Disclosures

• There is no conflict of interest or relevant financial interest by the faculty or planners of this activity.
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• The entire webinar and the program evaluation must be completed to earn contact hours.
• This webinar will be recorded and available until 9/20/2020
IPE PANEL PRESENTATION:
Assessment of Interprofessional Practice

Hosted by:

IPEC
Interprofessional Education Collaborative
Connecting health professions for better care

American Association of Colleges of Nursing
MODERATOR

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John Luk
MD
Assistant Dean of Interprofessional Integration
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The University of Texas at Austin Dell Medical School
METHOD FOR SUBMITTING QUESTIONS

Simply type questions or comments in the chat box on the right side of your screen.
LEARNING OBJECTIVES

• Describe the key structure of IPE programs at the University of Colorado Anschutz Medical Campus and the University of Texas at Austin

• Explain approaches to assessing IPE outcomes

• Identify lessons learned related to achieving desired IPE goals and coordinating assessment and health outcomes
REGISTER AT IPECOLLABORATIVE.ORG

FALL 2017

Oct 18-20 in Long Beach, CA
Advancing & Sustaining Your Program for Collaborative Practice
PANELIST

Eric H. Gilliam
PharmD, BCPS

Program Director, University of Colorado Center for Interprofessional Education and Practice
Assistant Professor, Department of Clinical Pharmacy
Assistant Director, Office of Experiential Programs, Skaggs School of Pharmacy & Pharmaceutical Sciences
Assessment Strategies in IPE: Insights from University of Colorado

Eric H. Gilliam, PharmD, BCPS, Assistant Professor
Program Director, Clinical Integrations Program
CU Center for Interprofessional Practice & Education (CU CIPE)

Eric.Gilliam@ucdenver.edu
CU CIPE Team

Center for IPE Faculty & Staff

- Suzanne Brandenburg, MD, Center Director
- Eric Gilliam, PharmD, Director – Interprofessional Practice
- Shimaa Basha, MPH, CHSE, Director – IPE Simulation
- Wendy Madigosky, MD, Director – Didactic Education
- Reesie Roland, IPE Program Coordinator
- Michelle Colarelli, Curriculum Manager & Instructional Designer
- Shannon Patsey, Clinical Integrations Coordinator
- Jason Brunner, Chair of Evaluation & Assessment
- Natalie Mathay, IPE Student Worker

IPE Program Representatives

- Nikki Block, CAA, MMSc - Anesthesiologist Assistant Program
- Daniel Goldberg, JD, PhD – Center for Bioethics and Humanities

IPE Assistant Directors (IPE Council)

- Amy Akerman, MPAS, PA-C – Physician Assistant Program
- Kari Franson, PharmD, PhD – Skaggs School of Pharmacy
- Karen Gorton, PhD, MS, RN - College of Nursing
- Wendy Madigosky, MD, MSPH – School of Medicine
- Amy Nordon-Craft, PT, DSc – Physical Therapy Program
- Lindsey Yates, DDS, MPH – School of Dental Medicine
Who’s on the Team?

- ~750 students / cohort
  - Anesthesiologist Assistant
  - Dental Medicine
  - Medicine
  - Nursing
  - Pharmacy
  - Physical Therapy
  - Physician Assistant
  - Public Health

- 2 – 3 cohorts of students at any given time

- Distance and International Learners
- ~ 50 Faculty facilitators in the class room
- Countless preceptors and partners in clinics and the surrounding communities
Two – Four Year Curriculum

Clinical Integrations
Open Campus Program
(CI-1)

Interprofessional Education & Development Course
(IPED)

Clinical Transformaions Simulation Lab
(CT)

Clinical Integrations Practicum
(CI-2)

Co-Curricular Experiences
(1 semester)

Didactic Training
(2 Semesters)

Simulation Training
(1 Afternoon)

Experiential Training
(Varies)
Getting Started

- IOM 2015 Report\(^1\)
- NEXUS Assessment & Evaluation Guides\(^2\)
  - Webinars, tools, guidelines, and reviews
- Need to align care systems and education systems
- Need to assess change and impact of IPE
  - Apply Kirkpatrick Model
  - Integrate Qualitative and Quantitative Methods

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\(^2\) Available at https://nexusipe.org/advancing/assessment-evaluation-start
Strategic Plans lead to Assessment Plans

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**IPE STRATEGIC PLANNING OUTLINE 2017 (CLINICAL INTEGRATIONS)**

Outline for strategic plan operationalization (focus on education):

1. Establish measures/performance indicators for each item:
   a. Define thresholds/benchmarks (including meeting accreditation requirements for each program)
2. Map measures to specific activities and benchmarks for each (implementation plan)
   a. Timeline with responsibility assignments (IPE component level and program level) for each step (what needs to happen for measure x to come in to play, etc.)
3. Once basic implementation plan outlined, ask each program - do you have other specific goals that would inform measures/performance indicators?
4. As part of process, review if needed re-align measures with IPE big picture – vision/mission/values and more granularly overall curricular outcome
5. Evaluation committee will then focus on how to best:
   a. Assess learners
   b. Evaluate components

Clinical Integrations (C) Component:

1. Students will engage in interprofessional practice:
   a. They will work in IP teams and identify its role in meeting the triple aim (Phase 1 - Co-curricular)
   b. They will demonstrate teamwork and collaboration skills in clinical interprofessional practice settings (Phase 2 - CI Practicum)

<table>
<thead>
<tr>
<th>Component</th>
<th>Measure</th>
<th>Activity</th>
<th>Benchmark</th>
<th>Timeline for Implementation</th>
<th>Responsibility</th>
<th>Notes (goals, needs, etc.)</th>
</tr>
</thead>
</table>
| Students will work in IP teams and identify its role in meeting the triple aim (CI - Phase 1 [C-1]) | 1. IPE provides co-curricular interprofessional activities aligned with the triple aim to all health professions students through IPE programming or in conjunction with IPE partners. | Activities already developed and offered through IPE and Partners
   a. Certificate in IP Quality Improvement and Patient Safety (IPE/VCH)
   b. DAWN Clinic
   c. National Western Stock Show Health Screenings (AHESC)
   d. Rural Immersion Week (SDM Rural Track)
   e. I-Peak Home Visits (Accelerating IPE Grant Project)
   f. SDM Frontier Center (SDM)
   g. Interprofessional Collaborative Practice team skills and leadership seminars (CCNE HSRA Grant)
   h. Interprofessional Culinary Elective
   i. Public Health Case Competition (SPH)
   j. Global Health Course in Kathmandu, Nepal (CI Catalogue Survey)
   k. Birth Simulations (CAPS) (CI Catalogue Survey)
   l. Center for Bioethics and Humanities IP Student Advisory Group

1. A variety of activities is offered to meet the needs and interest of students from all health professional programs. | 1) Five or more O-1 programs are offered to the students in each CI-participating program [CON, SDM, SOM, SOP, PA, and PT], Gaps: SDM and PT
2) 80% of students from each participating program participate in at least 1 CI-1 activity | Ongoing 2-year goal Various (see table) IPE Council Reps to advocate for programing aligned with interests of their respective students. Do we want to cultivate more or just promote what is here? -Quantify capacity and identify need to develop/recruit more if needed based on benchmarks. Do we want to track engagement or just promote? -Yes. Benchmark capacity and participation -Need mechanism to track/report participation Do these programs need to identify aspects of the Triple Aim as part of their mission? Is their missions articulated to the students?
Kirkpatrick Model for Evaluation

Examples of Data Sources

Organizational Change
Changes in the system or environment
*Change in practice culture; Change in work processes*

Behavior
Evaluation of Student Performance
*Teaming, Clinical Interventions, Collaboration with Team*

Knowledge
Evaluation of Student
*Tests & Quizzes, Demonstration of Knowledge / Competencies*

Reaction
Student Perception of Learning Experience:
*Surveys, Focus Groups, Evaluations, Attitudinal Scales*
Students recognize their role as a health practitioner in the context of the Triple Aim early in their training.

Students continue to engage in Interprofessional student collaborations beyond program requirement.

Students recognize their role as a health practitioner in the context of the Triple Aim early in their training.

Increase promotion of IPE across campus; Increase IPE Partnerships; Change in policies to streamline cross-professional co-curricular structures.

Improve student and faculty perceptions of IPE Program on Campus; Students maintain enthusiasm for IPE training.
Student Assessment in IP Practice

- Goals:
  - Provide each health profession program with individual student level data demonstrating competency in teamwork and collaboration within clinical practice settings

- Key Stakeholder
  - Deans & Curriculum Leads
  - Accreditation Standards

- Strategy:
  - Standardize student assessment across campus
Student Assessment in IP Practicum

- Assessment Tool
  - Interprofessional Professionalism Assessment\(^1,2\) (Modified)
    - Developed by the Interprofessional Professionalism Collaborative\(^3\)
      - Aligned with IPEC Competencies
      - Individual student behaviors
      - Cross-professional assessment
  - CU modifications
    - 9-items
    - Plus 1 global assessment item (pass/fail)

\(^3\)www.interprofessionalprofessionalism.org
Organizational Change

~10% of Provider’s patients engaged with pharmacy student service during program

Behavior

I trust this learner to be on my interprofessional team: <1% Marked “No”

Knowledge

Student demonstration of IPEC Competencies:
Mean score across items: 4.7

Reaction

Would you recommend this program? Mean 4.3
Comments: “Best experience I’ve had so far”
Longitudinal Programmatic Assessment

Co-Curricular

Didactic Training

Simulation Training

Experiential Training

Student Evaluation of Experience & Self-Reflective Prompts
  • Professional Identify Formation: Roles & Responsibilities

Team Performance
  • IPEC Domains: Q&S, T&C, V&E

Individual Performance on Teams
  • IPEC Domains: T&C

Center for Interprofessional Practice & Education
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS
“Participating in [This IPE Activity] contributed to my development as a collaborative healthcare professional.

- **Co-curricular:** Level of Agreement ~50% (First pilot year)
- **Didactic:** Level of Agreement: ~60%
- **Simulation:** Pending
  - LoA ~90% on similar question
- **Experiential:** Pending
  - LoA ~85% on similar question (SOP initial pilot cohort)

**Student Evaluation of Experience & Self-Reflective Prompts**
- Professional Identify Formation; Roles & Responsibilities

**Quantitative -> Standardize items -> Track Change Over Time**
**Qualitative -> Thematic Analysis -> Program Improvement**
<table>
<thead>
<tr>
<th>Content Area</th>
<th>Didactic tRAT Performance</th>
<th>Simulation Team Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% Items Correct</td>
<td>Mean % fully performing target behaviors</td>
</tr>
<tr>
<td>Semester 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semester 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality &amp; Safety</td>
<td>98.5%</td>
<td>75.6% (3 behaviors)</td>
</tr>
<tr>
<td>Values &amp; Ethics</td>
<td>98.8%</td>
<td>55.9% (2 behaviors)</td>
</tr>
<tr>
<td>Teamwork &amp; Collaboration</td>
<td>98.6%</td>
<td>62% (17 behaviors)</td>
</tr>
</tbody>
</table>

tRAT: Team Readiness Assurance Test performed immediately following individual assessment of same behaviors.

Simulation: Teams improve with experience.

Didactic: Team-knowledge is greater than individual-knowledge.
“I trust this learner to be a member of my interprofessional team”

» Observer rated statement as “Yes” or “No”

<table>
<thead>
<tr>
<th></th>
<th>Simulation</th>
<th>Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Students</td>
<td>763</td>
<td>314</td>
</tr>
<tr>
<td>Professions Represented</td>
<td>7</td>
<td>1 (pharmacy)</td>
</tr>
<tr>
<td>Rater</td>
<td>Trained facilitators • Patient perspective</td>
<td>Non-Pharmacist Clinician • Supervisor perspective</td>
</tr>
<tr>
<td>Responding “No” N, (%)</td>
<td>3 (0.4%)</td>
<td>1 (0.3%)</td>
</tr>
</tbody>
</table>

Are there predictors indicating low trust? Will early intervention and coaching help?
Lessons learned

- Take the time to invest in strategic planning!
- Consider needs of all stakeholders
- Consider how data may be used before collection
  - Consider longitudinal assessment strategies
- Aim for different levels of assessment data
- Integrate multiple sources of evidence
PANELIST

John Luk
MD

Assistant Dean of Interprofessional Integration
Assistant Professor, Departments of Medical Education and Pediatrics
The University of Texas at Austin Dell Medical School
Interprofessional Integration Assessments

The University of Texas at Austin

School of Nursing
Steve Hicks School of Social Work
Dell Medical School
College of Pharmacy
In Gratitude

• Provost and Deans
• Curriculum leaders of partnering programs
• IPE Champions
  • Barbara Jones, PhD, MSW, FNAP
  • Veronica Young, PharmD, MPH
  • Gayle Timmerman, PhD, RN, CNS, FNAP, FAAN
• Faculty
• Learners
• Community
From Education To Practice

Transformation of health education

- Experiential learning
- Assessment of team competence
- Formation of profession-specific & inter-professional identity

Transformation of health care delivery systems

- Partnership: education, health system, community
- Common goal: IHI triple aim
- Interprofessional teams

Alignment
Rethink Everything

Interprofessional

HEALTH
COMMUNITY
CARE

EDUCATION
RESEARCH
INNOVATION
Our Approach

Learner Centered
Team Oriented, Interprofessional
Experiential, Intentionally Interactive
Application, Service
Value Added, Transformation
Reflective, Inquiry
Immerse learners in interprofessional inquiry, application, and leadership to yield measurable impact and outcomes.
Foundations

Assessments
## It’s about TEAM work!

<table>
<thead>
<tr>
<th>Grade Elements</th>
<th>Assessment</th>
<th>Pass Grade Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turnout (Attendance)</td>
<td>Attendance as gathered by faculty team facilitator</td>
<td>Consistently identified as being on time</td>
</tr>
<tr>
<td>Effort (Modeling team collaboration characteristics)</td>
<td>Team self-assessment to be completed collectively by team members and faculty team facilitator at the end of sessions</td>
<td>Consistently identified as meeting or exceeding expectations</td>
</tr>
<tr>
<td>Assignments</td>
<td>Fall Semester&lt;br&gt;1. Team simulation&lt;br&gt;2. Team community experience&lt;br&gt;3. Self Assessments&lt;br&gt;4. Learner Reflections</td>
<td>Satisfactory completion by assignment due dates. Please refer to the course common syllabus for assignment due dates</td>
</tr>
<tr>
<td>Mastery (of Knowledge)</td>
<td>Knowledge progress multiple choice question quizzes.</td>
<td>Correctly answered 70% of examination questions</td>
</tr>
</tbody>
</table>
Assessments—Year 1

**Team**
- Conducted at session debriefs
  - Based on four IP core competencies
  - Facilitated by faculty in teams

**Faculty**
- Confidential, at sessions, for course directors
  - Professionalism
  - Participation
  
  *Written formative feedback*
  - Based on four IP core competencies
  - Provided directly by faculty to student at second to last session

**Peer**
- Confidential, aggregated anonymous report back to learners
  - How did peer benefit from this team member?
  - Describe strength of this team member
  - Provide constructive feedback for improvement

**Self**
- End of course assignment
  - Describe how you have benefited team
  - Describe one strength
  - Describe one performance improvement on team
  - Describe how you assume leadership
Assessments—Year 1 revised

**Team**
- conducted at session debriefs
  - Based on four IP core competencies
  - Facilitated by faculty in teams

**Faculty**
- confidential, at sessions, for course directors
  - Professionalism
  - Participation
  - Written formative feedback
    - Based on four IP core competencies
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**Peer**
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  - Provide constructive feedback for improvement

**Self**
- end of course assignment
  - Describe how you have benefited team
  - Describe one strength
  - Describe one performance improvement on team
  - Describe how you assume leadership
Interprofessional Community Activity

• Learn about community: health disparities, cultural diversity, & social determinants of health and wellness

• Partner with community

• Pecha Kucha: It’s about the PITCH!
  P  Pecha Kucha, format
  I  Idea Development, storytelling
  T  Team, team member effort
  C  Community, connecting to local community
  H  Health, connecting to local health issues

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Quiz

- End of semester knowledge assessment
- Multiple choice answer questions
- Three optional open-ended opportunities to explain answers to 3 questions
- Sample quiz for practice
Applications

Assessments
It’s still about TEAM work!

<table>
<thead>
<tr>
<th>Grade Elements</th>
<th>Assessment</th>
<th>Pass Grade Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>T</strong> Turnout to Intersessions</td>
<td>1. Attendance of intersessions.</td>
<td>1. Attendance of all intersessions or completion of remediation work</td>
</tr>
<tr>
<td></td>
<td>2. Team assignment completion</td>
<td>2. Completion of all team intersession assignments</td>
</tr>
<tr>
<td><strong>E</strong> Interprofessional</td>
<td>CANVAS Course Passport Activities</td>
<td>1. Completion of assigned passport activity per block</td>
</tr>
<tr>
<td>Experiences</td>
<td></td>
<td>2. Completion of six course passport activities or assigned remediation work in Year 2</td>
</tr>
<tr>
<td><strong>A</strong> Analysis of Course</td>
<td>Course Reflections</td>
<td>1. Completion of inquiry reflections</td>
</tr>
<tr>
<td>Applications</td>
<td>• 3 Inquiry reflections</td>
<td>2. Completion of blog reflections</td>
</tr>
<tr>
<td></td>
<td>• 2 Blog reflection</td>
<td>3. Completion of the two final course reflections: six word story and fifty-five word</td>
</tr>
<tr>
<td></td>
<td>• Six Word Story</td>
<td>story</td>
</tr>
<tr>
<td></td>
<td>• Fifty Five Word Story</td>
<td>4. Meets expectation on reflection rubric for completed essays</td>
</tr>
<tr>
<td><strong>M</strong> IHI Open School Modules</td>
<td>IHI Open School Module completion by due dates</td>
<td>1. Completion of assigned IHI modules by the due dates</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Basic Certification by end of Year 2</td>
</tr>
</tbody>
</table>
IPE is also about Professional Identity Formation

<table>
<thead>
<tr>
<th>Reflection Element</th>
<th>Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>P</strong> Personal</td>
<td>The reflection is written in first person and is relevant to self.</td>
</tr>
<tr>
<td><strong>I</strong> Inquiry</td>
<td>The reflection fulfills the assignment inquiry.</td>
</tr>
<tr>
<td><strong>F</strong> Future</td>
<td>The reflection addresses the impact of the experience on one’s future practice as a resident.</td>
</tr>
</tbody>
</table>
# 6-55 Stories

<table>
<thead>
<tr>
<th>Six Word Story</th>
<th>Fifty-Five Word Story</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exactly six (6) words. No more and no less.</td>
<td>Exactly fifty-five (55) words. No more and no less.</td>
</tr>
<tr>
<td>Clear and Complete.</td>
<td>Complete story.</td>
</tr>
<tr>
<td></td>
<td>Reflective.</td>
</tr>
</tbody>
</table>

Work of Kristy Kosub, MD and Krista Bowers, MD at the UT Health San Antonio Department of Medicine.
Thank you!

John Luk
john.luk@austin.utexas.edu
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2017 IPEC WEBINAR SERIES

Thursday, October 5, 2017
2017 USPHS IPEC Award Winners: University of Central Florida

Thursday, December 7, 2017
Health Professions Accreditors Collaborative (HPAC) Panel Discussion: Accreditation and Interprofessional Engagement

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