A Newly Formed University Center of Interprofessional Education: Programs and Lessons Learned
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Background
- Deans of two colleges within university initiated discussions and idea
- Reports to Senior Vice President for Academic Affairs
- IOM reports on interdisciplinary care and patient centered care
- Need for educational opportunities to teach interprofessional curricula and teamwork skills
- Partnership of all colleges of TJU and the University Hospital

Mission
To promote excellence in health through interprofessional education and scholarship.

Faculty Needs Assessment
Perceived examples of resources needed for IPE and IPC by faculty respondents on needs assessment
- Strong administrative support
- Motivated students
- Provision of models
- Hearing from experts
- Faculty development in IPE
- Willingness of faculty
- Schedules
- Lack of buy-in or interest by faculty
- Financial support
- Traditional mindset
- Space
- Lack of contact among professions
- Silo approach to education
- Resistance to change

Didactic / Experiential Curriculum
- Health mentor program
- Team care teaching video productions
- Roles of health professions information sheets with video descriptions by Dean/Chair
- Interprofessional geriatric care web-based self study modules

Hospital Collaborative Projects
- Handwashing
- Schwartz rounds

Clinical Simulation Curriculum
- Interprofessional discharge planning team OSCE

Facility Development
- IPE conference/faculty development
- Invited lectures on IPE
- Mini grant program
- Facilitated two “Association of Prevention Teaching and Research” interprofessional projects with faculty from 4 disciplines
- Faculty networking event
- IPE evaluation and research interest monthly groups
- IPE newsletter
- Partner with Geriatric Education Center (EPaD GEC) – summer interprofessional fellowship

Evaluation Resources
- IPE evaluation working group
  - Directors of Jefferson longitudinal surveys
  - Key faculty from medicine, nursing, pharmacy, OT, PT
- Jefferson longitudinal surveys
  - Robust existing surveys tracking Jefferson students from matriculation through their careers

Areas of Evaluation
- Student outcomes
- Faculty outcomes and attitudes
  - Action plans
  - IPE attitudes
- Developing measurable competencies

Model Curriculum:
Program Goals:
- Students will understand the roles of their colleagues
  and be prepared to function as members of effective health care teams
- Students will understand the point of view of individuals with chronic conditions, and be prepared to provide patient- and family- centered care

Program Structure:
- 2 year longitudinal program
- Health mentor teams
  - 3-5 students from 3-4 health education programs
  - A health mentor, community volunteer
- Disciplines involved
  - Medicine, nursing, pharmacy, PT, OT and couples & family therapy
  - Approximately 1,000 students
  - 20+ faculty

Evaluation of Health Mentor Program:
Patient-Centered Care:
- Chronic illness survey
- Perception of health
- Attitudes toward nurse physician collaboration
Team-Based Care:
- IEPS
- RIPLS
- Competencies
- Roles of health professions
- Attitudes toward health care teams
- Qualitative

Next Steps
- Continue refinement of existing curriculum
- Increase IPE programs
- Evaluate impact on health mentors
- Continue to develop a model to assess patient outcomes related to IPE
- Assess the long term impact on practice outcomes and practice choices by students

Lessons Learned
- Scheduling is a major challenge
- Champions (faculty, students, and administration, health mentors) are key
- Curricula is dynamic and ever changing
- Student and faculty evaluation guides the programs

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