

# Theory Burst

## Program Evaluation & Improvement

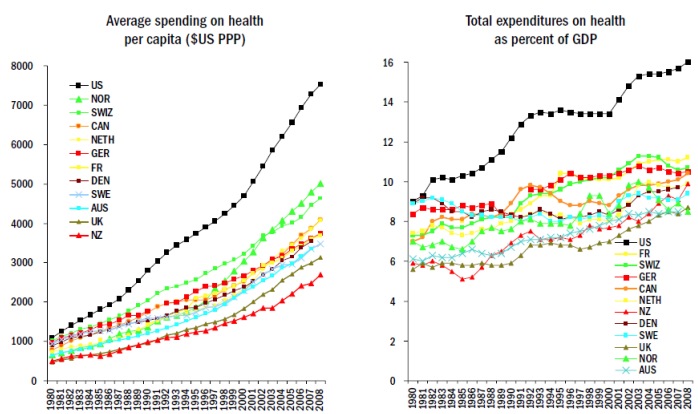
### Interprofessionalism

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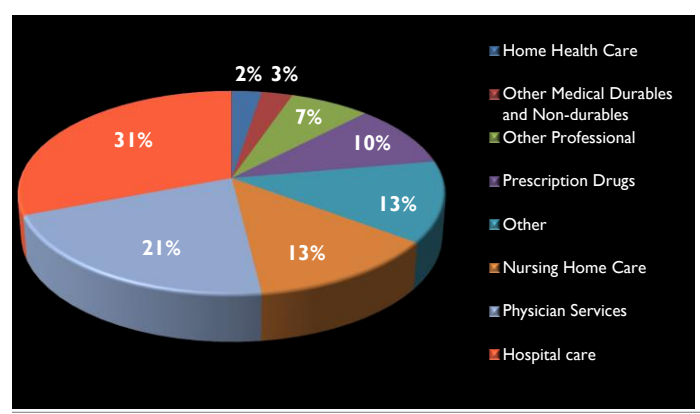
## Why Interprofessionalism?

## International Comparison of Spending on Health, 1980 - 2008



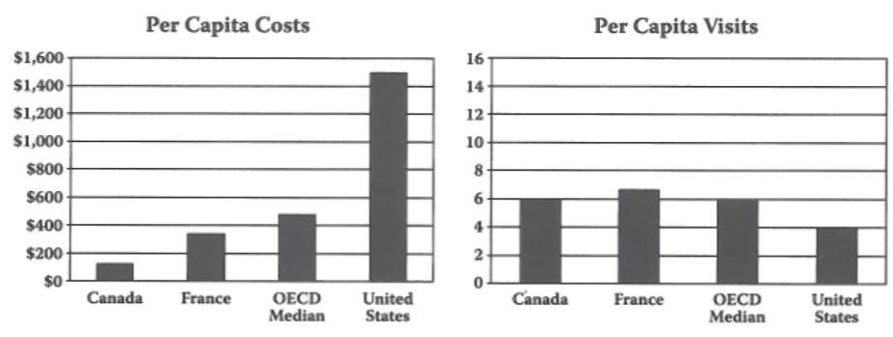
Note: PPP = purchasing power parity—an estimate of the exchange rate required to equalize the purchasing power of different currencies, given the prices of goods and services in the countries concerned.  
Source: OECD Health Data 2010 (Oct. 2010).

## Distribution of Costs

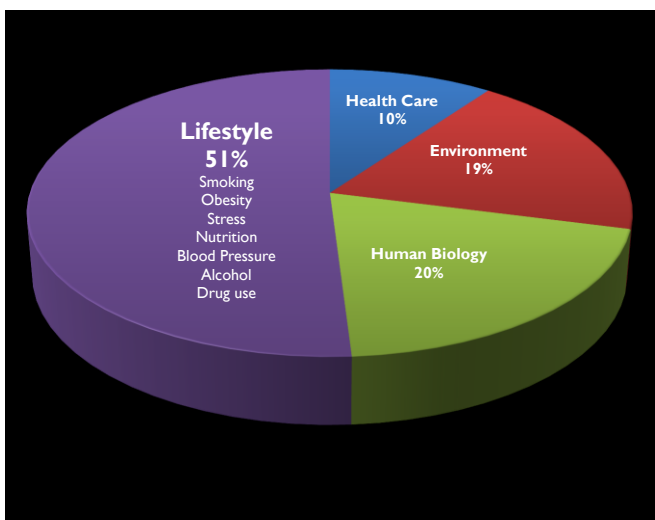


Note. Adapted from *Health Care Will Not Reform Itself: A User's Guide to Refocusing and Reforming American Health Care* (p. 35), by George C. Halvorson, 2009, New York: Productivity Press.

# Physician Costs

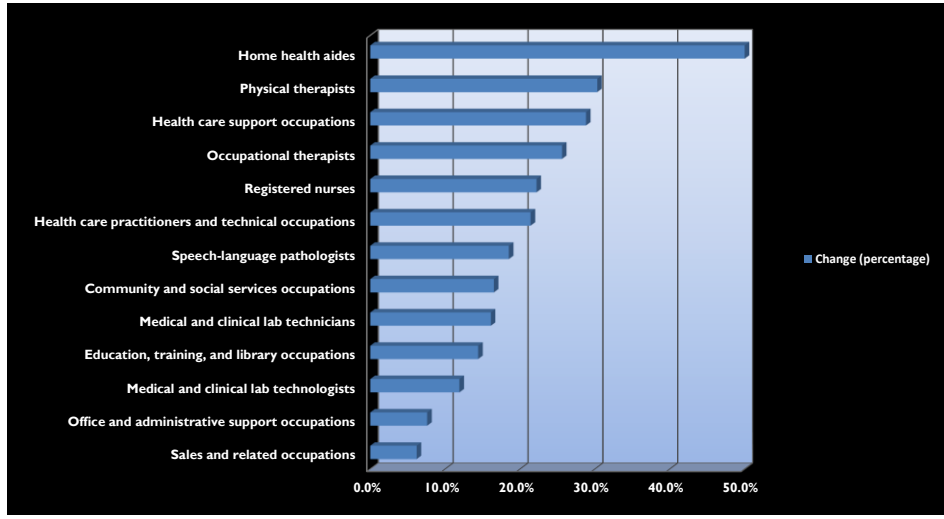


# Determinants of Health



Schroeder, Steven A., We Can Do Better – Improving the Health of the American People, N Engl J Med 2007 357: 1221-1228

## US Workforce Employment, 2008-2018



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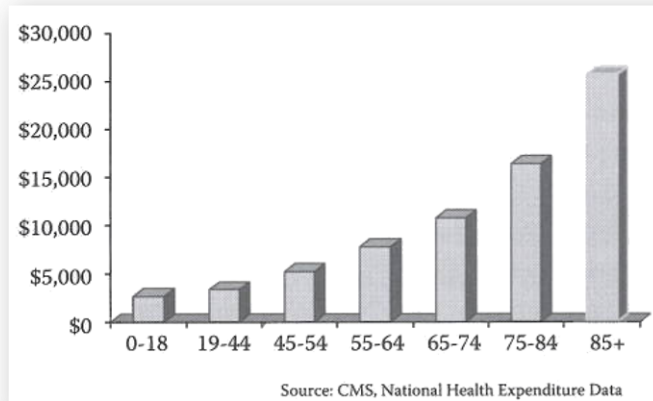
## Phoenix



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## Costs Rise with Age

Per Capita Annualized Health Care Costs by Age Group



Note: Adapted from *Health Care Will Not Reform Itself: A User's Guide to Refocusing and Reforming American Health Care* (p. 37), by George C. Halvorson, 2009, New York: Productivity Press.



ASU Health Solutions

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## Home of Health Solutions: The ASU Downtown Phoenix Campus

Health Solutions Develops New Models,  
to improve health, lower costs, enhance access



- Formed in 2011
- Health education model
- Bridges ASU creating synergy within university and strategic partners



ASU Health Solutions

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# Health Solutions Enrollment

## STUDENT ENROLLMENT

	College of Health Solutions	College of Nursing & Health Innovation
<b>UNDERGRADUATE</b>	<b>3490</b>	<b>854</b>
<b>GRADUATE</b>	<b>72</b>	<b>124</b>
<b>PHD</b>	<b>53</b>	<b>131</b>



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# Interprofessionalism



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# Advancing Interprofessionalism



## IPEC COMPETENCIES

1. Values/ethics
2. Roles/responsibilities
3. Interprofessional communication
4. Teams/teamwork

## SELECT POPULATIONS THAT

1. Need team interventions,
2. are likely to benefit,
3. and can be impacted in a reasonable timeframe.



# Approach

- Systematic
- Pragmatic
- Grounded in insights from other IPE work
- Student insight
- Consistent and integrative

## Evaluation - Macy Grant

Links characteristics of clinical sites to intervention which includes face-to-face learning grounded in quality and patient-centered care



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## Evaluation - Macy Grant

Evaluation done in collaboration across universities, health professions programs and AzGEN, clinical partners and students



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## Evaluation - Macy Grant

Consider critical design issues:

- Dose
- Sensitivity of measures
- Common measures
- Timing
- Burden

## Specifics – Staged Model

### CLINICAL SITE / STUDENT / PRECEPTOR CHARACTERISTICS

- Survey, clinical site database
- Will incorporate required AzGNE variables

### COMPETENCY DEVELOPMENT

- Survey, objective testing of interprofessional competence
- Specific IPEC competencies associated survey, testing tools

### INTERVENTION STRENGTH

- Survey, Interview
- Frequency, type, delivery format of education – classroom, clinical
- Coaching interventions
- Preceptor interventions

### PATIENT OUTCOMES, CLINICAL PARTNER SATISFACTION

- Record extraction for patient outcomes
- Focus on important performance measures for targeted populations

## Takeaways

- Interprofessionalism: behavioral and attitudinal approach
- Train people to perform anywhere
- Understand industry dynamics
- Create teams to address needs locally
- Use IPEC competencies as standard framework
- Identify meaningful metrics
- Learn from the past; design for the future

**Thank you!**

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