Engaging Stakeholders to Establish a Culture of Interprofessional Education and Collaboration

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Background
• Various factors such as institutional commitment to patient safety and a favorable learning environment for learners coupled with accreditation bodies’ requirements for compliance with standards on interprofessional education (IPE) drive the need to establish a culture of IPE and collaborative practice at our institution.

• IPE related activities initiated across different healthcare programs at our institution are few, lack intentional curricular alignment across programs and faculty who are trained in IPE competencies.

Aim
• Establish a culture of IPE and collaborative practice through engagement of stakeholders such as institutional leadership, clinical and non-clinical faculty and healthcare learners.

Setting
• Wake Forest Baptist Health is home to the Wake Forest School of Medicine (WFSM) and Wake Forest Baptist Medical Center (WFBMC.)

• Wake Forest School of Medicine houses the Doctor of Medicine (MD), Physician Assistants (PA) and Certified Registered Nurse Anesthetist (CRNA) programs.

• Wake Forest Baptist Medical Center serves as a preceptor site for Pharmacy, Nursing and allied health learners from other surrounding universities.

Methods
• Institutional Leadership Support – WFSM Dean charged all associated deans and program chairs to select a representative to the IPE Working Group.

• IPE Working Group formed in 2016 – consists of representatives from MD, PA, Nursing, CRNA, Pharmacy, Graduate Medical Education, School of Medicine Administration.

• IPE Working Group activities based on Framework for IPE Culture. (Figure 1)

• Participating faculty surveyed on individual perceptions of practice and teaching of IPE competencies prior to the IPE retreat.

• IPE faculty retreat designed to use a small group session to guide an interprofessional team of faculty through the process of designing an IPE curriculum for learners.

Results

IPE Faculty Retreat
• Eighty two attendees participated in the IPE retreat (clinical/basic science faculty, medical education staff.)

• 74% completed survey on Perception of Practice and Teaching of IPE competencies.

• Sixteen IPE projects created during the interprofessional faculty retreat.

• Three projects selected for further development and implementation.

Next Steps
• Design and evaluate a continuous IPE curriculum for faculty’s professional development.

• Engage authors of three selected projects to refine and implement projects.

• IPE faculty development/healthcare learner curricular development funding opportunities.

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