



Early Learning:

**Aligning Health Care and
Interprofessional Education**

**The National Center Team
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UNIVERSITY OF MINNESOTA

National Center for



Interprofessional
Practice and
Education

Requested Topics

Trends in Interprofessional Education

Sustaining Interprofessional Education

What the National Center is working on

The national IPE scene since 2010

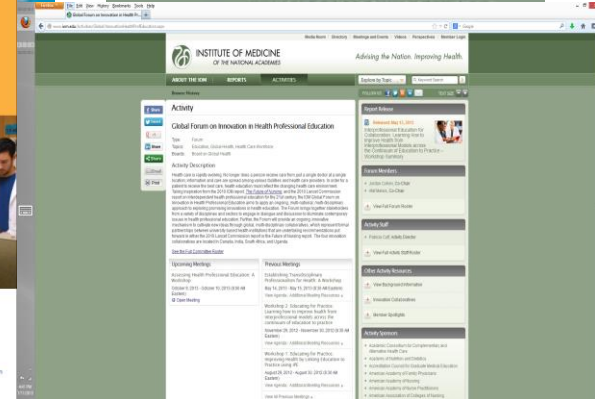
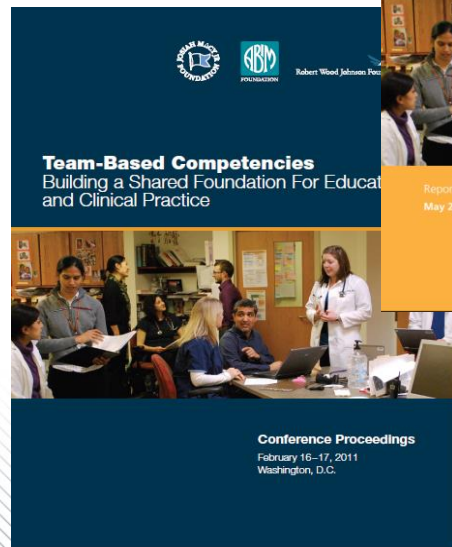
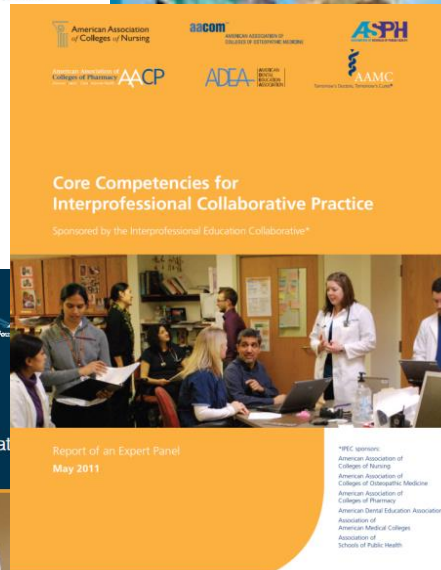
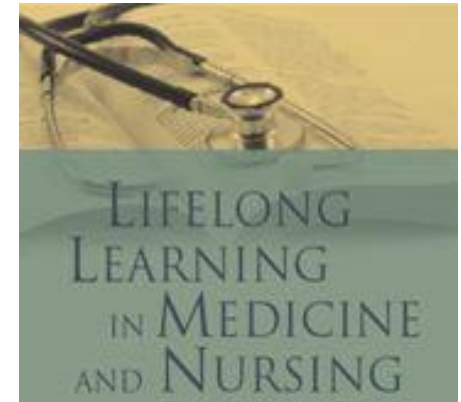


THE CARNEGIE FOUNDATION
for the ADVANCEMENT of TEACHING

CONFERENCE SUMMARY

June 16–18, 2010 | Palo Alto, California

Educating Nurses and Physicians: Toward New Horizons



Transforming Patient Care: Aligning Interprofessional Education with Clinical Practice Redesign

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INSTITUTE OF MEDICINE

REPORT OF A CONFERENCE

Educating for The Health Team

October 1972

NATIONAL
ACADEMY of
SCIENCES
Washington, D.C.

NAS-NAE
FEB 22 1974
LIBRARY

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Health care Trends in the 1970s and Today

1970s

Today

Status of primary care



Redesign around primary care, prevention, population health

Specialization and subspecialization



Impact of bundled payments?

Nurse practitioners, Physicians Assistants, Clinical Pharmacists



The right worker partnering with patients, families and communities. How not who.

Little interest in processes



Patient safety, quality & systems improvement, teamwork leading to outcomes

Little evidence for teamwork



Growing evidence for teamwork

Independent work



Growing collaboration and turf wars

Adapted from: Schmitt, M. (1994). USA: Focus on interprofessional practice, education, and research. *Journal of Interprofessional Care*, 8(1), 9 – 18.

The National Center: A New Model for Public-Private Partnership

Micro, Meso and Macro Levels

Funder Perspectives

A ROADMAP FOR

Patient + Family Engagement in Healthcare

Practice and Research

Practical strategies for advancing engagement in healthcare—starting today.

START



CONFERENCE RECOMMENDATIONS

April 3 – 6, 2014 | Arlington, Virginia

Partnering with Patients, Families, and Communities: An Urgent Imperative for Health Care

In the Macy Foundation Conference on
Patients, Families, and Communities to Link
Practice and Education



Building a
Culture of Health

Robert Wood Johnson Foundation



Transforming Patient Care: Aligning Interprofessional Education with Clinical Practice Redesign

Proceedings of a conference chaired by
Malcolm Cox, MD and **Mary Naylor, PhD, RN, FAAN**
January 2013 | Atlanta, Georgia

June 2013

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In addition to the recommendations for
transformative action contained in this conference
summary, conferees also crafted and agreed to a
vision statement for health professions education
and healthcare practice going forward. The
statement reads:

*We envision a future in which individuals,
families, and communities are understood to be
the very reason our healthcare system exists, and
that those who are caring, teaching, learning,
or otherwise working within the system must
partner fully and effectively with them to foster
optimal health and wellness for all.*

The vision statement purposefully uses the verb
"partner" in place of "engage" (which was the
original word used by the Macy Foundation when

st, New York, NY 10005 | www.macyfoundation.org

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National Center for | Interprofessional
Practice and Education

UNIVERSITY OF MINNESOTA

The National Center for Interprofessional Practice and Education is supported by a Health Resources and Services Administration Cooperative Agreement Award No. UE5HP25067. © 2013 Regents of the University of Minnesota, All Rights Reserved.

Our vision for health



Our Goals:

- Improving quality of experience for people, families, communities and learners
- Sharing responsibility for achieving health outcomes and improving education
- Reducing cost and adding value in health care delivery and education

Our Goal

To provide the **leadership, evidence** and **resources** needed to guide the nation on the use of interprofessional education and collaborative practice (IPECP) as a way to enhance the experience of health care, improve population health and reduce the overall cost of care.

Our Strategies

- **Co-create** and **evaluate** IPECP models that reconnect education and collaborative practice in Nexus sites across the U.S. and show the impact of this work on the Triple Aim.
- **Strengthen** and increase the availability of evidence about the effectiveness of IPECP in achieving the Triple Aim.
- **Lead** and **facilitate** the national dialogue among stakeholders in education and health care about the effectiveness of IPECP in achieving the Triple Aim.

Strong demand for IPECP support



- ✓ Contacted by more than 700 *individual* organizations for information and consultation
- ✓ Provided training to more than 7,500 people in practice and in education through more than 80 meetings in U.S.
- ✓ Advising several agencies and professional organizations to drive change, at their request
- ✓ Receive emails or calls from on average 5 – 10 new organizations and people each week

How can the National Center serve:

- Those new to the field
- Seasoned professionals, or early adopters
- Leaders who want to see evidence and ROI for investing

Demand translated into new approach: Inform, connect, engage. . . .

- ✓ Recognizes everyone brings expertise
- ✓ Engages diverse groups with different perspectives about IPECP
- ✓ Encourages active participation to share expertise across sectors in practice and in education
- ✓ Creates partnership toward problem-solving as a community
- ✓ Applies and leverages new tools and technology to achieve more with less
- ✓ Creates data and encourages use locally and nationally



Together, we are the National Center for
Interprofessional Practice and Education



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www.nexusipe.org

Learn about biomedical health informatics

Take a [free online course](#) to learn how the the field of biomedical health informatics (BMHI) is improving safety, outcomes, and efficiency in health care.



What we are learning: Trends

We are learning:

Related to health workforce in practice

- ✓ Little standardization and approaches to teams in the delivery system
- ✓ Disconnect between practice and education – need to reconnect
- ✓ Reports about retraining costs
- ✓ In some regions, practice more advanced than education; others, the reverse
- ✓ Lack of role models for teamwork/team-based care
- ✓ Anticipation of some change in reimbursement for health care (e.g., bundled payment systems)

We are learning: Related to IPE

- ✓ Significant national IPE experimentation in education sector at curriculum level related to a number of factors
- ✓ Some recognition that education needs to focus on the Triple Aim, not just curriculum change, stimulated by the National Center
- ✓ General lack of system-wide connection between practice and education
- ✓ Non-aligned accreditation standards, creating disincentives
- ✓ Mismatch with what transforming health care sector actually needs (e.g., diversity, primary care, teams, distribution)

What is the National Center working on?

Advance: Research, measurement, evidence

- Scoping Review and literature
- Courageous Conversations
- Measurement Instruments
- InSITE Tool
- Innovations Incubator Network
- National Center Data Repository
- Nexus Learning System

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Browse nearly 500 articles about interprofessional education and collaborative practice

The National Center Literature Compendium includes full citations and access through PubMed, and is organized by article content, country of study, healthcare system, methods, number of professions involved, sample size and study setting.

What happens when practice and education leaders talk about the Nexus?

There is a growing recognition of the need to:

1. Connect education and practice in vision, leadership, structure, and 'on the ground' practice.
2. Provide credible evidence for education and practice models and pathways that affect Triple Aim outcomes.
3. Support IPECP leaders and advocates with a shared vision at local and national levels who will focus on transforming systems.
4. Improve IPECP training and clinical experiences to prepare future and current health professionals.

Based on Courageous Conversations, funded by Robert Wood Johnson Foundation, 2013-2014.

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Measurement Instruments

The National Center is now offering online access to a collection of instruments used for interprofessional education and collaborative practice (IPECP) research.

Browse the curated collection in our Resource Exchange to learn about—and in many cases, access or download—these tools.

At a glance: National Center measurement instrument collection process

- Began with [2012 Canadian Interprofessional Health Collaborative \(CIHC\) report](#) on 128 IPECP instruments
- Narrowed search to include instruments that were readily available for viewing or used in at least two separate projects leading to reports in refereed journal
- Eliminated instruments that did not fully focus on IPECP and added a nationally standardized patient satisfaction instrument
- Resulted in 26 instruments for initial inclusion in the special curated collection, most of which may be directly accessed from this website

Summary of Measurement Instruments by Outcome

Displaying 1 - 31 of 31

Attitudes

[AHPQ: Attitudes to Health Professional Questionnaire ©](#)[ATHCT: Attitudes Toward Health Care Teams Scale](#)[ELIQ: Entry Level Interprofessional Questionnaire](#)[GRPQ: General Role Perception Questionnaire](#)[HTVI: Healthcare Team Vitality Instrument](#)[IEPS: Interdisciplinary Education Perception Scale](#)

Links

- » [Submit an instrument](#)
- » [Read National Center Director Barbara Brandt's introduction to this resource](#)
- » [Learn about our selection process from Senior Evaluation Advisor Jean King](#)

We want to hear from you.

- » [Leave feedback](#)



Measurement...



Skype



Presentations



WMPEI 9.14 - ...



June 20 HRSA...



Research slid...

4:08 PM
9/18/2014

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InSITE Evaluation Instrument Survey

[View this email in your browser](#)

Seeking volunteers for measurement instrument validation

Because you have recently participated in a National Center for Interprofessional Practice and Education activity or have been referred by somebody who has, you are receiving this request to volunteer to help with the validation of a measurement instrument for interprofessional education for collaborative practice.

About the Instrument:

Becoming a better interprofessional learning organization

The Interprofessional Education Site Evaluation (InSITE) tool was developed by an interprofessional team of health professionals funded by the University of Minnesota Academic Health Center Office of Education, administrative home of the National Center. InSITE is intended for teams of clinicians to use to self-assess and develop their own clinical practices to support interprofessional learning for current and future health professionals. One goal is to assist in workforce development by creating teams that educate the future generation of health professions to be "collaboration-ready" for practice.



Skype



Presentations



WMPEI 9.14 - ...



June 20 HRSA...



Research slid...

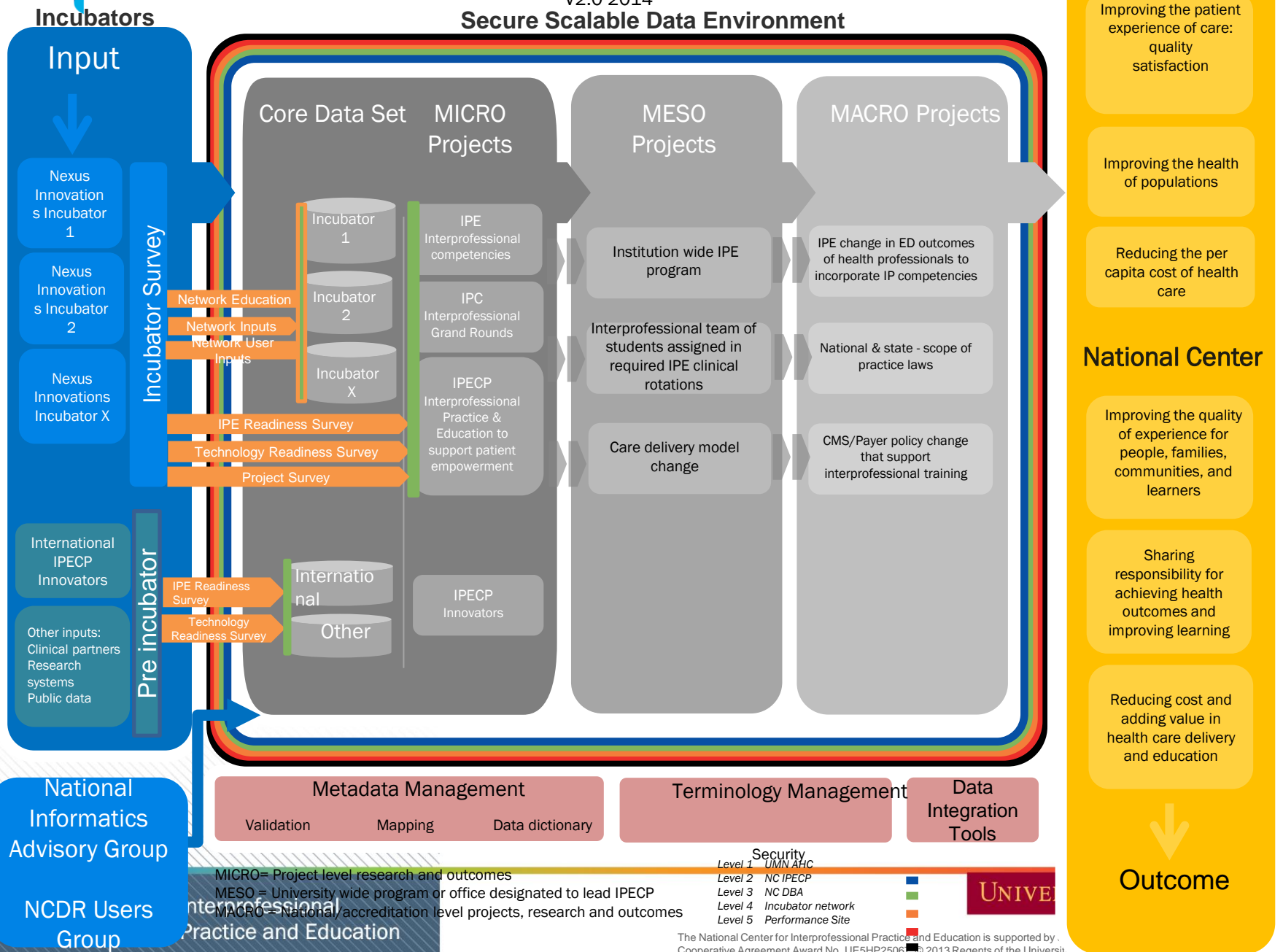
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National Center Data Repository (NCDR)

V2.0 2014

Secure Scalable Data Environment



Questions we need to answer

Does interprofessional education and collaborative practice...

- **Improve the Health Outcomes (Triple Aim) on an individual and population level?**
- Result in improvement in educational outcomes?
- **Identify ecological - environmental factors essential for achieving Health Outcomes (Triple Aim)?**
- Identify factors essential for sustainability of the transformation of the process of care?
- **Identify changes needed in policy, accreditation, credentialing and licensing?**
- Establish the causal connection between Health Outcomes (Triple Aim), education and collaborative practice?

Anatomy of an incubator

- ✓ Integrating clinical practice and education
- ✓ An intervention to impact the Triple Aim (cost, quality and population health)
- ✓ Interprofessional team involving students / residents
- ✓ Report on particular ecology
- ✓ Shared resource model
- ✓ Sign agreements
- ✓ National conversation for problem-solving, sharing resources
- ✓ Scalability
- ✓ Transportability to other environments

Preliminary incubator findings

1. Sites are having difficulty calculating the costs of their interprofessional projects.
2. Necessary people on the ground may not know each other.
3. Executive leadership is a critical success factor.
4. Wide variation in types of interprofessional curriculum and support exists.
5. The definition of “team” is highly variable.
6. The engagement of patients, families and communities is minimal.
7. Public health professionals generally not involved at team level.
8. Policy and governance at all levels (institutional, state, national) can support or hinder transformation.

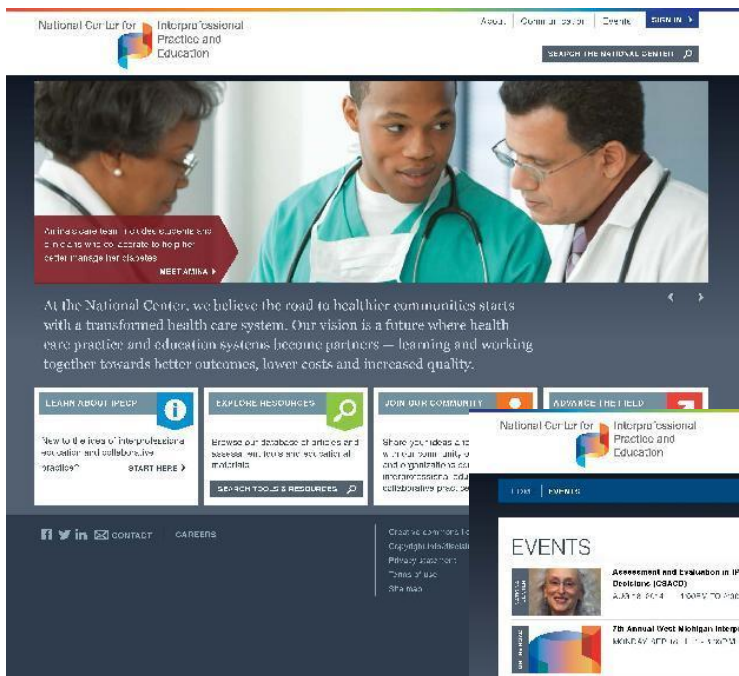
Tools and Training

Nexus Learning System

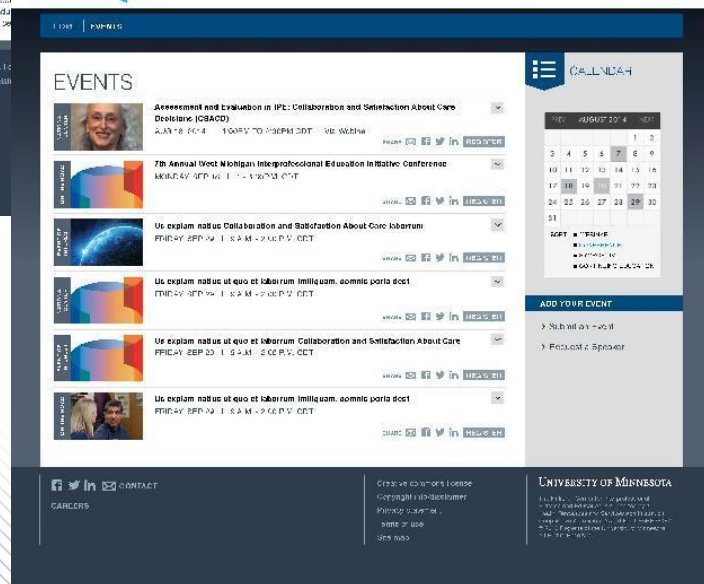
Regional Meetings

Webinars

Coming in early 2015



Note: Designs are illustrative of the approach, but not final.



Online Community Moderators

A team of recognized IPECP leaders with diverse backgrounds, extensive experience and informed opinions will:

- Review and comment on materials in the Resource Exchange, giving context for understanding and recommendations for use
- Recommend additional content to add to the collection
- Encourage other community members to contribute innovative ideas
- Facilitate collaboration by connecting members with helpful information, useful tools and potential partners

Join the Conversation

- Join our community of individuals and organizations passionate about interprofessional education and collaborative practice:
 - Create a profile on the Resource Exchange
 - Upload or link to your interprofessional resources
 - Comment on existing resources
 - Register for our newsletter (and submit content!)
 - Attend an event
 - Interact with us on Twitter (@nexusipe)

We want to hear from you!

Let's Talk About Sustainability

Macy 2013 Report Recommendation:

Align existing resources to establish and sustain linkage between interprofessional education and collaborative practice.

Josiah Macy, Jr. Foundation. Transforming Health Care: Aligning Interprofessional Education with Clinical Practice Redesign, 2013.