THE IMPORTANCE OF INTERPROFESSIONAL EDUCATION IN NURSING

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The objectives for this presentation are:

- Explain the importance of Interprofessional Education as it relates to improving communication among caregivers, team-building, and the quality of patient care.
- Describe issues associated with the incorporation of interprofessional education in academia, such as potential impact, stakeholders involved, possible positive and negative outcomes, and barriers to implementation.
- Explain the needs associated with implementing interprofessional education in a curriculum, such as leadership and team development, administrative infrastructure, cultivation of partnerships, promotion of interprofessional practice in the clinical setting, evaluation of the program, and the anticipated inputs/outputs related to an IPE program.
- Identify the ethical and legal issues associated with interprofessional education.
- Provide an explanation on how to incorporate nursing standards into practice.
- Review academic freedom and ethical decision making for faculty who teach IPE.
Introduction

- Interprofessional education (IPE) is a curriculum design that places members or students of more than one health care or social care related setting in one classroom for the purposes of sharing skills and knowledge between professions.

- Interprofessional education will serve to bridge the gap that exists among caregivers as it relates to communication and improvement of patient outcomes.

- Theoretical frameworks, such as social and action learning, are used to deliver IPE in academia and in the actual health care related work setting (Wilcock, et al., 2009).
General Competency Statements by Domain


- **VALUES/ETHICS FOR INTERPROFESSIONAL PRACTICE**
  Work with individuals of other professions to maintain a climate of mutual respect and shared values.

- **ROLES/RESPONSIBILITIES**
  Use the knowledge of one’s own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.

- **INTERPROFESSIONAL COMMUNICATION**
  Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease.

- **TEAMS AND TEAMWORK**
  Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver patient/population-centered care that is safe, timely, efficient, effective, and equitable.
Elements of Collaborative Practice

- Elements of collaborative practice include:
  - Accountability/Liability
  - Organization
  - Open dialogue/effective communication
  - Teamwork
  - Self-sufficiency
  - Role clarity
  - Exchange of trust and respect
  - Collective leadership
Effective Communication in Collaborative Practice

- Why is effective communication important in collaborative practice?
Importance of Interprofessional Education

- Encourages collaboration among caregivers
- Improves team-building
- Increases service learning
- Elevates social responsibility
Improving Communication using the PDSA Model

- Interprofessional education utilizes:
  - Plan do study act or PDSA model for learning,
  - Social interaction learning theories in teaching, and
  - Heightened self-perception.

- Interprofessional education guides students in:
  - Employing self-examination of culture differences, biases, common disparities experienced in the country, barriers to the provision of health care, religious practices, and the behaviors of patients and clients.

- The proposed end result is:
  - Elevated self-perception,
  - Increased interprofessional communication, and
  - Increased self-examination of culture differences and biases that might impede communication.
Improving Team-Building

- IPE improves team-building through:
  - Immersion in interprofessional interaction
  - Improved communication among caregivers
  - Increased knowledge of imposed professional barriers
  - Increased knowledge of the skillset represented by other professionals
Improving the Quality of Patient Care

- Interprofessional education and collaborative practice have served to improve health outcomes while strengthening the functioning of the health care team by:
  - Empowering team members;
  - Reducing the communication gaps;
  - Enabling a comprehensive approach to providing care;
  - Minimizing admission rates;
  - Promoting team cohesiveness; and,
  - Promoting patient-centered care.
Incorporation of Interprofessional Education in Academia: Purpose

The American Association of the Colleges of Nursing (AACN) Position Statement – Key Points
- Recommended that a form of interdisciplinary education begin in the first semester of nursing education
- IPE ceases to exist in academic institutions
- Growing need for interprofessional care and improvement of interprofessional communication

AACN Recommendations
- Schools of nursing should create and align curricula that incorporate multiple opportunities for undergraduate and graduate nursing students to interact with other members of the health care team.
- Nursing schools should engage in planning with other disciplines to increase the number of available clinical practice experiences in order to foster interprofessional approaches to patient care.
Using a Program Logic Model

- The program logic model serves to:
  - Identify inputs and outputs related to resources, activities, and participation; and,
  - Identify the impact of implementing IPE as a curriculum change related to stakeholders.

- The five key components to the program logic model are:
  - Resources
  - Activities
  - Outputs
  - Outcomes
  - Impact
Incorporation of Interprofessional Education in Academia:  
*Inputs and Outputs Related to Interprofessional Education*

<table>
<thead>
<tr>
<th>Inputs</th>
<th>Outputs</th>
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<tr>
<td><strong>Resources</strong></td>
<td><strong>Activities</strong></td>
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<tr>
<td>What is invested by the program:</td>
<td>What the program offers:</td>
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<td>• Staff</td>
<td>• Simulation lab</td>
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<td>• Time</td>
<td>• Lecture</td>
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<td>• Money</td>
<td>• Interactive Webinars</td>
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<td>• Materials</td>
<td>• Clinical Experience</td>
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<td>• Technology</td>
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<td>• Research and Best Practices for Nursing Care</td>
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<tr>
<td>• Participation</td>
<td>Who the program reaches:</td>
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<td></td>
<td>• Students</td>
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<td></td>
<td>• Hospitals</td>
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<td></td>
<td>• Long Term Care Facilities</td>
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<td>• Academic Stakeholders</td>
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**Incorporation of Interprofessional Education in Academia: Potential Impact**

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<tr>
<th>Outcomes – Impact</th>
<th>Short - Innovation</th>
<th>Medium</th>
<th>Long - Implementation</th>
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<tr>
<td><strong>What does the program promote? Learning:</strong></td>
<td><strong>What is the byproduct of IPE? Action:</strong></td>
<td><strong>How will learning IPE in nursing affect the health care community:</strong></td>
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<td>• Acquired skills</td>
<td>• Effective multidisciplinary care</td>
<td>• Increased interpersonal communication.</td>
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<td>• Increased critical thinking</td>
<td>• Increased positive patient outcomes</td>
<td>• Increased patient satisfaction.</td>
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<td>• Increased communication among caregivers</td>
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<td>• Reduction in patient-related safety events.</td>
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<td>• Increased long-term positive staff and patient outcomes.</td>
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<td>• Increased nursing job satisfaction.</td>
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Incorporation of Interprofessional Education in Academia: Stakeholders

- Three categories of stakeholders are affected by the incorporation of interprofessional education in academia:
  - Direct
    - School of Nursing Administration
    - Other administrators
    - Faculty
    - Information Technology and Design Staff
    - Ancillary staff
  - Secondary
    - Students and members of the interdisciplinary staff at clinical sites
  - Beneficiary
    - Patients
    - Patients’ families
    - Students
Incorporation of Interprofessional Education in Academia:

Possible Positive Outcomes

- Enhancement of student training and education
- Improved economic outcomes (clinical institutions)
- Expansion of research and scholarship
- Improvement of communication among caregivers
- Increased safety of the work environment
- Promotion of teamwork
- Improvement of care for patients
- Improved inter-collegial communication and self-efficacy
- Improved engagement in community outreach projects and service learning.
Incorporation of Interprofessional Education in Academia: Possible Negative Outcomes or Barriers

- Barriers Related to Clinicians
  - Varied approaches among practitioners from multiple disciplines for rendering patient care
  - Differing perspectives of the clinical problem and inability to arrive at consensus for treatment
  - Time involvement for rendering care is widely varied
  - Conflicts associated with responsibilities related to care

- Barriers Related to Academia
  - Lack of administrative support and resources
  - Lack of institutional collaborators (clinical sites)
  - Scheduling and logistical issues
  - Faculty development constraints
  - Time involvement

(sources: Page, Hume, Trujillo, Leader, Vardeny, Neuhauser, Dang, Nesbit, and Cohen (2009); Milton (2012); NACEP (2014)}
Promote academic freedom and ethical decision making for faculty through adherence to:

- American Association for University Professors (AAUP) standards
- NLN's ethical principles for nursing education programs:
  - Caring
  - Integrity
  - Diversity
  - Excellence
Top Down – Bottom Up Approach

- IPE Requires a top-down and bottom-up approach
  - Top-down ➜ governmental policy formation needed for infrastructure, funding, and development of organizations to support IPE.
  - Bottom-up ➜ healthcare terminology and nursing language must be clear and communicated effectively among disciplines. Respectful and purposeful discussion is needed to define the scope, role, and responsibilities of all members.

- Expansion of Medicare coverage to include advanced practice nursing
- Expansion of opportunities for nurses to engage in collaborative efforts in academic and clinical health care organizations.
American Association of Colleges of Nursing (2016) Publication

Advancing Healthcare Transformation: A NEW ERA FOR ACADEMIC NURSING
Accreditation Partnerships

- Independent accreditation bodies from the six IPEC-sponsoring associations formed the Health Professions Accreditors Collaborative (HPAC).
  - Established in late 2014
  - Current members of the Health Professions Accreditors Collaborative (HPAC) include:
    - Accreditation Council for Pharmacy Education (ACPE) www.acpe-accredit.org
    - Commission on Collegiate Nursing Education (CCNE) www.aacn.nche.edu/ccne-accreditation
    - Commission on Dental Accreditation (CODA) www.ada.org/en/coda
    - Commission on Osteopathic College Accreditation (COCA) www.osteopathic.org
    - Council on Education for Public Health (CEPH) www.ceph.org
    - Liaison Committee for Medical Education (LCME) www.lcme.org
  - In February 2016, IPEC welcomed 9 new institutional members, expanding the professional representation from 6 to 15
Commission on Collegiate Nursing Education (CCNE) Position on Interprofessional Education

- AACN strategic plan includes: Lead innovation in academic nursing that promotes team-based, interprofessional health care.
  - CCNE Standard III-H speaks specifically to fostering interprofessional collaborative practice.
    - III-H. The curriculum includes planned clinical practice experiences that:
      - enable students to integrate new knowledge and demonstrate attainment of program outcomes;
      - foster interprofessional collaborative practice; and
      - are evaluated by faculty.

“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. Once students understand how to work interprofessionally, they are ready to enter the workplace as a member of the collaborative practice team. This is a key step in moving health systems from fragmentation to a position of strength.” (AACN, 2014)
In Conclusion
Questions?
Helpful Resources for IPE

- National League for Nursing’s Guide to Effective Interprofessional Education Experiences in Nursing Education

- Interprofessional Education Collaborative’s (IPEC) Core Competencies for Interprofessional Collaborative Practice

- Interprofessional Education Collaborative’s (IPEC) Core Competencies for Interprofessional Collaborative Practice: 2016 Update
  - [https://aamc-meded.global.ssl.fastly.net/production/media/filer_public/70/9f/709fedd7-3c53-492c-b9f0-b13715d11cb6/core_competencies_for_collaborative_practice.pdf](https://aamc-meded.global.ssl.fastly.net/production/media/filer_public/70/9f/709fedd7-3c53-492c-b9f0-b13715d11cb6/core_competencies_for_collaborative_practice.pdf)

- Interprofessional Collaborative Practice Competencies: Adapted from Interprofessional Education Collaborative’s (IPEC) Core Competencies for Interprofessional Collaborative Practice: 2016 Update
  - [https://nebula.wsimg.com/923d6ff345809ba51e831ea3377fcedf?AccessKeyId=DC06780E69ED19E2B3A5&disposition=0&alloworigin=1](https://nebula.wsimg.com/923d6ff345809ba51e831ea3377fcedf?AccessKeyId=DC06780E69ED19E2B3A5&disposition=0&alloworigin=1)
References


