

This group received support from the Woodruff Health Sciences Center IPECP Implementation Task Force in the form of travel support

WHAT WE LEARNED

There are unique barriers to Inter-professional Education within the Ambulatory Setting compared to the Inpatient Setting, and for Primary Care Clinics Sites that accepted trainees, very few took learners from more than one discipline

BACKGROUND

- Inter-professional education and collaborative practice (IPECP) are health system goals for the Woodruff Health Sciences Center at Emory University
 - These principles emphasize teamwork
 - They focus on top of license practice
 - They permit all disciplines to be involved in the education of the patient, the providers, and the trainees
- In actuality, many primary care practice settings fall short in achieve IPECP
- IPECP may be more difficult to achieve in the ambulatory setting because of block rotations and pace of practice
- We assumed that ideal interprofessional education could only take place IF there were learners from multiple professions

OBJECTIVE

- To find out how many academic PC sites accepted learner placements from multiple disciplines
- To determine common barriers to IPECP in the Emory system and from literature review

METHODS

Study Type

- Survey of placement coordinators of medical students, Physician Assistant students, Nurse Practitioner Students, and Pharmacy Students.

Measures

- Comparison of placement rosters across programs against list of PC clinics that were Emory-owned or Emory faculty practices in primary care

Analysis

- We conducted interviews with clinician educators where coordinators had placed multiple disciplines to confirm that these disciplines worked within the clinic at the same time

RESULTS

Lists of Placements for Different Disciplines Amongst Emory PC Clinics

	Locations
Med Student Sites	Clinics A, B, C, G-P
NP student sites	Clinics A, D, E
PA student sites	Clinics A, B, E, F
Pharmacy student sites	Clinic A

Sample Barriers Mentioned Impeding Teaching Activities in Primary Care

Domain	Examples
Time	If you teach the traditional way (e.g student sees patient, presents to provider, then provider sees patient with the provider) this is going to take 20 minutes per visit for a simple problem, more for physicals or complicated problems.
Patient preference	I have had patients complain about teaching on my Press Ganey surveys. "I did not like going through the visit twice," one comment stated, for example.
Block system	It's become hard for me to precept Emory students due to their block system. I don't like to have students more than 2 days per week. My preference would be to have the same student for fewer days per week for several months, rather than more days per week for shorter periods.
Unprepared students	I work in internal medicine where many patients have two pages of meds and walk in with complicated problems. Waits for specialists are long and our patients in Smyrna have limited financial resources. I need students who are ready for and welcome this challenge.
EMR	Students should have computer access for chart reviews if possible. This would teach them necessary skills in primary care such as digging through the chart to compile each patient's health maintenance screenings and vaccines before a visit.



Summary and Next Steps

- We found 2 PC clinics with multiple, simultaneous learner placement across multiple disciplines
- Of these, 1 practice had robust IPE activities with a commitment to team-based care, practicing at the top of license, and collaborative practice
- This clinic is working on more fully describing their model and disseminating best practices

References
 Hawkins R, Silvester JA, Passimant M, Riordan L, Weiss K. (2018) Envisioning the optimal interprofessional clinical learning environment: Initial findings from an October 2017 NCICLE symposium. <http://ncicle.org>
 Health Professions Accreditors Collaborative. (2019) Guidance on developing quality interprofessional education for the health professions. [https://s3-us-west-2.amazonaws.com/nexuise-resource-exchange/HPACGuidance\(02-01-19\).pdf](https://s3-us-west-2.amazonaws.com/nexuise-resource-exchange/HPACGuidance(02-01-19).pdf)
 Jakobsen, F., Morcke, A. M., Hansen, T. B. (2017) The interprofessional learning experience: Findings from a qualitative study based in an outpatient setting. *Journal of Interprofessional Care*, 31(5).
 Selleck, C.S., Ffolt, M., Burkart, H., Frank, J. S., Curry, W. A., Hites, L. S. (2017) Providing primary care using an interprofessional collaborative practice model: What clinicians have learned. *Journal of Professional Nursing* 33(6), 410-416.