

# **Advancing Interprofessional Education and Practice to Combat Antimicrobial Resistance**

**Presentation from the IPE WG**

PACCARB Public Meeting

June 29, 2021

**PACCARB**

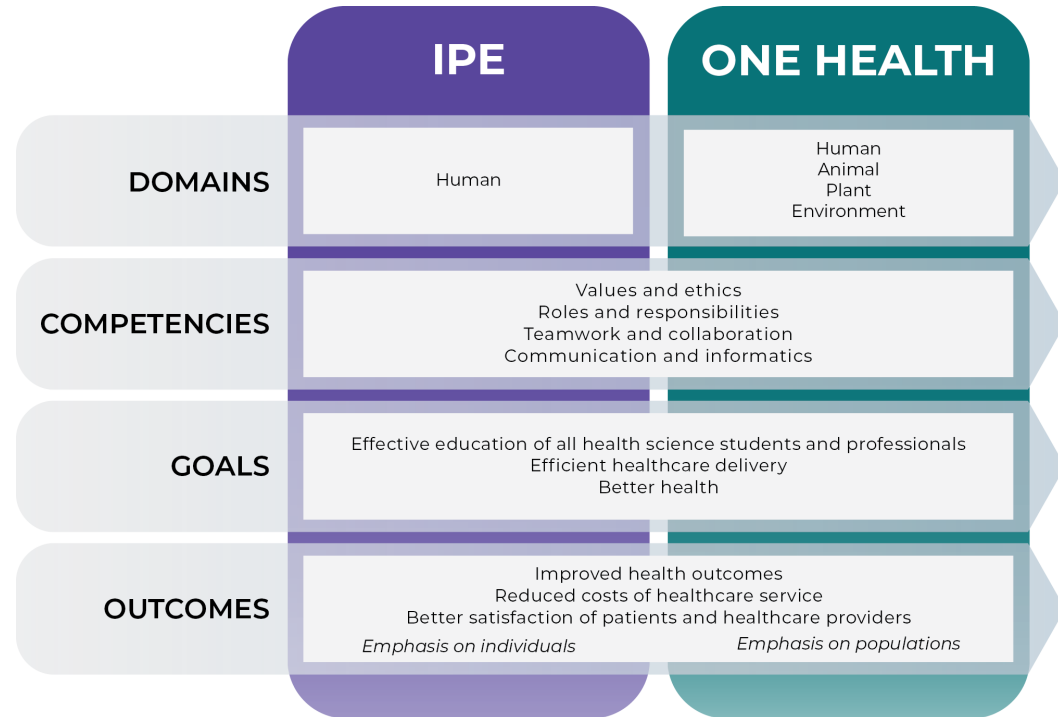
Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria

# Process

- Tasked by ASH on behalf of Secretary in October 2020 to provide recommendations on improving antibiotic stewardship and infection prevention and control through the implementation of interprofessional education and practice (IPE/P)
- WG held five internal meetings with presentations from SMEs and discussions of findings in addition to the PACCARB Public Meeting in February 2021.
- Result: WG developed ten recommendations

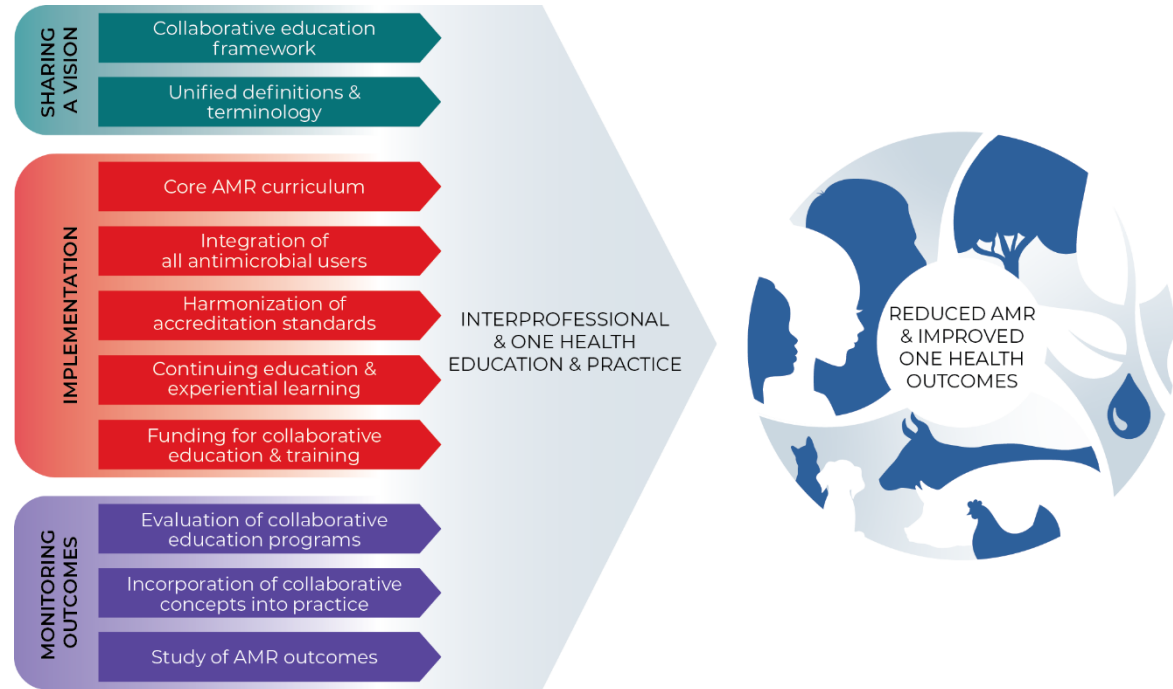
# Collaborative Education and Practice

- IPE/P and One Health are both interdisciplinary but are not interchangeable across all fields
- The recommendations apply to both interdisciplinary paradigms by using the umbrella terms of *collaborative education and collaborative practice*



# Summary of Recommendations

- Ten overarching recommendations
- Recommendations and report are organized into three sections:
  1. Sharing a Vision
  2. Implementation
  3. Monitoring Outcomes



# Sharing a Vision

PROMOTE INTERPROFESSIONAL COLLABORATION AND ONE HEALTH IN HEALTH SCIENCES PEDAGOGY TO REDUCE AMR AND IMPROVE HEALTH OUTCOMES

**Recommendation 1:** Advance the adoption of a framework of effective collaborative education across all health science professions that are impacted by AMR.

**Recommendation 2:** Adopt unified definitions for collaborative education and practice terminology.

# Implementation

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## PROMOTE INTEGRATION OF AMR TOPICS AND COLLABORATIVE EDUCATION INTO CURRICULA AND EXTRACURRICULAR LEARNING

**Recommendation 3:** Define and create a core AMR curriculum founded on team and collaborative learning concepts that can be used for all health science students.

**Recommendation 4:** Integrate all antimicrobial users (e.g., prescribers, practitioners, clients, and patients) into collaborative education and practice.

# Implementation

## INCENTIVIZE AMR COLLABORATIVE EDUCATION AND PRACTICE THROUGH ACCREDITATION AND FUNDING

**Recommendation 5:** Harmonize accreditation standards across health science professional schools to include antimicrobial stewardship, AMR prevention, infection prevention and control, and collaborative skills.

**Recommendation 6:** Promote collaborative practice through continuing education and experiential learning opportunities.

**Recommendation 7:** Provide or increase funding for collaborative education and training.

# Monitoring Outcomes

## ASSESS EFFECTIVENESS OF COLLABORATIVE EDUCATION AND PRACTICE PROGRAMS

**Recommendation 8:** Evaluate collaborative education programs.

**Recommendation 9:** Ensure that collaborative concepts are incorporated into practice.

**Recommendation 10:** Perform or fund studies of collaborative education and practice programs to determine their impact on reducing AMR.



# Important Takeaways

- Bridge the differences between IPE and One Health by having both paradigms learn from each other and by expanding the roles traditionally included.
- Develop a core AMR curriculum that can be used across all health science disciplines.
- Incentivize incorporation of AMR concepts through harmonization of accreditation standards across all health science disciplines.
- Define measurable outcomes that can then be used to monitor collaborative education and practice programs for positive impacts on AMR.

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# Discussion and Vote