

2008 APTR Institute for Interprofessional Prevention Education Final Team Project Report

Title: Development of the Center for Interprofessional Education at Nazareth College (CIPE)

- Professions and faculty :
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- Was there an existing core IPE faculty team prior to this project?

On an informal basis, several faculty from across the disciplines frequently collaborated with on and off-campus clinical practica. The initiation of this project formalized the interprofessional collaboration across the core disciplines, and allowed us to include additional programs/departments (e.g. School of Education, Biology Department and Art Therapy Program).

Goals and progress to date:

These are the revised goals following our attendance at the 2008 APTR Institute.

Goal I: Development of a conceptual model for the delivery of interprofessional education and practice.

I.a. Present model to administration and faculty of the School of Health & Human Services (HHS), revise and formalize.

A conceptual model for the delivery of interprofessional education was developed and presented to the faculty of the School of HHS in Fall 2008. There was unanimous faculty and administrative support for this conceptual framework. The Center's framework was comprised four components: Curriculum, Practice, Research and Advocacy. The Center would be responsible for the coordination of these components across the School of HHS and between other stakeholders across the college community. Although there was support for the concept, actual creation of this structure was deferred. In the interim, the Interprofessional Steering Committee assumed oversight of the ongoing interprofessional efforts until a more comprehensive proposal for the Center was developed and presented to the college administration. Currently, work is underway to address aspects of the Curriculum and Practice aspects of the model. Refer to Attachment A.

Goal II: Assist faculty design and implement an interprofessional curriculum within the constraints of discipline-specific programmatic and accreditation requirements.

Guided by our conceptual framework, our initial focus has been on the Curriculum and Practice components. It is our belief that the Research and Advocacy components of our work will emerge as we progress in first two areas.

II.a Conduct department level curriculum audits across the School of HHS.

Curriculum audits were completed on fifty-eight courses across the School of HHS. Ten IPE objectives that had been developed by the Interprofessional Steering Committee served as the frame of reference for the curriculum audit. The ten IPE objectives are referenced in Attachment B. The results of the audit revealed a strong commitment across the school to incorporate interprofessional objectives into various courses. Of the fifty-eight courses surveyed, 40 % had included one or more interprofessional student learning objectives as part of the course's content. The most frequently cited IPE objectives addressed the themes of team development and interactions, ethics, culturally competent care and evidence-based practice. Further analysis of this data is required to determine which courses address specific content and how this content can be integrated more effectively into an interprofessional collaborative model.

II.b Develop interprofessional education (IPE) module/course expanding upon currently used models and curriculum within each department/program.

The initial timeline for completion of our proposed project was modified during the year to accommodate faculty workload and schedules. We recognized that due to the constraints of our workload with heavy academic and clinical responsibilities, coordinating additional planning time on a consistent basis was extremely difficult during the regular academic year. Although we made progress during the academic year, we determined that the summer semester, when faculty could anticipate a reduction in workload, would allow us to make significant progress with our proposal.

To further support our efforts, the Interprofessional Steering Committee obtained a college-funded summer grant that provided small faculty stipends to support our work toward developing an interprofessional course. The grant permitted the committee to invite additional faculty, who had expressed specific interest in interprofessional education opportunities, to join our group. Three additional faculty joined the core committee: Dr. Beverly Brown, Biology, Dr. Ellen Contipidis, Inclusive Education; Dr. Stephan Demanchick, Art Therapy.

By-weekly meetings were held during June and July and significant progress was achieved toward the development of an IPE course. A syllabus for a newly created course, entitled *Contemporary Issues in Interprofessional Education*, was developed. See Attachment C.

Due to the complexities of our individual programs' curriculum and accreditation requirements, identifying an optimal course format (e.g. intensive 2 week course vs.

traditional fifteen week course) and a preferred semester for offering the course proved challenging. The details must still be worked out, however we have targeted summer 2010 to pilot the course. Informal conversations with faculty and students across programs suggest that enrollment will initially include a small number of students who can work this course into their existing programs of study. However, faculty are committed to a teaching model which includes instructors from a cross section of academic programs who will use a variety of pedagogical styles.

To continue our IPE work, the committee successfully submitted a proposal to the Dean of HHS for a work load reduction for Dr. Bidwell-Cirone to continue to advance the work of the Interprofessional Steering Committee. Based upon our previous year's activities, the committee recognized the need to have faculty time dedicated toward advancing our goals and final project. The momentum achieved this summer could not be maintained without this commitment from the college.

II.c Identify assessment tools for project (s), faculty and students.

II.d Create an assessment protocol for IPE modules.

Following the APTR institute, we allocated a portion of our budget to purchase IPE resources, specifically to inform our assessment practices. One of our main focuses was identifying various assessment tools which would allow us to evaluate the effectiveness of the faculty IPE process and the impact of our IPE course and clinical activities. We have collected several survey tools. Examples of IPE resources we purchased include the entire Interprofessional Education series published by the Blackwell Publishing Group, as well as other titles. These resources will be centralized in the library for IPE faculty and student use. In addition, a graduate assistant has been assigned to complete a review of the IPE literature to include compiling IPE assessment tools currently available.

II.e Perform faculty development in the area of interprofessional education.

Since our return from the Institute, our team has actively engaged in a variety of faculty development activities. In October 2008, two members attended the National Outreach Scholarship Conference, State College, Pennsylvania. Faculty from the nursing, physical therapy and speech-language pathology programs presented a poster session entitled, *Interprofessional Clinical Outreach: A Formative Learning Experience*, which described interprofessional community service outreach across the School of HHS. The IPE team has presented to the faculty of the School of HHS on the topic of interprofessional education on three occasions between fall 2008 and the present. Each presentation has yielded significant interest in the topic. The positive response to our work prompted the IPE team to pursue more formal faculty networking on the topic of IPE for fall 2009. We have submitted a proposal entitled *Networking for Interprofessional Teaching and Learning* to the Center for Teaching Excellence and the Faculty Development Committee to assist us with our efforts. More than 20 faculty have expressed an interest in participating in this professional development opportunity.

Additional interprofessional activities planned for Spring 2010 include sponsoring a lecture by a national level guest speaker to address issues which cut across all the disciplines (e.g. cultural diversity, disability understanding, person-centered care etc.), and a training module on problem-based learning (PBL). We anticipate incorporating the PBL instructional strategy into the IPE course to be offered next summer.

Professional development has occurred beyond the boundaries of the campus. Several faculty have assumed leadership roles in discussing IPE initiatives within the Rochester professional community. For example, Lisa Durant-Jones serves as the speech pathology discipline coordinator for the Leadership Education in Neurodevelopmental Disabilities Program at the University of Rochester. This federally funded program has a strong IPE focus, and Dr. Durant-Jones has been able to bridge teaching and learning activities across the two schools as a result of the APTR institute.

Goal III. Engage faculty and students in pursuing interprofessional campus-based and outreach programs that will enhance learning and establish a mind set for interprofessional collaboration.

III.a Identify campus-based projects and community-based partners who will agree to the implementation of interprofessional service projects following completion of the IPE modules.

Interprofessional collaboration continues in several of the on-campus clinics including the Aphasia, Music Therapy, Art Therapy and Physical Therapy Clinics. Most recently, we have expanded our interprofessional activities to include the “Kids Camp,” a wellness program for children with chronic developmental disabilities.

Currently, the School of HHS has over 16 partnerships with community agencies, universities and programs. A partial listing of these partnerships includes:

- Centro de Oro
- Home Care of Rochester
- Hickok Brain Injury Center
- University of Rochester’s Leadership Education in Neurodevelopmental Disabilities
- Legacy Senior Living Communities
- Monroe Community College Liberty Partnership Program
- Children’s Institute at Strong Museum of Play
- Rochester Institute of Technology
- Veterans Outreach Center
- Rochester Head Start Programs
- St. Joseph’s Neighborhood Center
- Heritage Christian Homes for Developmental Disabilities
- Multiple Sclerosis Society of Western New York

These partnerships represent a diverse group of programs and opportunities for interprofessional collaboration. Currently, at least one discipline is actively engaged in providing educational or

clinical services at each of these agencies. In some instances, interprofessional services are in place. However, as a result of our IPE team's work in the development of an interprofessional curriculum, we are in the process of expanding or improving our interprofessional activities with these partners.

Although a clinical component has not been included in our pilot offering of the course **Contemporary Issues in Interprofessional Education**, we anticipate that it will be in subsequent offerings. In the meantime, the advancements that have been made thus far in creating a more systematic and evidenced-based interprofessional culture at Nazareth is spilling over into multiple aspects of our clinical practica. For example, the IPE Steering Committee has compiled a listing of external practica placements which are utilized by more than one discipline in the School of HHS. We anticipate conducting an audit on the types of services provided by our students and faculty in clinical practica to establish where there are opportunities to encourage interprofessional education prior to students being placed in a particular setting.

Goal IV. Create interprofessional demonstration projects in the community modeling academic/community collaboration to address community health problems.

Our team believes that progress with this goal will be achieved as we make advances with Goals I, II and III. Community-based demonstration projects remain an important outcome of our IPE activity.

Goal V. Make a difference in the lives of children and their families through an interprofessional integrated approach that treats targeted community health issues (e.g. obesity as a multifaceted problem).

V.a. Appoint an Interprofessional Advisory Board

We anticipate progress in Goal V will be achieved as we make advances in Goal I, II and III. However, we plan to present our IPE work to the School of HHS Advisory Board as a preliminary source of feedback regarding how we might target an interprofessional project dealing with an important community health issue.

Important decisions made (or contemplated) – (e.g. *Based on what you have learned thus far, what would you have done differently? Lessons learned or new perspectives acquired so far.*)

Reflecting back upon our revised Post-Institute proposal, we believe that our timeline and the scope of activities were too aggressive given the additional infrastructure that needed to be created at Nazareth College. Although we are a highly motivated group, we underestimated the amount of work and the time commitment that was required for our Post-Institute project. However, over the past year, we have reaffirmed faculty commitment toward interprofessional education and our need to aggressively pursue this agenda with college administration. In order to make significant progress, faculty require dedicated time to devote to the IPE efforts if we are going see this content become an

integral component of the curriculum. One step toward this goal has occurred with the approved work-load reduction for one of our Steering Committee members.

We have also learned that we must raise the level of awareness of IPE across the campus. One of the agreed upon outcomes for our interprofessional course is for students to be able to “*Identify and apply a person-centered approach to the planning and delivery of comprehensive services by culturally competent interprofessional teams*”. To that end, one of our colleagues from the School of Education has partnered with the IPE Steering Committee and numerous campus-based funding sources to bring a national level speaker to the college. Based upon the reaction thus far, we anticipate broad appeal across campus and another positive step toward developing a more widespread climate of support for IPE at Nazareth.

We have also learned that we need to focus on the Curriculum and Practice components of our conceptual model for IPE before we can move into to Research and Advocacy. We anticipate that the faculty teaching circle will also inform these less explored areas. We have also secured funding for a graduate assistant who will assist faculty in conducting literature review (e.g. assessment tools), and analysis of data collection from the curriculum and practicum audits.

Challenges faced

As stated in previous sections, we underestimated the time commitment to complete our entire proposal. An additional challenge we faced was the actual creation of the Center for Interprofessional Education. Despite support for the concept of the center, the logistics of actually creating this center appears to be a larger hurdle due to financial and structural implications. However, our IPE team is not discouraged and has developed a plan that will allow us to make measurable gains with our proposal over the course of the next year.

Evaluation plans/instruments being used.

After a review of the literature, an informal appraisal of the IPE team’s functioning over the past year was developed and administered in July 2009. The appraisal consisted of eleven items and faculty were asked to respond on a five point scale ranging from strongly agree to strongly disagree. There was strong agreement that that faculty perceived various aspects of the IPE process as positive and mirrored the working of an effective team. All faculty expressed a strong desire to continue their work on the IPE during the 2009-2010 academic year and anticipated successful implementation of several aspects of the project within the next 12 months.

Note any Institutional Change:

Since attending the APTR Institute, senior administration is more aware of the IPE work in the School of HHS. Additionally, the Deans of the Schools of Education and the

College of Arts and Sciences, as well as the Director of the Center for Teaching Excellence have offered their support for more systematic interprofessional engagement.

Other items of interest to share: - *What impact on the curricula at your institution do you anticipate will emerge as a result of your interprofessional prevention education initiative? Please share future plans you have for advancing interprofessional prevention education activities at your institution.*

Upon completion of our initiative, we anticipate that we will have successfully integrated interprofessional education into the curriculum of the School of HHS. We anticipate that we will have created a mechanism that will actualize one of the missions and the vision of the School:

The Mission of the Nazareth College School of Health and Human Services is to prepare professionals who work collaboratively and proactively, and act as agents of change in the global health care community. The mission of the school embraces the vision developed by the Health Professions Education Committee of the Institute of Medicine (2002):

"All health professionals should be educated to deliver [person]- centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches, and informatics."

We anticipate that we will have successfully replaced the segmented and informal interprofessional collaborative culture that had existed with a more integrated and purposeful IPE program with a direct result of preparing students to enter the work world trained to learn and engage in a range of interprofessional activities.

Respectfully Submitted by:

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