A National Perspective on Interprofessional Education: Nursing's Mandate for Action

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IPE: Not New and Not Old

- Mandate for better collaboration and teamwork goes back 100 or more years
- IOM report: 1972
- Coggleshall report for AAMC
- Lysaught report 1970
- Most recently Interprofessional Education Collaborative or IPEC

Sound familiar?

- How to use the existing workforce optimally and deliver the most cost effective care
- Need to produce a health care workforce responsive to the needs of the health care system and patient's needs
- Need to ensure that health care providers can practice to their full scope of practice
- Requires a cooperative effort to form teams of providers able to bring unique skills together to meet the needs of patients. (IOM, 1972)

IPEC

 Formed out of the belief of the leaders of six academic health professions organizations that the changing healthcare needs mandated a vision that would bring reality to the view that all health professions should understand each other and work together to create the best construct of care across the spectrum of care delivery



 Every medical, nursing, dental, pharmacy, and public health graduate is proficient in the core competencies for interprofessional, team-based care, including preventive, acute, chronic and catastrophic care.

Four competency domains with 38 sub-competencies:

(SPH aacom American Association Values and ethics of Colleges of Nursing AMERICAN ASSOCIATION OF COLLEGES OF OSTEOPATHIC MEDICINE AAMC AMERICAN DENTAL EDUCATION Colleges of Pharmacy **Roles and** responsibilities Interprofessional communications Teams and teamwork *IPEC sponsors: American Association of Colleges of Nursing American Association of Colleges of Osteopathic Medicine American Association of Colleges of Pharmacy American Dental Education Association Association of American Medical Colleges Association of Schools of Public Health



Inteprofessional Education Collaborative

- Our intent was to build on each profession's expected disciplinary competencies in defining competencies for interprofessional collaborative practice.
- Our commitment was based on our own mutual respect for the value we each brought to health care and our passion for improving care across the life span and in all settings.

Why did we do it?

- Our overriding goal was to improve health care and to stay true to the values that drove us to become health professionals.
- Understood the need to model and support for improvement in collaboration across the health professions.

Interprofessional Professionalism

- Collaboration of ten health professions, led by Jody Frost, APTA
- "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"
- The purpose of the Interprofessional Professionalism Collaborative (IPC) is to develop a valid and reliable <u>assessment instrument</u> for interprofessional professionalism <u>behaviors</u> and related educational <u>resources</u> for use by educators across all health professions

Collaborators

 American Association of Colleges of Nursing (AACN) American Association of Colleges of Osteopathic Medicine (AACOM) American Association of Colleges of Pharmacy (AACP) American Board of Internal Medicine (ABIM) American Dental Education Association (ADEA) American Occupational Therapy Association (AOTA) **American Physical Therapy Association (APTA)** American Psychological Association (APA) American Speech-Language-Hearing Association (ASHA) Association of American Medical Colleges (AAMC) Association of American Veterinary Medical Colleges (AAVMC) Association of Schools and Colleges of Optometry (ASCO) National Board of Medical Examiners (NBME)

MedEd IPE Portal

- Designed to host both peer reviewed and demonstration work to advance IPE
- Provides a panoply of tools and models of success for IPE across the health professions
- Free and easily accessed by faculty and learners

Where's Nursing?

- IPE is mandated through the Essentials documents that frame baccalaureate, master's and doctoral (DNP) education
- CCNE requires that these standards be used to frame the education of professional nurses and evaluates the presence of IPE in the program.

Accountability for IPE

- <u>J Interprof Care.</u> 2013 Mar;27(2):123-30
- Interprofessional education accreditation standards in the USA: a comparative analysis.
- <u>Zorek J¹</u>, <u>Raehl C</u>.
- Nursing (CCNE) had the highest number of specifically stated references to IPE in the accreditation standards

Health Professions Accreditation Collaborative

- Accreditation Council for Pharmacy Education (ACPE)
- Commission on Collegiate Nursing Education (CCNE)
- Commission on Dental Accreditation (CODA)
- Commission on Osteopathic College Accreditation (COCA)
- Council on Education for Public Health (CEPH)
- Liaison Committee for Medical Education (LCME)

Ensuring IPEC Competencies

- HPAC will communicate with stakeholders around issues in IPE with the common goal to better prepare students to engage in interprofessional collaborative practice.
- Endorsing IPEC Competency document as fundamental to preparing competent health professionals.
- Exploratory work in progress to develop indicators that would be measured to determine the degree of IPE that is occurring as part of accreditation review.

Experimentation and Innovation

- Large growth in actual, patient centered IPE efforts in nursing and across the health professions
- Challenges continue to be related to medicine
- Newer collaborations are often academic and practice partnerships such as the VA Primary Care Centers of Excellence
- Major barrier to IPE is the need to change the culture of independent and unconnected work in both the academic and practice communities
- Culture change is integral to exchanges that foster IPE
- Despite rhetoric about the "new models of care that are team based" this is often difficult to find.

What does this mean for nursing?

- Need to find partners for collaboration within and outside the health professions – e.g. engineering and nursing.
- Need for practice partners to provide real collaborative models for learners to see and model.
- Barriers to clinical training access do not facilitate IPE at the point of care.
- Unfortunately, research indicates that students come with preformed views of their roles and hierarchy across health professions. Need to confront this.

Recommendations

- HRSA's workforce initiatives should all mandate IPE not just checking the box.
- Clinical training sites should be monitored for their openness to bringing a variety of learners together.
- Although point of care learning is the best, should be strong support for simulation laboratories that will allow testing of collaboration before actual patient care experience.
- Faculty development and resources for new models of interaction across the professions should be supported.
- Reimbursement models that recognize the importance of collaboration to care outcomes must be enhanced.