



— ARKANSAS COLLEGES OF —  
**HEALTH EDUCATION**

# **Interprofessional Education/ Interprofessional Practice Guidebook**

## Interprofessional Education/Interprofessional Practice (IPE/IPP)

Arkansas Colleges of Health Education (ACHE) is committed to interprofessional education and practice. In support of this commitment, ACHE has identified a goal in its strategic plan that aims to

*Establish interprofessional education, practice, and research; affirmatively representing the mission of the institution locally, regionally, nationally, and internationally.*

### Mission

The mission of Arkansas Colleges of Health Education Interprofessional Education and Practice (ACHE IPE) is to transform the quality of healthcare through interprofessional education, practice, and research.

The purpose of ACHE IPE is to create healthcare professionals ready for interprofessional collaborative practice and research. We are dedicated to improving healthcare by providing opportunities for collaborative learning, research, service, and leadership. Specifically,

- Provide experiences that promote interprofessional collaborative practice in the educational and clinical healthcare continuum.
- Create an understanding and respect of the various roles of the interprofessional team, including the patient and their family.
- Develop faculty interprofessional teaching, practice, and research skills.

### Operational Definitions

ACHE employs the World Health Organization definitions of interprofessional education (IPE) and interprofessional practice (IPP), also called interprofessional collaborative practice.

*Interprofessional education:* When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes” (WHO, 2010).

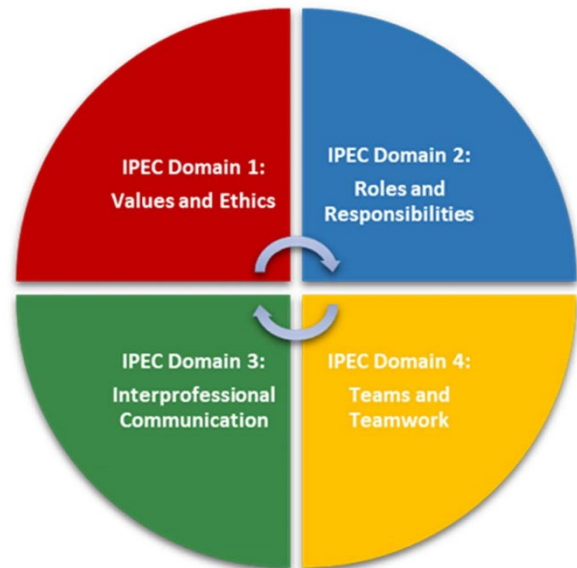
*Interprofessional collaborative practice:* “When multiple health workers from different professional backgrounds work together with patients, families, (careers), and communities to deliver the highest quality of care” (WHO, 2010).

*Interprofessional teamwork:* “The levels of cooperation, coordination, and collaboration characterizing the relationships between professions in delivering patient-centered care” (IPEC, 2016).

*Interprofessional team-based care:* “Care delivered by intentionally created, usually relatively small work groups in health care who are recognized by others as well as by themselves as having a collective identity and shared responsibility for a patient or group of patients (e.g. rapid response team, palliative care team, primary care team, and operating room team)” (IPEC, 2016).

## Interprofessional Education Collaborative (IPEC) Core Competencies for Interprofessional Collaborative Practice

1. Values/Ethics: Work with individuals of other professions to maintain a climate of mutual respect and shared values.
2. Roles/Responsibilities: Use the knowledge of one's own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations.
3. Interprofessional Communication: Communicate with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease.
4. Teams and Teamwork: Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan, deliver and evaluate patient/population-centered care and population health programs and policies that are safe, timely, efficient, effective and equitable Interprofessional Education Collaborative (2016).



### IPE/IPP Student Learning Outcomes

Student learning outcomes (SLOs) are derived from the IPEC and are aligned under the four IPEC Domains.

#### Values and Ethics

- VE1. Place interests of patients and populations at the center of interprofessional health care delivery and population health programs and policies, with the goal of promoting health and health equity across the life span.
- VE2. Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care.
- VE3. Embrace the cultural diversity and individual differences that characterize patients, populations, and the health team.
- VE4. Respect the unique cultures, values, roles/ responsibilities, and expertise of other health professions and the impact these factors can have on health outcomes.

- VE5. Work in cooperation with those who receive care, those who provide care, and others who contribute to or support the delivery of prevention and health services and programs.
- VE6. Develop a trusting relationship with patients, families, and other team members.
- VE7. Demonstrate high standards of ethical conduct and quality of care in contributions to team-based care.
- VE8. Manage ethical dilemmas specific to interprofessional patient/population centered care situations.
- VE9. Act with honesty and integrity in relationships with patients, families, communities, and other team members.
- VE10. Maintain competence in one's own profession appropriate to scope of practice.

#### Roles and Responsibilities

- RR1. Communicate one's roles and responsibilities clearly to patients, families, community members, and other professionals.
- RR2. Recognize one's limitations in skills, knowledge, and abilities.
- RR3. Engage diverse professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific health and healthcare needs of patients and populations.
- RR4. Explain the roles and responsibilities of other providers and how the team works together to provide care, promote health, and prevent disease.
- RR5. Use the full scope of knowledge, skills, and abilities of professionals from health and other fields to provide care that is safe, timely, efficient, effective, and equitable.
- RR6. Communicate with team members to clarify each member's responsibility in executing components of a treatment plan or public health intervention.
- RR7. Forge interdependent relationships with other professions within and outside of the health system to improve care and advance learning.
- RR8. Engage in continuous professional and interprofessional development to enhance team performance and collaboration.
- RR9. Use unique and complementary abilities of all members of the team to optimize health and patient care.
- RR10. Describe how professionals in health and other fields can collaborate and integrate clinical care and public health interventions to optimize population health.

#### Interprofessional Communication

- CC1. Choose effective communication tools and techniques, including information systems and communication technologies, to facilitate discussions and interactions that enhance team function.

- CC2. Communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible.
- CC3. Express one's knowledge and opinions to team members involved in patient care and population health improvement with confidence, clarity, and respect, working to ensure common understanding of information, treatment, care decisions, and population health programs and policies.
- CC4. Listen actively and encourage ideas and opinions of other team members.
- CC5. Give timely, sensitive, instructive feedback to others about their performance on the team, responding respectfully as a team member to feedback from others.
- CC6. Use respectful language appropriate for a given difficult situation, crucial conversation, or conflict.
- CC7. Recognize how one's own uniqueness (experience level, expertise, culture, power, and hierarchy within the health team) contributes to effective communication, conflict resolution, and positive interprofessional working relationships (University of Toronto, 2008).
- CC8. Communicate the importance of teamwork in patient-centered care and population health programs and policies.

#### Teams and Teamwork

- TT1. Describe the process of team development and the roles and practices of effective teams.
- TT2. Develop consensus on the ethical principles to guide all aspects of teamwork.
- TT3. Engage health and other professionals in shared patient-centered and population-focused problem solving.
- TT4. Integrate the knowledge and experience of health and other professions to inform health and care decisions, while respecting patient and community values and priorities/preferences for care.
- TT5. Apply leadership practices that support collaborative practice and team effectiveness.
- TT6. Engage self and others to constructively manage disagreements about values, roles, goals, and actions that arise among health and other professionals and with patients, families, and community members.
- TT7. Share accountability with other professions, patients, and communities for outcomes relevant to prevention and health care.
- TT8. Reflect on individual and team performance for individual, as well as team, performance improvement.
- TT9. Use process improvement to increase the effectiveness of interprofessional teamwork and team-based services, programs, and policies.

TT10. Use available evidence to inform effective teamwork and team-based practices.

TT11. Perform effectively on teams and in different team roles in a variety of settings (Interprofessional Education Collaborative, 2016).

## Quadruple Aim - IPE Curriculum Framework

### Stages of Learner Development

*Exposure Level.* A learner who is a novice at interprofessional education and practice. This learner will be exposed to IPE/IPP and participate in learning activities that helps him/her to understand and apply the fundamentals of IPE/IPP.

*Immersion Level.* A learner who is at an intermediate stage of understanding IPE/IPP. This learner is actively involved in learning to fulfill their role and utilize other professions on the healthcare team through immersion into activities, seminars, simulations, and clinical practice. Emerging leadership skills are noted.

*Competence Level.* A learner who has developed the knowledge and skills to participate as a competent member of a health care team. This learner is proficient at demonstrating the qualities described in the IPE sub-competencies. Leadership skills are evident.

To meet expectations for quality IPE, it is recommended that programs create overall IPE plans that include all the following characteristics:

1. Rationale: Articulates a vision, framework, and justification
2. Outcome-based goals: Stated in terms that allow the assessment of students' achievement of objectives and interprofessional competencies for collaborative practice
3. Deliberate design: Intentionally designed and sequenced series of classroom, extracurricular, and clinical learning activities integrated into the existing professional curriculum and longitudinal in nature, spanning the entire length of the program and including content and instructional formats appropriate to the level of the learner and to the outcome-based goals; and
4. Assessment and evaluation: Methods to assess individual learners' mastery of interprofessional competencies and to evaluate the IPE plan for quality improvement purposes; and if appropriate, education and practice outcomes research and scholarship.

## IPE Activity Planning Form

This form can be used to help faculty design and implement interprofessional education and practice activities.

### Type of activity

- Didactic
- Experiential
- Simulation
- Standardized patient
- Clinical skills
- Scholarly
- Service

### Activity Title

### Purpose of the Activity

- Values and Ethics
  - Work with individuals of other professions to maintain a climate of mutual respect and shared values.
- Roles and Responsibilities
  - Use the knowledge of one's own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations.
- Interprofessional Communication
  - Communicate with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease.
- Teams/Teamwork
  - Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan, deliver and evaluate patient/population-centered care and population health programs and policies that are safe, timely, efficient, effective and equitable. Interprofessional Education Collaborative (2016).

### Stage of Learner Development

- Exposure
  - A learner who is a novice at interprofessional education and practice. This learner will be exposed to IPE/IPP and participate in learning activities that helps him/her to understand and apply the fundamentals of IPE/IPP.
- Immersion
  - A learner who is at an intermediate stage of understanding IPE/IPP. This learner is actively involved in learning to fulfill their role and utilize other professions on the

healthcare team through immersion into activities, seminars, simulations, and clinical practice. Emerging leadership skills are noted.

- Competence
  - A learner who has developed the knowledge and skills to participate as a competent member of a health care team. This learner is proficient at demonstrating the qualities described in the IPE sub-competencies. Leadership skills are evident.

### Learning Objectives

Specific

Measurable

Achievable

Relevant

Time-bound

### Voluntary or Mandatory Participation

Target Health Profession Learners - DO, OT, PT, PA, MSB, other

Maximum number of Participants

Preparation of the Activity – (PPT, case study scenarios, simulation experience, debriefing questions, etc.)

Pre and post assessment

Description of the Activity (actual content and schedule of events – pre-test, introduction, content, debrief, post-test)

Activity Duration (single event, series of events)

Prework for students – (readings, assignment, etc.)

Coordination needs

- Prior to the event (reserve room, recruit students, orient panelists, communicate event to facilities, set-up, etc.) Facility needs (tables, chairs, IT, etc.)
- During the event (ensure room meeting needs, handouts, assessments, etc.)
- After the event (clean-up, email thank you, analyze activity/event outcomes, etc.)
- Consent (to participate, to share activity and resources)



## References

*World Health Organization (WHO). (2010). Framework for action on interprofessional education and collaborative practice.*

[http://whqlibdoc.who.int/hq/2010/WHO\\_HRH\\_HP\\_N\\_10.3\\_eng.pdf](http://whqlibdoc.who.int/hq/2010/WHO_HRH_HP_N_10.3_eng.pdf).

*Interprofessional Education Collaborative (IPEC). (2016). Core competencies for interprofessional collaborative practice: 2016 update.*

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