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Methods for Demonstrating High-Level Impact for Practicum Experiences in Interprofessional Education

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Purpose:

Building more robust research methodologies that measure both student and patient outcome linkages is a nursing education research priority (National League for Nursing [NLN, 2016]). To that end, nursing education researchers are challenged to demonstrate outcomes that represent higher levels of learning. Using Moore's Framework for Outcomes Evaluation (2009), learner participation and satisfaction are lower-level outcomes with limited ability to demonstrate the impact of an educational intervention. Mid-level outcomes include those associated with demonstrating knowledge, competence, and performance; high-level outcomes are those that establish an effect on patient and community health. Nursing education research has tended to focus on lower- and mid-level outcomes, with little research focusing on patient and community health as an outcome of educational interventions. These outcomes measures are consistent with the Institute for Healthcare Improvements (IHI) Triple Aim (IHI, 2019) of improving patient experience, improving population health, and reducing per capita cost of health care.

Methods:

Interprofessional education (IPE) is an excellent opportunity to demonstrate higher-level impact of an educational intervention. This presentation will highlight the evolution of an IPE program for nursing and medical students over a period of 12 years. Educational design, research design, and results showing high level impact will be described. The IPE program provides a deliberated, stepped approach to preparing students for interprofessional collaborative practice, consistent with the Interprofessional Education Collaborative (IPEC, 2016) competencies. Following extensive training that includes modified TeamSTEPPS® training (Agency for Healthcare Research and Quality [AHRQ, 2017]), students take part in a variety of IPE interventions such as round table simulations, standardized patients, high-fidelity simulations, and direct practice. These interventions provide opportunities to measure student and patient outcomes at a variety of levels. Our team's work includes developing and testing reliable and valid tools to measure student learning.

Our team used the World Health Organization (WHO) Framework for Action on Interprofessional Education and Collaborative Practice (WHO, 2010). The WHO framework postulates that interprofessional education prepares the present and future health workforce so that they may enter the practice setting "collaborative practice-ready" resulting in a strengthened health care system and improved health outcomes.

Results:

Patients in our program experienced a reduction in 30-day re-admission rates from 27.45% to 1.96%; a reduction in all admissions from 60.78% to 31.37%. The return on investment (ROI) model shows a 30-day cost readmission avoidance of \$400,000. In addition, the “stretch” in days from home to readmission for those readmitted was favorably increased from 72.88 days to 98.29 days.

Conclusions:

Our interventions accelerated collaborative practice readiness, and therefore improved health outcomes, while students were still in their health professions education programs. This approach allowed our team to directly study patient and system health outcomes which directly targets the IHI Triple Aim.

Title:

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Keywords:

Evaluation, Impact and Interprofessional education

Abstract Summary:

The purpose of this presentation is to describe the methods for demonstrating high-level impact outcomes from interprofessional education (IPE) interventions. The team will describe a comprehensive program for the development of research strategies to measure the outcomes of their longitudinal IPE program.

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First Primary Presenting Author

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Author Summary: I have been an educator for over 25 years in undergraduate and graduate nursing programs. I am a Clinical Nurse Specialist, serve as our organization's Magnet Program Co-Director and our system's Magnet Program Coordinator. I have developed interprofessional education and practice initiatives with my team which have been widely recognized.

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Fourth Author

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department for my organization. I provide transitional care consultation and guidance to patients recently discharged from acute care, and care coordination post-discharge. I collaborate with our university to provide interprofessional education and practice experiences to future health care professionals.