

# Prevention and Quality in Health Professions Education: The Role of Interprofessional Learning



Tomorrow's Doctors, Tomorrow's Cures

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## APTR-ACPM-ACMQ Joint Annual Meeting



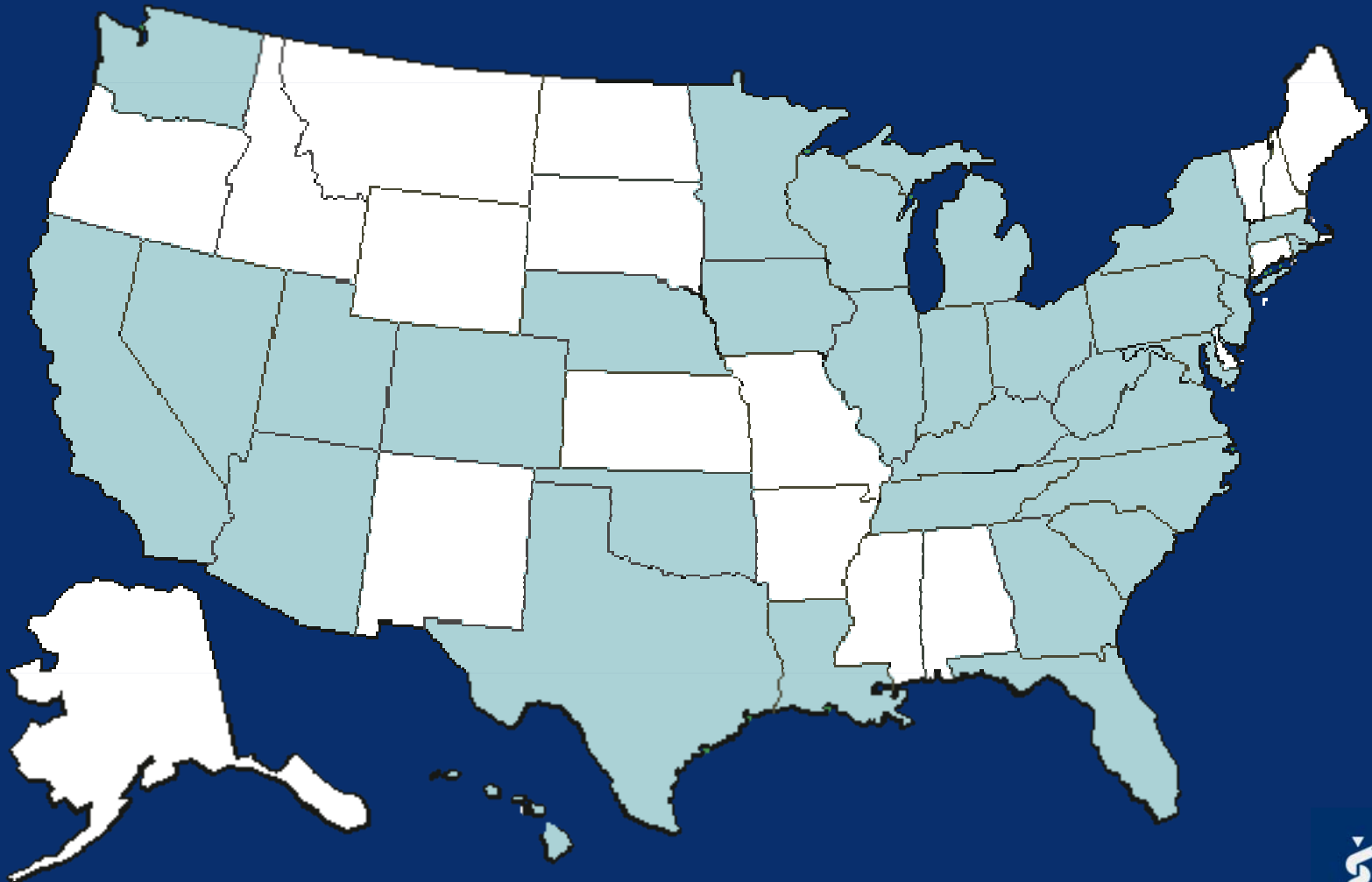
Darrell G. Kirch, M.D.  
President and CEO, AAMC

February 12, 2009



Association of  
American Medical Colleges

# A Personal Perspective Derived From Listening Inside and Outside the Beltway



How do the American people  
feel about their health care?

December 1, 2008  
TIME™ Magazine Cover Story

“The Sorry State of American Health”



# What Worries Americans About Health Care?

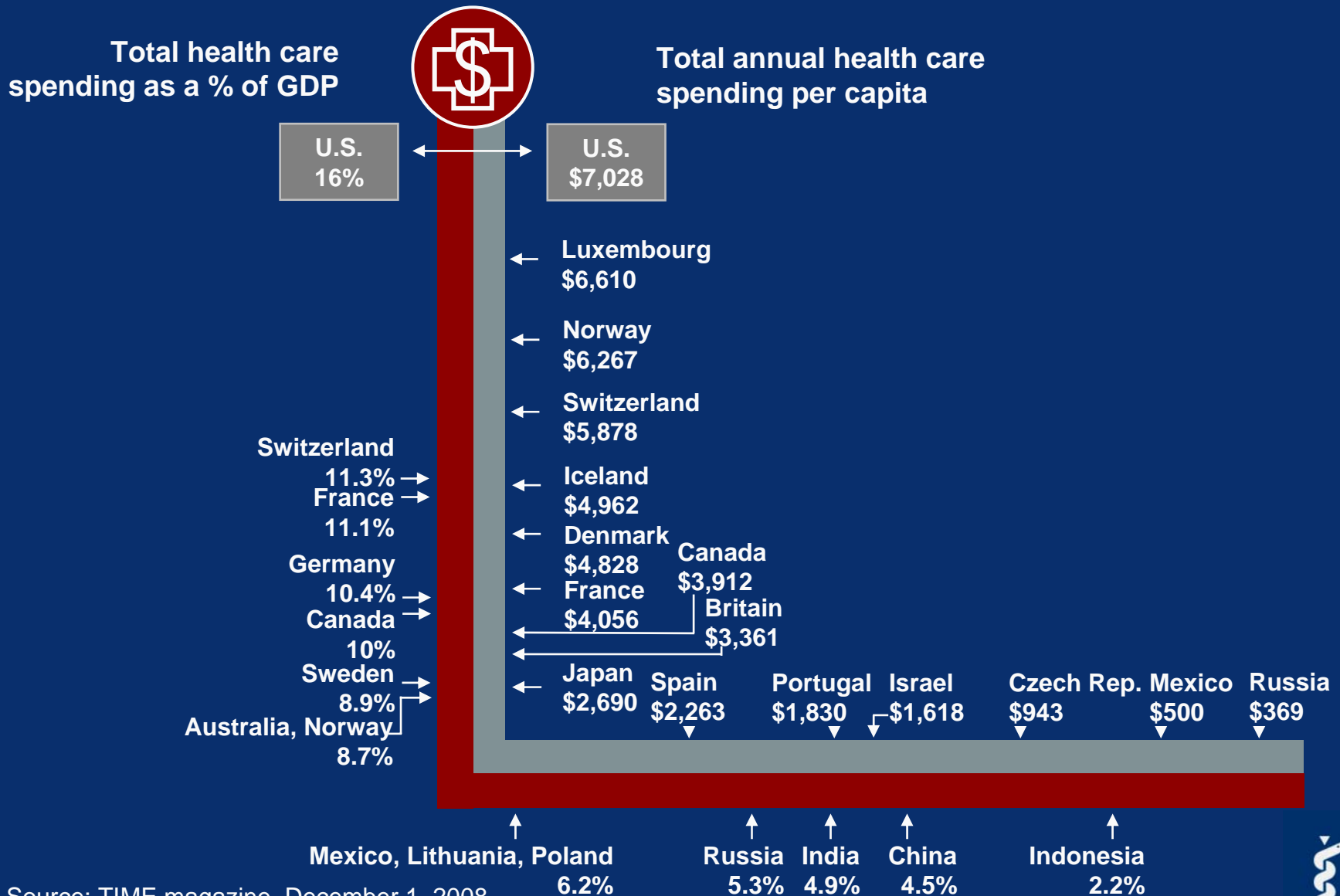
- Will a doctor, a nurse, a pharmacist, a physical therapist... be there for me when I need one?
- Will I be able to pay the bill?
- Will the system and the people in it actually “care” for me?

Do health care professionals  
feel any better?

What is the source of our  
discontent?

Is it all just about money?

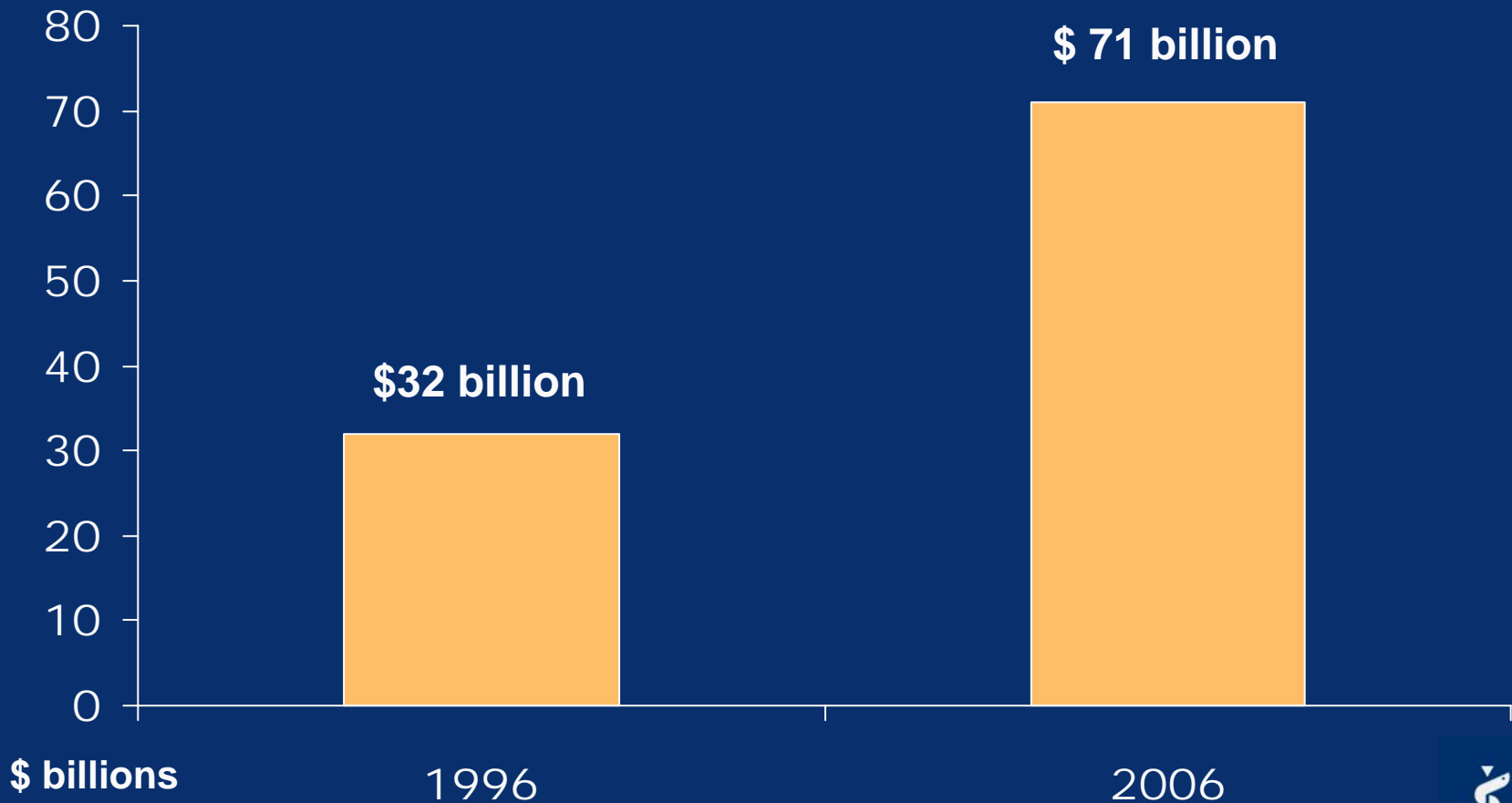
# U.S. Spends More on Health Care Than Any Other Nation



What is the source of our  
discontent?

Have we simply failed to  
find the right strategy to  
generate more revenue?

# A Decade of Growth: Total Annual Medical School Revenues



If the problem isn't as simple as money and strategies to build revenues, where should we turn our attention?

# Embracing a New Culture

**“Culture eats strategy  
for lunch every day”**



Tomorrow's Doctors, Tomorrow's Cures®

# Culture and the Courage to Change

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**AAMC President's Address  
2007 Annual Meeting  
Washington, D.C.**

**Darrell G. Kirch, M.D.**  
President and CEO

Association of  
American Medical Colleges



# The Traditional Culture of Health Care

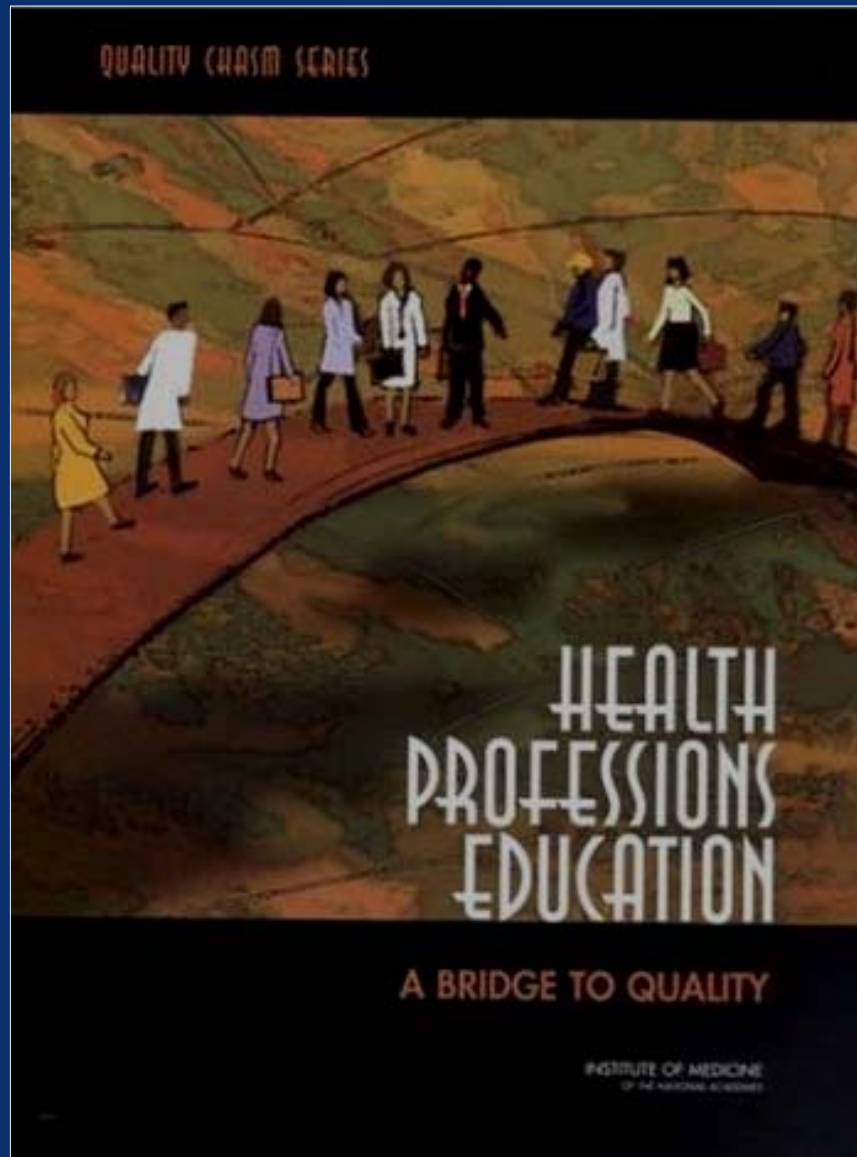
- **Individualistic**
- **Autonomous**
- **Scholarly**
- **Expert-centered**
- **Competitive**
- **Focused**
- **High-achieving**
- **Hierarchical**

# Embracing an Emerging Culture for Health Care

- **Collaborative**
- **Transparent**
- **Outcomes-focused**
- **Mutually accountable**
- **Team-based**
- **Service-oriented**
- **Patient-centered**

# The Key to the New Culture – Putting the Interprofessional Ideal into Practice



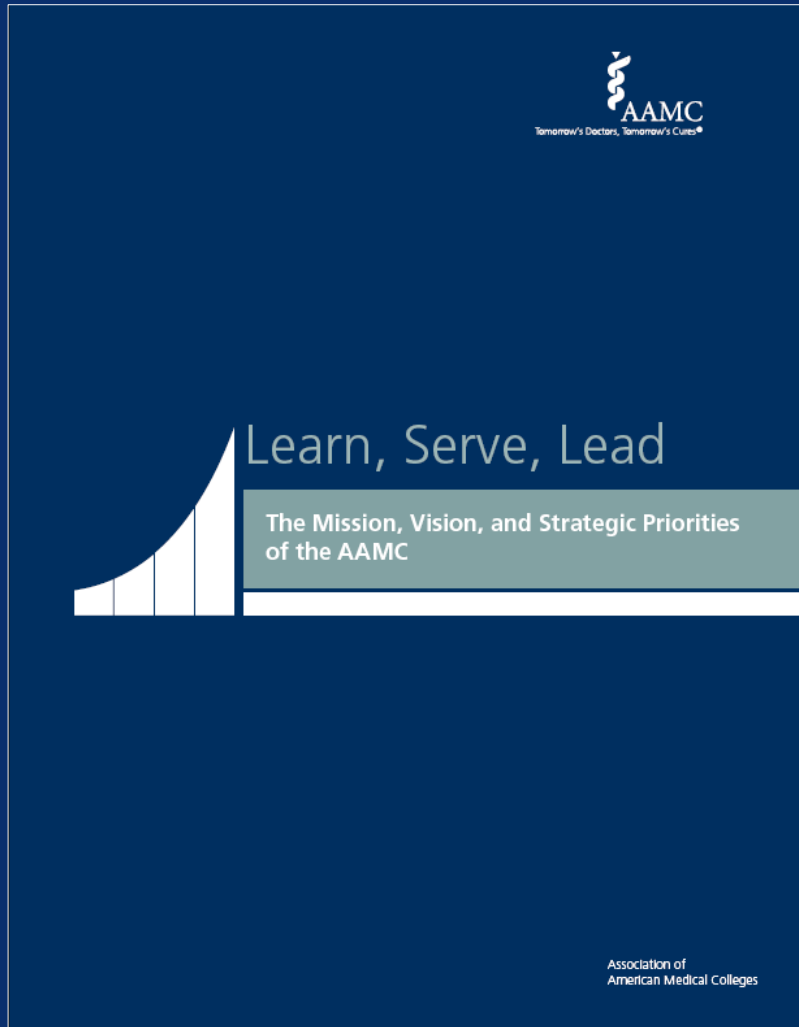


Source: Institute of Medicine, *Health Professions Education: A Bridge to Quality*, April 08, 2003

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# AAMC Strategic Priorities



## Interprofessional health education and practice

As the need for interprofessional health care teams becomes commonplace, the academic medicine community can benefit from models of cross-disciplinary education in health professions degree programs. In partnership with other associations, the AAMC can help members develop, disseminate, and promote these innovations. These collaborations can also drive new thinking and recommendations for ways to ensure adequate health care services.

# Reporter

Vol. 17, No. 8  
May 2008

News About the Nation's  
Medical Schools and Teaching Hospitals

## A Word From the President



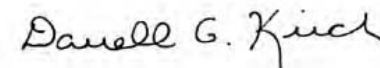
### Interprofessional Collaboration: We Are Willing—Can We Find the Way?

In recent years, there has been growing recognition of the need to think and work interprofessionally on the front lines of patient care. Some of this momentum began in 2003 when the Institute of Medicine (IOM) published its report—*Health Professions Education: A Bridge to Quality*—and identified work in interdisciplinary teams as one of five core competencies for all health professionals. More recently, in meetings with nursing, pharmacy, and other groups, I repeatedly hear a readiness to improve the way we work together and find myself inspired by leaders such as Lucinda L. Maine and Kenneth W. Miller of the American Association of Colleges of Pharmacy, whose thoughtful *Viewpoint* appears on the opposite page. Within the AAMC, we have designated interprofessional health education and practice a key strategic area through our strate-

patients or prescribe drugs? At the health system level, these attitudes are reinforced by prevailing models of health care delivery which bring us together as loose collections of individuals providing specialized services, instead of highly integrated teams of professionals coordinating care.

Can we overcome these hurdles? I believe our mutual desire to improve patient care is much stronger than the sum of differences that have precluded greater collaboration. Working to address these differences—many of them embedded in our respective professional cultures—will not be easy and progress likely will be achieved in small—but significant—steps.

If we all agree that greater interprofessional collaboration makes sense for our patients, and collectively are truly willing, we can overcome each of the hurdles I have described. Our focus must be patient-centered, not profession-centered. Providing high-quality health care is not the sole domain of a single profession, but the shared responsibility and privilege of all.



Darrell G. Kirch, M.D.  
AAMC President and CEO

# What Does This Mean for Us as Health Professions Leaders?

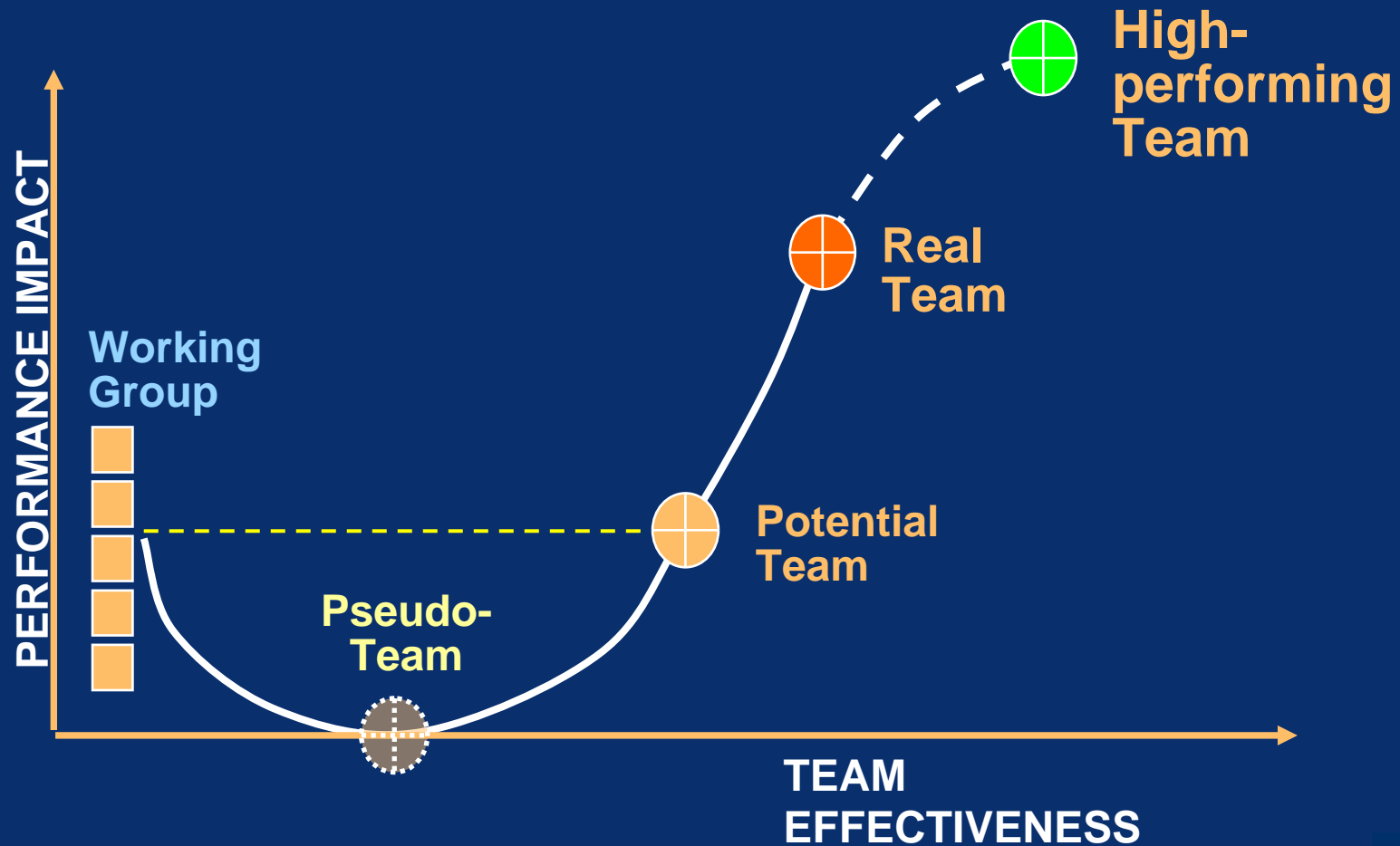
**If “culture eats strategy  
for lunch every day...”**

**And if a positive culture is a key  
source of future excellence...**

**How do we create a new inter-  
professional culture?**

**#1** Foster collaboration and accountability, accepting nothing short of high-performance teams in all mission areas!

# A New Model for the Organization – Creating High-Performance Teams



Source: Katzenbach and Smith, 1993

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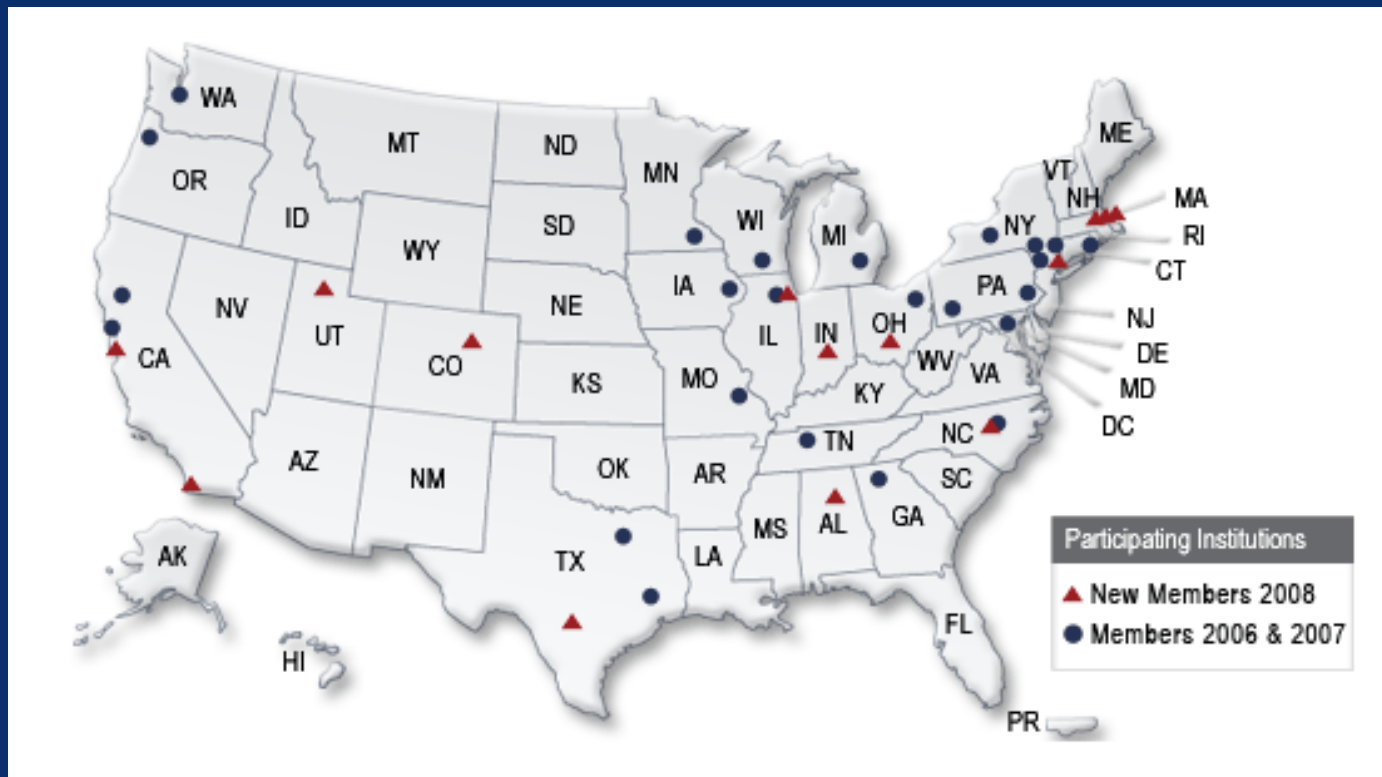
# Creating an Educational Culture in Which All Teach and All Learn



# Creating a Clinical Culture of Teamwork and Collaboration



# Creating a Research Culture of Teamwork and Collaboration



**#2** Rethink our modes of rewarding performance – including our approach to promotion and tenure!

...folly is hoping for A,  
while rewarding B!

—Steven Kerr, Ph.D.

# #3 Rethink our approach to education!

# Discontinuity in the Medical Education Continuum

Premedical

Medical  
School

Residency and  
Fellowships

Practice

“Learning as participation [is] not simply a way of acquiring skills, but also of developing an identity and sense of belonging in a community.”

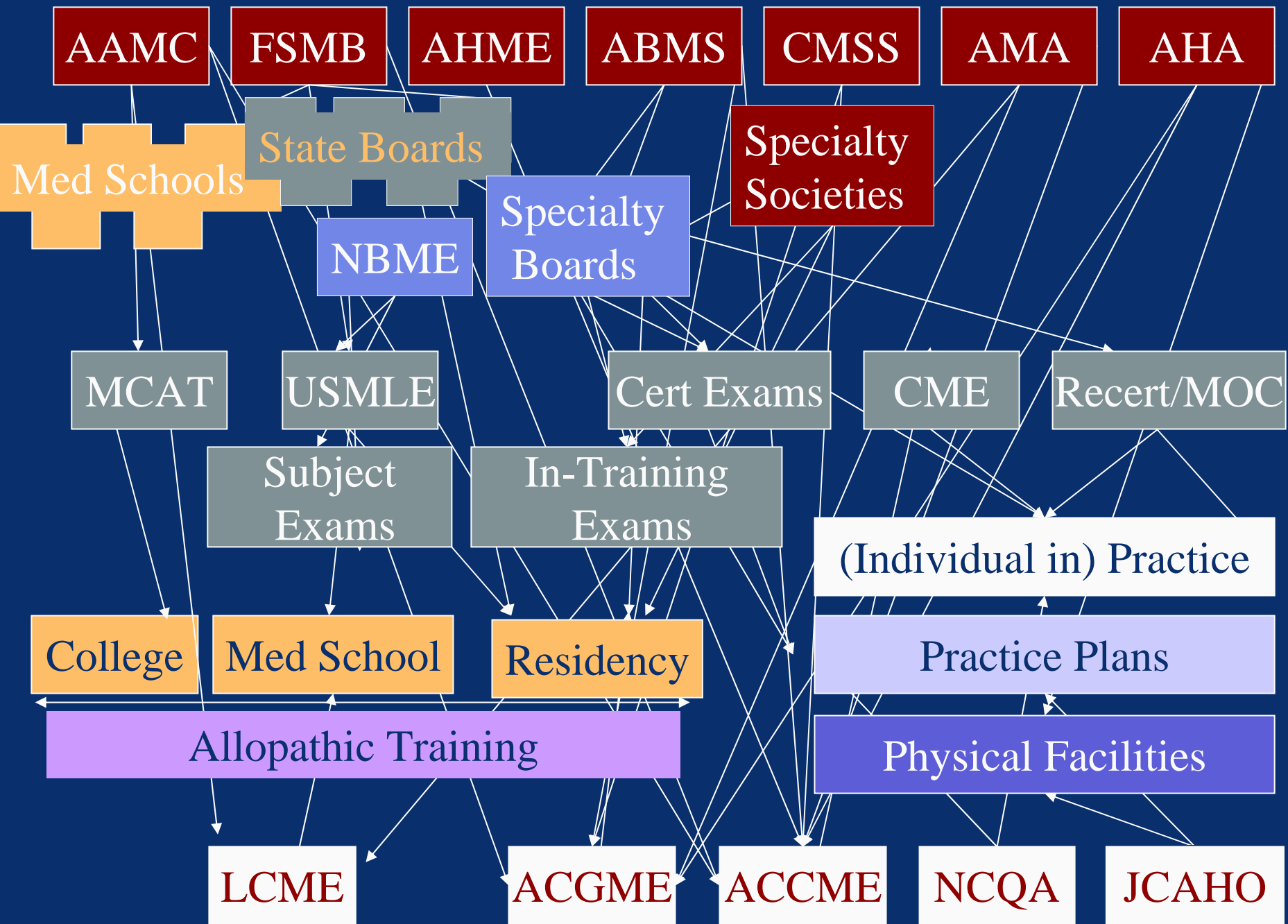


**Professional self  
developed in silos**

**Interprofessional  
self**

Adapted from M. Schmidt, *Interprofessional Education (IPE): Finding Our Way Forward 35 Years after the First IOM Report*, November 2008.

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# #4 Confront the questions we have been avoiding!

# Asking and Answering “The Tough Questions” for Our Nation



“Obama stimulus plan may hit \$1 trillion”

—Dec. 18, 2008

# The Washington Times

Thursday, December 18, 2008

## Obama stimulus plan may hit \$1 trillion

[Christina Bellantoni](#) (Contact)

President-elect Barack Obama is floating the possibility of an economic-stimulus package as large as \$1 trillion, making good on private comments by his staff to supporters that they are prepared to take the political heat for a dramatic rise in the federal deficit.

Mr. Obama carefully has sidestepped repeated c

“Stimulus  
now, deficit  
later”

—Jan. 6, 2009

# The Boston Globe

## Stimulus now, deficit later

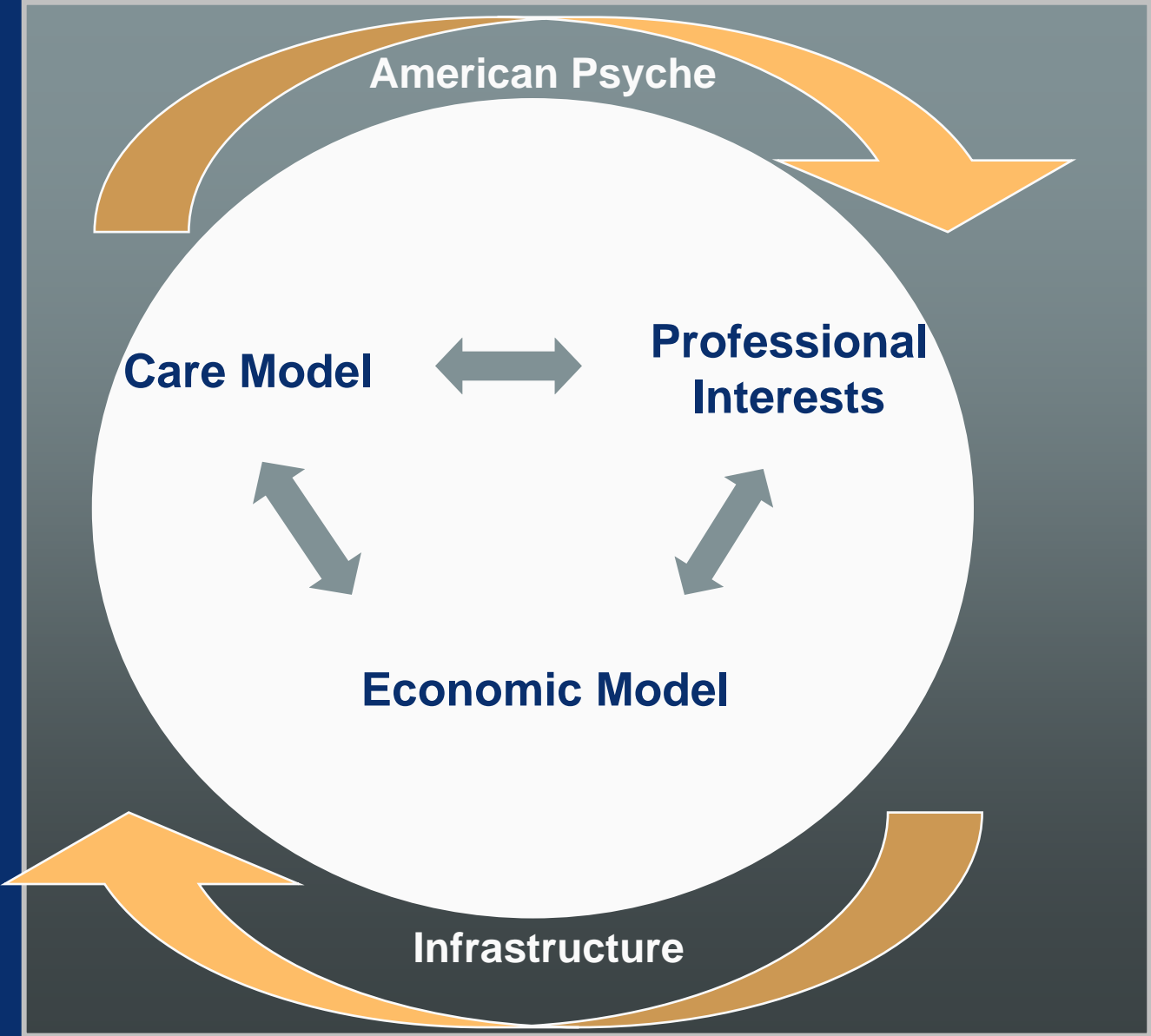
Posted by Foon Rhee, deputy national political editor January 6, 2009 01:11 PM

[Link](#) | [Comments \(9\)](#)

Monday, President-elect Barack Obama took Capitol Hill by storm to promote his economic stimulus plan that, at least in the short term, will dramatically increase the federal deficit with as much as \$775 billion in spending and tax cuts.

Today, he huddled with key advisers on how to bring the deficit down once the economy recovers.

# Who Is Responsible for “Fixing” Health Care?



# The Toughest Question!

Is this a political issue (i.e., a problem for someone else) or an ethical concern for each of us personally?

# The Pillars of Health Professions Ethics

- Beneficence
- Non-maleficence
- Autonomy
- Social Justice

# The Ethical Pillars



Beneficence

Non-  
maleficence

Autonomy

Social Justice



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