

HOW TO MAKE INTERPROFESSIONAL EDUCATION AND PRACTICE THRIVE IN YOUR ACADEMIC-PRACTICE PARTNERSHIPS

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AGENDA

- » Why are interprofessional academic-practice partnerships important?
- » Benefits and Challenges
- » Framework Resources: AACN, IPEC, IPC, NCICLE
- » Models and Examples
- » Group Activity and Discussion

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OBJECTIVES

- » Discuss the impact of academic-practice partnerships and leadership for creating strong interprofessional clinical relationships.
- » Discuss strategies to address challenges to implementing interprofessional academic-practice partnerships that strengthens academic and clinical environments.
- » Develop ideas for building a strong academic-practice partnership to support interprofessional clinical experiences in your own settings.



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TOP CONCERNS FOR IPEC INSTITUTE ATTENDEES

- Assessment tools for learners and programs
- Utilizing scarce/zero resources
- Budgeting for IPE and achieving sustainable funding
- Strategic planning and administration buy-in
- Building cultural competence and health literacy
- Working with public health and community partners
- Developing academic-clinical partnerships
- Best practices for curriculum development and mergers
- Aligning IPE with clinical practice redesign
- Incorporating health technology
- Leveraging learner and patient outcomes
- Integrating the social determinants of health



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Why Partner?

Academic-Practice Partnerships are an important mechanism to strengthen both interprofessional education and collaborative practice resulting in improved patient care and health outcomes.

- Better positions healthcare professionals to lead change and advance interprofessional education and practice
- Enhances lifelong and experiential learning beyond the classroom
- Benefits the patients, families, learners and healthcare organizations and systems



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Challenges

- Values taught at the undergraduate and preprofessional level are often lost once new clinicians leave the classroom and enter the clinical environment
- Frequently, new clinicians encounter a clinical infrastructure that reflects traditional approaches to delivering health care that are siloed and hierarchical in nature
- It is important to have strong academic-practice partnerships that promote interprofessional clinical learning environments



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Value of an Optimal Interprofessional Clinical Learning Environment

- For patients and Families
 - Safer Care and Improved Outcomes
- For Learners:
 - Preparation to engage in safe and effective interprofessional collaborative care throughout their career
- For health care organizations and health systems
 - Improved quality of care and lowered costs



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GUIDING PRINCIPLES OF DEVELOPING AND SUSTAINING PARTNERSHIPS (AACN-AONE TF)

- » **Formal relationships at senior leadership level**
- » **Mutual shared vision: goals and expectations clearly articulated**
- » **Goals regularly evaluated**
- » **Commitment by partners**
- » **Formalized structure**



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BEST PRACTICES FOR STRENGTHENING ACADEMIC-PRACTICE PARTNERSHIPS

- AACN-AONE Tool Kit
- AACN-AONE 2017-2019 Day of Dialogue
- AACN-AONE Advisory Committee
- Exemplary Academic Practice Partnership Awards
- New Era Awards



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COMMISSIONING A NATIONAL STUDY



- IN FEBRUARY 2015, THE AACN BOARD OF DIRECTORS COMMISSIONED MANATT HEALTH TO CONDUCT A STUDY ON HOW ACADEMIC NURSING CAN THRIVE IN AN ERA OF HEALTHCARE TRANSFORMATION.
- FINAL REPORT RELEASED BY AACN IN MARCH 2016.

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NEW ERA AWARD CRITERIA

- » The academic nursing partnership demonstrates an innovative and sustained relationship that meets one of the New Era report recommendations
- » The joint partnership exemplifies one of the following ideal six characteristics: 1) Shared Governance and Open Communication, 2) Alignment of Vision, Goals, and Strategy, 3) Supportive Resources and Infrastructure, 4) Integrative Research Programs, 5) Interprofessional Collaboration, and 6) Focus on Improved Community Health Outcomes.
- » The exemplary partnership demonstrates positive outcomes that are measurable.
- » The strong partnership is currently in place and has future plans for sustainability.

American Association
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The Voice of Academic Nursing

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1: EMBRACE A NEW VISION FOR ACADEMIC NURSING

- UAB won the 2018 New Era Award because of its strong academic practice partnership; MOU creates a formal structure for the partnership
- The PATH (Providing Access to Healthcare) Clinic and the Heart Failure Clinic are UAB Partnership Examples that exemplify ideal partnership characteristics
- The clinics use a nurse-led interprofessional collaborative practice model (IPCP) in care of these complex, high need, high cost patients
- Outcomes: Decrease in A1c, 30 day readmission; increase in patient satisfaction and clinician and student satisfaction






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3: PREPARE THE NURSE OF THE FUTURE

- Lead the development of interprofessional efforts institution wide
- Near universal agreement that the future of healthcare education is interprofessional
- 80% of Deans report that interprofessional education programs are in place at their institutions; deeper dive reveals few clear examples
- Academic nursing should take the lead in driving interprofessional education development in partnership with university presidents and their health science college dean counterparts



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- **VALUES/ETHICS**
- **ROLES/RESPONSIBILITIES**
- **INTERPROFESSIONAL COMMUNICATION**
- **TEAMS & TEAMWORK**

2011

2016

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Interprofessional Professionalism Collaborative

Home Behaviors Assessment Tool Kit Resources more...

What is Interprofessional Professionalism?

"Consistent demonstration of core values evidenced by professionals working together, aspiring to and wisely applying principles of, altruism and caring, excellence, ethics, respect, communication, accountability to achieve optimal health and wellness in individuals and communities."

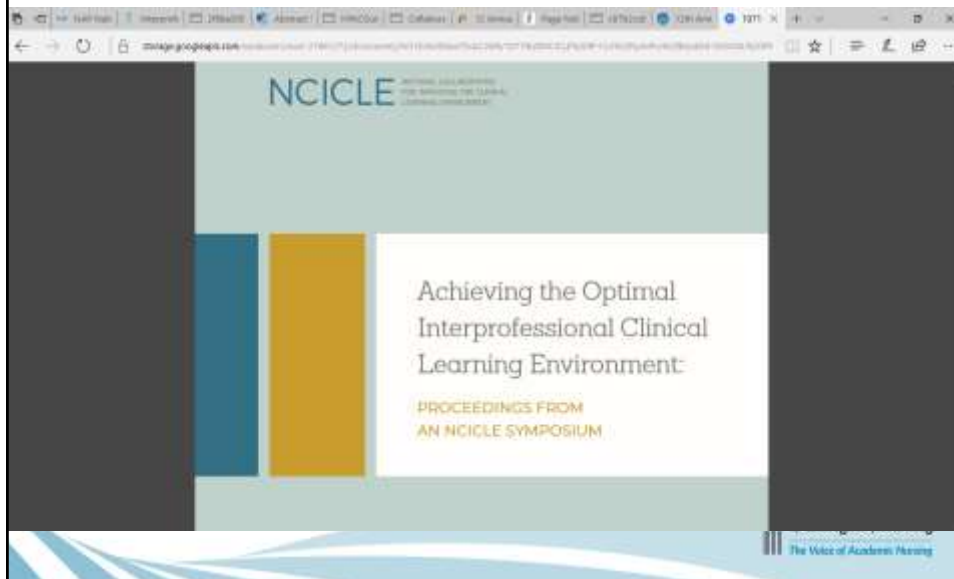
"Ben-El-Mechaieck H, et al. Measuring Medical Professionalism. Oxford University Press, New York, NY, 2006: 15."

Contact and Collaborate with Us!

POWERED BY weebly

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Framework for an Optimal Interprofessional Learning



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Framework for an Optimal Interprofessional Learning

- **Patient Centeredness:** Health care is viewed as co-created with the patient; the patient is an integral part of the healthcare team
- **Continuum of Learning:** Commitment to lifelong learning throughout one's career, ensuring that IPE begins in preprofessional and graduate education
- **Reliable Communications** result in care plans that are rich, collaborative continuous and patient-centered

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Framework Continued

- **Team-Based Care:** Thrives in a culture that fosters leadership skills at all levels; team interdependence, shared decision making, and collective competence
- **Shared Accountability:** Structures in place to evaluate the effectiveness of IPP, encourages strong QI practices, and dissemination of lessons learned
- **EBP Centered on Interprofessional Care:** base collaborative exemplars, research, and EBP IPP models



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SOCIAL WORK FIELD EDUCATION ACCREDITATION STANDARDS

- **Nine social work competencies**
 - Social Workers also understand the role of other professions when engaged in inter-professional teams.
- **Accreditation standards require field placements for social work students**
 - 400 hours for baccalaureate students
 - 900 hours for masters students



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SPECIFIC STANDARDS RELATED TO SOCIAL WORK FIELD EDUCATION

- **2.2.7** The program describes how its field education program specifies policies, criteria, and procedures for selecting field settings; placing and monitoring students; supporting student safety; and evaluating student learning and field setting effectiveness congruent with the social work competencies.
- **2.2.8** The program describes how its field education program maintains contact with field settings across all program options. The program explains how on-site contact or other methods are used to monitor student learning and field setting effectiveness.
- **B2.2.9** The program describes how its field education program specifies the credentials and practice experience of its field instructors necessary to design field learning opportunities for students to demonstrate program social work competencies. Field instructors for baccalaureate students hold a baccalaureate or master's degree in social work from a CSWE-accredited program and have 2 years post-social work degree practice experience in social work. For cases in which a field instructor does not hold a CSWE-accredited social work degree or does not have the required experience, the program assumes responsibility for reinforcing a social work perspective and describes how this is accomplished.
- **M2.2.9** The program describes how its field education program specifies the credentials and practice experience of its field instructors necessary to design field learning opportunities for students to demonstrate program social work competencies. Field instructors for master's students hold a master's degree in social work from a CSWE-accredited program and have 2 years post-master's social work practice experience. For cases in which a field instructor does not hold a CSWE-accredited social work degree or does not have the required experience, the program assumes responsibility for reinforcing a social work perspective and describes how this is accomplished.
- **2.2.10** The program describes how its field education program provides orientation, field instruction training, and continuing dialog with field education settings and field instructors.



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IPE ACADEMIC-
PRACTICE
PARTNERSHIPS
MODELS AND
EXAMPLES

- **Camden Coalition Student Hotspotting**
- **University of Colorado**
- **University of Washington**
- **University of New England**
- **University of Toronto**

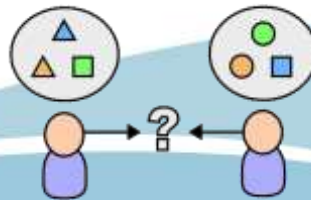


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Nurse of the Future

- **University of Colorado: Interprofessional Education Program**

- IPE Course focuses on Team Dynamics and Communication
- Clinical Transformation Simulations
- Clinical Integration: students engage in IPP in interprofessional clinics



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Student Hotspotting

- **1. Identifying Patients-**
 - Partner with area hospitals, insurance companies, PCP practices or their institution's QI department to access raw patient data. Use guidelines to target and identify 3-5 patients to engage.
- **2. Establish relationships-**
 - Make first contact with patients while they are in the hospital; establish a relationship and explain the purpose of engaging in intervention. Make plans to visit the patient in their home or other safe space where the patient feels comfortable. Building trust is critical as patients proceed through the intervention.
- **3. Create care plan-**
 - Help patients uncover the cause of their over-utilization of healthcare service. Create a plan to tackle these issues, and help motivate patient to take charge of their health by educating and setting achievable goals. Focus on creating links to social supports and primary care physician. Calling upon team's interdisciplinary knowledge is key!
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Student Hotspotting

- **4. Support and navigate care plan-**
 - Student teams guide patients as they navigate the social service system and attend medical appointments. Teams also provide guidance and support as patients learn to take on more active role in their healthcare.
- **5. Final report-**
 - Students record their experience and relay patient stories in a final report.

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Student Hotspotting Resources

- [Camden Coalition Hotspotting Curriculum](#)
- Hotspotting Hubs
 - Saturday, March 23rd 2019- Samuel Merritt University
Oakland, CA
 - Saturday, March 30th 2019- University of Utah
Salt Lake City, Utah
 - Saturday April 6th, 2019- Southern Illinois University
Springfield, IL
 - Saturday, April 13th 2019-Thomas Jefferson University
Philadelphia, PA

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The image is a screenshot of a web browser window. The address bar shows the URL depts.washington.edu/medex/homeless. The main content of the page is a flyer for a course titled "Homelessness in Seattle". The flyer features a background image of an elderly man in a grey hoodie. The text on the flyer reads: "Homelessness in Seattle", "An Interprofessional Training Opportunity for Students in the Health Professions", "UW MEDEX Course 580", "Thursdays, January 4th - March 8th, 2018", and "5:30pm - 7:30 pm".

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- The Strategies to Nurture Aging People (SNAP) is an interprofessional experience in which you work with faculty and other students to design and implement a fall prevention course for independently-living older adults.
- Students meet weekly as a team over the semester to learn about interprofessional communication, fall reduction strategies, health literacy, and characteristics of the older adult cohort, as well as to design a six-week fall prevention course.



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IPE Structured Placement

Students are placed in an interprofessional team within a clinical care unit at a practice site. They participate in one or two facilitated introductory tutorials and then continue to meet as a group on a regular basis for patient/client/family-themed tutorials. Upon completion of their clinical experience, they deliver a group presentation.

IPE Flexible Placement

Students who are not able to participate in a *structured IPE clinical placement* will need to work with their placement supervisor to complete the following **3 IPE Flexible Placement activities**:

[Flexible Activity 1 - Participation in Interprofessional Team Education](#)

[Flexible Activity 2 - Interviewing/Shadowing a Team Member](#)

[Flexible Activity 3 - Participation in Team Meetings](#)



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DISCUSSION OF ISSUES IMPACTING ACADEMIC- PRACTICE PARTNERSHIPS

- Costs and productivity
- Scalability
- Scheduling and Logistics-co-rotations
- Training interprofessional practice instructors
- Making academic-practice partnerships visible and valued
- Curriculum considerations
- Sustainability
- Discipline-specific accreditation standards
- Others?



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- **What are your goals for your IPE academic-practice partnerships?**
- **What are your opportunities?**
- **What are your potential barriers?**
- **What are potential strategies?**



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