted Learning (CL-PAL) tutors into prerequisite A&P may decrease attrition. The tutors are content/procedure competent upper level health professions students and were set at a ratio of 1:4 tutor to student. Tutors facilitated learning and reinforced course objectives in clinically applicable labs. Knowles suggests that adult learners are more engaged in a subject when they perceive relevance to their life. Upon survey, we found a significance between control and intervention students where students reported: 1. "the lab exercises were beneficial to my understanding of the material", 2. "I received an appropriate amount of individualized attention to learn the material", and 7. "the pre-laboratory assignments were useful for understanding the material".

Two Virginia community colleges will use CL-PAL IPE to promote student learning in their Medical Laboratory Technician programs. This approach promotes a culture of interprofessionalism early in the students' career.

THE EVOLUTION OF INCLUSION OF IMAGING STUDENTS IN A STUDENT-RUN INTERPROFESSIONAL FREE CLINIC; Melissa Clark (University of Arkansas for Medical Sciences); Lisa Rhoden (University of Arkansas for Medical Sciences); Layla Simmons (University of Arkansas for Medical Sciences)

Inclusion of imaging students in a meaningful IPE experience on the UAMS campus has been a challenge since the curriculum's inception in 2015. Representation of imaging students exists within the curriculum, but often times students struggle to feel like an essential component of the team.

The 12th Street Health and Wellness Center (12th Street HWC) is a student-run, interprofessional, free clinic where students from all five colleges are invited to participate on interprofessional teams to deliver health care services to patients who have no or limited access to health care in the Central Arkansas area. These patients are often unable to afford imaging services, so to address this health need we have incorporated both radiography and sonography as available services at the 12th Street HWC. We have also found this meets an educational need in the IPE curriculum for imaging students.

Upon inception, the imaging students participating on the interprofessional teams at the 12th Street HWC reported a higher feeling of satisfaction when compared to other interprofessional activities available.

This new activity highlights the skills and expertise of imaging professionals as an essential part of the health care team.

MAKING AN IMPACT: INTEGRATING MULTIDISCIPLINARY PROFESSIONAL ACTIVITIES IN COLLABORATION TOGETHER; Clotilde Dudley Smith (Sacred Heart University); Sharon McCloskey (Sacred Heart University); Victoria Osborne (Sacred Heart University); Jody Bortone (Sacred Heart University); Tammy Lampley (Sacred Heart University)

The Institute of Medicine (IOM) advises that healthcare education should teach interprofessional groups of students to deliver patient-centered care, and develop skills in collaborative teamwork and communication, evidence-based practice, quality improvement, and informatics (IOM, 2003).

Interprofessional teams enhance the quality of patient care, lower costs, decrease length of hospital stay, and reduce medical errors. (IOM, 2001).

To that end, the Colleges of Health Professions, Nursing and Arts and Sciences formed a collaborative committee whose mission is to create a program enabling all graduates to demonstrate readiness for interprofessional collaboration. One product of the committee is four events throughout the academic year, based on the four competencies of Values and Ethics, Roles and Responsibilities, Interprofessional Communication and Teams and Teamwork. Undergraduate and graduate students from various majors in those colleges, including Occupational Therapy, Social Work and Health Sciences, work together in interprofessional teams to discuss a patient case centered on one of those four competencies. Before and after the events, students are given the RIPLS questionnaire to evaluate their attitudes towards IPE.

STUDENT-LED INTERDISCIPLINARY TEAMS ENHANCE STUDENT RESEARCH EXPERIENCES; Jeanette Garcia (University of Central Florida)

Issue addressed: To determine whether the development of an interdisciplinary team of students from health-related disciplines would enhance student research experiences.

Methods: Three teams of 3 – 5 students from different health-related disciplines (e.g. Kinesiology, Psychology) developed health promotion programs that were conducted in schools and community organizations. Students gained experience with conducting participant focus groups, measuring physiological and psychological health outcomes, learning proper data entry procedures, coding qualitative data, and assisting with data analysis and interpretation. At the end of the project period, students completed surveys that inquired about their experiences with this interdisciplinary approach.

Outcomes: All 14 students who participated felt they benefitted from the interdisciplinary model, and 79% of the students reported that this experience enhanced their confidence in research design and increased their interest in interdisciplinary collaborations.

Conclusion: An interdisciplinary approach to student research may enhance student interest and experiences. Further research is needed to determine benefits across health disciplines and research settings.

MOVING A COURSE FROM AN INTER-DISCIPLINARY COURSE FORMAT TO AND INTERPROFESSIONAL EDUCATION COURSE FORMAT; Ricky Joseph (University of Texas Health Science Center San Antonio); Dr. George Kudolo (University of Texas Health Science Center San Antonio); Dr. Maureen Simmonds (University of Texas Health Science Center)

The need exists to clearly distinguish interdisciplinary courses in healthcare education from interprofessional courses. Educators, untrained in the design and delivery of interprofessional education will often attempt to label interdisciplinary educational courses as interprofessional courses.

Methodology: Three healthcare disciplines collaborated to convert an interdisciplinary course, with a ten-year history, into an interprofessional education course. The agreed upon goal was to assure that students from the three disciplines (medical lab science, occupational and physical therapy, n=105) benefit from the IPEC competencies while accomplishing the objectives of the course. The course was redesigned from an information-discussion-facilitation format to an information-team discussion-team planning-team product design-and team product delivery format.

Observations/Outcomes: Both the quantitative and qualitative ratings of the course immediately improved after the first year and has been sustained over the last four years.

Conclusion: This format for transitioning courses from interdisciplinary to interprofessional education course can be applied to ensure that IPE competencies and course objectives are attained.

INTERPROFESSIONAL FACULTY FACILITATOR EFFECTIVENESS IMPROVES WITH MULTIPLE FORMATS OF TRAINING MATERIALS; Patricia Ohtake (University at Buffalo); Janice Tona (University at Buffalo)

Issue: IPEC core competency development requires robust interprofessional (IP) learning experiences, however many faculty lack the skills to facilitate IP groups of students. We investigated the impact of written, online video, and just-in-time facilitator training on students' evaluation of faculty facilitation effectiveness.

Method: Our IPE program provides IP Forums where students engage in small group case discussions with a faculty facilitator. Faculty were provided IP small group facilitation training in written (starting Fall 2016), online video (starting Spring 2017), and just-in-time (starting Fall 2017) formats. Using program evaluations, students evaluated facilitator effectiveness. Faculty evaluated training format effectiveness.

Outcomes: Students' (n=4,224; response rate 97%) agreement that their faculty facilitator was effective increased as the variety of facilitator training materials increased [79% (Fall 2016) to 85% (Fall 2017)]. Faculty facilitators (n=480; response rate 72%) agreed written (95%), online video (86%), and just-in-time (90%) training formats were useful.

Conclusion: Student-assessed faculty facilitator effectiveness improved with the introduction of multiple formats of training materials.

A CREATIVE APPROACH TO ENHANCE COMMUNICATION WITH PEDIATRIC PATIENTS: AN INTERPROFESSIONAL EVENT; Alyssa Quinlan (St. John's University); Stacey Singer-Leshinsky (St. John's University), Alyssa Quinlan (St. John's University), Corinne Alois (St. John's University)

Issue: Teaching communication skills to future health care providers can be challenging when there is limited access to pediatric communities. As medical educators, we inspire future clinicians to promote the health and well-being of children. This study focuses on the perceived benefits of engagement between various health care profession students and elementary school aged children.

Method: An IPE service project was initiated involving Physician Assistant, Clinical Laboratory Science, and Radiologic Technology students and faculty. Various health topics were presented to students in multiple small group settings. Qualitative surveys were collected from health science and elementary student participants regarding attitudes towards the experience.

Observations: Health science students reported improvements in communication skills with children and other healthcare professionals and increased awareness of roles/responsibilities of the health care team. Elementary students reported increased health awareness, and improved knowledge of the function of various health care professionals.

Discussion: Incorporating engaging activities can be a creative approach to IPE and a valuable tool for promoting healthcare.

INNOVATIVE APPROACHES TO LAUNCHING IPCP AMONGST GRADUATE STUDENTS IN ALLIED HEALTH PROFESSIONS; Katherine Russell (University of Cincinnati); Chalee Engelhard (University of Cincinnati); Amber Boyd (University of Cincinnati); Kelly Kennedy (University of Cincinnati)

Hypothesis: The education of students within the allied health disciplines has become increasingly focused on incorporating Interprofessional Education (IPE).

Method: Due to this growing need, an interdisciplinary team of faculty partnered to establish an Interprofessional Collaborative Practice (IPCP) workgroup. The team's primary objectives included identification and removal of barriers to collaboration and promoting the integration of IPE in each individual discipline through train-the-trainer workshops, educational events, and development of a well-vetted IPCP curriculum.

Outcomes: The workgroup successfully established a curricular framework to pilot a community-based initiative for IPCP at clinical sites, and to further increase IPCP student and community experiences. This process enabled the integration of IPE throughout the college, and establishment of an iterative cycle designed to promote ongoing enhancement of the graduate student experience.

Conclusion: Development of an IPCP faculty workgroup fostered an innovative culture, removed barriers, and jumpstarted the knowledge and integration of IPCP in the community while simultaneously providing IPCP opportunities for graduate students to meet accreditation standards.

NEW MODELS FOR HEALTH PROFESSIONS EDUCATION AND PRACTICE

PLANNING FOR INTERPROFESSIONAL EDUCATION AND PRACTICE: CRITICAL SUCCESS FACTORS FOR LEARNING SPACES; Jennifer Amster (Health Education Planning and Design, Principal)

Hypothesis: Strategically designed interprofessional health education spaces that mirror real-world environments prepare future leaders by facilitating team-based learning and promoting collaboration between disciplines.

Method: Researchers gathered and analyzed metrics, planning methodologies, and surveys for several health education buildings that brought departments together for interprofessional opportunities.

Observations/Outcomes:

- Interprofessional classrooms and simulation spaces require more area per seat to accommodate multiple departments and larger groups.
- Interprofessional team competencies are gained through specific spatial attributes, including visibility, acoustics, size, lighting.
- Effective interprofessional health education buildings are strategically planned to build community and promote interaction.
- Student engagement is increased by gaining understanding of other disciplines' activities through chance encounters and transparency into learning spaces.

Conclusions: Traditional classroom and simulation space benchmarks must be adjusted for integrated health professions buildings. Collaboration space and transparency increase student satisfaction and maximize learning and research opportunities.

ACADEMIC SUCCESS FACTORS AMONG HEALTH PROFESSIONS STUDENTS FROM ECONOMICALLY OR EDUCATIONALLY DISADVANTAGED BACKGROUNDS; Reamer Bushardt, PharmD, PA-C (George Washington University); Maranda C. Ward, EdD, MPH (George Washington University); Catherine Golden, EdD, MPA (George Washington University); Blake Harrison, PMP (George Washington University); Ellen Scully-Russ, EdD (George Washington University); Russell Korte, MBA, PhD (George Washington University); Grace Henry, EdD (George Washington University)

Issue: Increasing the diversity of the U.S. healthcare workforce is necessary to deliver culturally competent care and improve disparate health outcomes. A workforce pipeline initiative was initiated as an innovative partnership between a public high school, regional community colleges, and a private university to create a future generation of health professionals from diverse backgrounds.

Method: An environmental study was conducted using mixed methods to describe factors impacting the academic success of students from economically and/or educational disadvantaged backgrounds within high school, community college, and university settings.

Results: This regional environmental study analyzed 19 programs that targeted academic enrichment or social support for diverse students across the three educational settings. Content analysis of published reports and interviews revealed 5 protective and 10 risk factors that impact academic success. A gap analysis was performed against existing student support services and programs.

Conclusion: Students from underrepresented backgrounds in the health professions experience numerous barriers in the educational pipeline. Efforts are underway to address the gaps to better meet student needs.

INNOVATIVE PUBLIC-PRIVATE PARTNERSHIP TO ADVANCE DIVERSITY IN HEALTH PROFESSIONS EDUCATION AND PRACTICE; Catherine Golden (George Washington University); Laura Evans (Alexandria City Public Schools); Jennifer Ushe (Alexandria City Public Schools); Joyce Maring (George Washington University), Reamer Bushardt (George Washington University)

Initiatives authorized by Congress, such as GEARUP, recognize the need to foster student readiness for postsecondary education in underserved and underrepresented populations. Health professions (HP) need to enhance access and success of underrepresented students in order to diversify the healthcare workforce and provide culturally competent care. Developing educational pipelines that engage high school students from diverse backgrounds in health career pathways may address the HP workforce shortages and serve the needs of diverse patients and communities. A Governor's Health Sciences Academy was successfully established to grow a diverse pipeline into health careers through partnership between a public secondary and a private postsecondary education institution. The host high school enrolls almost 4,000 students, 78% coming from underrepresented minorities or disadvantaged backgrounds. Enrollees complete up to 18 college credits through dual enrollment pathways leading to high-demand healthcare careers. Pedagogical approaches emphasize authentic learning and reinforce health equity principles. Academies and pipeline programs address critical healthcare workforce shortages, and may improve workforce diversity.

AN EXPLORATION OF FACTORS ASSOCIATED WITH OCCUPATIONAL THERAPY STUDENTS' ACADEMIC AND PROFESSIONAL COMPETENCE; Lisa Handler (Long Island University); Amiya Waldman-Levi, PhD, OTR/L (Long Island University)

Hypothesis: There is limited research regarding personal and cognitive factors that affect student's clinical and academic performance. Student executive functioning, learning strategies, and academic performance will predict their clinical performance and professional competencies.

Method: A cohort study (N=48) using a convenient sampling method of a three-year BS/MS occupational therapy program in a metropolitan area. The Executive Function Index (EFI; Spinella, 2005), The Learning and Study Strategies Inventory, 2nd Edition (LASSI; Weinstein & Palmar, 2002), and science courses grade point average, at the first year. Fieldwork Performance Evaluation (FWPE; AOTA, 2003), at the third year. NBCOT Occupational Therapy Knowledge Exam (OTKE; NBCOT, 2019), at the end of third year.

Observations/Outcomes: Student Executive functioning and Test-Taking Strategies predicted student clinical performance, explained 57.7% of variability in evaluation scores. Science GPA predicted 42.6% of the variability in professional competence scores.

Conclusion: Executive functioning and test-taking strategies predicted student clinical performance, while Science GPA predicted better professional competence.

THE EFFECTIVENESS OF THE KAWA MODEL TO IMPROVE SELF-EFFICACY FOR FIELDWORK; Jian Jones (Florida A&M University); Brittany Nash (Florida A&M University)

Self-reflection and strategic planning have been recommended as tools for students to navigate through stressful practice (Prast, Chase & Chrestion 2017). The purpose of this research: a) examine the utility of the adapted Kawa model to improve level II FW readiness in relation to self-efficacy and b) to assist students with identifying potential barriers relating to occupational therapy level II fieldwork using the Kawa model. The Kawa model was implemented as a clinical approach to assist students in identifying barriers to strategically plan for potential stressful events in fieldwork. Using the adapted traffic highway

Kawa model as an individualistic assessment enabled the students to express concerns, identify goals, strengths and weaknesses related to the level II FW experience. A survey of open-ended questions was administered to identify themes. Clinical outcomes included the self-identification of barriers that could impede successful performance and educational outcomes included the creation of a strategic plan to address potential barriers relating to self-efficacy while on level II fieldwork. Conclusion, themes indicated improved self-efficacy relating to future FW performance.

AN INTERPROFESSIONAL FACULTY DEVELOPMENT MODEL FOCUSED ON IMPROVING PEDAGOGY IN A COLLEGE OF HEALTH SCIENCES; Douglas Keskula (Western Carolina University); Terry W. Pollard, Ed.D. (Senior Educational Developer, WCU)

The purpose of this paper is to describe the development and implementation of a Health Educators Academy as a model for faculty development in a College of Health Sciences. Twenty-five faculty participated in the program over the past 5 years. Each spring, 5 faculty are selected to participate in a week-long summer master class facilitated by an outside expert in health professions education. Participants work with their interprofessional cohort throughout the year to complete goals focusing on improving teaching and engaging in scholarship. Three peer review publications and over 20 peer reviewed presentations have resulted from the collaborative work of academy members. Both qualitative and quantitative feedback from participants has been extremely positive in terms of improvement in instruction, facilitation of interprofessional collaboration/scholarship and career development. We believe this interprofessional faculty development model has potential to benefit health-related educational programs by improving teaching skills and facilitating collaboration and scholarship. Practical guidelines for the organization and implementation of this collaborative faculty development model will be presented.

SKILL BUILDING FOR SPEECH-LANGUAGE PATHOLOGY STUDENTS USING CLINICAL SIMULATION LABS; Fang Ling Lu (UT Health - San Antonio); Angela Kennedy, SLPD, CCC-SLP (University of Texas Health- San Antonio)

For a new master's degree program in speech-language pathology with a medically focused curriculum, we recognize a great need to build a bridge between academic knowledge and clinical skill through competency-based education. One of our approaches is to provide students with guided experiences before external practicum placement that replicate important aspects of the real world in medical settings. Our program is tasked with building two innovative clinical skills labs to simulate an acute care hospital setup and a clinic setup. The objective of the labs is threefold:

- (1) Faculty can teach hands-on applications in simulated case studies, thus providing students opportunities to apply academic knowledge to critical decision-making in a low-stakes setting.
- (2) Students are provided with guided experiences to learn substantial aspects of the real world in a fully interactive manner before their external clinical practicum placement.
- (3) Faculty can conduct independent research as well as guide and mentor students in innovative clinical research using state-of-the-art equipment.

The presentation will include cost-saving measures, lab room setup, simulated case studies, and student learning outcomes.

INTEGRATING GENOME-BASED KNOWLEDGE AND ITS APPLICATION INTO HEALTH PROFESSION'S CURRICULA: MEASURING EFFECTIVENESS OF ONE-DAY WORKSHOP; Jelena Malogajski (Long Island University); Ivan Brankovic (Max Planck Institute)

Health professionals' knowledge about genomic information and their confidence in using it in patient care, as well as in public health initiatives, is lagging behind advances in genomic technology. In order to address this challenge, we designed a workshop on the fundamentals of genetics, and clinical- and public health applications of modern genetic research. Students of the School of Health Professions at LIU Brooklyn attended one-day workshop which combined hands-on training with lecture-based learning. The purpose of this study was to evaluate the effectiveness of one-day workshop as an educational model appropriate for meeting the challenge of integrating genome-based knowledge and its healthcare application into curriculum for various profiles of health profession students. Students completed a multiple-choice questionnaire before and after the workshop. Pre and post-test analyses, was be completed in order to assess knowledge improvement. Paired T-tests with 95% confidence interval levels was conducted and showed that there is strong evidence ($p = 0.015$) that the workshop had a positive impact on the knowledge gain of health profession students on the topic of fundamentals of genetics and its healthcare application.

ART IN MEDICINE; Linda Martino (MCPHS University); Rosanne Washington (MCPHS University); Beth Geraldts (MCPHS University); Jessica Kersberger (MCPHS University); Dan Tzizik (MCPHS University); Thomas Stowell (MCPHS University)

Hypothesis: Perceived ability and confidence in visual literacy skills among a cohort of clinical science students will increase after participation in a guided and structured training of unbiased observation through Art in Medicine.

Method: Clinical health science students (physician assistant, occupational therapy and nursing) participated in this study. Students who gave consent to participate agreed to complete 3 sessions of guided and structured training of unbiased observation of artwork and one additional session to complete the post survey.

Observations/Outcomes: The change between pre and post surveys revealed increased perception of ability and confidence in visual literacy skills. In four of the five survey questions, a majority of the subjects reported improvement in visual literacy skills. The responses for the two questions relating to ability in visual literacy skills, 52% and 48% of subjects reported improvement. The responses for the three questions relating to confidence in visual literacy skills, 56%, 60% and 68% of subjects reported improvement.

Participation in Art in Medicine training improved health science students' perceived ability and confidence in visual literacy skills.

LLC: A NEW EDUCATIONAL MODEL FOR ENTERING FRESHMAN; Yvonne Nelson-Langley (FAMU-School of Allied Health Sciences)

"Preparation is the key to Success" - Alexander Graham Bell

FAMU's Living Learning Communities (LLCs) provide a wholistic approach to the education of freshman college students through academic partnerships and service-learning opportunities. Students live on campus and participate in academic programming that encourages them to work together in a living

learning community. The program concentrates on learning through motivating and challenging residents in and outside of the classroom.

The FAMU-School of Allied Health Sciences' LLC is for students who have an interest in pursuing careers in allied health. Students with a minimum high school GPA of 3.0 are encouraged to apply. Interested students must also submit an essay that addresses why they are interested in pursuing an allied health profession and provide any other information that might be relevant.

FAMU's LLC program started with the freshman 2015-16 cohort. Data analysis indicated that LLC students earned a higher GPA at the end of their freshman year than non-LLC students. Additionally, the 2015-16 LLC cohort had a higher GPA at the end of their senior year and graduated in four years at a higher rate than non-LLC students.

OT PRACTITIONERS' PERSPECTIVES ON FAMILY CAREGIVING: LESSONS LEARNED;
Precious Osuoha (UT Health San Antonio)

Hypothesis: Caregiving can lead to psychological and physical effects. This research looked at how occupational therapy currently facilitates positive dimensions of family caregiving with persons with dementia (PWD). **Method:** Phenomenological tradition was used which sought to understand the significance of the lived experiences of occupational therapists. Individual interviews were conducted with occupational therapists who were currently working in inpatient rehab facilities, home health agencies, skilled nursing facilities, acute care settings, or memory homes. The structured interviews were done to obtain their perspectives on the experiences of working with caregiving dyad members. The interviews were analyzed and patterns were identified. Themes were based on specific interventions that occupational therapists found helpful for family caregivers when caring for PWD. In turn, similar methods could be implemented by formal caregivers living in the home environment.

Observations/outcomes: clinical/educational

Conclusion: Based on the data, interventions the OTs used to facilitate positive dimensions of care proven successful with caregivers for PWD. These interventions were then developed into a caregiver intervention protocol.

UTILIZATION OF IPADS® IN STUDENT CLINICAL ROTATIONS TO IMPROVE SAFETY AND STREAMLINE INFORMATION ACCESS; Lisa Perkins (Virginia Commonwealth University); Jenica Harrison (Virginia Commonwealth University); Teresa Nadder (Virginia Commonwealth University)

One means of staying on pace with technological advances in laboratory medicine is by integrating mobile devices into clinical training. The Virginia Commonwealth University Clinical Laboratory Science program initiated a pilot study to ascertain attitudes from senior level students and clinical educators on using mobile devices as a laboratory bench-side educational tool during clinical rotations. In this study, senior level MLS students used iPads in concert with Google Drive in lieu of paper manuals during clinical rotations. Pre-study surveys were used to assess attitudes towards mobile devices. Focus groups for students and clinical educators were conducted after completion of the clinical rotations. The results of the study indicate that advantages of employing mobile devices include: improvement of safety by eliminating the transfer of paper from the laboratory to the outside, ease of accessibility to electronic references at the bench-side, elimination of massive amounts of paper to print clinical rotation manuals, and electronic monitoring of each student's progress through clinical rotations. Participants suggested that

the employment of styli and DocuSign® would improve efficiency and secure document signature approval.

ENCOURAGING PROFESSIONALISM AND CORE VALUES THROUGH VOLUNTEERISM IN A PTA PROGRAM; Stacey Sloas (Arkansas State University); Becky Keith (Arkansas State University)
An educational need exists to foster the development of professionalism and core values in future health care providers. There is a 15 year history of opportunities to volunteer as a cohort or individually in community programs such as United Way Day of Caring, Senior Olympics, Miracle League ball, food banks & fundraisers for special needs. These opportunities have helped reinforce core values promoted by the American Physical Therapy Association. Values include accountability, altruism, compassion/caring, excellence, integrity, professional duty & social responsibility. Adding opportunities to actively demonstrate core values through volunteering during the professional program has been well received by students. Future plans include continuation of core value demonstration through volunteerism followed by questionnaires at the end of the one year program and from alumni 2-5 years post-graduation to assess the impact of volunteerism on professional conduct.

ELECTRONIC ASSISTED MEDICAL DOCUMENTATION: ATTITUDES AND TRENDS AMONG ADVANCED PRACTICE PROVIDERS IN OUTPATIENT SETTINGS; Phillip Smith (Mount St. Joseph University)

Objective: To quantify advanced practice provider attitudes about electronically assisted documentation in the outpatient setting.

Method: Survey data was collected from advance practice providers to identify providers utilizing electronically assisted documentation in the form of electronic health records systems or similar, to document outpatient encounters.

Results: 306 advance practice providers completed the survey and met the inclusion criteria. Included respondents were stratified into 3 groups based on the daily volume of outpatient encounters. A statistically significant shift ($p < 0.001$) in documentation style from free text formatted entries to discrete data entry was seen as the volume of daily patient encounters increased. In evaluating self-assessed encounter accuracy and readability, a statistically significant ($p < 0.001$) decrease in both measures was noted with encounters utilizing a discrete data entry format.

Conclusion: In outpatient settings a volume dependent shift to discrete element documentation despite self-assessed deficiencies in both accuracy and readability was noted. This shift has the potential to negatively affect the integrity of medical documentation and raises patient safety concerns.

ADDRESSING SOCIAL DETERMINANTS OF HEALTH WITHIN A HEALTH SCIENCES CURRICULUM; John Snyder (The Ohio State University)

Issue to be addressed: In 2016, the National Academies of Sciences, Engineering, and Medicine released a report advocating for health professions curricula to strengthen teaching of the social determinants of health (SDH). The report proposed a unifying framework built around three domains: education, community, and organization. Within these domains are components which resonate with emphasis in allied health curricula, specifically collaborative learning, experiential learning, community engagement, and a supportive organizational environment.

Method: This framework was adopted in a required course on contemporary issues in health and society. In the course, a local county's Community Health and Needs Assessment (CHNA) provided a population

health perspective coupled with self-reported data on economic stability, education, social and community context, and neighborhood environment.

Observations/Outcomes: As examples of the impact of SDH on health, adults were most likely to rate their health as "fair" or "poor" if they were separated (50%) or had an annual income < \$25,000 (29%) .

Conclusion: Using these data for discussion, learners were able to describe the impact of life circumstances and "place" on health.

HOW DO HEALTHCARE MANAGEMENT STUDENTS EMPLOY THE ART CRITICISM QUESTIONING STRATEGY TO AFFECT AN INTERNSHIP PRESENTATION?; Pia Woodley (Florida A&M University)

Issue: Internship poster presentations lack creativity, analysis, interpretation, and evaluation. Method: The Art Criticism Questioning Strategy, operates within the context of Bloom's Taxonomy and challenges students to think critically and connect emotionally to artwork. The questioning strategy, known as the Art Criticism Model has application in art education and healthcare. Like an Artist, healthcare students can consider color, texture, symbols, words, and emotions to communicate an artifact to a viewing audience. The Art Criticism Model includes four steps.

They are: 1. Description, 2. Analysis, 3. Interpretation, and 4. Judgement. The process involves, healthcare students selecting artwork of interest. They look at a piece and provide basic information, the students go deeper in analyzing the artwork, an interpretation is given, then a judgement is made.

Observation: The healthcare student transfers knowledge gained from the questioning strategy to create their poster presentation.

Conclusion: Future leaders in healthcare will be challenged to think critically and creatively to solve problems. The Art Criticism Model may be a tool to stimulate unconventional thoughts to lead to solutions to problems.

SERVICE LEARNING IN PHYSICIAN ASSISTANT EDUCATION TO ADDRESS HEALTH DISPARITIES; Neena Xavier (University of Alabama at Birmingham, School of Health Professions); Peter Jones, PhD (University of Alabama at Birmingham)

Background: Homelessness is associated with poorer health status (1) and prior studies among Birmingham, Alabama's homeless found a substantial proportion of respondents with unmet needs in accessing specialty care(2). Although physician assistants (PA) provide "front-line" care to increase access, the current shortened medical-model training offers few opportunities to address health disparities.

Purpose: Our study aim is to create service learning in PA curriculum to increase students' comfort in caring for chronically homeless.

Educational Model: Using Kolb's Theory of experiential learning, we aligned an existing interprofessional, student-run wellness clinic with the objectives of a PA clinical medicine course. The student's participate in this concrete experience, complete a critical self-reflection, and apply strategies to care and counsel patients. They also complete and pre- and post-survey about perceptions on homelessness.

Observation: 1)Increased awareness in addressing health disparities 2) Improved comfort with counseling chronically homeless

Conclusion: We created an active learning strategy to increase student's comfort with caring for homeless and met a community partner's need for improved access to care.

UNDERGRADUATE PUBLIC HEALTH AND NUTRITION STUDENTS ASSESS COMMUNITY ASSETS AND GAPS THROUGH PROBLEM-BASED LEARNING; Marguerite Zaharek-Girgasky (University of Saint Joseph)

Issue Addressed: In problem-based learning, students identify what they need to learn, while the instructor acts as a facilitator rather than a provider of knowledge. In a community nutrition course, students worked collaboratively to assess community assets and gaps. The goal was to identify factors that impacted nutrition status, while learning about government programs, non-profit agencies, policies, data collection methods, health disparities, built environment and access. Weekly homework encouraged identification of needed information. In class, a “scenario” or problem integrated key concepts. Students assessed community characteristics, while the instructor asked open-ended questions to stimulate discussion. Community members and professionals visited to serve as local experts.

Method: Evaluation data included satisfaction with teaching methods, self-efficacy and self-assessment of competency in applying skills. An end-of-semester survey was distributed. Interviews will be conducted 18 months post course completion.

Observations: Problem-based learning provided opportunities to gain important knowledge and skills.

Conclusion: This teaching model provided broadened students’ understanding while developing important skills.

SELECT TOPICS IN ALLIED HEALTH

AN INNOVATIVE SUMMER PROGRAM AIMED TO ENCOURAGE INTEREST IN HEALTH CARE WITH EMPHASIS IN LABORATORY MEDICINE; Cliff Cymrot (George Washington University); Marcia Firmani (George Washington University)

Issue: Medical Laboratory Scientists perform an important role in disease diagnosis and treatment. However, there is currently a shortage in the laboratory workforce. The Bureau of Labor Statistics estimates the need for trained laboratory professionals will increase 12% from 2016 to 2026. Consequently, we developed an innovative summer program aimed at teaching young, STEM-oriented individuals about diagnostic medicine, and other health professions.

Method: This program, offered to local high school and community college students, included 6 hours of daily hands-on, interactive activities along with relevant foundational knowledge. A pre and post-test as well as a survey were implemented.

Outcome: Students achieved significantly ($p < 0.05$) higher scores on the post-test compared to the pre-test, indicating that they learned key information during the program. Also, 90% of students felt the program stimulated their interest in laboratory medicine and 99% felt that they were more knowledgeable about health science than they were before.

Conclusion: The program successfully ignited interest and exposed laboratory medicine and broader aspects of health care to future health care professionals.

YEARS OF LIFE LOST: UNDERSTANDING A LONG-RANGE IMPACT OF SUBSTANCE MISUSE AND SUICIDE; Randy Leite (Ohio University); Orman Hall (Ohio University); Richard Hodges (Ohio University)

Critical health issues are often explored in the present with a focus on rates of incidence and patterns of association with other factors. Far less attention is given to the long-term population impacts of events that result in loss of life. A lost life represents a loss of potential in terms of community contributions, economic impacts, procreation, and generation of social capital. Working with State of Ohio death

certificate date, the Ohio Alliance for Innovation in Population Health, a consortium of 28 university, corporate, and public health partners, has undertaken an exploration of the years of lost life associated with overdose deaths. These analyses include both statewide and community-level assessments. Preliminary analysis reveals nearly 1,000,000 lost years of life due to opiate and other drug overdoses during the eight-year period of analysis. This presentation will describe the analysis methodology, key findings, implications, and considerations of means by which analysis of lost years of life may be utilized to promote policy and practice approaches to life-threatening issues.

NURSE PRACTITIONER AND PHYSICIAN ASSISTANT PRECEPTOR COURSE DEVELOPMENT BASED ON THE RESULTS OF A LEARNING NEEDS ASSESSMENT; Nicole Oertli (Mayo Clinic)

Issue/Hypothesis: Increased learners enrolling in Nurse Practitioner (NP) and Physician Assistant (PA) training programs has resulted in a high demand for adequately trained preceptors. Training for NP and PA preceptors is needed to accommodate the increased learner demand.

Method: A preceptor needs assessment survey was previously disseminated electronically to 1,296 NP and PA providers at a large medical system in the Midwest. Results of the survey were used to develop an online preceptor education course.

Observations/Outcomes: Subject matter experts were consulted in the creation of nine modules for an online NP and PA preceptor course. Pre and post-surveys were developed to evaluate course effectiveness. Participants are eligible for 5 continuing medical education (CME) credits upon completion approved by AMA, ANCC and AAPA.

Conclusion: Results of course pre and post-surveys will be monitored for course modification and improvement, and to determine preceptor preparedness. It is anticipated that participation in preceptor training will have a positive impact on provider preparedness to serve as a NP/PA preceptor, resulting in increased learner capacity.

ADDRESSING THE GAP IN OCCUPATIONAL THERAPY: DISPARITIES BETWEEN RESEARCH AND PRACTICE; Victoria Ramirez (UT Health San Antonio); Anna Marie Pollard (UT Health SA); Ana Allegretti (UT Health SA)

Introduction: Assessment selection in Occupational Therapy (OT) is the first step in creating individualized intervention. For children with cerebral palsy (CP), assessment selection can be a cumbersome process when accounting for unique characteristics of the disorder. The aim of this article is to discuss the current gap between assessments used in research and those selected by practicing OTs.

Methods: The research team compared survey responses and the five most frequently used assessments in the literature (Peters et al., 2019) to determine if there were any similarities in assessment selection among researchers and practicing OTs measuring skills and outcomes for children with CP.

Results: revealed no overlap amongst assessments selected between researchers and practicing OTs.

Conclusion: The gap between practicing OTs and research is concerning given the profession's advancements toward evidence-based practice. To guide future research and validate our profession, a universal consensus on assessment use for the pediatric CP population is crucial. It is imperative to provide evidence-based practice in all health care professions to ensure clients receive quality, beneficial care.

USING ALLIED HEALTH PROFESSIONALS AS PEER-LEADERS FOR DIABETES EDUCATION; Stacey Sloas (Arkansas State University)

Self-management of diabetes improves following diabetes education. Low numbers access certified diabetes education leaving many with inadequate education. Peer-led diabetes education programs may improve access & overcome barriers. Does peer-led diabetes education impact empowerment, knowledge of diabetes & health behaviors of individuals with prediabetes or diabetes? A series of 4 sessions were led by a physical therapist for community members in NE Arkansas with a diagnosis of prediabetes or diabetes. Pre/post questionnaires assessed health behaviors, knowledge of diabetes (Revised Diabetes Knowledge Test) and empowerment (Diabetes Empowerment Scale SF). Focus groups followed the intervention. 26 participants completed the program offered in various locations over a 6 month period. Statistically significant improvements were found in health behaviors, knowledge & empowerment. Satisfaction with a peer-led model was found through focus groups. Community members & allied health professionals can provide diabetes education that extends the reach of health care. Barriers such as travel, cost & timing of classes that may prevent access to traditional diabetes education may be overcome by a peer-led model of education.

AWARD FOR INSTITUTIONAL EXCELLENCE AND INNOVATION IN INTERPROFESSIONAL EDUCATION AND COLLABORATIVE HEALTH CARE

The Association of Schools of Allied Health Professions (ASAHP) strongly endorses interprofessional education (IPE) and interprofessional collaborative practice (IPCP). Support for IPE and IPCP is based on the idea that collaboration will increase the efficiency and effectiveness of delivery systems to promote team-based, patient/family centered health care. As the leading organization representing health professions schools, ASAHP serves as a collaborative resource and advocate for interprofessional education to students, faculty, professional accrediting bodies, and practitioners through instruction, research and service.

FIRST PLACE

Indiana University – Purdue University Indianapolis (Lubbock, Texas)

IU graduates most of health science, medical, public health, and social work professionals in Indiana. Hence, the reach and impact of curricular transformation across these schools on 8 campuses is truly state-wide enterprise. In 2013, IU faculty leaders released a concept paper calling for the development of the IU Interprofessional Practice and Education Center (IU IPE Center); approved in 2014, the center brings together faculty, students and communities to implement, integrate and evaluate interprofessional education programs and innovative team practice models. The purpose of the IU IPE Center is to provide prepare the future healthcare workforce for interprofessional collaboration and teamwork. Working strategically with academic, practice, and community partners, it plays a significant role in defining Indiana's future health and healthcare outcomes. More than 10,000 learners, faculty, staff, clinical practitioners, and community members work together each year through education, practice, service, community outreach, leadership development, and scholarship. Together, our goal is to improve the experience of care for providers and patients/clients, improve the overall health of populations, and reduce per capita cost while forming an active learning community that uses around team care to help support the well-being of healthcare students, faculty, and practitioners.

PROGRAMS OF MERIT

University at Buffalo (Buffalo, New York)

The Interprofessional Education Program at the University at Buffalo prepares highly competent healthcare professionals who improve health outcomes by excelling in interprofessional communication, teamwork, and the provision of safe, ethical patient- and population-centered care. Our interprofessional education (IPE) curriculum, developed by the UB IPE Leadership Team, is offered as the UB Interprofessional Collaborative Practice (IPCP) Micro-credential program and is earned through three digital badges: IPCP Foundations, IPCP Communication and Teamwork, and IPCP Healthcare Practice. These digital badges are sequenced to develop increasing levels of competency in IPCP knowledge and skills. Incorporation of high-impact learning experiences including simulation, community-based service, clinical practice, and global service learning experiences promotes achievement of the IPEC core competencies. Our program annually prepares ~ 900 students in 12 health professions education programs to enter the workforce as effective interprofessional collaborative practitioners. To ensure excellence in interprofessional facilitation and preceptorship, our program provides faculty development initiatives and workshops to ~ 200 faculty annually. Finally, our program is actively engaged in advancing IPE and IPCP through scholarship. In the past four years, our program's scholarship has included receiving 6 grants, publishing 10 manuscripts, and presenting 30 abstracts at national and international interprofessional education conferences.

University of Kansas Medical Center (Kansas City, Kansas)

The University of Kansas Medical Center's (KUMC) mission to demonstrate excellence in education, research, service, and patient care is exemplified by its commitment to interprofessional education (IPE). IPE is a central part of KUMC's culture with over 40 ongoing IPE activities identified by its Center for Interprofessional Practice, Education, and Research (CIPER). Prominent among these, over 1000 students from 14 professions and 5 schools participate in an annual campus-wide, 3-level, progressive Foundations of Interprofessional Education program. Students also practice interprofessional collaboration (IPC) through high-fidelity clinical simulations housed in the state-of-the-art Health Education Building and in interprofessional clinical learning environments across campus. KUMC is committed to improving the health of the surrounding area through its support of local, student-led, interprofessional pro-bono clinics and interprofessional learning in practice sites throughout Kansas. The impact of this interprofessional training is determined through robust, longitudinal assessment of learners, alumni, preceptors, patients and employers, with 97% of learner respondents reporting IPC practice-readiness upon graduation. KUMC continues to develop and implement innovative, high-quality IPE opportunities that reflect best practice and produce effective, collaborative, practice-ready healthcare providers prepared to achieve the Quadruple Aim of improved patient care, population health, cost effectiveness, and care team well-being.

University of Texas Southwestern Medical Center (Dallas, Texas)

Centralized Interprofessional Practice and Education (IPE) at UT Southwestern
Efforts in interprofessional education have grown at UT Southwestern Medical Center over the last decade. This growth requires centralized and coordinated interprofessional education activities within UT Southwestern, and in collaboration with other academic institutions.
Interprofessional Practice and Education (IPE) functions as a centralized bridge for the schools (medical, health professions, graduate) at UT Southwestern to integrate and coordinate interprofessional education and collaborative practice. IPE coordinates activities such as Convergence, which began as a Quality

Enhancement Plan (QEP), and has been sustained as a program to provide foundations in interprofessional education. IPE functions as a centralized structure to aid in planning and coordination of longitudinal interprofessional curricular activities, such as the new QEP, TeamFIRST. IPE enhances specific missions within each professional academic program (medical, physician assistant, physical therapy, etc.). IPE also helps bring together stakeholders across the campus (clinical, hospital, health system) in interprofessional practice and education to implement education, practice and innovation in a centralized manner in alignment with the institutional mission and goals. Centralized IPE supports UT Southwestern to achieve its mission to prepare health professionals of the highest quality to meet the needs of the health care system in Texas through interdisciplinary education and promotion of comprehensive health care.