

Innovative Approaches to Launching IPCP Amongst Students in Allied Health Professions

Katherine Russell, AuD, CCC-A, Chalee Engelhard, PT, EdD, MBA,
Amber Boyd, PT, DPT, DHSc, SCS, CSCS and Kelly Kennedy, OTD, OTR/L, NTMTC



Background

Clinical education and direct patient care have historically been completed in discipline specific silos.

Interprofessional Education (IPE) and Interprofessional Collaborative Practice (IPCP), while not new concepts in healthcare, have been slow to take off in the United States healthcare system and universities (Nelson, Tassone, & Hodges 2014).

When students in allied health and medical professions engage in IPE experiences, evidence supports that this improves patient outcomes (Furze, Lohman, & Mu 2006).

Hypothesis/Issue

The education of students within the allied health disciplines has become increasingly focused on incorporating IPE. This is in part due to:

- Program and accreditation standards
- Emerging research demonstrating improved patient experience
- Directives of healthcare stakeholders

Universities and healthcare systems are faced with the challenge of teaching IPE and modeling IPCP.

Addressing the need for Interprofessional student training and experiences became an apparent area of opportunity within the College of Allied Health Sciences (CAHS).

Method

An interdisciplinary team of faculty partnered to establish an IPCP workgroup. The workgroup had representation from all disciplines within CAHS.



Disciplines present in CAHS and represented in the IPCP workgroup

The team's primary objectives included:

- Identification and removal of barriers to collaboration across CAHS and greater Academic Health Center
- Promoting the integration of IPE in each individual discipline through train-the-trainer workshops and educational events
- Development of a well-vetted IPCP curriculum
- Promoting a culture shift within faculty to incorporate IPE naturally and not seen as an "add on" to work load

Method Continued

The workgroup members, comprised largely of field work placement coordinators, utilized their connections with allied health professionals within the community to garner partnerships.

Outcomes

The workgroup successfully established a curricular framework to pilot at community-based initiatives for IPCP at clinical sites, and to further increase IPCP student and community experiences.

Sample Curriculum Questions by Topic	Questions
Values/Ethics	Describe how you respected unique cultures, values, and expertise of patients, families and/or other healthcare team members?
Roles/Responsibilities	How did you assist in creating treatment plans that appropriately contributed your discipline's insights to other disciplines?
Interprofessional Communication	What terminology was helpful to team communication?
Teams/Teamwork	How did you develop a trusting relationship with patients, families, and other team members?

Student and preceptor feedback from the pilot experiences have helped further shape the curriculum.

This process enabled the integration of IPE throughout CAHS, and establishment of an iterative cycle designed to promote ongoing enhancement of the graduate student experience.

Student outcome measures are being assessed using the Interprofessional Collaborative Competencies Attainment Survey (ICCAS) moving forward.

Conclusion

Development of an IPCP faculty workgroup within the college was integral to the process that fostered an innovative culture, removed barriers, and jumpstarted the knowledge and integration of IPCP in the community. This simultaneously provides IPCP opportunities for students to meet accreditation standards.

Further work is being conducted to expand the graduate level IPE and IPCP experiences into each program to reach more students. A shift in the academic culture to encourage and foster IPE in coursework has also become a large goal of the IPCP workgroup.

References

Furze, J., Lohman, H., & Mu, K. (2006). Impact of an Interprofessional community-based educational experience on students' perceptions of other health professions and older adults. *Journal of Allied Health* 37(2), P. 71 –77.

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