

Beyond Time and Schedules: Strategies for Robust and Sustainable IPE

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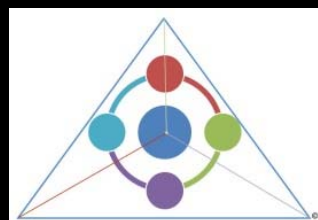


COLLABORATING ACROSS BORDERS V
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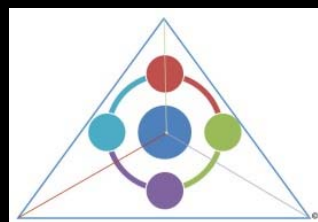


The Macy Project *Interprofessional Primary Care*

*Advancing High Quality Healthcare through
Teamwork Practice and Education*

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Acknowledgements



Our Macy Project Team

Nina Karamehedovic	Robin Bonifas	Liz Harrell	Donna Velasquez
Lisa Hines	Teri Kennedy	Michele Lundy	Samantha Samples

SCHEDULES

TIME



INCENTIVES

POLITICS

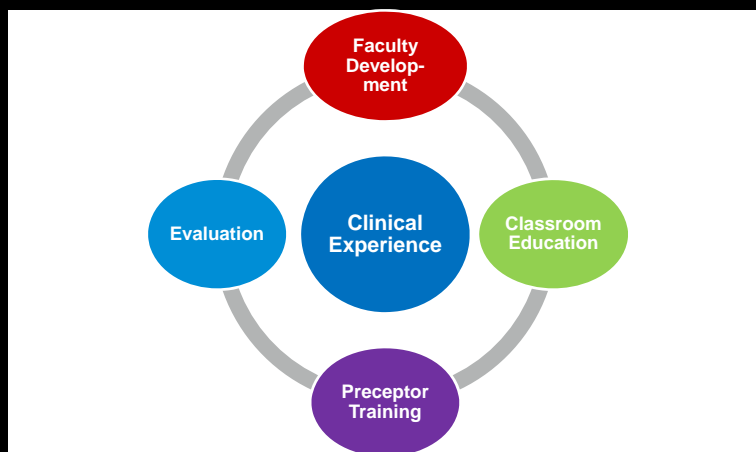
If we wait for everything to work like clockwork – the time may pass us



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When we started



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Context

- IPE competencies somewhat valued, not required in all professions
- Clinical sites challenged by new teamwork models, integration
- Lack of short, standardized, objective evaluation tools
- Plethora of IP resources gets overwhelming

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Opportunistic IPE

- Capitalize on everything going on in your organization
- Work at multiple levels
Leadership, champions, and everyone else who'll listen
- Build formal and informal structures and processes incrementally and iteratively – sustainability is key

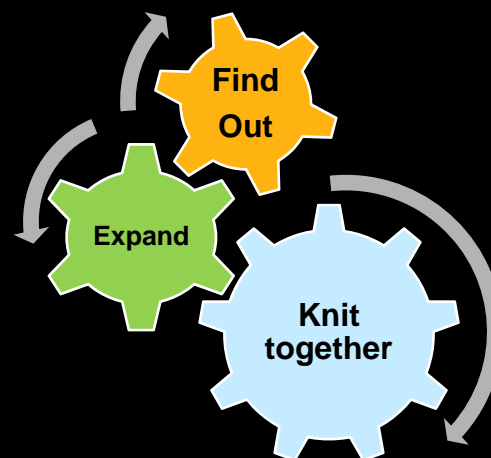
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IPE is going on in more places than you may think

- Old and new courses
- Simulations
- Class exercises
- Curriculum redesign
- Workshops
- Student groups
- New grants and projects

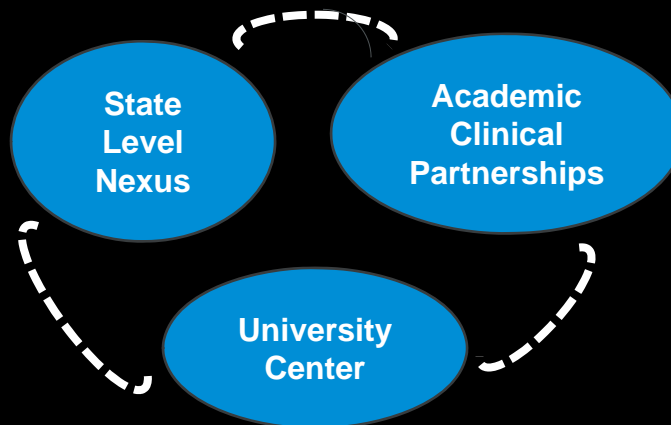
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IPE - Integration in Action



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Infrastructure important but not a deterrent – build as you go



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Use whatever resources you can

- IPE Network is robust
- People share resources freely
 - National Center
 - AIHC/IPEC Webinars
 - University websites
 - Foundations

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Create new ones only when essential

IPED Distance Education Modules Development Project:

Project Objective:
Develop a set of four foundational and five primary care centered IPE distance education modules and accompanying faculty development facilitation materials that are:
 Relevant Engaging Practical/Immediately Applicable Neutral (unbiased) Asynchronous Mobile Compatible

IPED Foundational Modules (FM)	IPED Primary Care Focused Modules (PCM)
FM-1: What is IPE? Why is it important in your practice?	PCM-1: Team-Based Decision-Making - Introductory Overview
FM-2: Team Communication - Tools and Strategies	PCM-2: Involving Team Members in Primary Care Practice
FM-3: Team Roles - Who's on the team; what do they do?	PCM-3: Developing an Integrated Plan of Care
FM-4: High Performing Teams - What to Look For	PCM-4: Care Management - Synchronizing Implementation of the Care Plan
	PCM-5: Evaluating and Improving Team Performance

Faculty Development Focused Module Resources and Accompanying Materials (FDM)
 FDM: IPE Foundational Modules/IPED Primary Care Modules - Resources to Guide Teaching and Learning

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Use the context in your favor

"A rising tide lifts all boats"



- Accreditation Requirements
- Challenges for clinical sites, e.g.
 reducing readmissions, improving quality indicators, reducing turnover
- University market niche

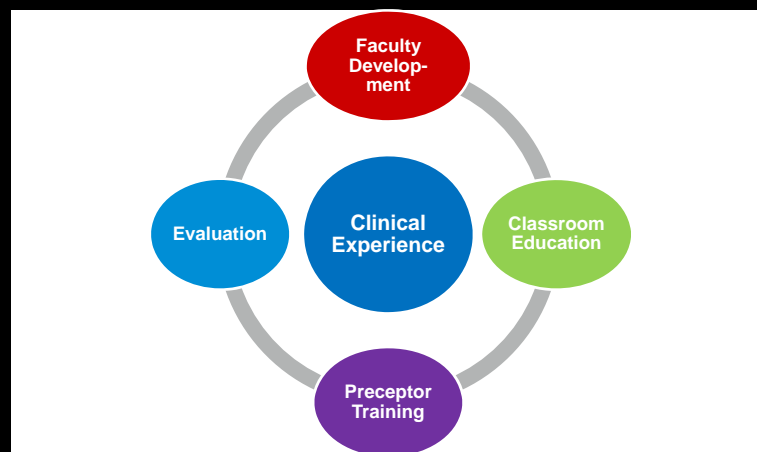
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Find new ways to knit things together

- Collaborative curriculum mapping
- Core evaluation
- Win-win projects
- Offer useful resources – not rhetoric
- Build in incentives, e.g. working with the National Center, IP networks, attendance at CAB

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Re-envisioning our model



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Impact of Opportunistic and Developmental Strategies

What we started out with	Where we are at now
Two universities; four health disciplines; little experience working together	Center; leadership support/commitment; joint grant applications
Few IPE connections outside initial project partners	Members of National Center Nexus; 4 universities and expanding; 3 IP projects
Plans for student co-location; limited numbers	Range of team practice models; more professions; reach 150-200 students
Elective IPE Content	IPE more integrated in curriculum; systematic mapping
No evaluation of IPE competencies	Programs have agreed to common core evaluation
Preliminary vision of faculty coach model	Faculty IPE coaches engaged in curriculum, evaluation, clinical partnerships IPE policy
No IPE faculty development	Faculty development programs underway; partnering with other universities
Predominantly single professional clinical placements	Sites with student teams; projects focused on team processes of care, e.g. reduced readmissions

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Closing the loop

- Strategies for embedding and sustaining robust and vibrant IPE programs are different than start-up strategies
- They require:
 - deeper integration
 - new infrastructures
 - different leadership roles for faculty, students, and senior administrators

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Closing the loop cont.

- Visualizing IPE development as a series of embedding changes offers more effective ways to plan for and implement sustainable IPE

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Thank you!

We invite your
questions and comments.

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