



Interprofessional Education

“Students are learning to see each other as people as opposed to the nursing student or the medical student. This has a big impact when they get into the clinical setting: they know that each person is more than their professional label and they are less likely to attribute qualities to individuals based on their role.”

Elena M. Umland, PharmD
Associate Dean for Academic Affairs
Jefferson School of Pharmacy

“Interprofessional education offers a way to prepare students to work together to treat complex patients and improve patient care. IPE can facilitate communication between professionals, promote collaborative teamwork, improve the working culture on a unit or in a department and decrease errors to provide highly beneficial and effective patient care. After graduation, Jefferson students will be ready to work on multidisciplinary healthcare teams to provide interdisciplinary patient-centered care.”

Marcia Levinson, PT, PhD
Faculty, Department of Physical Therapy
Jefferson School of Health Professions



What is Interprofessional Education (IPE)?

Interprofessional education occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes. *World Health Organization, 2010*

What does IPE look like?

Interprofessional education is learning beyond disciplines. It is health professional students learning and working together to help a person with chronic disease. It is professors of medicine, occupational therapy and couple and family therapy teaming up to teach students about end of life decisions. It is team-based training of nursing and radiologic sciences students learning from and about each others' roles while engaging in an ER simulation exercise. The learning occurs in traditional classrooms, simulation settings, clinical arenas and service learning projects. IPE engages faculty/educators, students, working health professionals and staff, and it encourages communication, promotes collaboration, and cultivates

a collaborative practice workforce that fosters person-centered care.

Why is IPE important?

The Institute of Medicine recommends that all health professionals should be educated to deliver patient-centered care as members of an interprofessional team, emphasizing evidence-based practice and quality improvement with the goal of improving the quality of healthcare, including prevention and management of chronic disease.

Jefferson's Commitment to IPE

Thomas Jefferson University is committed to educating professionals to form and lead integrated healthcare delivery and research teams. The University funds and supports the Jefferson Interprofessional Education Center (JCIPE) and the University Clinical Skills and Simulation Center (UCSSC) as two key channels for IPE. The scheduling of classes and activities, allocation of faculty time to interprofessional initiatives, research funding and multiple IPE curricular activities and service learning programs are other examples of Jefferson's commitment.

Jefferson Interprofessional Education Center (JCIPE)

Founded in 2007, JCIPE's mission is to promote excellence in health care through interprofessional education and scholarship. JCIPE is dedicated to improving person-centered, collaborative care by implementing and evaluating interprofessional education activities such as the Patient Safety Symposium, FACT ACE Days' IPE modules and the Health Mentors Program, throughout the University curriculum.

JCIPE also offers Jefferson faculty and staff ongoing opportunities to highlight interprofessionalism.

- **The Interprofessional Education and Care Practicum offers opportunities for faculty and staff participants to plan an interprofessional education or care project with peer and faculty mentor input.**
- **The Writing Workshop guides faculty and staff through the process of writing a manuscript about an interprofessional education or care project for journal publication.**
- **A biennial conference brings together educators, clinicians/practitioners, policy makers and researchers from Canada and the U.S. It features current trends, best practices and advancements in interprofessional education and practice.**



University Clinical Skills and Simulation Center (UCSSC)

The UCSSC, housed in the Dorrance H. Hamilton Building, focuses on developing, implementing and evaluating curricula using simulation to teach clinical skills. The Center features a simulated hospital environment where students learn and practice fundamental skills such as patient history-taking and physical examination. Students often work with standardized patients (actors trained to portray patients), use recorded case studies or practice with equipment or in spaces that resemble actual clinical settings before they enter their fieldwork. Many activities that take place through the UCSSC are interprofessional due to their real-life nature.

UCSSC is accredited by the Society for Simulation in Healthcare (2011) and American College of Surgeons (2009).

Examples of IPE in the Curriculum

Just as healthcare practice shifts to become team-based, interprofessional education involves groups of students from various disciplines – medicine, nursing, pharmacy and health professions. At times, graduate medical trainees (interns, residents, fellows), pastoral care and other students join the mix.

The **Health Mentors Program** (HMP) is a two-year longitudinal interprofessional curriculum that brings together 250 community volunteers and 1200 students each academic year. Students learn firsthand about what matters to patients living with chronic health conditions and/or impairments. They learn how to maintain an environment of mutual respect and shared values. Interprofessional student teams are paired with Health Mentors (community-based volunteers/health consumers) to complete four learning modules over two years. Discussion topics include health and wellness, patient safety and self management support.

HMP is one of three programs featured in the report “Core Competencies for Interprofessional Collaborative Practice,” (2011) produced by the Interprofessional Education Collaborative.

In the **End of Life symposium**, faculty and students from several programs join with hospital interns to practice effective communication using a case study

“Jefferson University is at the forefront of the interprofessional education movement, which is designed to change the culture of health care and reshape the education of health professionals.”

**Michael J. Vergare, MD,
Senior Vice President
Academic Affairs**

“Solutions to the healthcare crisis will not come from politicians but from future and practicing healthcare professionals who know the system intimately, work together as a team and bring their unique expertise and viewpoints to the table. Jefferson offers a unique learning laboratory for this process – by combining the university’s academic resources and the clinical resources from the hospitals and clinical practices – to bring together professionals from diverse fields and backgrounds.”

**David B. Nash, MD, MBA, Dean
Jefferson School of Population Health**

“I use every opportunity I have to tell students how to communicate with a patient: be patient, caring and above all, a good listener. Show compassion. This is what patients need today.”

Susan Moul, Health Mentor

about making end of life decisions for a family member. After studying content throughout the semester, students interact in a final activity involving standardized patients, small group discussions and expert panel presentations.

The **Interdisciplinary Clinical Care Planning** course prepares students for active roles in interprofessional healthcare by placing them in small teams to construct a plan of care for a standardized patient. Students work together over three to four weeks to increase their working knowledge of professional roles and discuss a patient-centered intervention plan. At the culmination of the course, each team presents their plan to a panel of clinicians followed by feedback and discussion.

The **Patient Safety Workshop** focuses on medical errors – analyzing, disclosing and prevention. A standardized patient and spouse participate in this workshop to give students face-to-face practice. Small groups of students do a root cause analysis of the situation and discuss how the “second victim” – the health professional involved in the error – can overcome any feelings of participation guilt.

Student Leadership and Community Service

IPE extends beyond the curriculum. Interprofessional student leadership opportunities include serving as a student representative to the JCIPE Steering

Committee, student leader small group facilitator for Interprofessional Education Small Groups, Health Mentors Program newsletter editor and/or course liaison.

Students from different disciplines often interact in clubs, activities and community service projects. Here are some projects that provide a place for students to collaborate in the real world.

Refugee Health Partners involves outreach to refugees from more than 25 different countries. Students offer patient education, serve as patient health navigators and meet targeted needs such as conducting flu vaccine clinics.

At the **Geriatric Education Center’s Falls Prevention Clinic** students evaluate older patients who have fallen or are at risk of falling. After meeting with patients, the team discusses each case and makes recommendations to share with the patient and their primary healthcare provider.

JeffHope provides dignified, accessible and appropriate health care for a diverse population of underserved and marginalized individuals. Students provide medical clinics and healthcare advocacy to support those living at homeless shelters, identify patient care and health problems, and work together to solve them.

“I think these programs are enlightening for students. They realize there is no category we fit into – whether we’re ‘ancient’ or not ancient, or whatever disease we have. We are individuals, not a category. You can’t go by how someone looks or how they respond to aging. We like to be treated as individuals. If they learn that now it will stay with them.”

Sarah Frischling
Health Mentor



“I joined the medical students when they met with patients at Our Brother’s Place, a homeless shelter, and realized that pharmacists really do work with other healthcare providers and that it’s important to know how to interact.”

Pharmacy Student

Learn More about IPE at Jefferson

JCIPE: jeffline.jefferson.edu/jcipe

UCSSC: www.jefferson.edu/clinical_skills_simulation/