# 2017-2018 Annual Report

July 1, 2017 – June 30, 2018

Center for Interprofessional Practice and Education at Washington University Medical Campus







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First-year Interprofessional Education Experience Attendees (spring 2018)

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## Overview

Key Accomplishments AY 2017-18

- Curriculum: Release of the IPE Curriculum Master Framework
- Assessment: Established formal, collaborative relationship with Brown School Evaluation Center
  - Completed evaluation of major existing IPE activities: Transitions of Care, Independent Living Center, Standardized Patient Team Experience and First-Year Sessions.
- Professional Development: Hosted 11 workshops for 156 attendees
  - o Including new IPE 101 and 201 workshops and inducted first cohort of Master Interprofessional Educators
- Scholarship: Produced 8 scholarly presentations and 2 publications
- Operations: Doubled Center Staff with addition of two student interns

### AY 2018-19 Plans

- Curriculum & Assessment: Design Phase I Universal Introductory Curriculum to launch in Fall 2019. We also will run three experiential pilots with clinical partners.
- Professional Development: Continue workshop series, induct Master Interprofessional Educator cohort 2.
- Operations: Design the educational technology to support the longitudinal IPE curriculum.

"Being with learners from the other professions helps me to dispel myths and to provide ideas for how they can be part of the solution."

Nursing Faculty Member,

Master IPE Educator

### **Center Structure**

The Center for Interprofessional Practice and Education (CIPE) at Washington University Medical Campus was launched in August 2015. The center is a collaboration between Goldfarb School of Nursing at Barnes-Jewish College (Goldfarb), St. Louis College of Pharmacy (the College), and Washington University School of Medicine in St. Louis (WUSM), and involves seven academic programs:

- 1. Audiology\*
- 2. Deaf Education\*
- 3. Medicine (MD)
- 4. Nursing (RN)
- 5. Occupational Therapy (OT)
- 6. Pharmacy (Pharm)
- 7. Physical Therapy (PT)

The CIPE Steering Committee engaged in a strategic planning process during fall 2016 and winter 2017. Utilizing information gathered through faculty discussions and committee work done by faculty from all the center professions, members revisited the purpose of the center. This discussion culminated in the development of a comprehensive mission/vision/ values statement, which has been endorsed by the highest levels within each of the center's collaborating institutions.

The center is governed by a Steering Committee comprised of two representatives from each institution. Current staff includes Heather Hageman, MBA, director and Robin Young, M.A., coordinator.

<sup>\*</sup>Audiology and Deaf Education are part of the Program in Audiology and Communication Sciences (PACS).

### Mission

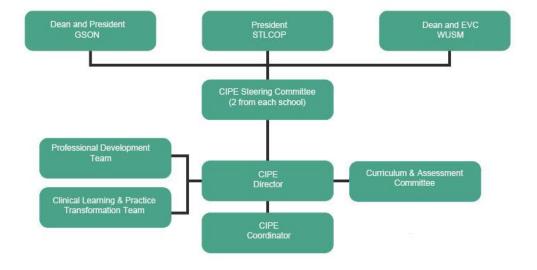
We promote an educational environment that values and supports collaboration by building a community of interprofessional champions and scholars, developing & integrating curricula, and enhancing collaborative practice.

### Vision

To improve the health and wellness of individuals across the greater St. Louis region through interprofessional care delivery, education and community partnerships. We aim to create a best-evidence model that can be adapted to other communities.

### **Values**

Partnerships, trust, respect, advocacy, scholarship, innovation and quality



### **Steering Committee Members:**

### **Goldfarb School of Nursing**

Jean Davis, Ph.D., RN, Senior Associate Dean for Research Holly Diesel, Ph.D., RN, Academic Chair, Accelerated and RN to BSN programs

### St. Louis College of Pharmacy

**Tricia Berry**, Pharm.D. Chair, Department of Pharmacy Practice **Gloria Grice**, Pharm.D., Director, Experiential Education

### Washington University School of Medicine

**Eva Aagaard**, M.D., Senior Associate Dean for Education **William Clark**, Ph.D., Director, Program in Program Audiology and Communication Sciences

**Jennifer Stith**, PT, Ph.D., LCSW, Division Director of Education in Physical Therapy and Associate Director of Professional Curriculum **Steve Taff**, Ph.D., OTR/L, FNAP, FAOTA, Associate Director of Professional Education and Academic Affairs

### **Students**

During summer 2018, the center's staff doubled! The center was fortunate to have Stephanie Kibby, Washington University School of Medicine Clinical Doctorate of Occupational Therapy (OTD) candidate, and Emma Knapp, Washington University Master of Public Health (MPH) candidate, work to complete experiential portions of their degrees with the center.

"With IPE education, we are giving our students the tools to succeed in collaboration."

Nursing Faculty Member, Master IPE Educator

"We need to provide positive learning experiences and help instill the values that promote patient-centered, teambased care..."

Pharmacy Faculty Member, Master IPE Educator

## **Strategic Priorities**

The CIPE Steering Committee drafted strategic priorities for the center in July 2017 with input from faculty, staff and students across the center's three institutions and our clinical and community partners. These strategic priorities will be operationalized over the next three to five years.



"Integrating the Arts" professional development workshop participants.

"It's great to meet people from different professions and learn more about each other, and recognize that we're all humans trying to improve the lives of others."

PT Student, First-Year IPE Session, spring 2018



### Strategic Priorities – Goals

### Education

- Develop integrated, longitudinal curriculum
- Develop complementary comprehensive assessment plan
- Develop technological infrastructure to support curriculum and assessment
- Strategically add new professions/GME

### **Practice**

- Learn best practices in patientcentered collaborative care clinical practice environment
- Partner with clinical entities to create patient-centered collaborative care clinical practice sites
- Identify technology needs
- Establish collaboration with other academic institutions

### Community

- Implement a professional development plan
- Identify common social spaces for students and faculty
- Support extracurricular student activities
- Establish a coordinated communication plan
- Investigate other crossinstitutional efforts

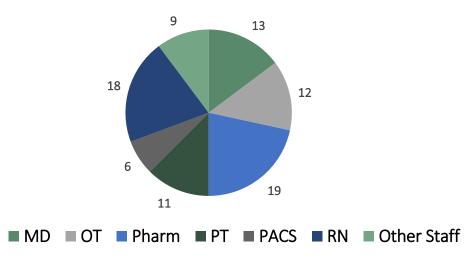
### Research

- Set research priorities/areas of focus
- Develop research infrastructure
- Disseminate research findings in peer-reviewed journals and national presentations
- Obtain external research funding
- Determine process for involving students in research

### **Community Engagement**

During AY 2017-18, 86 faculty, clinicians and staff from across the campus served on one of the center's committees and/or were actively engaged in curriculum design, teaching or professional development activities.

## Overall Faculty, Clinician and Staff Involvement in CIPE 2017-2018



### Transitions of Care Curriculum Team

In spring 2018, the center piloted an innovative IPE experience focused on the transitions of care process to determine the feasibility of incorporating the experience into the curricula of all of the center's programs. In addition, coordinators wished to gain student insight into the value of the experience to generate ideas for future expansion of experiential offerings.

Twenty-five students, five from each profession (medicine, nursing, occupational therapy, pharmacy and physical therapy) volunteered to participate in the pilot. The pilot was structured into three phases. Learners completed the first phase on their own by reviewing two online cases that focused on transitions of care. St. Louis College of Pharmacy provided funding for use of the CareCases software from CaseNetwork®. Themes of the cases were focused on medication management and transition planning/information transfer. Learners received discussion questions to prepare for the in-class session that followed.

The second phase consisted of an in-class discussion session on Feb. 7, 2018. Each learner was assigned to an interprofessional group with one learner from each profession. All groups discussed both cases during the two-hour session, and the experience ended with a large group debrief presentation emphasizing best practices and important takeaway points from each case. The last phase of the pilot was an experiential activity. Each interprofessional group met with a medical resident facilitator to walk through a simulated discharge on a hospitalized patient. The facilitator highlighted issues to address for facilitating a safe discharge.

This fall, a modified version of the case exercise will be incorporated as IPE sessions in the IPE Transitions of Care course in the Pharmacy curricula and as an elective experience for the other programs.

The center's Curriculum and Assessment Committee is working with the Evaluation Center at the Brown School at Washington University to assess the experience. In addition to creating an evaluation plan, the Evaluation Center has suggested that more Post-Experience Assessment questions be added related to program implementation (e.g., activity format, content, logistics) to ensure continuous quality improvement.

### Members:

- Maggie Bland, DPT, Program in Physical Therapy, Washington University School of Medicine
- Kay Mueggenburg, Ph.D., MSN, RN, CHPN, Goldfarb School of Nursing
- Pat Nellis, MBA, OTR/L, Program in Occupational Therapy, Washington University School of Medicine
- Alison Stevens, Pharm.D., St. Louis College of Pharmacy
- Tim Yau, M.D., M.D. Program, Washington University School of Medicine

"The best part of interprofessional education for me is the relationships that I've formed with educators and learners from other professions with whom I may never have had the opportunity to interact without CIPE. These relationships have brought joy and meaning to my life and have improved my career satisfaction. I truly believe they also help me provide better patient care as well as a better education to the learners in my own profession. Thank you, CIPE!"

Medicine Faculty Member, Master IPE Educator "I think the more opportunities for professionals of different backgrounds to work in small groups to tackle common goals (ie. educational challenges etc.) the more a natural cross professional connections will be created and built.

Professional Development Workshop Participant, fall 2017

## Clinical Learning & Practice Transformation Team

The purpose of this team is to: assist with identifying, establishing and/or developing sites where interprofessional teams of students can be placed. The goal is for students to learn how to work effectively in teams while contributing to the needs of the site to improve patient/client care. The center's Clinical Learning and Practice Team (CLPT) is comprised of at least one faculty representative from each of the center's collaborating academic programs.

### Team Responsibilities:

- Meet with representatives from potential sites
- Assess the opportunities for partnership and student team placement
- Assist with the selection and planning of the experiences
- Help ensure student participation, supervision and assessment
- Assist with sites' interprofessional development

### Current Members of CLPT (AY 2017-18):

- Tamara L. Burlis, PT, DPT, CCS, Washington University Program in Physical Therapy
- Nicole Gattas, Pharm.D., St. Louis College of Pharmacy
- Martha Hoffman, D.N.P, MBA, RN, Goldfarb School of Nursing
- Jennifer Miller-Katsafanas, PT, DPT, WCS, CLT, Program in Physical Therapy, Washington University School of Medicine
- Lauren Milton, OTD, OTR/L, Program in Occupational Therapy, Washington University School of Medicine
- Kay Mueggenburg, Ph.D., MSN, RN, CHPN, Goldfarb School of Nursing
- Amanda Ortmann, Ph.D., Program in Audiology and Communication Sciences, Washington University School of Medicine
- Duana Russell-Thomas, OTD, OTR/L, Program in Occupational Therapy, Washington University School of Medicine
- Tracy Spitznagle, PT, DPT, WCS, Program in Physical Therapy, Washington University School of Medicine
- Alison Stevens, Pharm.D., St. Louis College of Pharmacy
- Amy Tiemeier, Pharm.D., St. Louis College of Pharmacy
- Colleen Wallace, M.D., M.D. Program, Washington University School of Medicine

## **Professional Development**

The Professional Development Team spent AY 2017-18 launching its Professional Development Plan. The intent of the plan is to create a core cadre of well-trained IPE professional educators across the seven educational programs and includes the following initiatives:

"There are baby steps we can start taking today to get us closer to interprofessional

learning."

IP Learning in Practice Settings Workshop Attendee

### **Monthly Workshop Series**

The Professional Development Team launched a monthly professional development workshop series in fall 2017 to which all interested faculty and clinicians have been invited. Based on a needs assessment from faculty at the center's collaborating institutions, topics included facilitating challenging learner groups, mindfulness/resiliency, interprofessional clinical teaching strategies and the cognitive science of teaching and learning. The Professional Development Team has relied on key resources within each institution, and creates new workshops as needed based on the professional training they have received.

### Workshops Hosted in AY 2017-18:

- Applying Principles from Cognitive Science to Health Professions Education (September 2017)
- Managing Challenging Scenarios in Interprofessional Small Group Facilitation (September 2017)
- Integrating the Arts into a Health Professions Curriculum (October 2017)
- Interprofessional Building Inclusive Communities (October 2017)
- Interprofessional Learning in Practice Settings (November 2017)
- Professional Resilience (December 2017/May 2018)
- Understanding Health Profession Identities and Their Unintended Impacts on Interprofessional Team Performance (January/August 2018)
- Facilitating IPE 101 (February 2018)
- IPE 201 Managing Challenging Scenarios in Interprofessional Education (April 2018)

"IPE energizes me when I see leaders from the differing disciplines all coming together with one goal: to improve health care outcomes for the client. Working together produces a special synergy, and helps to let all members of the team value one another as equally important."

> Nursing Faculty Member, Master IPE Educator

### Members of the Professional Development Team:

- Heather Hageman, MBA, Center for Interprofessional Practice and Education
- Judith Smith, Ph.D., RN, GCNS-BC, Goldfarb School of Nursing
- Rebecca Stauffer, Pharm.D., St. Louis College of Pharmacy
- Colleen Wallace, M.D., MD Program, Washington University School of Medicine

### Facilitating IPE 101

The center's Professional Development Team launched a new "Facilitating IPE 101" workshop adapted from the three-day "Facilitating IPE" workshop held by Toronto ehpic® in 2017. The condensed one-day IPE 101 workshop was held in February 2018. Participants learned about the IPE competencies and the center's emerging longitudinal curriculum. Attendees also gained knowledge on implicit bias and the stereotypes of professions and the culture of teams, and had the opportunity to hone their facilitation and debriefing skills. Ten of the center's academic and clinical partners completed this foundational workshop.



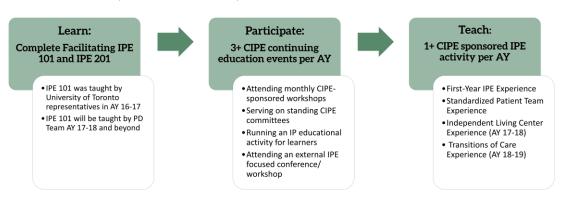
Workshop participants in discussion at the "Applying Principles from Cognitive Science to Health Professions Education" workshop.

### Master Interprofessional Educator Certificate

The center's professional development goal is to create a core cadre of well-trained IPE educators across our seven educational programs. In doing so, these Master Interprofessional Educators will meet accreditation standards, produce scholarship and enhance educational culture to best prepare learners to practice in interprofessional settings throughout their careers.

Faculty and clinicians who attend our "Facilitating IPE 101" workshop, participate in the "IPE 201" workshop, take part in a designated amount of interprofessional professional development activities and teach in the emerging IPE curriculum will be designated as Master Interprofessional Educators.

These are the requirements to complete the certificate:



"I value interprofessional education because I have had the privilege to be a part of highly effective health care teams and work with amazing practitioners from all health professions during my career. I was not exposed to formal training about interprofessional education during my schooling and believe that starting this exposure early is key to ensuring these principles will be sustained as students transition to practitioners."

Pharmacy Faculty Member, Master IPE Educator

### Congratulations to our first cohort of Master Interprofessional Educators!

On May 10, the inaugural group of 13 Master Interprofessional Educators was inducted. This cohort had representation from all three institutions, with faculty from medicine, nursing, occupational therapy and pharmacy.



Pictured from left to right: Gloria Grice (St. Louis College of Pharmacy), Alison Stevens (St. Louis College of Pharmacy), Judy Smith (Goldfarb), Colleen Wallace (Washington University School of Medicine), Tricia Berry (St. Louis College of Pharmacy), Duana Russell-Thomas (Washington University School of Medicine), Susan Fliesher (Goldfarb), Kay Mueggenburg (Goldfarb)

Not pictured: Douglas Char (Washington University School of Medicine), Stephanie Crist (St. Louis College of Pharmacy), Holly Diesel (Goldfarb), Carolyn Dufault (Washington University School of Medicine), Rebecca Stauffer (St. Louis College of Pharmacy "Interprofessional education fosters collaboration, which is the future of health care."

Pharmacy Faculty Member,

Master IPE Educator

## Curriculum and Assessment Committee (CAC)

### Purpose/Charge:

The center's Curriculum and Assessment Committee (CAC) designs, reviews and evaluates the center's' IPE curriculum and learner assessment in collaboration with individual programs. The committee is also tasked with making data-driven recommendations for curricular revisions as appropriate.

### Responsibilities:

The CAC has worked closely with the center's director and its Steering Committee to develop the core IPE curriculum framework, which is comprised of IPE learning objectives, universal and selective IPE activities. The committee will continue working closely while the framework is being implemented in fall 2019. The CAC serves as the primary committee responsible for developing and revising the core learning objectives of the IPE curriculum framework and universal IPE activities.

The committee oversees the design of select IPE activities and assessments of student learning from any IPE activity that is intended to be part of the core IPE framework. The committee reports on student cohort progress toward achieving the learning objectives articulated in the core IPE framework in collaboration with the individual programs. The CAC is responsible for making evidence-based recommendations for curricular modifications (i.e., to IPE learning objectives and IPE activities). The committee shall also identify promising or exceptional student learning and assessment practices and communicate that information to IPE activity design teams. The also assists, the center's Professional Development Team, as needed, to identify potential areas for professional development activities with respect to best practices in IPE curriculum design, delivery and assessment.

Each member of the CAC represents their own professional academic program and, as such, serves as a liaison between the CAC and the profession-specific academic program (ideally including profession-specific curriculum committee). CAC members are expected to regularly participate in monthly meetings.

### Collaboration with the Evaluation Center:

The center's Curriculum & Assessment Committee has an ongoing partnership with the Brown School Evaluation Center at Washington University in St. Louis to develop and implement a curriculum evaluation plan.

### Members (spring 2018):

- Suzie Chen, pharmacy student, St. Louis College of Pharmacy
- Avril Coley, M.D. student, Washington University School of Medicine
- Tom De Fer, M.D., M.D. Program, Washington University School of Medicine
- Brenda Gleason, Pharm.D., St. Louis College of Pharmacy
- Heather Hageman, MBA, Center for Interprofessional Practice and Education
- Kelly Hantack, MSN, RN, CPN, Goldfarb School of Nursing
- Cory Hillis, Audiology Student, Washington University School of Medicine
- Maxine Johnson, student, Goldfarb School of Nursing
- Tara Shaw, MSN, RN, Goldfarb School of Nursing
- Stacy Smallfield, DrOT, OTR/L, BCG, Program in Occupational Therapy,
   Washington University School of Medicine
- Jennifer Stith, PT, P.D., LCSW, Program in Physical Therapy, Washington University School of Medicine
- Maureen Valente, Ph.D., Program in Audiology & Communication Sciences, Washington University School of Medicine
- Megan Wren, M.D., M.D. Program, Washington University School of Medicine
- Kathy Yang, occupational therapy student, Washington University School of Medicine

### Initial Committee Charge:

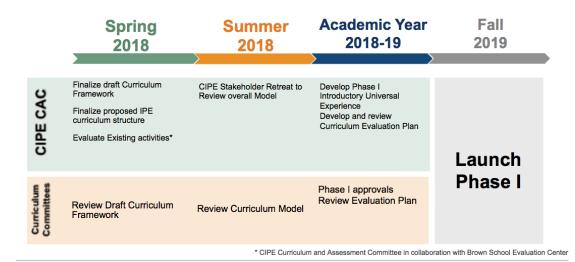
The initial charge is to develop an integrated, longitudinal core interprofessional curriculum framework to be shared and implemented across all of the center's educational programs. The curriculum framework will be based on sound educational principles and mindfulness of individual academic program tracks and accreditation/certification requirements, as applicable. Subsequently, it is expected that the committee will develop (or task development to subcommittees) curricula and learner assessments and review the content and design of any IPE activities that are intended to be a part of the core interprofessional curriculum framework to ensure the activity addresses one or more learning objectives in the framework. They will review feedback on curricular elements and make suggestions for change.

### Official Framework (released spring 2018)

The center is proud to announce the release of the **Core IPE Curriculum Framework.** This work is the culmination of more than two years of thoughtful discussion and research by the center's Curriculum and Assessment Committee members. It incorporates feedback from all seven profession-specific curriculum committees.

The next steps for the IPE curriculum development, described in the **timeline** below, include finalization of the IPE curriculum structure and evaluation plan, broader stakeholder input and launching the foundational Phase I activity in fall 2019. It is anticipated that the Phase I activity will be a universal introductory activity for all center professions, replacing the current First-Year Sessions. Phase II will consist of a set of selective activities for students. The requirements for IPE selectives and the process for registration will be developed during AY 2018-19. During this time a method for cataloguing all IPE activities within CIPE programs will also be developed.

## **IPE Curriculum Development Working Timeline**



"New, stronger,
and even lifelong
networks are being
created across
disciplines and
along the
continuum
(students,
educators,
practicing clinicians,
researchers and
administrators)."

OT Faculty Member, Master IPE Educator

### First-Year Sessions

The center would like to thank the First-Year Design Team for their time and expertise in designing the First-Year Sessions. These sessions have run since the center's inception, and with the team's input, they have improved over time. The center's Curriculum and Assessment Committee (CAC) believes it is stable enough to continue in its current iteration during AY 2018-19. Since further revisions are no longer needed for the First-Year Sessions, the First-Year Design Team's duties have been absorbed by the CAC.

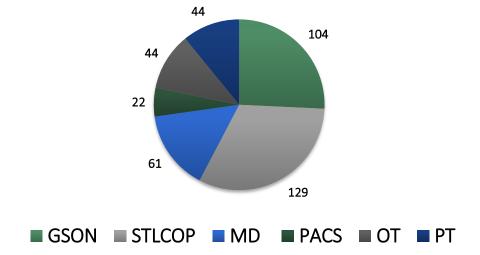
The First-Year IPE Sessions are the introductory component of the center's' longitudinal curriculum. During the sessions, first-year, professional-level students from all seven academic programs learn about each other's roles and responsibilities within the health care team. The sessions also foster communication and teamwork with the overarching goal of improving the delivery of health care. At the sessions, students are grouped into interprofessional teams and work through exercises designed to encourage the understanding of self, others and their teams. The teams continued working together for each of the three sessions, rotating to a different location at one of the collaborating institutions on each date. The broad goal of this experience was to introduce the students to the fundamental principles of understanding and valuing the roles of the members of interprofessional health care teams.

### AY 2017-18 Session Objectives:

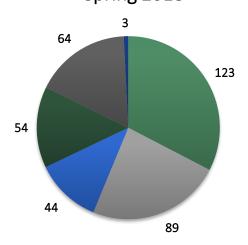
- Understand that the delivery of safe and effective patient care is a team effort.
- Help students recognize aspects of their personal identity that could impact their role as a team member.
- Describe the complementary nature of members on an interprofessional team.

Assessments administered to all learners at the end of the experience indicated high levels of agreement that these objectives were met.

Number of Learners by Program for First- Year IPE Fall 2017



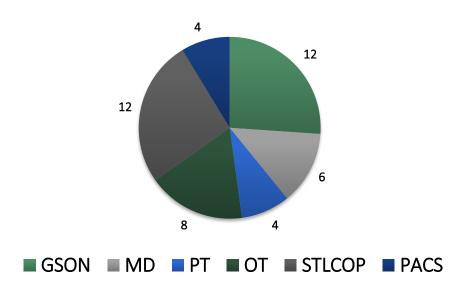
Number of Learners by Program for First- Year IPE Spring 2018



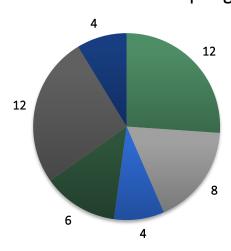
"This experience facilitated the understanding of the components of interprofessional collaboration. I think it was well structured and informative."

Medicine Student, First-Year IPE Session, spring 2018

## Number of Faculty and Clinicians by Program for First-Year IPE Sessions Fall 2017



## Number of Faculty and Clinicians by Program for First-Year IPE Sessions Spring 2018



## Standardized Patient Team Experience Curriculum Team

This session is a hands-on experience with multiple health care professions (medicine, nursing, occupational therapy, pharmacy and physical therapy). Students practice novel ways a health care team might function in order to effectively and efficiently care for a hospitalized patient/client. IPE student teams determine how to work together to take a history and physical and develop a care plan for a standardized patient. An IPE faculty team then debriefs the experience. The goal for this session is to develop an integrated, interprofessional treatment plan that reflects the roles and strengths of each member of the care team as well as the needs of the patient. This experience began in 2009 with medicine and nursing students and has since been expanded and adapted based on feedback from participants and the curriculum team. The center's CAC is working with the Evaluation Center at the Brown School at Washington University to assess the experience. The Evaluation Center has recommended developing an activity plan for the activity with a logic model and evaluation questions. They also suggested implementing a process for analyzing and reporting data collected from activity learners and instructors. This process will also integrate qualitative data collection from learners to better understand their perceptions of the activity.



Students participating in the Standardized Patient Team Experience

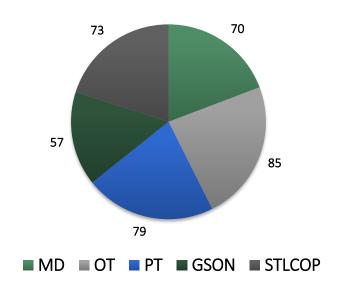
### **Team Members:**

- Teri Boyd, EDD, MSN, RN, Goldfarb School of Nursing
- Doug Brown, Ph.D., Washington University School of Medicine
- Stephanie M. Crist, Pharm.D., BCACP, BCGP, St. Louis College of Pharmacy
- Alan Glass, M.D., Washington University School of Medicine
- Gloria Grice, Pharm.D., BCPS, St. Louis College of Pharmacy
- Heather Hageman, MBA, Center for Interprofessional Practice and Education
- Dehra Harris, M.D., M.D. Program, Washington University School of Medicine
- Barcus Jackson, DCS, EDD, MBA, ITIL, Goldfarb School of Nursing
- Suki Lammers, administrative coordinator at the Office of Medical Student Education, Washington University School of Medicine
- Angela McConachie, DNP, RN, FNP-C, Goldfarb School of Nursing
- Monica Perlmutter, OTD, OTR/L, Program in Occupational Therapy, Washington University School of Medicine
- Jamie Pitt, Office of Education, Washington University School of Medicine
- Judith Smith, Ph.D., RN, GCNS-BC, Goldfarb School of Nursing
- Jennifer Stith, PT, Ph.D., LCSW, Program in Physical Therapy, Washington University School of Medicine
- Susan Tucker, MSOT, OTR/L, ATP, Program in Occupational Therapy,
   Washington University School of Medicine
- Robin Young, M.A., Center for Interprofessional Practice and Education

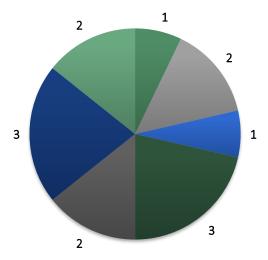


Students participate in the Standardized Patient Team Experience

## Number of Learners by Program for Standardized Patient Team Experience 2017-2018



Number of Faculty and Staff by Program for Standardized Patient Team Experience 2017-2018





Students participate in the Standardized Patient Team Experience

## Independent Living Center (AY 2017-18)

The Independent Living Center Pilot offers learners the opportunity to work with a learner from another profession while interacting with an older adult community participant.

Learning teams meet with their community volunteer two times. The first visit focuses on building rapport, exploring the volunteer's management of health and wellness, current health needs and barriers to health care. Learners ask the community volunteer to complete the Home Safety Self-Assessment Tool (HSSAT). After the visit, learners discuss possible community resources to address the community volunteer's unmet health needs. During the second visit, learners review the HSSAT with the community volunteer and review their medications together.

All of the learning teams then come together with the facilitators for a large group debriefing. Learners are assigned to one of 16 larger teams for a group discussion led by a center-trained facilitator. Teams will present their team reflection with members other participating teams and discuss their site visits, the barriers to healthcare that were observed and teamwork skills.

The independent Living Center Pilot is required for learners in the following courses:

Occupational Therapy (OT) 5380

Introduction to Pharmacy Practice Experience (IPPE) 5130

The center's CAC is working with the Evaluation Center at the Brown School at Washington University to assess the experience. The Evaluation Center has made recommendations to develop an evaluation plan for the activity and encourage more learners and site preceptors to complete the post-activity evaluation. The idea of offering an incentive to the community participant volunteers to encourage them to return their satisfaction surveys is also under consideration.

### Members:

- Christine Berg, Ph.D., OTR/L, Program in Occupational Therapy, Washington University School of Medicine
- Stephanie M. Crist, Pharm.D., BCACP, BCGP, St. Louis College of Pharmacy

"I liked that we all just became a group of people. I thought this broke down any barriers that occur sometimes."

Nursing Student, First-Year IPE Session, spring 2018

## **Extracurricular Student Engagement**

The Health Professional Student Leadership Council (HPSLC) focuses on the extracurricular side of interprofessionalism. HPSLC works in parallel with the center to promote and advance the understanding of interprofessional collaboration between all health professions on the Washington University Medical Center campus (audiology, deaf education, medicine, nursing, occupational therapy, pharmacy and physical therapy). The center's director serves as the advisor of HPSLC.

### 2017-2018 Board Members:

- President Suzie Chen, pharmacy student, St. Louis College of Pharmacy
- Vice-President Randy Abueed, pharmacy student, St. Louis College of Pharmacy
- Secretary Yoon Lee, pharmacy student, St. Louis College of Pharmacy
- Treasurer Mary Cabreros, pharmacy student, St. Louis College of Pharmacy
- Social Media Administrator Melanie Lutz, audiology student, Program in Audiology and Communication Sciences

\*While the AY 2017-18 HPSLC Executive Board is heavily represented by pharmacy students, each health profession program has at least two appointed student representatives to ensure each program has representation on the leadership team.

\*Note: Board member composition changes annually. The list of current board members can be found online at http://cipewumc.org/students/HPSLC.html



### **Board Activities:**

- Updated the HPSLC Constitution to better reflect the current mission, activities and internal structure of the organization.
- Determined that the Community Outreach Chair that is elected within the Goldfarb Men Excelling in Nursing (GMEN) organization will serve as one of the nursing student representatives for HPSLC. This individual will be elected through the Goldfarb School of Nursing GMEN.
- Established relationship and piloted a workflow visit with Saturday Neighborhood Health Clinic (SNHC) for future involvement of pharmacy students in the clinic.

### **Events:**

- Start-of-Year Meet & Greet Health professional students from all three institutions met over appetizers and refreshments. There were t-shirt giveaways.
- Interprofessional Case Discussion Panel –84 attendees participated. The panel explored the scope of practice of different health care professions while working through a case study.
- Fall Community Service Day-25 students volunteered at Kingdom House.
- Halloween Bar Crawl—Approximately 230 students participated in this social event in the nearby Grove neighborhood.
- Stroke Case Study Night—55 attendees. The interprofessional case discussion focused on the application of students' knowledge of stroke as it applies to their health profession. Students worked together to develop assessments for medical problems based on clinical patient data
- Hot Chocolate Social- 30 attendees.
- Trivia Night-11 attendees
- Pediatrics Case Study Night- 35 attendees. The interprofessional case discussion focused on the application of students' knowledge of pediatrics as it applies to their health profession. Students worked together to develop assessments for medical problems based on clinical patient data
- Spring Community Service Week-16 students volunteered at Kingdom House.
- "Be The Match" Marrow Donor Registry Drive-Collaborated with the Student Academy of Audiology (SAA) to host a bone marrow registry drive.
- Monthly Happy Hour-Hosted every month in collaboration with the Graduate Professional Council (GPC) and Institute for Health Care Improvement (IHI) for two of the monthly events.
- Snow Cone Social-50 attendees

## Scholarly Publications, Presentations and Grants

### **Recent Grants**

1. Alison Stevens, Pharm.D., Maggie Bland, DPT, Kay Mueggenburg, Ph.D., MSN, RN, CHPN, Pat Nellis, MBA, OTR/L, Tim Yau, M.D. Center for Teaching and Learning at St. Louis College of Pharmacy Grant. 2017-2018. Development of an innovative Interprofessional Education (IPE) experience focused on transitions of care in a longitudinal Introductory Pharmacy Practice Experience (IPPE) course.

### Recent Scholarly Publications and Presentations

- 2. Collins, L, Doll, J, **Hageman H**, Jensen, G, Lockeman, K, Maudlin, M, Pfeifle, A, Reising, D. Exploring the Impact of Interprofessional Mentoring. Poster presented at the National Center for Interprofessional Practice and Education Conference (Nexus Summit), Minneapolis, MN July 29-31 2018.
- 3. **Stauffer S, Hageman H, Smith J, Wallace C**. Professional Development Plan for Interprofessional Educators: Lessons Learned. Poster presented at the National Academies of Practice (NAP) Annual Forum, Atlanta, GA. April 13-14, 2018.
- 4. **Char D, Brottman M, Taff S**. Results of a Systemic Review of Interprofessional Literature Regarding Best Practices in Teaching Diversity and Inclusion. Poster presented at the National Academics of Practice (NAP) Annual Forum, Atlanta, GA. April 13-14, 2018.
- 5. **Grice G**, Thomason AR, Meny LM, Pinelli NR, Martello JL, and Zorek JA (2018). Intentional Interprofessional Experiential Education. American Journal of Pharmaceutical Education: Volume 82, Issue 3, Article 6502.
- 6. **Grice G, Harris D, Perlmutter M, Smith J, McConachie A, Hageman H.** A Practical Tool to Rate Interprofessional Behaviors and Coach Teams for Success, Collaborating Across Borders VI Conference Banff, Alberta, Canada, October 1-4, 2017.

- 7. **Hageman H, Grice G,** Hanyok L, Lin A, Davidson H, Miller B. Nuts and Bolts of Implementing a Multi-Institution Collaboration for IPE—Alignment Across Cultures & Processes—Getting Started, Collaborating Across Borders VI Conference, Banff, Alberta, Canada, October 1-4, 2017.
- 8. **Grice G,** Thomason A, Meny L, Pinelli N, Martello J, Zorek J. Intentional Interprofessional Experiential Education, Collaborating Across Borders VI Conference, Banff, Alberta, Canada, October 1-4, 2017.
- 9. **Hageman H,** Thithecott G, Lillie E. Defining Leadership Across the Health Professions, Collaborating Across Borders VI Conference, Banff, Alberta, Canada, October 1-4, 2017.
- 10. Michelfelder A, Vlasses F, Callahan M, Sinclair L, Pole D, Ratka A, Newton A, Hageman H. No Mission No Margin: Funding Interprofessional Education and Collaborative Practice (IPECP) Programs Collaborating Across Borders, Collaborating Across Borders VI Conference, Banff, Alberta, Canada, October 1-4, 2017.
- 11. **Hageman H,** Huggett K, Simpson D, Hasbrouck C, Stuber M, Luk J, Timmerman G. Operationalizing Interprofessional Education in the Clinical Workplace. Medical *Science Educator*. 2017.



Rebecca Stauffer, St. Louis College of Pharmacy, and Douglas Char, Washington University School of Medicine at the National Academy of Practice Conference

### **Professional Development Plan for Interprofessional Educators: Lessons Learned**

nan, MBA<sup>2,</sup> Judith Smith, PhD, RN<sup>3</sup>, Colleen Wallace. MD<sup>4</sup>

- Center for Interprofessional Practice and Education at Washington University Medical Campus.
   Collaboration among three private, freestanding institutions co-located on the same medical campus.
- same medical campus.

  Seven professions: audiology, deaf education, medicine, nursing, occupational therapy, pharmacy & phylical therapy.

  A need for trained interprofessional (IP) educators was identified early in the curriculum development process as key to successful implementation in classrooms and practice site.
- Professional development must be strategic in design and needs to model the principles and premises of interprofessional education and collaborative practice. <sup>3,2</sup>

### Methods: Key Elements

### Professional Development Team

- roressional Development learn
  Consists of one representative from each
  institution and CIPE director.
  Representative is primary cultural liaison trespective institution, keeping institution
  informed of programing and aligned
  philosophically with CIPE.
  Tame completed national T3 Trains by Tra
- Team completed national T3 Train-the-Traine Interprofessional Faculty Development Program.

### Professional Development Plan

- Enhance IP culture
   Support curriculum and teaching innovation - Produce scholarship
- Program Specifics
- Implementation Master Interprofessional Educators

To create a core cadre of well-trained IP educators to deliver the universal IPE curriculum across the seven academic programs.

Acknowledgements.

The authors would like to thank Robin Young, MA (CIPE) for her assistance with the formatting process.



### Figure 2: Master Interprofessional Educator Criteria



- Address unique IPE principles.

  Align the teaching cultures across all three institutions around IPE.

- Some resistance was experienced from institutions with original Master Educator criteria as the expectations were too high in the early development of our IP culture.

Educational Content of the Workshop

- Virant-Young, D, Forrest, K, McCaskey, S, et al. Faculty Development in Interprofessional Education: Designing and Implementing a Successful Program. Medical Science Educator, 2014. 24(4): 401-407.

### Interprofessional Workshop Breaks Down Professional Silos

Heather Hageman, MBA1, Douglas Char, MD2, Isaac Butler, Pharm.D.3, Michael Ward, PhD, RTR4

sional Practice and Education at Washington University Medical Campus (CIPE), (2) Washington University School of Medicine (WUSM), (3) St. Louis College of Pharmacy (STLCOP), (4) Goldfarb School of Nursing at Barnes-Jewish College (GSON)

Participants by Profession

## Center for Interprofessional Practice and Education at Washington University Medical Campus

### Background

· The Center for Interprofessional Practice and Education at Washington University Medical developed a Professional Development Campusworkshop around professional identities and interprofessional relationships.

### Workshop Objectives

- Develop an awareness of oneself in the process of socialization and our role in uilding inclusive systems.
- Explore how our professional roles impact each individual's attitudes, actions, and decision-making as a healthcare provider.

  • Advance our understanding of how
- professional socialization impacts interprofessional team effectiveness.

### Activities

- Identity group discussion
   Exploration of socialization process within professions
- Power Line activity

### Results

## Winter 2018



Cycle of Socialization

### Participant Comments

We all learned positive and negative biases about our own and other professions from a young age and have continued to develop them throughout our career developments.

We are sometimes blind to our privilege in teams and need to be more intentional about managing ourselves and our teams.

There is more controversy and conflict in the minds of various non-physician specialists (pharmacists, therapists, hygienists, educators) than we physicians realize. Being cognizant of those colleagues' perceptions and feelings is critical to working effectively with them and enriching their professional experience.

### Power Line Activity Sample Statements

Place yourself along the power continuum in the position that best describes your power status if you were:

- A pharmacist entering a patient's hospital room to discuss discharge medications with the patient and a nurse is in the process of preparing the patient to be discharged.
- A physician and you walk into a room with several nurses.
- A nurse and you walk into a room with several physician.

Now, place yourself along the power continuum in the position that best describes your power status in your normal work life.

The authors would like to thank Dewitt Campbell, MSW (NCCJ St. Louis) for his contributions to this project.

## For More Information

If you are interested in receiving email updates from the Center for Interprofessional Practice and Education at Washington University Medical Campus, please contact Robin Young, center coordinator, at <a href="mailto:Robin-Young@stlcop.edu">Robin-Young@stlcop.edu</a>

Visit our website at <a href="mailto:cipewumc.org">cipewumc.org</a>

## Center for Interprofessional Practice and Education

at Washington University Medical Campus

Goldfarb School of Nursing at Barnes-Jewish College St. Louis College of Pharmacy Washington University School of Medicine

## Center for Interprofessional Practice and Education

at Washington University Medical Campus

Goldfarb School of Nursing at Barnes-Jewish College | St. Louis College of Pharmacy | Washington University School of Medicine

## CORE IPE CURRICULUM FRAMEWORK Objectives & Learning Activities

### **Guiding Principles to Operationalize this Framework:**

- 1. The core curriculum is anchored by a focus on teamwork and leadership needed for interprofessional practice.
- 2. Patient/client/family is a member of the interprofessional team.
- 3. Foundational knowledge/skills/behaviors listed in this Framework should be taught by each academic program to prepare learners for IPE activities.
- 4. The core curriculum is longitudinal and as such, would benefit from learner teams that remain intact for as long as possible with a goal to establish psychological safety and trust necessary to provide optimal patient/client care.
- 5. Upon completion of their academic program, all CIPE academic program learners should demonstrate participation in learning activities for all core curriculum learning objectives. IPE activities, both universal and selective, will be implemented over time to provide opportunities for leaners to develop proficiency toward core curriculum learning objectives.
- 6. Core curriculum objectives will be taught and practiced through universal activity(ies) involving all academic programs and selective activities that include at least two academic programs as appropriate.
- 7. CIPE academic programs will determine which levels of learners are best suited to participate in the various activities.
- 8. CIPE academic programs will determine in which selective activities their learners will participate to demonstrate competency in all core curriculum learning objectives.
- 9. The core curriculum is intended to be aligned with and integrated into existing curricula, outcomes, and/or competencies of each CIPE academic program.
- 10. The CIPE Curriculum and Assessment Committee will make data-driven revisions to this Framework annually, as appropriate.
- 11. Adequate resources, including faculty and clinicians to deliver the core IPE curriculum, shall be made available by each CIPE academic program.

IPE Program Goal	Behavioral Goal	Foundational Knowledge/Skills/Behaviors (to be introduced uniprofessionally before participating in introductory phase)			
			Introductory Phase I	IPE Objectives  Developmental  Phase II	At Graduation Phase II
1. Communicate  Communicate in a responsive and responsible manner that	A Listen actively	Accurately restate and summarize discussions with others in own profession     Recognize the need for and ask for clarifications from others in own profession     Restate and clarify own communication for others in own profession when needed	I.1.A.  1. Ask for clarifications from other health professionals	II.1.A.  1. Restate and clarify own communication for other health professionals	III.1.A.  1. Solicit ideas and opinions from others 2. Accurately restate and summarize discussions with other team members
supports a team approach	B Manage conflict	Describe basic principles of conflict management <sup>1</sup>	I.1.B.  1. Identify sources of interprofessional conflict	II.1.B.  1. Identify strategies for conflict resolution within teams	III.1.B.  1. Demonstrate a strategy for conflict resolution
	C Exchange information	Identify effective written communication and verbal/ nonverbal communication skills (e.g., eye contact, observation of interpersonal space, voice rate/volume/tone, etc.) and tools     Recognize that own profession has terminology that others may not understand		II.1.C.  1. Use terminology appropriate for the context and for team members	III.1.C.  1. Report (verbal or written) patient / client information to team members using a systematic and effective approach  2. Give timely and constructive feedback to team members in a sensitive manner  3. Openly and respectfully receive feedback from team members

IPE Program Goal	Behavioral Goal	Foundational Knowledge/Skills/Behaviors (to be introduced uniprofessionally before participating in introductory phase)	Ohiostinos			
			Introductory Phase I	Objectives Developmental Phase II	At Graduation Phase III	
2. Leadership & Teamwork Skills  Apply collaborative leadership practices that support practice and team effectiveness	A Develop team dynamics	<ul> <li>Articulate the benefits of a patient/client -centered interprofessional team</li> <li>Describe the process of team development and effective team practice</li> <li>Describe the characteristics of good leadership and good followership</li> <li>Articulate personal strengths/areas for improvement to be an effective team member<sup>2</sup></li> </ul>	Get acquainted with team members (e.g., name, profession)	<ol> <li>Identify positive and negative behaviors that foster or hinder team development and dynamics</li> <li>Identify instances of appropriate leadership and followership</li> </ol>	III.2.A.  1. Demonstrate positive behaviors that result in team effectiveness  2. Lead or follow appropriately, depending on the situation/context	
	B Share goal(s)/vision	Develop patient/client-centered goals from the perspective of own profession.		II.2.B  1. Share patient/client and profession-specific goals with team members	III.2.B  1. Negotiate and prioritize a shared team goal(s)	
	C Share decision-making process	Describe the clinical decision making process used in own profession and use the process at a novice level	I.2.C.     Integrate evidence (if available) and the knowledge and experience of team members to inform decisions or solutions to problems	II.2.C  1. Engage the appropriate team members in shared decision-making or problem solving	III.2.C  1. Evaluate the outcome(s) of the team's decision  2. Demonstrate adaptability and flexibility in supporting the team's shared decision	
	D Reflect on team performance	Demonstrate ability to reflect on own performance	I.2.D.     Identify strengths and areas for improvement for the team's effectiveness and cohesiveness	<ol> <li>Reflect on your strengths and areas for improvement to enhance personal performance within the team.</li> <li>Explain how changes in personal performance can influence the team's performance</li> <li>Identify the strengths and areas for improvement of other team members</li> </ol>	1. Utilize feedback from team members to maximize contributions to the team.  2. Develop a plan that addresses the team's identified strengths and areas of improvements	

IPE Program Goal	Behavioral Goal	Foundational Knowledge/Skills/Behaviors (to be introduced uniprofessionally			
		before participating in introductory phase)	Introductory Phase I	Objectives Developmental Phase II	At Graduation Phase III
3. Values/Ethics  Work in a patient/client-centered interprofessional team to create and maintain a climate of collaboration, mutual respect, and trust	A Promote health and health equity across the lifespan	Identify one's own level of health and access to health care     Identify barriers that generally impact individual and community health status     Explain how barriers result in health care inequities     Explain differences in patient/client needs across the life span	I.3.A.  1. As a team, given a specific patient/client or population, identity barriers to health and healthcare	II.3.A.  1. Identify potential strategies for team members to collaboratively advocate for a patient/ client or population	III.3.A.  1. For a specific patient/client or population advocate for viable solutions to ameliorate barriers to health and healthcare
	B Embrace cultural diversity and individual differences	Define implicit and explicit bias     Identify aspects of one's own cultural identity and implicit biases     Identify how bias (own and others) may influence team dynamics     Demonstrate awareness of the cultural and individual needs of others	I.3.B.  1. Identify cultural diversity and individual similarities and differences among team members	II.3.B.  Identify professional cultural differences and similarities among the professional groups (e.g., professional identity, level of professional status, historical context)  Demonstrate techniques for finding "common ground" to bridge differences among team members.	III.3.B.  1.Communicate in a culturally sensitive manner with team members
	C Promote ethical behavior of the team	<ul> <li>Articulate the ethical principles/Code of Ethics of one's own profession</li> <li>Adhere to HIPAA rules</li> <li>Describe importance of balancing trust, learning, accountability and safety (e.g., Just Culture, etc.)</li> </ul>		II.3.C.  1.Identify various approaches to address ethical dilemmas  2.Describe possible outcomes and resolutions to ethical dilemmas	III.3.C.  1. As a team, resolve an ethical dilemma that incorporates accountability and fault tolerance

IPE Program Goal	Behavioral Goal	Foundational Knowledge/Skills/Behaviors (to be introduced uniprofessionally before participating in introductory phase)			
			Objectives		
			Introductory Phase I	Developmental Phase II	At Graduation Phase III
				1111100 11	
A. Roles & Responsibilities Leverage the personal abilities and characteristics and professional expertise of each individual to optimize team function	A Be aware of own and others' professional roles/responsibilities	Describe the roles and limitations (i.e., scope of practice) of your specific profession <sup>2</sup>	I.4.A.  1. Identify (at a basic-level) the scope of practice, roles/responsibilities, and area of expertise of team members	II.4.A.  1. Analyze gaps and/or areas of overlap in roles/responsibilities of team members in the care of patients/clients	III.4.A.  1.Leverage team members' professional expertise to optimize patient/client care

<sup>&</sup>lt;sup>1</sup> Conflict Management: The practice of being able to identify and handle conflicts sensibly, fairly, and efficiently.

### **Endorsement History:**

Assessment Committee in December 2017

Steering Committee in February 2018

Profession Specific Curriculum Committees (Pharmacy, Nursing, Medicine, Audiology/Deaf Education, Occupational Therapy) March 2018-April 2018 Curriculum and Assessment Committee April 2018.

<sup>&</sup>lt;sup>2</sup> At a novice level to enter core IPE curriculum and then reinforce and develop deeper understanding as learner continues in their academic program and in the core IPE curriculum