

# Making Interprofessional Practice “Real”: Developing Student Experiences in Rural Settings to Align Practice and Education

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- 1) Sign the session attendance roster.
- 2) Complete the session evaluation.

# Acknowledgements

- Funding from the Josiah Macy, Jr. Foundation
- Support from the National Center for Interprofessional Practice and Education
- Preceptors and staff in the Interprofessional Teaching Clinic in the Dept. of Family Medicine at KUMC
- Preceptors and staff at Ashley Clinic, CHC SEK, and Mercy Clinic
- KUMC Center for Interprofessional Education and Simulation

# Objectives

- Verbalize the concepts of interprofessional practice and education.
- Describe the unique advantages and challenges of interprofessional practice and education in rural communities.
- Identify strategies to promote collaboration between academic institutions and health care organizations to enhance student experiences in rural settings.
- Find resources about interprofessional education and practice applicable to preceptors and practice sites.



# The Journey to Interprofessional Education...



# We Need to be Here...In the “Real” World!



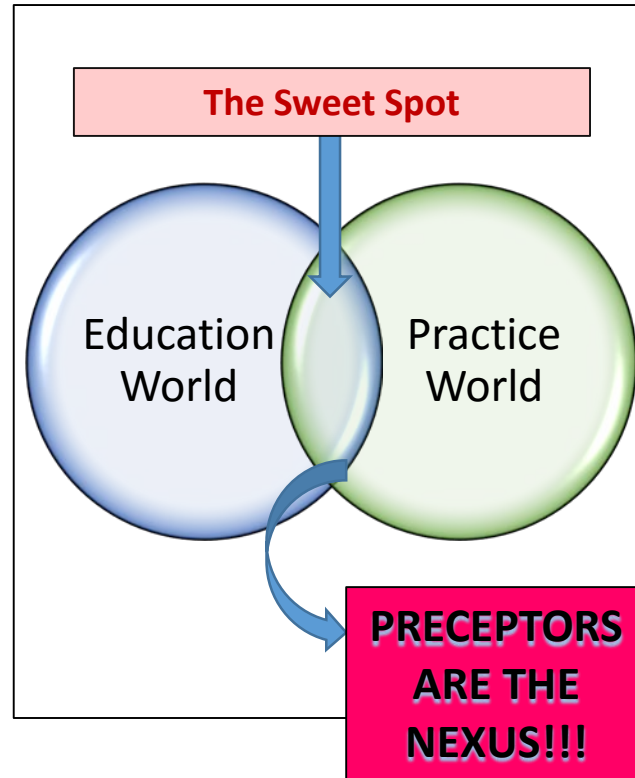




# Vision for Interprofessional Learning *IN* Practice

- Preceptors and staff **ROLE MODEL** interprofessional collaboration on a daily basis.
- Learners are **VALUE-ADDED** for interprofessional collaboration.
  - Contribute to achievement of the Quadruple Aim= Bring the joy back to practice
  - Education can drive practice transformation
- Create **INTENTIONAL** and **EXPLICIT** interprofessional opportunities for learners.

# Interprofessional Learning *IN* Practice





Cahn P, Bzowickyj A, Collins L, et al. A design thinking approach to evaluating interprofessional education. *J of Interprof Care* 2016; 30: 378-80.

# Our Journey

## **Interprofessional Practice Experience at KUMC**

Started August 2011

Prototypical Model



## **Preceptors In the Nexus Toolkit**

Available at [www.nexusipe.org](http://www.nexusipe.org)

Resources for Free



## **Interprofessional Practice Experience at Rural Sites**

3 Sites in SE Kansas

Pilot Fall 2015 and Spring 2016  
Sustained and Growing AY16-17

# Interprofessional Practice Experience at KUMC

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Med, Pharm, Psych	Med, Nursing, Pharm, Psych	Dietetics, Med, Nursing, Psych	Med, Pharm, Psych	Med, Pharm, Psych, PT
Afternoon	NONE	IPE Curriculum	Med, OT, Pharm, Psych	NONE	NONE

Intentional IP Practice + Explicit IP Education

# Breaking the Silos Down in Practice



**Different from the  
Status Quo**



**Shared Leadership**  
**Team Huddles**  
**Alternative Presentation Styles**  
**Patient Partnership**  
**Transparency**  
**Reflection on Team Process**



**Innovational vs.  
Traditional**

# https://nexusipe.org/engaging/learning-system/preceptors-nexus-toolkit

The screenshot shows a web browser window with the URL <https://test.nexusipe.org/ku-preceptor>. The page is titled "Preceptors in the Nexus Toolkit" and is part of the National Center for Interprofessional Practice and Education website. The page content includes a navigation sidebar, a search bar, and several sections of text and a diagram.

**National Center for Interprofessional Practice and Education**

Home

## Preceptors in the Nexus Toolkit

Ready to transform your clinical site into an interprofessional collaborative care and training site?

### What you'll get from this toolkit

A wide array of tools that support and enrich interprofessional practice to enhance patient care and professional development opportunities for clinical preceptors' facilitating interprofessional teams of learners. You can use any or all of the tools in a variety of settings- everything is customizable! The tools are available in a variety of formats:

- web-based modules for preceptor development.
- active-learning materials and facilitator guides for face-to-face workshops for preceptor development.
- interprofessional education materials to be used with learners to enhance their practice experiences.
- interprofessional collaborative practice materials and other resources being used across the country.

### Who this toolkit is for

This toolkit will help preceptors in any healthcare profession who wish to precept interprofessional learners and/or champion interprofessional practice and education at their clinical site.

**Get started with interprofessional precepting**

Build a foundation of knowledge and skills in precepting interprofessional learners, facilitating interprofessional discussions, and enhancing interprofessional practice and education at your site.

- Complete one or all of the short and self-paced online modules.
- Consider using these alone or as part of a group activity.

**Provide effective interprofessional education experiences for learners**

Already have a good foundation in interprofessional collaborative practice? Do you want tools and techniques for educating interprofessional learners on their clinical rotations?

**Become an interprofessional practice and education champion at your clinical site**

Already have a good foundation in interprofessional education? Do you want to learn strategies to promote and enhance interprofessional collaborative care at your clinical site?

The diagram shows a flow from the top box to two bottom boxes, with a double-headed arrow between the bottom boxes, indicating a relationship between the two paths.

## Preceptor as Learner

ONLINE MODULES	GROUP LEARNING MATERIALS
An Introduction to Interprofessional Collaboration	Madness to Methods
Facilitating Interprofessional Discussions: Best Practices	Role Play Cards
Interprofessional Precepting: Best Practices	Objective Structured Teaching Experience (OSTE)
Enhancing Interprofessional Practice and Education at Your Site	Madness to Methods



## Preceptor as Interprofessional Educator

EDUCATIONAL TOOLS
Interprofessional Crucial Conversations/Conflict Resolution
Interprofessional Agents of Change
Interprofessional Team Evaluation
Interprofessional Journal/Book Club
Interprofessional Pandora's Box
Interprofessional Standardized Patient Simulation
Interprofessional Quality Improvement
Interprofessional Debriefing Guides

## Preceptor as Interprofessional Champion

PRACTICE TRANSFORMATION TOOLS
Interprofessional Group Visit and Home Visit Guides
National Models and Resources for Interprofessional Practice Transformation



A "Guided Tour" Webinar Available at <https://nexusipe.org/resource-exchange/kansas-preceptor-toolkit-webinar>



# IP Precepting Best Practices




Interprofessional Precepting Best Practices - Google Chrome  
healtheducation.umn.edu/precepting/

Interprofessional Precepting Best Practices


Intro IP Precepting Models 12 Tips My Plan

Uncertain about how to best precept learners from multiple professions?

Learn how to implement best practices for interprofessional precepting and make a plan for your next group of learners.

*Begin!*



# Five iOSTE Scenarios

Coaching and debriefing throughout

1. **facilitate a small group** of IP students, even in the face of reluctant and disruptive behavior
2. **precept an IP student team**, even when the team is dysfunctional and dominated by one voice
3. **evaluate an IP student team**'s communication and patient care, offering up difficult and timely feedback
4. **precept an IP student team** “with and in front of the patient”, even when the team is used to the more traditional style of patient presentations
5. **co-precept an IP student team**, discussing the patient and teaching with preceptors from other professions

# Enhancing and Aligning Interprofessional Practice and Education

...what's the  
big deal...we  
already do  
this?

We have nurses,  
pharmacists, PAs,  
and Social Work  
in our clinic....I  
send in referrals  
to PT all the time

We already have  
different students  
rotating in our  
clinic/unit...

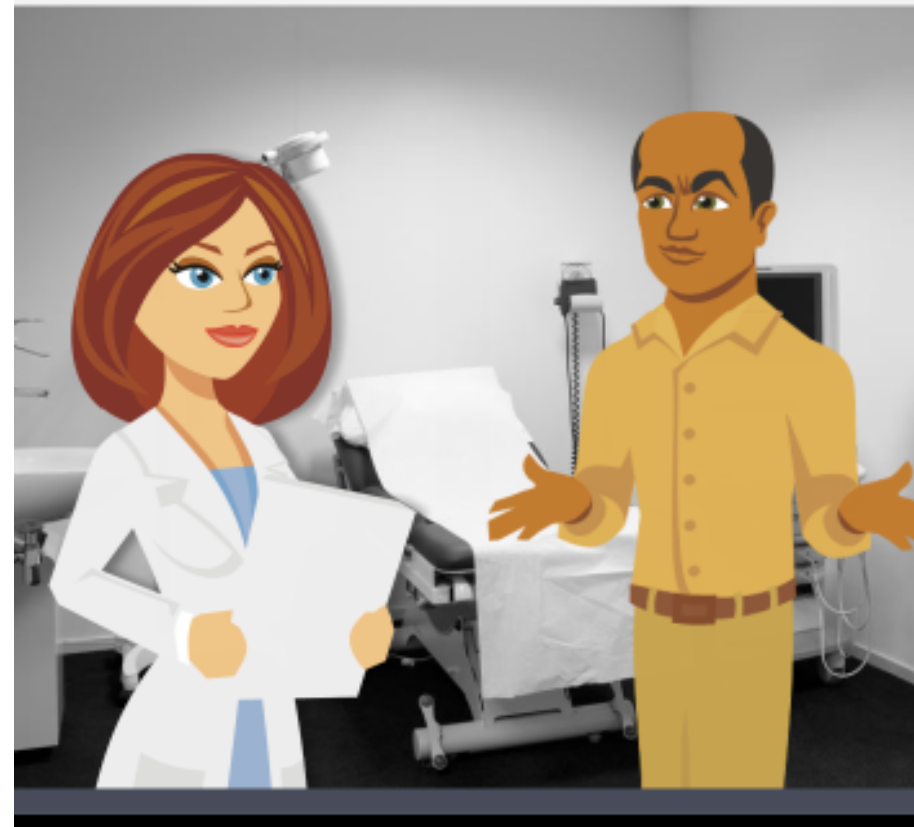
# Huddle and Discuss...

- Huddle up and form a small group
- Consider 2 scenarios and determine how to
  - (1) enhance interprofessional collaboration
  - (2) integrate IP learners to be value-added for the patient, preceptor(s), and clinic
- 5 minutes to discuss and 5 minutes to report out

- You are developing this practice site and preceptors...

- What suggestions do you have for enhancing interprofessional collaborative practice?
- How would you include interprofessional learners?

A primary care provider sees a patient for many chronic diseases, including major anxiety and depression, which appear worse today. The patient has many issues related to social determinants of health. He is frequently in the emergency department for chronic diseases, mostly due to non-adherence to medications. The provider writes a prescription for an increased dose of his antidepressant.

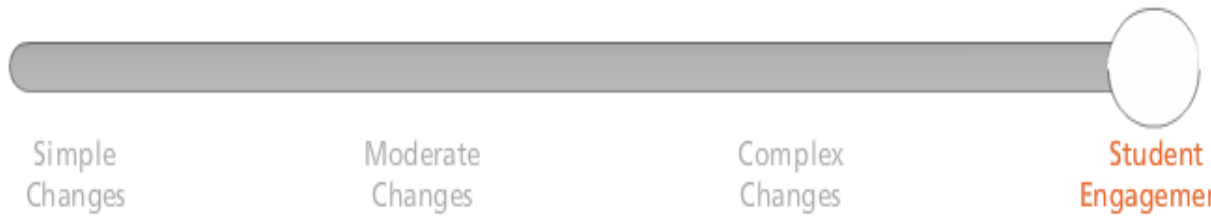


# Interprofessional Teams in Practice: Scenario 5: Patient with Mental Health Needs

A primary care provider sees a patient for many chronic diseases, including major anxiety and depression, which appear worse today. The patient has many issues related to social determinants of health. He is frequently in the emergency department for chronic diseases, mostly due to non-adherence to medications. The provider writes a prescription for an increased dose of his antidepressant.



Move the slider to explore ways to enhance interprofessional collaboration in this situation through simple, moderate, and complex changes to process of care. Consider also, the value of engaging students.



The interprofessional student team initiates and completes a rapid cycle quality improvement project in the primary care clinic with the aim of universal annual screening for depression for all patients. In addition, the interprofessional student team makes home visits to patients with depression and social isolation to better assess their physical and environmental conditions, and to develop a plan to enhance adherence and quality of life.

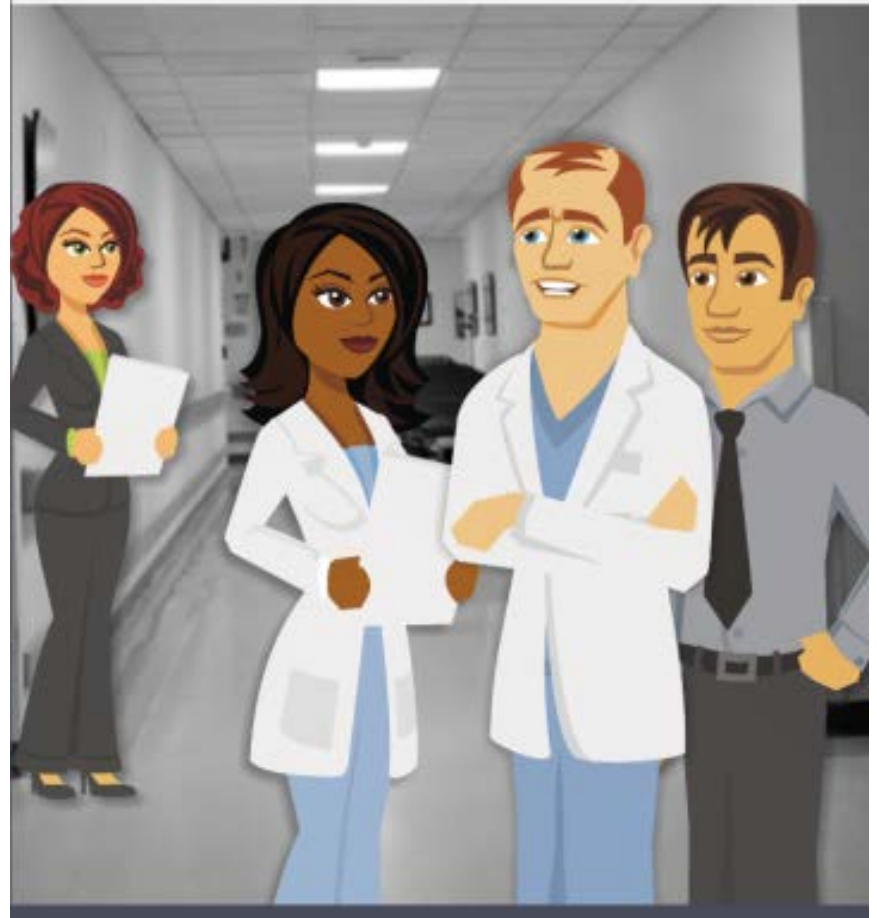
Previous Scenario

Next Scenario

- You are developing this practice site and preceptors...

- What suggestions do you have for enhancing interprofessional collaborative practice?
- How would you include interprofessional learners?

Outside of a patient's room, an attending physician stands in the center of a group that includes a medical student, medical resident, and pharmacist. The pharmacist is off to the side and does not say much. The attending does most of the talking.



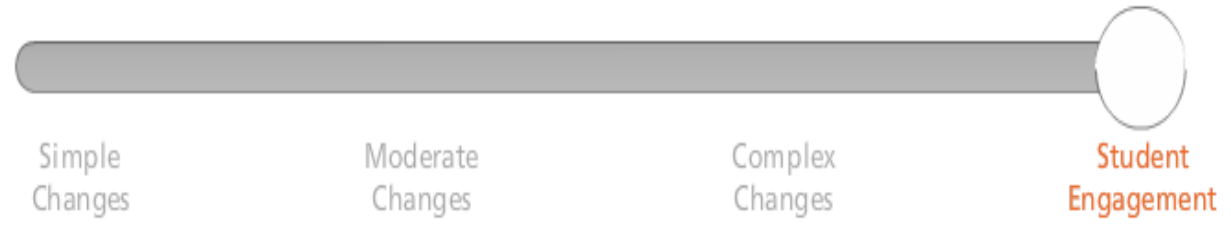


# Interprofessional Teams in Practice: Scenario 7: Physician-Centered Rounds

Outside of a patient's room, an attending physician stands in the center of a group that includes a medical student, medical resident, and pharmacist. The pharmacist is off to the side and does not say much. The attending does most of the talking.



Move the slider to explore ways to enhance interprofessional collaboration in this situation through simple, moderate, and complex changes to process of care. Consider also, the value of engaging students.



Include the interprofessional student team on daily rounds and have them present their recommendations in front of the patient. Consider alternating students from each profession to lead the presentation. Doing so will send an implicit message about flattening hierarchies and role model good interprofessional collaborative teamwork.

Previous Scenario

Next Scenario



# Expansion of Model to Rural Kansas





# Rural-specific challenges to IPECP

- Limited exposure of preceptors and staff to IPECP
- Availability of preceptors
  - Ever increasing productivity pressures
  - Many preceptors face less control of their own schedules
- Availability of healthcare professionals to collaborate with
  - Community-resources limited
  - Payment models for rural clinics present challenges
- General student challenges
  - Student engagement
  - Housing
  - Space within clinic
- Organizational challenges
  - Coordinating learners schedules, limited communication with the colleges

# How Did We Engage Preceptors and Sites?

- Continuing education credit for professional development activities
- Enhanced innovative team-based care and medical home models at your site
- Implementation and training of TeamSTEPPS®
- Students help with practice-efficiencies and value-added work (QI projects, home visits, chronic case management, PA requests, call-backs, etc.)
- Recruitment tool to enhance primary care workforce needs throughout Kansas
- Small compensation for pilot sites for completing assessments for first year (none thereafter)

# Process for Implementation

- Step 1: Identify sites, observe, and needs assessment
- Step 2: Develop preceptors and clinical staff
- Step 3: Intentionally bring student teams together at the site for IPECP
- Step 4: Assessment of preceptors, staff, students, and patients
- Step 5: Reflections and next steps
- Step 6: Sustainability

# Step 1: Identify sites, Observe, Needs Assessment

- Accreditation standards for rotation supervision
- Rotation requirements and needs
- Sites in physical location (possibility of “match-making”)
- Utilized learners from other universities in the region
- Housing
- Utilized AHEC and Office of Rural Medical Education

# Step 1: Identify Sites, Observe, Needs Assessment

- Needs assessment
- Utilized uniprofessional students already at the sites for data and observations at baseline
  - Clinical Site Inventory and Narrative Report
  - IOPPS survey considering interprofessional opportunities

# Step 2: Preceptor Development

- Preceptors and staff (IPECP introduction, IP precepting, IP practice transformation, TeamSTEPPS®) BEFORE the interprofessional clinical experience occurred
- 4 hours of training
  - Content from modules and group activities from Preceptors in the Nexus toolkit
  - TeamSTEPPS®
- 2 additional hours of follow-up training
  - Refreshers
  - InSITE tool
- Invited EVERYONE at the sites
  - CE and food were incentives

# Step 3: Develop Experiential Learning at Sites

- Current alignment only two weeks, intentional alignment this year 4 weeks

	Preceptor	Half-Days
Primary care visits	Physician PA or NP	1 half-day 1 half-day
Non-traditional clinician visits	Diabetes Educator Pharmacist Psychologist	1 half-day
Non-traditional visit type	Nurse or Physician	1 half-day
IPE curriculum: Reflection and Debriefing	Rotating Preceptor	2 hours



# Step 4: Assessment

		Assessment Description
I	Reaction/Satisfaction	Satisfaction survey to preceptors/clinicians (post) Satisfaction survey to students (post)
IIa	Modification of Perceptions	Attitudes Toward Healthcare Team Scale (Pre/Post)
IIb	Acquisition of Knowledge and Skills	ACE-15 tool to assess 'teamness' (Pre/Post)
III	Behavioral Change	Clinical Site Inventory (Pre/Post) IOPPS Interprofessional Opportunities (Pre/Post) Focus Groups of Faculty Preceptors and Students (post)
IVa	Benefits to Service Delivery	Clinical Site Inventory (Pre/Post) IOPPS Interprofessional Opportunities (Pre/Post) Focus Groups of Faculty Preceptors and Students (post)
IVb	Benefits to Patients	Patient Focus Groups

# Benefits to Service Delivery and Patients

- Evidence of the IP Practice Experience driving practice transformation emerged at the sites
  - Incorporation of team huddles into the daily work flow
  - Increased collaboration with the pharmacist for patient care visits (as opposed to the dispensing role they were already providing)
  - Centralized coordinator of students to improve opportunities for intentional collaboration
- Patients valued the increased time spent by the IP student team in the visit
  - Discovery of social factors that impacted health
  - Improved medication history and education
  - Tracking down information from three different sites/systems that led to better coordination of care

# Step 5 and 6: Reflections, Next Steps, Sustainability

- Interchangeable preceptors highly valuable for students
- Students value the experience of INTENTIONALLY working together to develop care plans with patients
- Time for debriefing and reflection with the students about IPECP critically important
- Collaborate with regional universities
- Mindful of students being value-added vs. burden
- Customize to clinic and patient population needs
- Market “what’s in it for them” to participating sites

# Step 5 and 6: Reflections, Next Steps, Sustainability

- Most administrators, preceptors, and clinical staff do not understand the concept and importance of aligning IPECP
- Preceptor/staff development on all concepts related to IPECP is necessary, but time for participation is a constant challenge
- Assessment of site culture, including the existence of hierarchical behaviors and physician-centered attitudes is important, and careful consideration of assigning interprofessional students to those sites

# Step 5 and 6: Reflections, Next Steps, Sustainability

- Education to patients about the benefits of interprofessional team-based care delivery is needed as primary care continues to evolve
- Continued professional development about interprofessional collaborative practice is important for clinical staff (that are not directly precepting interprofessional students) because they are role models and are an important factor for success
- Finding a balance between the interprofessional team-based care provided by students and the time/schedule/fee-for-service payments is extremely important for wide-spread adoption of the interprofessional *Learning IN Practice* model

# Step 5 and 6: Reflections, Next Steps, Sustainability

- Continuing at all 3 sites (expanding to other sites) this year
- Local IP Preceptor Summit that now is growing into an IP Academic Healthcare Day for wide-spread professional development
- Learning IN Practice Committee formed within KUMC Center for Interprofessional Education and Simulation
  - Database development to identify interprofessional student overlap
  - Messaging and marketing campaign about IPECP to practice community
  - State-wide IPECP summit (initial conversations started)

# 15% Solution Activity

- What is your 15% solution for interprofessional Learning IN Practice (rural or not) at your institution?
  - 5 minutes: INDIVIDUALLY generate a list
  - 5 minutes: Share and consult within a SMALL GROUP

# THANK YOU!

Any Questions or Comments?

Feel free to contact us:

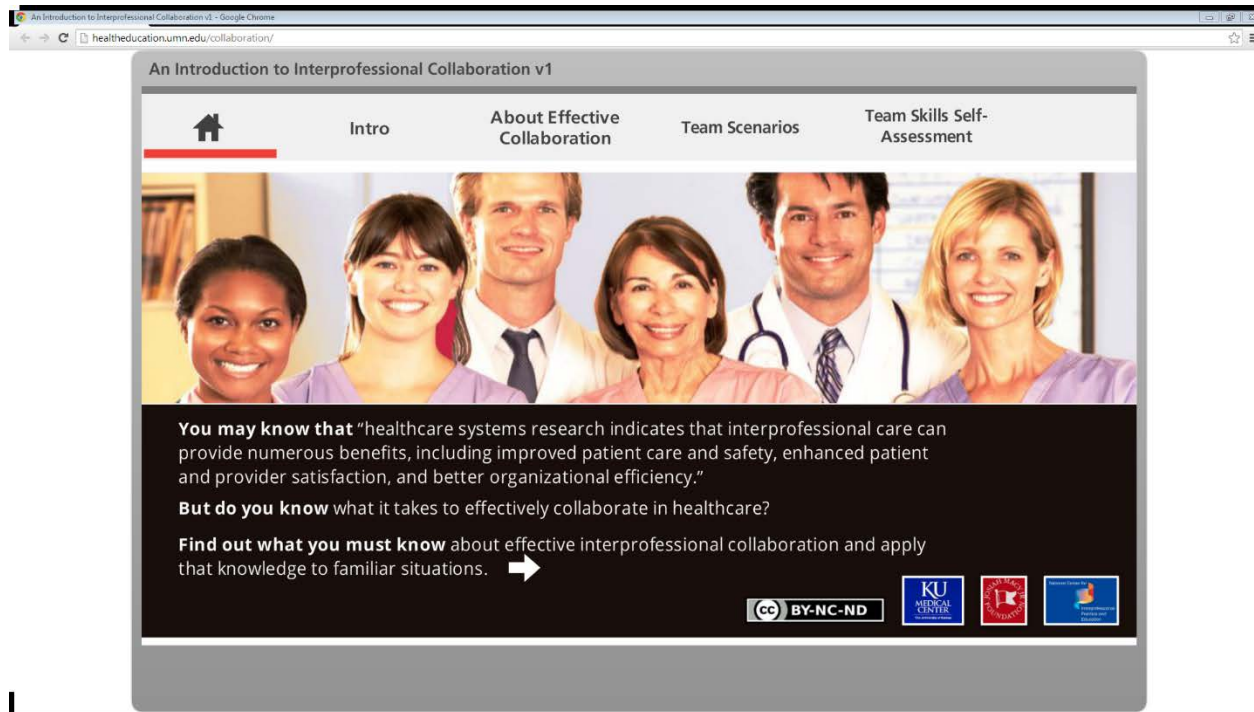
[sshrader2@kumc.edu](mailto:sshrader2@kumc.edu)

[jzaudke@kumc.edu](mailto:jzaudke@kumc.edu)



Extra Slides

# Introduction to IP Collaboration



An Introduction to Interprofessional Collaboration v1

Intro About Effective Collaboration Team Scenarios Team Skills Self-Assessment

**You may know that** “healthcare systems research indicates that interprofessional care can provide numerous benefits, including improved patient care and safety, enhanced patient and provider satisfaction, and better organizational efficiency.”

**But do you know** what it takes to effectively collaborate in healthcare?

**Find out what you must know** about effective interprofessional collaboration and apply that knowledge to familiar situations. →

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# Facilitating IP Discussions: Best Practices for Preceptors

Facilitating Interprofessional Discussions: Best Practices for Preceptors

Successful interprofessional student group facilitation


- Develops supportive learning environments based on trust and accountability
- Increases learner engagement and discovery
- Makes positive changes to healthcare systems and patient outcomes

This module will help prepare you to facilitate supportive and engaging discussions with interprofessional learners.

Let's begin!


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# IP Teams

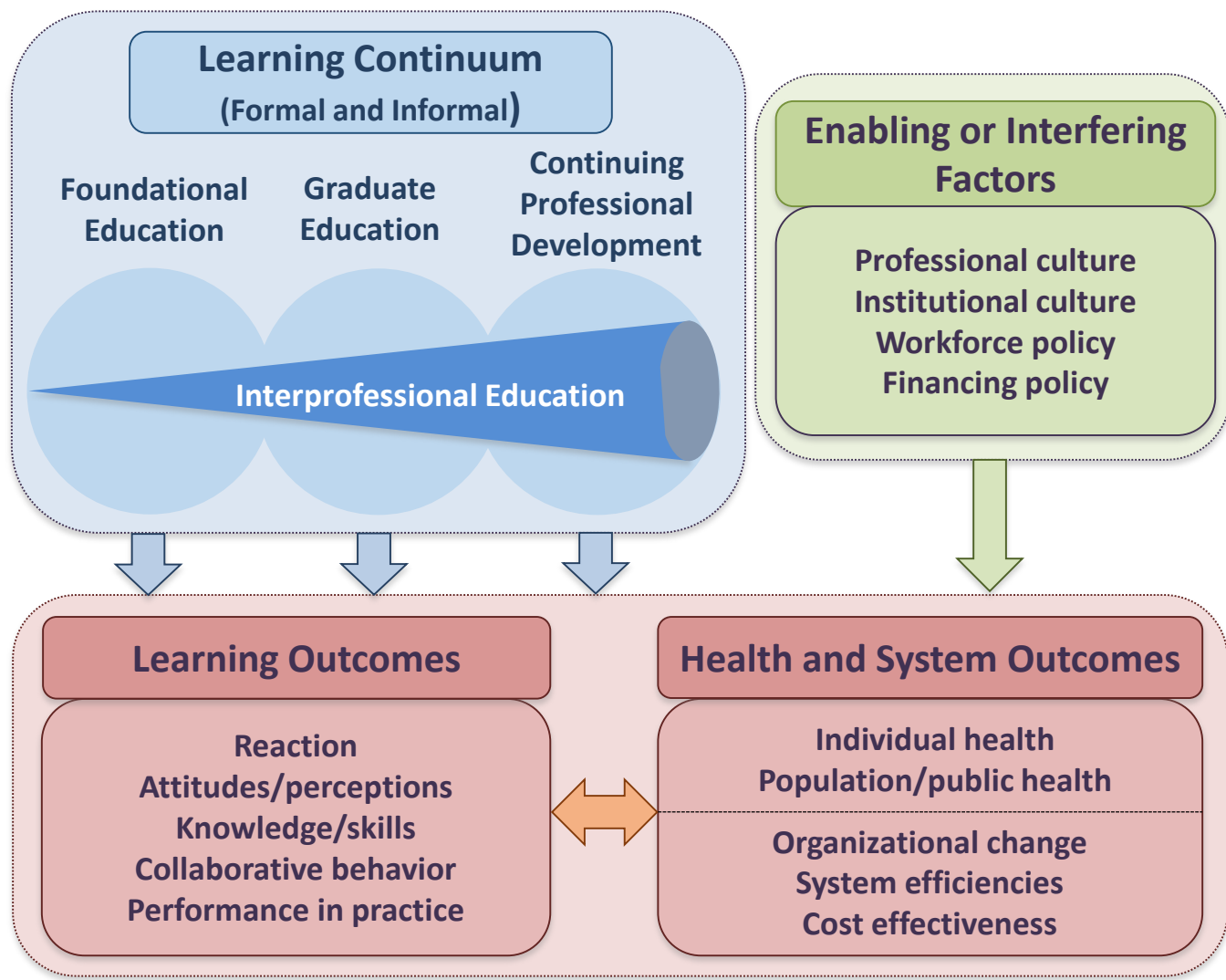
**Interprofessional Teams**  
Introduction | Myth or Fact? | Interprofessional Teams in Practice | Interprofessional Teams Background Info



**Interprofessional team-based care**  
Is your team as effective as it could be?

[Begin](#)





# What Do the Learners Say?

- Evidence extremely limited with graduate and workforce learners
- Evidence from STUDENTS:
  - Survey of IM/FM clerkships 30% or less included IPECP
  - Series of longitudinal studies regarding attitudes about IPECP
    - Initial: favorable
    - Middle: skepticism (while on rotations)
    - 1-year practice: beginning to be favorable again
  - Qualitative study of recent grads on IPE
    - Unanimous value of IPE (best experiences “authentic”)
    - Want more in clinical environment (many “missed opportunities”)