Practical Tips to Develop a Successful Interprofessional Community Outreach Initiative







This activity has been planned and implemented by the National Center for Interprofessional Practice and Education. In support of improving patient care, the National Center for Interprofessional Practice and Education is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

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All workshop participants:

- Scan your badge barcode or sign in to each workshop
- Complete workshop evaluations (paper) and end-of-Summit evaluation (electronic)

Those who purchase CE credit:

- MUST sign in to receive credit
- Will be sent a certificate after the Summit

****If you would like CE credit but have not purchased it, see Registration

Faculty

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Objectives

- Describe the interprofessional community outreach initiatives at one institution and the impact on clinical practice activities.
- Explain the importance of evolving a program through continuous quality improvement.
- Discuss a comprehensive evaluation process for interprofessional outreach initiatives.
- Utilize appropriate debriefing techniques following interprofessional education activities.
- Understand the challenges of interprofessional activities, both internal and external.



I. Interprofessional Education (IPE) at West Virginia University (WVU)

Gina Baugh



WVU Office of Interprofessional Education

GOAL: To provide learning experiences that foster the development of critical thinkers and compassionate professionals capable of functioning effectively as members of a healthcare team.



Three Phase Model Stages of Development

Phase 1 Phase 2 Phase 3

Novice Advanced Beginner Competent Proficient Expert



The Evolution of our IPE Model

- Phase I: Didactic sessions
 - Eleven disciplines
 - Six annual session
 - IPEC Competencies
 - Common topic areas





The Evolution of our IPE Model

- Phase II: Simulation activities
 - STEPS Center
 - High fidelity mannequins
 - Standardized patients



The Evolution of our IPE Model

- Phase III: Clinical practice experiences
 - Community outreach activities
 - Health system experiences
 - Acute care
 - Ambulatory care





II. Program Evolution

Amy Burt



The FIRST Idea! Fall Screens

- Physical therapy, occupational therapy, and pharmacy
- Fall screenings at an independent living facility (grant funded)
 - PT= balance screens
 - OT= environmental screens
 - PHAR= medication screens
- How was it IPE?
 - Pre-screening meetings
 - Group discussion afterwards





Rural Fall Screens

- OT, PT, and PHAR
 - Students, faculty, and preceptors
- Fall screenings in rural community centers (grant funded)
 - 2 days, information sessions about fall prevention and initial screenings then follow-up to discuss recommendations
 - Issue adapted equipment as needed
- How was it IPE?
 - Students developed educational sessions for the community center attendees
 - Collaboration with recommendations, this varied per participant





4 Sites with Follow-Up

- OT, PT, and PHAR
- Fall screenings at 4 local senior apartment complexes
 - Rolling screenings every session
 - Issue adapted equipment as needed
- How was it IPE?
 - Pre-session team meetings
 - Mixed screening teams
 - Collaboration on recommendations and adapted equipment needed



Three Sites, Three Topics

- OT, PT, and PHAR
- Educational sessions with interactive stations
 - Diabetes awareness and education
 - Fall prevention
 - Health literacy
- How was this IPE?
 - Interdisciplinary teams created each session



Health Fairs

- OT, PT, PHAR, Music Therapy, Audiology, and Speech and Language Therapy
- Provided 3 Healthy Aging Fairs to rural counties in WV
 - Interactive stations
- How was this IPE?
 - Interdisciplinary groups planned each station



III. Program Evaluation & Assessment Kimeran Evans



Assessment and Evaluation: Our Journey





Assessment and Evaluation: Your Journey



https://athleticbodysystem.wordpress.com/2009/11/02/the-journey-of-developing-a-lean-body/



Assessment v. Evaluation

<u>Assessment</u>: measurement of outcomes for *individual* learners or participants

 <u>Evaluation</u>: systematic gathering and interpretation of evidence enabling judgment of *program* effectiveness and value



Program Assessment Overview

- Supports your purpose statement
- Associated with your outcomes
- Considers
 - Curricular and program objectives
 - Level of learner/participant
 - Setting

"There is no one-size-fits-all tool for interprofessional education (IPE)." - Institute of Medicine, 2014



Kirkpatricks' Model for Educational Assessment

Assessment Level	Explanation	Assessment Type	Examples
1: Reactions	Learners' views on the learning experience and its interprofessional nature	Evaluations	Evaluation of the experience
2a: Attitudes/Perceptions	Changes in attitudes or perceptions between groups (pre to post)	Knowledge tests	(KSA's)
2b: Knowledge/Skills	Changes in knowledge or skill between groups (pre to post)	Surveys Skills Performance Measures	Pre-post surveys Self-Report or Observation Tool
3: Behavioral Change	Transfer of interprofessional learning to practice	Observation Simulation (Debriefing)	Self-Report or Observation Tool
4a: Organizational Change	Broader changes in the organization and delivery of care	Quality Measures	Chart Reviews Self Study Error Counts
4b: Benefits Patients, Families, Communities	Improvements in health or well- being of all		Morbidity/Mortality



Program Assessment

- 360° Assessment
 - Students
 - Faculty
 - Participants
 - Community Sites



http://hrpeople.monster.com/news/articles/3108-10-waysto-get-the-most-from-a-360-degree-leadershipassessment



Student Assessment

- Most common method of IPE Assessment
- Most commonly measures attitudes and perceptions
- Does not capture all levels of educational assessment
- Choices can be overwhelming
- Often overlapping
- Minimally validated
- Our examples:
 - RIPLS
 - IEPS
 - IPEC Competency Survey



Student Assessment Readiness for Interprofessional Learning Scale (RIPLS)

- Parsell & Bligh, Medical Education, 1999
 - 120 students from 8 healthcare disciplines
 - Reliability (Cronbach's Alpha)
 - Overall = 0.90
- Kurowski-Burt et al., Journal of Interprofessional Education and Practice,
 2017
 - 57 students from 3 healthcare disciplines (PT, OT, Pharmacy)
 - Administered pre/post project

https://nexusipe.org/informing/resource-center/ripls-readiness-interprofessional-learning-scale



Student AssessmentInterdisciplinary Education Perception Scale (IEPS)

- Original tool widely reported in literature but statistical analysis not performed
 - Hawk et al., 2002, Academic Medicine
 - Hayward et al., 2005, Journal of Allied Health
 - Goellen et al., 2006, Medical Education
- Adapted 12 item tool
 - McFayden et al., 2007, Journal of Interprofessional Care
 - Reliability (Cronbach's alpha)
 - Total scale = .87-.88

https://nexusipe.org/informing/resource-center/ieps-interdisciplinary-education-perception-scale



Student AssessmentInterprofessional Education Collaborative (IPEC) Competency Survey

- Dow et al., Journal of Interprofessional Care, 2014
- Administered to 481
 health professional
 students at Virginia
 Commonwealth
 University in Richmond,
 Virginia

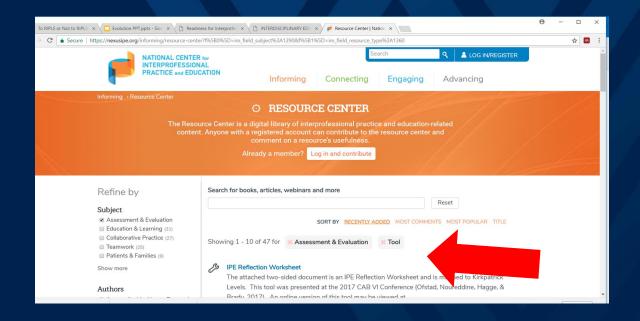
INSTRUCTIONS: Using the following 5-point scale, please rate the items based on your educational experience in the health care environment. Each item preceded by "I am able to"		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Valu	es and Ethics Domain					
1	Place the interests of patients at the center of interprofessional health care delivery.	1	2	3	4	5
2	Respect the privacy of patients while maintaining confidentiality in the delivery of team-based care.	1	2	3	4	5
3	Embrace the diversity that characterizes patients and the health care team.	1	2	3	4	5
4	Respect the unique cultures, values, roles/responsibilities, and expertise of other health professions.	1	2	3	4	5
5	Work in cooperation with those who receive care and those who provide support or care.	1	2	3	4	5
6	Develop a trusting relationship with patients, families and other team members.	1	2	3	4	5
7	Demonstrate high standards of ethical conduct and quality of care in my contributions to team-based care.	1	2	3	4	5
8	Manage ethical dilemmas specific to interprofessional patient centered care situations.	1	2	3	4	5
9	Act with honesty and integrity in relationships with patients, families, and other team members.	1	2	3	4	5
10	Maintain competence in my own profession appropriate to my scope of practice or level or training.	1	2	3	4	5
Roles	s and Responsibilities Domain					
11	Communicate my roles and responsibilities clearly to patients, families, and other professionals.	1	2	3	4	5
12	Recognize my limitations in skills, knowledge, and abilities.	1	2	3	4	5

Inter ndf

https://nexusipe.org/informing/resource-center/interprofessional-education-collaborative-ipec-competency-survey



Student Assessment Resources



https://nexusipe.org/informing/resource-center



Faculty Assessment

- Regular planning and debriefing sessions
 - Since Fall 2014!
- Structured and semi-structured qualitative assessment
 - Meetings
 - Electronic mail
 - Online learning environment
- Continuous quality improvement



Participant Assessment

- Assessed
 - Learning
 - Program evaluation
- Mixed-methods
 - Self-created surveys
 - Open-ended qualitative questions



Program Assessment Activity 1

- Community Health Project: Fall Screenings
 - Setting: Local Independent and Assisted Living Facility
 - 3 disciplines participating (PT, OT, Pharmacy)
 - · One faculty/clinical mentor on site per discipline
 - Performed fall risk assessments with scheduled follow up sessions several weeks later
- Ideas for assessment?

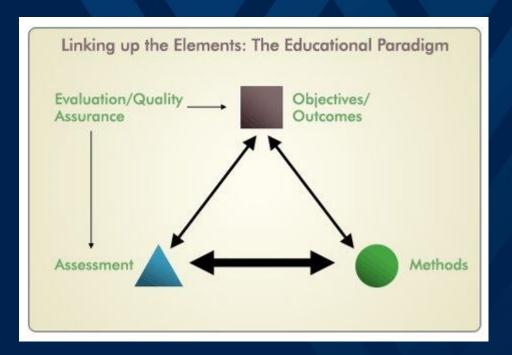


Program Assessment Activity 2

- Community Health Project: Healthy Aging Fair
 - Setting: Various regional community centers
 - 6 disciplines participating (PT, OT, Music Therapy, Pharmacy, SLP, Audiology)
 - One faculty/clinical mentor on site per discipline
 - 10 stations with various topics related to healthy aging
- Ideas for assessment?



Program Evaluation





IV. Debriefing

Gina Baugh, Amy Burt and Kimeran Evans



Debriefing

Overall

- Interactive, bidirectional
- Reflective conversation or discussion
- Goal of improving future practice

IPE

- Teamwork vs. content
 - IPEC competencies
- Co-facilitators
- Objective



Different Types of Debriefing

- GAS
- + Delta
- Debriefing with good judgement
- Advocacy inquiry
- Circular questioning



Evolution of our Debriefing Model

- Faculty & staff debriefing
 - Continuing professional development
 - Quality improvement
- Student debriefing
- Formal vs. informal



Helpful Tips for Debriefing

- As the facilitator, understand the details and process of the project.
- Relate debriefing to the objectives of the project.... stay on task with this focus.
- Provide a safe environment for learning. It's ok if the students forgot something, they need to learn from their errors.



The Questions

- Have a list of guided reflection questions
 - generic and specific
- Be curious about what they did and why they did it
- Try to understand the students' thought processes
- Take advantage of teaching moments



Sample Questions

- → Do you think you achieved your objectives?
- → Who was the leader? How did this leader emerge?
- → Were you satisfied with your work?
- → Is there anything else you would like to discuss?



Debriefing Activity

Objectives for Activity 2

- Students from multiple disciplines will provide healthcare education and screenings to seniors in WV.
- Students will participate in IPE activities to improve communication, leadership, teamwork/ collaboration, patient safety, and self-efficacy.



Program Assessment Activity 2

- Community Health Project: Healthy Aging Fair
 - Setting: Various regional community centers
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- Ideas for assessment?





V. Successes and Challenges

Gina Baugh



Successes

- Provide healthcare education and screenings to rural communities
- Student education
 - IPEC competencies
- Fulfills accreditation standards



Successes

- Additional IP collaborations
- Scholarship
- Support from administration
- Awards and recognition





Challenges

- Scheduling
- Resources
- Lack of understanding of IPE
- Student participation
- Framework for initiatives
- Assessment methods



Key Points to Remember

- Collaborate with faculty committed to IPE
- Don't be afraid to make changes and try something new
- Remember to assess programs from a variety of viewpoints
- Don't forget about the importance of debriefing
- Meet often with your faculty and staff partners
- Be a positive role model for your students
- Have fun!



Thank You



