Welcome and Introduction

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Featured Speakers

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Practical Steps to Address IPECP Implementation Challenges: The Loyola Experience

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Objectives

I. Understand the Loyola model for interprofessional transformation at clinical practices

II. Outline tips for managing challenges, human resources and system dynamics during IPECP implementation

III. Consider opportunities for applying the Loyola IPECP model at other institutions and using partnerships to maximize its success

IV. Showcase how National Center resources can be used to support IPECP transformation
I-Care Path Grant* (HRSA)

Create a patient-centered, nurse-led interprofessional model of care at a Family Medicine Clinic and a School Based Health Center; and include IPECP experiences for interprofessional students.

*Interprofessional Collaborative Redesign and Evaluation for Population Access to Health. The I-Care Path project is supported by a Health Resources and Services Administration Cooperative Agreement Award No. UD7HP26040: LOYOLA UNIVERSITY.
Challenges & Solutions

I. Priming the Pump: Building Partners for Grant Submission

II. Calibrating the Organizational Structure and Culture for Implementation

III. Calibrating the Clinical Structure and Culture for Empowerment

IV. Information Systems and Organizational Fog

V. Outcomes$^3$
I. Priming the Pump: Building Partners for Grant Submission

• 15-Year History of Collaboration
  • Began with Nursing, Family Medicine & Bioethics
  • Proviso East High-School Based Clinic in Local Community
  • Bioethics – Innovations in Leadership
• Broaden Partnerships
• Multiple Projects Clinical, Curricular, Grants
• Interprofessional Leadership Committee
• Institute for Transformative Interprofessional Education
• HRSA Grant: I-Care Path
I. Priming the Pump: Building Partners for Grant Submission

Selling the Dream

- Before Grant Submission
- After Grant Award
  - Health System
  - University
  - Clinics
II. Calibrating the Organizational Structure and Culture for Implementation
II. Calibrating the Organizational Structure and Culture for Implementation
III. Calibrating the Clinical Structure and Culture for Empowerment

Overarching Goals

• Transformation of the Health Care Team
• Creating Infrastructure for Success
• Health Care Provider Development for IPECP
• Illumination
• Development of Tools
• Organizational Structure
III. Calibrating the Clinical Structure and Culture for Empowerment

Redesign FM  \(\xrightarrow{\text{I-CARE-PATH Team}}\)  Redesign SBHC/Community
III. Calibrating the Clinical Structure and Culture for Empowerment

Hire: NPS, SW, Dietician

Interprofessional Team Training of Providers and Students

Continuous Monitoring, Participation, and Feedback; Revision
Training

Sakai
Team Training Videos
Poverty Simulation
Current Structure: Getting the Work Done!

Monthly: Grant Management

Weekly Work Groups

Monthly: Care Coordination Team

Monthly: Full Staff Meetings
Current Structure: Getting the Work Done!

Monthly: Grant Management

Grant Management Team Leaders In:

- Food and Nutrition
- Health System Administration
- Nurse Practitioner Leaders
- Family Medicine
- Research and Evaluation Specialists
- Expert in Ambulatory Care
- Senior Clinical Analyst
Monthly:
Full Staff Meetings
Weekly Work Group: Care Coordinator Team
IV. Information Systems and Organizational Fog

What data? Where is it? Who can access it?

Return data to team for decision making?

Patient Centered Medical Home
V. Outcomes

- Population Metrics
- Staff/Provider Response
- Health System Response
- Health Promotion to Meet Community Needs
- Patient Response
A Patient’s Perspective

Meets with her dietician, nurse, and APN
Join the IPECP Community

Create a profile
www.nexusipe.org

Add a resource
www.nexusipe.org/resource-exchange

Start a conversation
www.nexusipe.org/forum

Go social
www.twitter.com/nexusipe