



# JEFFERSON CENTER FOR INTERPROFESSIONAL PRACTICE & EDUCATION

Annual Report 2025



**Thomas Jefferson  
University**

HOME OF SIDNEY KIMMEL MEDICAL COLLEGE

# Table of Contents

About Us . . . . .	3
Mission. . . . .	3
Vision. . . . .	3
Diversity Statement . . . . .	3
Our Team . . . . .	4
Leadership & Staff . . . . .	4
Faculty & Staff Leads . . . . .	4
2025 Impact . . . . .	5
Key Accomplishments in FY25. . . . .	6
Highlighting Perspectives of Community Volunteer Educators . . . . .	7
Building Cross-Institutional Collaborations to Advance IPE & IPCP . . . . .	7
Promoting a Community of Interprofessional Belonging . . . . .	9
Tune In: JCIPE Featured on Podcasts This Year . . . . .	9
National Board Memberships & Fellowships . . . . .	10
Scholarship & Dissemination . . . . .	10
Grant Funding. . . . .	10
Philanthropic Funding. . . . .	10
Programs at a Glance   2024-2025. . . . .	10
Alzheimer’s Virtual Interprofessional Training . . . . .	11
Health Mentors Program . . . . .	12
Interprofessional Palliative Care Program . . . . .	13
Jefferson Student Interprofessional Complex Care Collaborative. . . . .	14
Project Extension for Community Healthcare Outcomes. . . . .	15
Team Care Planning . . . . .	16
Team Microaggression Interventions for Collaborative Outcomes . . . . .	17
Team Simulation & Fearlessness Education. . . . .	18
About Interprofessional Practice & Education . . . . .	19
Definitions. . . . .	19
Competencies . . . . .	19
Interprofessional Collaborative Practice Curriculum Framework . . . . .	19
Stay Connected . . . . .	20

# About Us

Founded in 2007, the **Jefferson Center for Interprofessional Practice & Education (JCIPE)** at Thomas Jefferson University is one of the premier interprofessional education and practice centers in the United States. We are dedicated to improving team-based care and affecting enhanced patient and population health through designing, implementing, and evaluating robust collaborative practice initiatives across Jefferson. With prior support from the AmerisourceBergen Foundation, Health Resources & Services Administration (HRSA), and Josiah Macy Jr. Foundation, as well as philanthropic donors, our team creates a culture of collaborative educational and clinical practice, employing innovative teaching models and evidence-based practices and developing evidence to support and implement collaborative practice. We are well known for our novel curricula; high-level engagement and coordination with students, faculty, clinicians, and institutional leadership; rigorous community partnerships; and commitment to assessment, evaluation, research, and continuous quality improvement.

## MISSION

We improve lives by advancing interprofessional practice & education.

## VISION

Reimagining collaboration in education and care to enhance healthcare delivery & wellness.

## DIVERSITY STATEMENT

The Jefferson Center for Interprofessional Practice & Education (JCIPE) acknowledges systemic discrimination and the barriers that it creates for healthcare, education, and effective team functioning. As such, we are implementing ongoing evaluations of ourselves and programs relative to diversity, equity, and inclusion. We believe that this is an ongoing effort, and that we can continuously grow and do better. It is our intent that students, staff, and faculty from all diverse backgrounds, disciplines, and perspectives feel valued, included, and respected. We believe the diversity that students, staff, and faculty bring is a resource, strength, and benefit. We learn to be better healthcare practitioners and educators when we respect and celebrate diversity in all its forms.

We partner with you to reimagine and build more open, respectful, and inclusive practice and training spaces. We strive to celebrate and amplify diverse voices, including, but not limited to, people of diverse age, disability, culture, ethnicity, gender identity, race, religion, sexuality, socioeconomic status, and profession. With you, we create opportunities for shared discussion and development around dismantling systemic discrimination together as an ongoing process.

*Thanks to those who participated in developing our new mission & vision statements this year to align with the updated Jefferson mission, vision, and values!*



# Our Team

Our work is made possible through the unwavering dedication of numerous interprofessional faculty, staff, stakeholders, community members, and funders who generously contribute their time, expertise, and financial support. We are profoundly grateful to these individuals and to the organizations that have supported our projects over the past year, including the Sandmeyer and Salzman family foundations. Thank you for your continued commitment to advancing patient and population health through interprofessional, team-based education and care.

## Leadership & Staff



**Amber King**  
Co-Director



**Brooke Salzman**  
Co-Director



**Shoshana Sicks**  
Director of Curriculum  
& Administration



**Maria Brucato**  
Director of Assessment,  
Evaluation, & Research



**Julie Liskov**  
Project Manager



**Kerry Baumer**  
Program Coordinator  
(Simulations;  
Pre-Nov. 2024)



**Reena DePaolo**  
Program Coordinator  
(J-SICCC)



**Melicia C. Edmonds**  
Program Coordinator  
(Health Mentors)



**Sydney Garrett**  
Program Coordinator  
(Simulations; Post-  
Feb. 2025)



**Frank Marzullo**  
Program Coordinator  
(ECHO & IP Palliative  
Care)



**Deja Boodram**  
Program Assistant  
(HMP & Virtual Worlds)



**Kenna Hersey**  
Program Assistant  
(J-SICCC, TCP, & Team  
SAFE; Pre-Oct. 2024)



**MC Almodovar**  
Program Assistant  
(J-SICCC, TCP, & Team  
SAFE; Post-Mar. 2025)



**Catherine Mills**  
Administrative  
Assistant

## Faculty & Staff Leads



**Nethra Ankam**  
Health Mentors



**Tracey Vause Earland**  
J-SICCC



**E. Adel Herge**  
Team Care Planning



**Mariana Kuperman**  
J-SICCC



**Jennifer Lacy**  
Team SAFE & Team  
MICRO



**Lauren LaTourette**  
IP Palliative Care



**Anne Mitchell**  
Health Mentors



**Juli Phillips**  
Pedagogy &  
Instructional Design



**Caitlyn Moore**  
IP Palliative Care



**Sara Stainthorpe**  
AVIT



**Susan Toth-Cohen**  
AVIT & PIVOT



**Alyssa Yeager**  
Team SAFE & Team  
MICRO



**Xiao Chi (Tony) Zhang**  
Team SAFE & Team  
MICRO

# 2025 IMPACT



34

CLINICAL SITES



8

COLLEGES



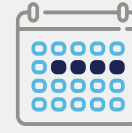
4

CAMPUSES



13

PROGRAMS



390

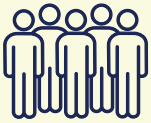
PROGRAM SESSIONS



510

PROGRAM HOURS

## IPE Foundations Course



35

STUDENTS



7

PROFESSIONS



7

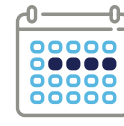
CONSULTATIONS

## Institutional Collaborative Program



1

PROGRAM



5

SESSIONS



10

HOURS

## Learners



2,985  
UNIQUE STUDENT  
LEARNERS

21  
LEARNER  
PROFESSIONS

## Facilitators

130

UNIQUE FACULTY  
FACILITATORS



18

FACILITATOR  
PROFESSIONS

## Student Engagement



11

STUDENTS  
CO-FACILITATING/  
ADVISING PROGRAMS

## Scholarship

25

CONFERENCE  
PRESENTATIONS  
AND WORKSHOPS



3 INVITED TALKS  
AND PANELS

5 PEER-REVIEWED  
PUBLICATIONS



14

RESEARCH AND  
GRADUATE ASSISTANTS

## Community Connection



2

STUDENT SCHOLARLY  
PRESENTATIONS

207

HEALTH MENTORS



6 J-SICCC  
PATIENTS

5 COMMUNITY  
VOICES SPEAKERS

Students  
Ranked IPE

7<sup>th</sup> out of 28

reasons for selecting Thomas Jefferson University:

"Opportunity to learn about, from, and with students in other healthcare professions"

# Key Accomplishments in FY25

## Launching a Certificate of Excellence in Team-Based Practice

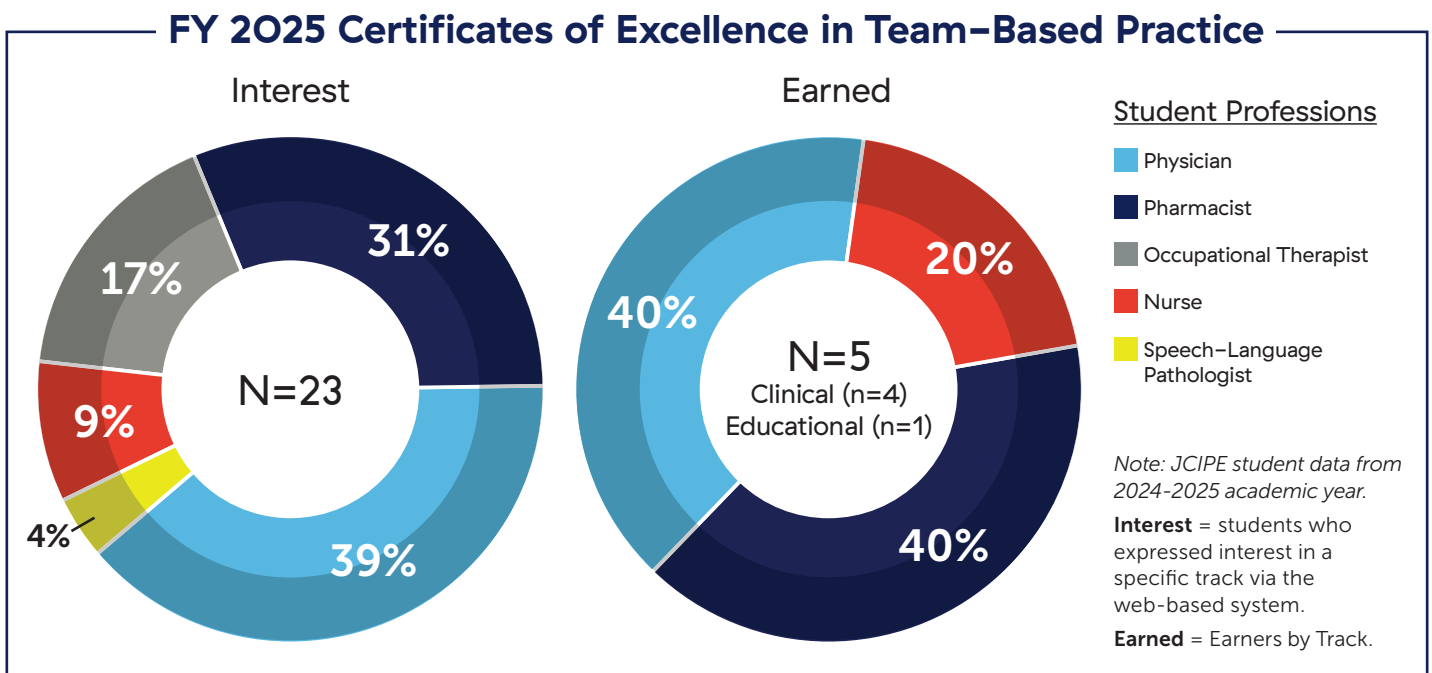
After development in collaboration with the JCIPE Interprofessional Curriculum Committee, our Center officially launched its Certificate of Excellence in Team-Based Practice last year. The certificate offers students across health and social service professions the opportunity to deepen their engagement in IPE during their pre-licensure training through one of three specialized tracks: clinical, education, or scholarship. Each track allows students to tailor their experience based on their interests and career goals by participating in patient-facing programs, co-facilitating or co-developing IPE activities, or contributing to research or service.

With the launch of the certificate, we also introduced a web-based system designed in partnership with the Academic Commons. The platform allows students to notify us of their interest in the certificate, be matched with an advisor to help plan activities, and track progress toward completion. To earn the certificate, students must complete 10–20 hours of approved interprofessional activities, fulfill all track-specific requirements, and submit a final reflection essay. This rigorous, yet flexible structure ensures that students not only meet foundational requirements in IPCP, but also demonstrate meaningful application of IPCP skills in real-world contexts.

In its inaugural year, five students from three professions earned the certificate and were recognized at our annual Recognition Ceremony. 23 students across five health professions also expressed prospective interest (Figure 1). This early engagement reflects a growing awareness of the importance of IPCP and students' interest in additional opportunities to practice applying these skills. For more information about the certificate, visit the [Certificate of Excellence webpage](#).



Student recipients of the Certificate of Excellence in Team-Based Practice recognized at the 2025 JCIPE annual Recognition Ceremony



## Highlighting Perspectives of Community Volunteer Educators

In the summer of 2024, a team at JCIPE conducted focus groups with Health Mentors to learn more about their experiences in the Health Mentors Program and what lessons they strive to impart on students through their participation.

38 Health Mentors across five focus groups recounted stories that they share with students about personal experiences managing chronic conditions, living with disabilities, barriers and facilitators to accessing healthcare, and their interactions with healthcare systems and teams.

The research team presented this work at Collaborating Across Borders IX in Omaha this year, and the research is now published in a special issue of *The Clinical Teacher* on the patient voice in health professional education.

Scan or [click here](#) to find the full research article published in *The Clinical Teacher*



### Insights from Health Mentors: Key Lessons Shared with Students in the Health Mentors Program

"My mother used to take the blue pill and the pink pill and a yellow pill, and when you would ask her, 'What are they for?' Her answer was 'The doctor sent them to me.' She had no clue why she was taking this, and this is something that I've shared with my groups throughout the years - that **not everybody that they will ever encounter, regardless of what their [the students'] profession ends up being, is going to be knowledgeable about what their medication is, when was the last time they had tests done, or what are their symptoms.**"

"I express how important it is for **communication** between the nurse and the doctor and the physical therapist, and all people involved in the program, **so that the patient gets the best care.**"

"I asked them do you know or have experiences or anyone in your life with a **traumatic brain injury?** Chances are most likely with all the students I speak to, they have had no one that they've known or very minimal experience. **I take them through what it had done to me.**"

## Building Cross-Institutional Collaborations to Advance IPE & IPCP

This year, JCIPE expanded its national and international collaborations in an effort to learn about, from, and with our colleagues to advance IPE & IPCP together. These initiatives spanned research and curricular and faculty development—each designed to address shared challenges, promote innovation, and strengthen the collective impact of IPE/IPCP across institutions and contexts. Highlights include:



### Validating the Jefferson Teamwork Observation Guide® (JTOG®) for use across diverse contexts

in collaboration with Oklahoma University Health Sciences (OUHSC)

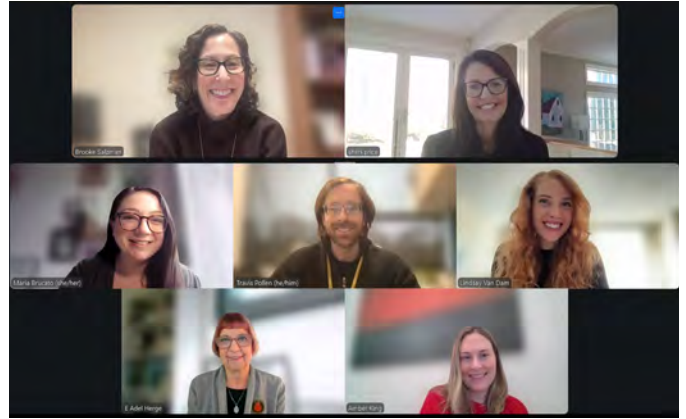
- Multi-institutional research strengthens the IPE/IPCP evidence base and the impact of interventions across diverse settings.
- Using measures that work as intended with various stakeholders across diverse contexts is important for valid group comparisons and to minimize measurement bias in research findings.
- JCIPE and OUHSC's Office of Interdisciplinary Programs partnered in a cross-institutional validation study of the JTOG.
- Findings will inform future research and support consistent evaluation of interprofessional learning outcomes nationwide.

Brucato, M., Robinson, M., Liskov, J., Tabak, K., & Sicks, S. (2024, October). *Navigating complexities of large-scale multi-institutional IPE/CP research: Quantitative assessment of IPEC competencies across diverse groups and contexts* [Seminar presentation]. Nexus Summit 2024, Virtual.



## Investigating the role of IPE in IP identity development in collaboration with Dalhousie University, Canada

- How do health professionals develop an interprofessional (IP) identity to enter the workforce IPCP-ready? What role does IPE play in this process?
- JCIPE is collaborating with IPE/IPCP scholars at Dalhousie University on 2 initiatives to explore these questions:
  1. A scoping review of qualitative studies examining how IPE experiences contribute to IP identity formation.
  2. A longitudinal interview study, replicating in the U.S. a Canadian protocol that tracks identity development from early interprofessional socialization and IPE through clinical practice.
- Together, these projects will inform intentional IPE design to support IP identity formation that fosters effective IPCP.



## Developing a competency framework for IPE facilitation in collaboration with four universities in the U.S. and Canada

- Effective facilitation is essential for high quality learning in IPE. Existing facilitation competency frameworks do not yet account for key skills pertinent to IPE, including knowledge and/or modeling of interprofessional core competencies.
- JCIPE, along with four universities in the U.S. and Canada, are building on existing literature and expert consensus to develop a comprehensive competency framework for effective IPE facilitation.
- Once finalized, the interprofessional, international workgroup will pool, adapt, and develop resources to create a multimedia interprofessional facilitator toolkit.

The framework and toolkit will support institutions in preparing facilitators who can foster inclusive, learner-centered environments that promote interprofessional competencies.



## Planning a summer research institute in IPCP in collaboration with Interprofessional Research.Global (IPR.Global)

- Healthcare professionals should have opportunities for training and mentorship to conduct rigorous IPE/IPCP research to generate evidence for systems and policy change.
- JCIPE collaborated with leaders at IPR.Global in needs assessment and curricular development for the [IPR.Global Summer Research Institute](#).
- The institute will equip practitioners and educators with skills to form research networks and lead impactful research projects to advance IPE/IPCP theory into practice.
- The cross-institutional team secured funding from the Association of Schools Advancing Health Professions to pilot and evaluate the institute in the late summer of 2025.

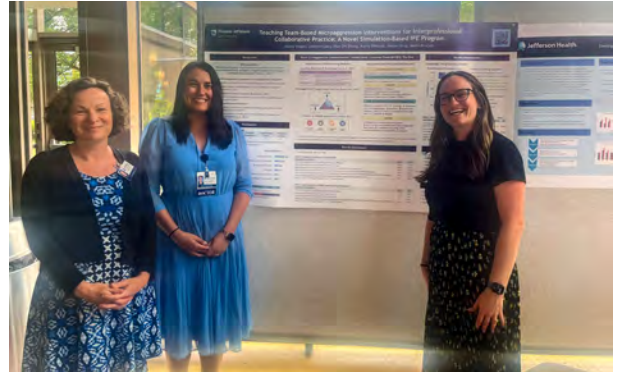
Khalili, H., Slater, C. E., Brucato, M., Gilbert, J. H. V., Zomorodi, M. G., Baugh, G. M., Owens, M., & Coco-Ripp, J. A. (2025, May 29). *Findings from a needs assessment to inform the development of a global IPECP summer research institute* [Oral presentation]. Collaborating Across Borders IX, Omaha, NE.



## Promoting a Community of Interprofessional Belonging

To create effective healthcare teams, it is critical to foster a culture of belonging where all team members feel valued and respected. This year, we spearheaded multiple endeavors to cultivate communities of interprofessional belonging and impart skills to enhance inclusiveness in learning and clinical environments.

Partnering with Bernard Lopez, MD, Associate Provost for Diversity and Inclusion, and building on existing work across the University, we convened a committee representing seven colleges to develop an interprofessional curriculum to prepare health professions students to recognize and address the ways that bias, stereotypes, and structural inequities affect team dynamics, patient care, and health outcomes. The curriculum was launched in fall 2024, bringing together students from nearly 10 health professions and consisting of:



**Foundational & application-level learning**, curated through sharing multimodal introductory content for accessibility across academic programs.



**Scaling JCIPE's Team MICRO & Team Care Planning: Black Maternal Health programs**, reaching new professions and increasing overall enrollment.



**Transformation of uni-professional** didactics and experiential learning activities into interprofessional learning opportunities.



**Faculty and staff development** to support facilitators to be prepared to lead meaningful discussions and debriefing sessions across the spectrum of foundational and experiential offerings.

Ultimately, the curriculum seeks to equip all Jefferson graduates, as well as faculty and staff, with the knowledge, skills, and behaviors needed to foster belonging in healthcare teams, advance equity in healthcare, provide high-quality, respectful care to every patient, and advocate for patients and colleagues in situations involving bias and injustice.

## Tune In: JCIPE Featured on Podcasts This Year



### [The Patient as Teacher: Integrating the Patient Voice into Health Professions Education](#)

*Healthcare Professionalism: Education, Research & Resources Podcast*

Members of the team discuss the rationale for integrating patient voices in IPE, with examples from the Health Mentors Program.



### [Inclusive Approaches to Clinical Care](#)

*Healthcare Communication Podcast*

Co-director Dr. Brooke Salzman discusses various topics related to inclusive approaches to clinical care including connections to IPCP.

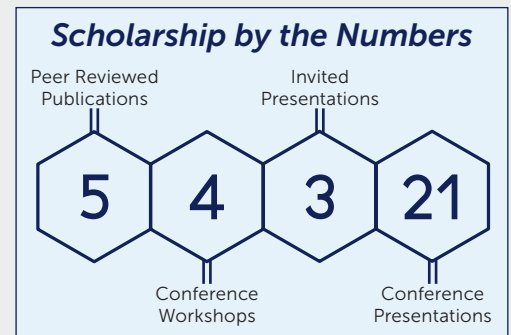
# National Interprofessional Committee Service

ORGANIZATION	INVOLVEMENT	JCIPE TEAM MEMBER
American Interprofessional Health Collaborative (AIHC)	Evidence Collaborative	Maria Brucato
	Leadership Workgroup (co-chair)	Brooke Salzman
	Collaborating Across Borders Networking/Social Committee Membership Committee Awards Sub-Committee (Lead)	Amber King
	Innovating Collaborative	Jennifer Lacy
National Academies of Practice (NAP)	Council (leadership group) Pharmacy Academy (chair) Interprofessional & Organization Committee Forum Planning Committee	Amber King
Interprofessional Research.Global (IPR.Global)	IPR.Global Steering Committee	Maria Brucato

# Scholarship & Dissemination

## Grant Funding

- *Child Adolescent Interprofessional Practice and Education (CAIPE) Fellowship*. Health Resources and Services Administration (HRSA), Behavioral Health Workforce Education and Training, July 2021 – June 2025. Grant total: \$2,000,000. (PI: Jeanne Felter; Co-I: Richard Hass).
- *Jefferson Education and Training: Primary Healthcare in IDD and Language Access*. Health Resources Services Administration (HRSA). September 2023 – June 2028. Grant Total: \$2,758,152. (PI: Mary Stephens; JCIPE sub-awarded).
- *Before diversity, equity, and inclusion there must be empathy, dignity, and respect: Truth-telling about the origins of racism in U.S. healthcare through art history*. Center for Faculty Development and Nexus Learning (CFDNL) Pedagogy. July 2024-June 2025. Grant Total: \$6,000. (PIs: Monica Medina-McCurdy, Megan Voller, Amber King).
- *Empowering Interprofessional Collaboration Through Global Research Innovation*. Association of Schools Advancing Health Professions (ASAHP), Interprofessional Collaboration Research Grant, September 2024 – August 2025. Grant total: \$14,732. (PI: Hossein Khalili; mPI: Maria Brucato).
- *Jefferson Student Interprofessional Complex Care Collaborative patient support*. Women’s Board of Thomas Jefferson University Hospital. June 2025 – July 2026. Grant total: \$5,000. (Reena DePaolo, Tracey Earland, Mariana Kuperman).



Scan or [click here](#) to see the full list of invited presentations, peer-reviewed publications, conference proceedings, conference presentations and workshops.



## Philanthropic Funding

- The late Ronald P. Sandmeyer, Sr. and the late Elaine H. Sandmeyer, a legacy of generous support of novel interprofessional programs and projects created, adapted, and administered by JCIPE.
- The Martin and Nora Salzman Foundation, in support of expanded and enhanced JCIPE programming.

# Alzheimer’s Virtual Interprofessional Training

Student teams learn to appropriately assess, manage, and support patients and families affected by Alzheimer’s and other dementias. Each team completes three simulations in a virtual world, acting out scenarios as patients with Alzheimer’s, their caregivers, and providers in different settings.



## Key Curricular Elements

- Virtual world interprofessional simulation
- Awareness and recognition of Alzheimer’s Disease
- Racial disparities in diagnosis and treatment of dementia
- Communication strategies with individuals with dementia and their caregivers
- Caregiver burden
- Introduction to roles of interprofessional team members caring for individuals with dementia
- Teamwork and communication skills with members of the interprofessional team

### IPEC Competencies

VE TT RR

#### 38 LEARNERS

Professions

Nurse, Advanced Practice  
Occupational Therapist  
Pharmacist  
Physician  
Public Health Practitioner

#### 10 FACILITATORS

Professions

Nurse, Advanced Practice  
Occupational Therapist  
Pharmacist  
Physician  
JCIPE Staff

## + New This Year

Transitioned to a new virtual world platform, Spatial, to enhance usability and authenticity.

## Program Outcomes | Assessment & Evaluation

METRIC	N	PRE MEAN	PRE SD	POST MEAN	POST SD
Knowledge - Alzheimer’s disease & dementias: causes, consequences, & IPCP approach to care	22	79.54%	9.39%	86.36%	9.86%
Confidence - screening, medication review, identifying roles & value of IP team, & patient-centered care (Min. = 1, Max. = 5)	22	3.57	0.52	4.24	0.33
Program evaluation (Min. = 1, Max. = 5)	20	NA	NA	4.15	0.49

“I learned how important it is to work collaboratively with a variety of professionals to ensure the patient’s needs are met on all fronts. Also, how important it is to support the caregivers in these scenarios as their role is quite difficult and comes with a lot of conflicting thoughts and emotions.”

—Student Public Health Practitioner

“Patience and compassion go a long way when working with fellow healthcare providers and the caregivers in giving the best treatment.”

—Student Pharmacist

## Scholarship Highlight

Toth-Cohen, S. & Stainthorpe, S. (2025, May). Integrating virtual reality approaches into simulations for interprofessional education: A case study. Published online for the 10th Annual Conference on Education (EDU 2025), cedu2025.org

# Health Mentors Program

Student teams learn firsthand from a community member (Health Mentor) about living with one or more chronic health condition(s), impairment(s), or disability(ies) and the value of team-based, person-centered care. Small teams meet with their Health Mentor three times during the program, complete short assignments, and have small group debriefing sessions.



## Key Curricular Elements

- Health Mentors as teachers
- Each person as an expert in managing their health
- Social Ecological Model as theoretical framework
- Impact of social determinants of health
- Application of 4Ms of Healthy Aging framework (what **m**atters, **m**obility, **m**entation, **m**edications)
- Advocacy project on issue of importance to Health Mentor
- Person-centeredness, communication, and teaming

### IPEC Competencies



### 1,527 LEARNERS

Cohort 17=798 | Cohort 18=729  
Professions

- Athletic Trainer
- Counseling & Behavioral Health Specialist
- Dietitian Nutritionist
- Genetic Counselor
- Medical Laboratory Scientist
- Nurse
- Occupational Therapist
- Pharmacist
- Physical Therapist
- Physician
- Physician Assistant
- Speech-Language Pathologist

### 70 FACILITATORS

Professions

- Athletic Trainer
- Dietitian Nutritionist
- Medical Laboratory Scientist
- Nurse
- Nurse, Advanced Practice
- Occupational Therapist
- Pharmacist
- Physical Therapist
- Physician
- Physician Assistant
- Speech-Language Pathologist
- JCIPE Staff
- Other

### 207 HEALTH MENTORS

“This experience has truly opened my eyes to the gaps that can sometimes exist between healthcare providers and patients. My [M]entor’s stories taught me how essential communication, teamwork, and respect are in providing great care.”

—Student Nurse

“This experience gave me insight into the different responsibilities and roles of other healthcare areas and how each component is necessary to treating the patient. It is critical to really work together as a team with different healthcare professionals to prioritize the health and goals of each patient.”

—Student Physician

## Program Outcomes | Assessment & Evaluation

METRIC <i>[*pre-program assessments were retrospective]</i>	N	MEAN	SD
<b>COHORT 17 (MODULE 3)</b>			
Module 3 Program Evaluation (Max. = 5)	461	4.19	0.74
Whole Program Evaluation (Max. = 5)	461	4.20	0.76
<b>COHORT 18 (MODULES 1 &amp; 2)</b>			
Program Evaluation of M1 (Max. = 5)	561	4.34	0.59
Program Evaluation of M2 (Max. = 5)	620	4.27	0.83

## Scholarship Highlight

White, R., Brucato, M., Prasad, P., Mitchell, A. B., & Ozorowski, K. (2025, May). *Exploring topics community members with chronic illness wish to teach future healthcare professionals* [Poster]. Collaborating Across Borders IX, Omaha, NE.

# Interprofessional Palliative Care Program

Small interprofessional student teams learn about the team-based provision of palliative care for persons with serious illness and at the end of life. Teams work collaboratively through case-based discussions and presentations. There is also an opportunity to observe a Jefferson palliative care provider in practice.

**+ New This Year**

Introduced a new learning module, "Additional Topics in Palliative Care," developed by 3 palliative care fellows who participate as facilitators in the program. This year's topics were "Palliative Considerations in Heart Failure", "Medical Aid in Dying", and "Care Settings Outside the Hospital". It is planned to vary topics each year.

**Key Curricular Elements**

- Principles of palliative care
- Introduction to roles and responsibilities of different team members in palliative care
- Communication with patients with serious illness and at the end of life, as well as with their caregivers

**IPEC Competencies**

VE	C	TT	RR
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**41 LEARNERS\***  
Professions

- Chaplain
- Nurse
- Occupational Therapist
- Pharmacist
- Physician
- Public Health Practitioner
- Social Worker
- Speech-Language Pathologist

**9 FACILITATORS**  
3 Palliative Care Fellows  
Professions

- Nurse
- Nurse, Advanced Practice
- Pharmacist
- Physical Therapist
- Physician
- Social Worker
- Speech-Language Pathologist

## Program Outcomes | Assessment & Evaluation

METRIC	PRE MEAN	PRE SD	POST MEAN	POST SD
End-of-life Professional Caregiver Survey (EPCS) Total (Max. = 140)	77.68	19.88	110.86	19.36
EPCS - Patient and Family Centered Communication (Max. = 60)	34.22	8.97	48.14	8.57
EPCS - Cultural & Ethnic Values (Max. = 40)	23.57	7.43	31.16	6.35
EPCS - Effective Care Delivery (Max. = 40)	19.89	6.05	31.57	5.76

Program Evaluation: **100%** of learners would recommend this program to their peers.

Note: N = 37

"I found it most helpful to learn interprofessionally about everyone's role within palliative care and how I can best support my future patients."  
—Student Speech-Language Pathologist

"The shadowing component was very helpful because it really helped to give me a more concrete idea of how a palliative care team operates. To see everything in real time was very eye opening and helped to re-affirm my interest in the field."  
—Student Physician

\*Over 80 applications were submitted by students or clinicians to participate in JCIPE's Interprofessional Palliative Care Program for the spring 2025 semester.

## Scholarship Highlights

Kates, J., Brown, C., & Brucato, M. (2024, September). What's interprofessional about shadowing? A qualitative analysis of student reflection essays in an interprofessional palliative care program [Lightning Talk]. Nexus Summit 2024, Virtual.

Kates, J., Brown, C., Campolieto, J., & Brucato, M. (2024). Health professions students' reflections about principles of interprofessional collaboration after shadowing interprofessional palliative care rounds. *American Journal of Hospice & Palliative Medicine*, 10499091241296856-. <https://doi.org/10.1177/10499091241296856>

# Jefferson Student Interprofessional Complex Care Collaborative

Student teams work with patients with complex health and social needs, providing “high-touch” interventions targeting the social determinants of health and intended to empower patients and reduce hospital utilization and costs. Curriculum components include accompaniment and observation, online modules, workshops, and case conferences, teaching students about the systemic barriers to obtaining high-quality care and maintaining health.



“This experience has highlighted the importance of understanding and addressing the complex challenges that people face in accessing healthcare and most importantly, it has taught me compassion and empathy.”  
 —Pre-Health Professions Student

“My biggest takeaway from the program is to always try and put myself in the patient's shoes. I learned that people are always fighting their own battles, some that we may even be [un]aware of. With this, it's important to practice patience and give everyone grace, especially when things don't go as hoped or expected.”  
 —Student Nurse

**Key Curricular Elements**

- Complex health and social needs
- Patient advocacy and patient-centered care
- Approaches to:
  - ◆ Barriers to care
  - ◆ Genuine healing relationships
  - ◆ Harm reduction
  - ◆ Motivational interviewing
  - ◆ Positive unconditional regard
  - ◆ Social determinants of health
  - ◆ Trauma informed care
- Collaboration and communication

**+ New This Year**

Integrated new essential workshops in navigating difficult conversations and patient loneliness.

**IPEC Competencies**

VE	C	TT	RR
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<b>35 LEARNERS</b>
<i>Professions</i>
Counseling & Behavioral Health Specialist
Nurse
Occupational Therapist
Pharmacist
Physician
Public Health Practitioner
Other
<b>25 ADVISORS/FACULTY LEADS*</b>
<i>Professions</i>
Counseling & Behavioral Health Specialist
Nurse
Occupational Therapist
Pharmacist
Physical Therapist
Physician
Physician Assistant
Public Health Practitioner
Other
<b>6 PATIENTS</b>

\*7 Alumni Advisors

## Program Outcomes | Assessment & Evaluation

METRIC	N (PRE/POST)	PRE MEAN	PRE SD	POST MEAN	POST SD
Jefferson Complex Care Knowledge & Skills Assessment (Max. = 100%)	-/8	-	-	84%	13%
Self-efficacy in Complex Care Skills (Max. = 7)	28/7	5.74	0.55	5.86	0.40
Program evaluation: “Overall, my experiences in the program prepared me for my future practice.” (1 = ‘Strongly Disagree’ to 5 = ‘Strongly Agree’)	-/19	-	-	4.15	0.96

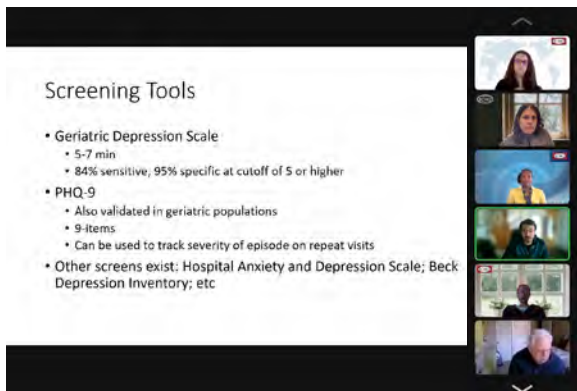
## Scholarship Highlights

DePaolo, R., Brucato, M., Salzman, B. (2024, October). *Debriefing teamwork in complex care curricula using the JTOG® App* [Poster]. Putting Care at the Center, 2024. Pittsburgh, PA.

DePaolo, R., Vause Earland, T., Hersey, K., Kuperman, M., & Brucato, M. (2024, September). *Measuring the evolution of team functioning in a longitudinal IPE program* [Lightning Talk]. Nexus Summit 2024, Virtual.

# Project Extension for Community Healthcare Outcomes (ECHO)

The Extension for Community Healthcare Outcomes (ECHO) model, developed at the University of New Mexico, employs Zoom to build healthcare workforce capacity and improve access to specialty care by providing frontline clinicians with the knowledge and support they need to manage underserved patients in their own communities. ECHO topics focus on complex conditions requiring a team-based approach to care. We serve as an ECHO hub which hosts ECHOs, or series of 60-minute sessions, on a regular basis on different topical areas of healthcare need. An interprofessional expert panel guides interactive, case-based learning, including both a didactic and a case presentation with a collaborative approach. This year, ECHO series were offered in the areas of Integrated Behavioral Health (IBH), Inpatient Care for Opioid Use Disorders (ICOUD), and Intellectual and Developmental Disabilities (IDD).

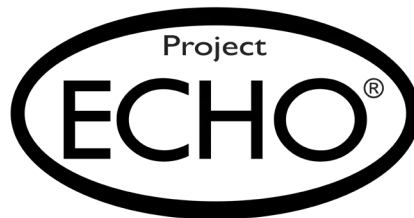


## Key Curricular Elements

- “All teach, all learn” model
- Case-based discussion
- Roles and responsibilities of different team members in supporting patients with complex conditions or needs
- Democratization of specialty knowledge

## New This Year

Employed group polls to gauge prior experience with and application in practice of session topics for enhanced learner engagement.



“So valuable to hear real life cases with expertise from different professionals.”  
 —Student Public Health Practitioner

“It gave me more awareness and appreciation for all the services that can be offered, which I will keep in mind for my patients.”  
 —Physician

## Program Outcomes | Assessment & Evaluation

METRIC	N	POST SELF-EFFICACY*		I WOULD RECOMMEND ECHO TO A COLLEAGUE
		MEAN	SD	
Integrated Behavioral Health	89	4.34	0.70	99%
Inpatient Care for Opioid Use Disorders	22	4.21	0.66	100%
Intellectual and Developmental Disabilities	26	4.27	0.69	96%

\*Self-efficacy in teamwork and ability to provide appropriate care (Max. = 5)

### IPEC Competencies

VE	TT	RR
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<b>INTEGRATED BEHAVIORAL HEALTH (IBH)</b>
<b>165 LEARNERS</b> <i>Professions</i>
Counseling & Behavioral Health Specialist Nurse Nurse, Advanced Practice Occupational Therapist Pharmacist Physical Therapist Physician Physician Assistant Public Health Practitioner Social Worker Other
<b>INPATIENT CARE FOR OPIOID USE DISORDERS (ICOUD)</b>
<b>60 LEARNERS</b> <i>Professions</i>
Nurse Nurse, Advanced Practice Pharmacist Physician Physician Assistant Public Health Practitioner Social Worker Other
<b>INTELLECTUAL AND DEVELOPMENTAL DISABILITIES (IDD)</b>
<b>142 LEARNERS</b> <i>Professions</i>
Counseling & Behavioral Health Specialist Dietitian Nutritionist Nurse Nurse, Advanced Practice Occupational Therapist Pharmacist Physical Therapist Physician Physician Assistant Social Worker Other
<b>4 FACILITATORS</b> <i>Professions</i>
Counseling & Behavioral Health Specialist Education Coordinator Physician

330 unique student, faculty, and staff learners across ECHOs (53 participated in more than one series)

# Team Care Planning

Students conduct a family meeting with simulated participants in one of three cases: 1) creating a discharge plan with an older adult patient hospitalized for an acute stroke and her adult child; 2) discussing birthing plans with a pregnant Black patient and her partner after a pre-eclampsia diagnosis; or 3) discussing returning to high school sports following an injury with a student athlete, their parent, and coach. After simulated family meetings, students debrief their teamwork skills with facilitators and receive feedback from simulated participants from the perspectives of the patients and support persons.



## Key Curricular Elements

- Interprofessional simulation
- Patient and family-centered care
- Teamwork and communication
- Healthcare biases
- Care of older adults, Black maternal health, reentry to high school athletics post-injury (case dependent)

## New This Year

Integrated student dietitian nutritionists into the Clinical Discharge case for the first time.

### IPEC Competencies



### BLACK MATERNAL HEALTH

#### 64 LEARNERS

Professions

Counseling & Behavioral Health Specialist  
 Exercise Physiologist/Scientist  
 Nurse  
 Physical Therapist  
 Physician

#### 8 FACILITATORS

Professions

Counseling & Behavioral Health Specialist  
 Nurse, Advanced Practice  
 Pharmacist  
 Physician  
 JCIPE Staff  
 Other

### CLINICAL DISCHARGE

#### 82 LEARNERS

Professions

Dietitian Nutritionist  
 Occupational Therapist  
 Pharmacist  
 Physical Therapist  
 Physician

#### 8 FACILITATORS

Professions

Exercise Physiologist/Scientist  
 Nurse  
 Nurse, Advanced Practice  
 Occupational Therapist  
 Physical Therapist  
 Physician  
 JCIPE Staff  
 Other

### RETURN TO SPORT

#### 24 LEARNERS

Professions

Pre-Health Professional

#### 4 FACILITATORS

Professions

Exercise Physiologist/Scientist  
 Occupational Therapist  
 JCIPE Staff

“I realized that if we had reviewed the chart independently and conducted separate patient encounters, our goals of care might have become more fragmented. This experience inspired me to advocate for more intentional interprofessional rounding, so that diverse care teams can collaborate with a shared understanding of patient safety and quality of care.”

—Student Physician

“Participating was a valuable experience that I believe other residents—especially those in OBGYN—could greatly benefit from. Working alongside an interprofessional team gave me a new appreciation for how different healthcare roles interpret the same clinical information. Although we all started with access to the same patient details, our unique perspectives led us to focus on different aspects of the case.”

—Anonymous Learner

## Program Outcomes | Assessment & Evaluation

METRIC	N	SELF-EFFICACY*		PROGRAM EVALUATION	
		POST MEAN	POST SD	POST MEAN	POST SD
Black Maternal Health Case	38	4.69	0.58	4.59	0.46
Clinical Discharge Case	66	4.59	0.78	4.69	0.64
Return to Sport Case	21	4.68	0.46	4.67	0.39

\*Self-efficacy in knowledge and skills in patient-centered, team-based care (Max. = 5)

## Scholarship Highlight

Pollen, T., Herge, E. A., Hunzinger, K., Brucato, M., & Hersey, K. (2025, May). *Outcomes of an interprofessional simulated patient encounter for undergraduate exercise science and pre-professional students* [Poster presentation]. Collaborating Across Borders IX, Omaha, NE.

# Team Microaggression Interventions for CollaboRative Outcomes

Team Microaggression Interventions for CollaboRative Outcomes (Team MICRO) is an interprofessional simulation program that leverages the microaggression triangle model to enable learners to build skills to address microaggressions with empathy. Learners participate in a two-part unfolding case, playing the role of themselves in a future healthcare setting, alongside simulated participants who play the roles of team members who are the source and recipient of a microaggression. The experience provides teams of interprofessional learners with authentic opportunity to practice recognizing and addressing microaggressions that occur in interprofessional healthcare settings from a humanistic empathy-based framework.



## Key Curricular Elements

- Interprofessional simulation
- Microaggression Triangle Model
- Brave space environment
- Addressing bias and microaggressions on healthcare teams



## New This Year

Partnered with colleagues to embed Team MICRO into health professions courses in the Jefferson College of Pharmacy and the Jefferson College of Rehabilitation Sciences (physical therapy).

### IPEC Competencies

VE C TT RR

#### 181 LEARNERS

Professions

Pharmacist  
Physical Therapist

#### 15 FACILITATORS

Professions

Counseling & Behavioral Health Specialist  
Nurse, Advanced Practice  
Pharmacist  
Physical Therapist  
Physician  
Physician Assistant  
JCIPE Staff



“I feel I have improved awareness of how micro aggressions can occur and how to better address them when they do occur. I feel this is particularly vital when working in a team setting.”

—Student Physical Therapist



“In the future, I will use what I learned to be an active bystander and stand up for others who may be victims of microaggression. It is important to speak up in the moment as it may not arise again and be another opportunity to address the situation.”

—Student Pharmacist

## Program Outcomes | Assessment & Evaluation

METRIC	N	POST MEAN	POST SD
Knowledge about microaggressions (Max. = 100%)	99	83%	18%
Self-efficacy in microaggression intervention approaches (Max. = 5)	99	3.88	0.48
Program evaluation (Max. = 5)	99	4.23	0.56



## Scholarship Highlights

Yeager, A., Lacy, J., Zhang, X. C., King, A., & Brucato, M. (2024, September). *Teaching microaggression interventions for safer interprofessional collaborative practice: A novel simulation-based curriculum* [Lightning talk]. Nexus Summit 2024, Virtual.

Yeager, A., Zhang, X. C., King, A., & Lacy, J. (2025, June). *Enhancing microaggression intervention through simulation-based learning* [Workshop]. Thomas Jefferson University Faculty Days, Philadelphia, PA.

# Team Simulation & Fearlessness Education

Students learn leadership, situational awareness, mutual support, and communication skills, with a special emphasis on speaking up about patient safety concerns using the national TeamSTEPPS® framework. Introductory Team Simulation & Fearlessness Education (Team SAFE) involves practicing these skills in two low fidelity simulations, and Advanced Team SAFE builds on this learning with greater clinical complexity in one higher fidelity simulation.



## Key Curricular Elements

- Interprofessional simulation
- TeamSTEPPS® Communication tools:
  - ♦ CUS (Concerned, Uncomfortable, Safety Issue)
  - ♦ 2-Challenge rule
  - ♦ SBAR (Situation, Background, Assessment, Recommendation)
- Leadership and team support

## New This Year

- Included student acute care nurse practitioners and respiratory therapists in Advanced Team SAFE, highlighting the roles of critical team members!
- Piloted a "CARE" (Consider, Address, Restore, Express) space for students to decompress after Advanced Team SAFE simulations.

### IPEC Competencies



### INTRODUCTORY TEAM SAFE

**1,113 LEARNERS**

*Professions*

- Athletic Trainer
- Dietitian Nutritionist
- Medical Imaging & Radiation Sciences Professional
- Nurse
- Occupational Therapist
- Pharmacist
- Physical Therapist
- Physician
- Physician Assistant
- Public Health Practitioner
- Respiratory Therapist

**53 FACILITATORS**

*Professions*

- Medical Imaging & Radiation Sciences Professional
- Nurse
- Nurse, Advanced Practice
- Occupational Therapist
- Pharmacist
- Physical Therapist
- Physician
- Physician Assistant
- Respiratory Therapist
- JCIPE Staff
- Other

### ADVANCED TEAM SAFE

**555 LEARNERS**

*Professions*

- Nurse
- Nurse, Advanced Practice
- Pharmacist
- Physician
- Respiratory Therapist

**43 FACILITATORS**

*Professions*

- Medical Imaging & Radiation Sciences Professional
- Nurse
- Nurse, Advanced Practice
- Occupational Therapist
- Pharmacist
- Physical Therapist
- Physician
- Physician Assistant
- Respiratory Therapist
- JCIPE Staff
- Other

**Introductory Team SAFE:** "Healthcare is becoming more interprofessional and learning how to work within this framework is important for all providers"

—Student Athletic Trainer

**Advanced Team SAFE:** "I thought this was great to do just before starting intern year. It helped make me feel more confident in practicing communication and collaboration in a safe space during an unsettling circumstance/patient case."

—Student Physician

## Program Outcomes | Assessment & Evaluation

METRIC	N	POST MEAN	POST SD
<b>INTRODUCTORY TEAM SAFE</b>			
Self-efficacy in Teamwork Skills (Max. = 5)	886	3.98	0.56
Program Evaluation (Max. = 5)	916	4.51	0.58
<b>ADVANCED TEAM SAFE</b>			
Self-efficacy in Teamwork Skills (Max. = 5)	389	3.82	0.63
Program Evaluation (Max. = 5)	419	4.46	0.67

## Scholarship Highlight

Forstater, A., Hass, R., & King, A. (2024). A TeamSTEPPS®-based simulation delivered virtually provides teamwork and communication outcomes comparable to in-person instruction. *Journal of Allied Health*, 53(4), 263–269.

# About Interprofessional Practice & Education

## DEFINITIONS

### Interprofessional Education (IPE)

occurs when students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes.

**Interprofessional Collaborative Practice (IPCP)** takes place when multiple health workers from different professional backgrounds work together with patients, families, care[givers] and communities to deliver the highest quality of care.

*World Health Organization, 2010*

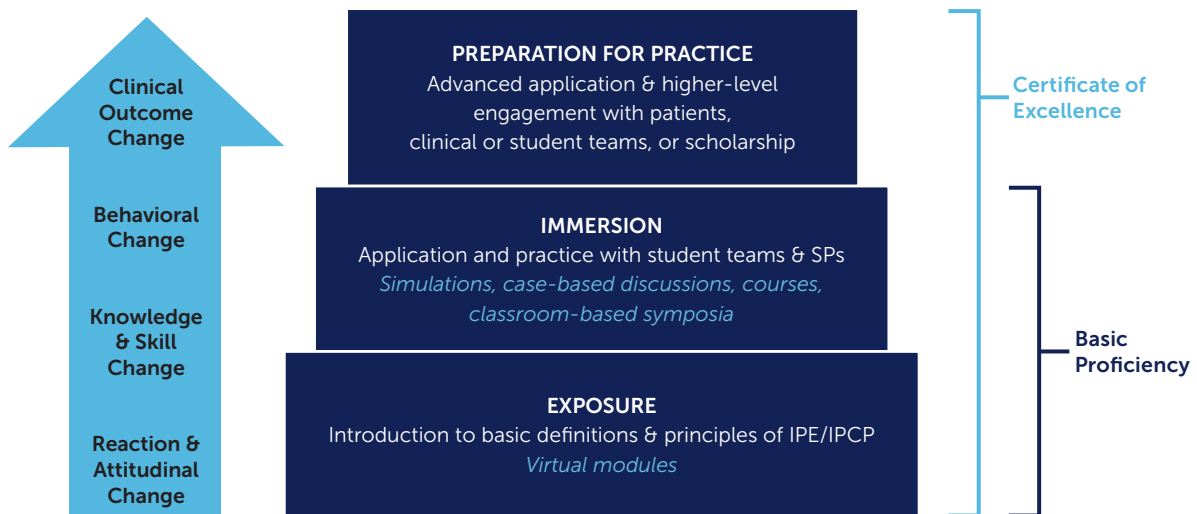
## Competencies

IPE initiatives at Jefferson are guided by the Interprofessional Education Collaborative (IPEC) Core Competencies for Interprofessional Collaborative Practice. An adaptation of these was adopted by the University across all academic programs in 2011 shortly after the initial IPEC publication.

All IPE activities at Jefferson are organized within JCIPE's Interprofessional Collaborative Practice Curriculum Framework, a developmental model which

categorizes IPE into three levels: exposure, immersion, and preparation for practice. Each health professions program defines the pathway for its students to earn Basic Proficiency in Collaborative Practice. As learners advance from exposure to preparation for practice, they progress in developing attitudes, knowledge, skills, and behaviors related to IPCP and have an opportunity to earn a Certificate of Excellence in Team-Based Practice for advanced participation.

## Interprofessional Collaborative Practice Curriculum Framework



The curriculum framework has three levels of interprofessional education programming and allows all health professions students to achieve Basic Proficiency in Collaborative Practice, as well as to have the opportunity to pursue a Certificate of Excellence in Team-Based Practice.



## JEFFERSON CENTER FOR INTERPROFESSIONAL PRACTICE & EDUCATION

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