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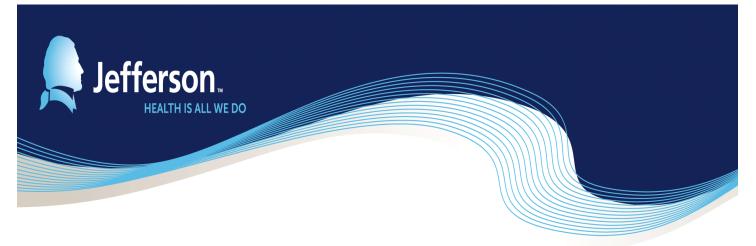
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Jefferson Center for InterProfessional Education

# **Interprofessional Education and Care Newsletter**

### From the Editors:

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Editorial Board 8 Welcome to the Fall 2014 edition of the Jefferson Interprofessional Education and Care Newsletter. It has been a busy Fall at Jefferson and we are excited to share several new developments which have been pushing the envelope in IPE. In October, we hosted our 4<sup>th</sup> biennial conference, Interprofessional Care for the 21st Century: Redefining Education and Practice. This year we had a record number of conference participants and presenters joining us from a variety of national and international academic and service organizations. Our keynote speakers, Dr. George Thibault, President, Josiah Macy Jr Foundation; Dr. Barbara Brandt, Director, National Center for Interprofessional Practice and Education at the University of Minnesota; Dr. John Gilbert, Principal & Professor Emeritus, University of British Columbia College of Health Disciplines, Co-Chair of the Canadian Interprofessional Health Collaborative; and a team from the Veterans Administration, including Dr. Malcolm Cox, Dr. Stuart Gilman, Dr. Richard Stark and Dr. Kathryn Rugen, collectively challenged and inspired us to re-conceptualize interprofessional education and collaborative practice opportunities for students as we prepare them for a healthcare delivery system that will focus on the triple aim of improving a patient's care experience, improving the health of patient populations, and reducing the per capita cost of healthcare. One of the articles that follows will highlight the conference presentation of the innovative work of Dr. Susanne Boyle from the University of Glasgow, Scotland and her colleagues. Dr. Boyle's team explored the area of augmented reality and its applicability to enhancing online interprofessional education through virtual communities.

You will also read about an interprofessional educational project using our own Jefferson Teamwork Observation Guide (JTOG). This initiative, which represents a collaboration between Dr. Kellie Smith from the Jefferson School of Nursing (JSN) and Dr. David George from Reading Hospital, examined third year medical and graduate nursing students' perspectives on the elements of strong leaders and facilitators and the characteristics of team functioning. And for the first time in this Fall edition of the newsletter, you will be able to read the inaugural article from the Student Column. Claire Sokas, a Sidney Kimmel Medical College student and Chelsea Gorman, a JSN student, two leaders of the newly established co-curricular group, IPE Grand Rounds, discuss this innovative new student-run IPE initiative.

The JCIPE team would like to extend a heartfelt thank you for your support and wish you and yours a joyous and healthy holiday season and a happy and prosperous New Year.

Elizabeth Speakman, EdD, RN, ANEF, FNAP Lauren Collins, MD Christine Arenson, MD Shoshana Sicks, MEd

### Successful Implementation of the ABCDEF Bundle in the MICU through Interprofessional Collaboration and Teamwork

Julie Rogan, RN, MSN, ACCNS-AG, AOCNS, CCRN Steven W. Gudowski, RRT Cara McDaniel, PharmD, BCPS Thomas Jefferson University Hospital Philadelphia, PA

Earlier this year, members of the medical intensive care unit (MICU) attended an interprofessional workshop that utilized Awakening/Breathing/Choice of Sedation/Delirium/Early Mobility (ABCDE) bundle simulation combined with TeamSTEPPS training to empower care givers to advocate for patient safety while optimizing patient care. The ABCDE bundle is an evidence-based tool designed to implement pain, agitation, and delirium guideline recommendations into routine practice. To further improve patient safety and outcomes and build upon the ABCDE concept, the MICU team developed an interprofessional practice project by adding routine assessment of need for indwelling Foley catheters to their daily work list, creating the "ABCDEF" bundle.

The first Monday following the interprofessional workshop, the Clinical Nurse Specialist, Nurse Manager, and Respiratory Therapy Supervisor began focused rounds on ABCDEF components for all intubated patients in the MICU. The Bedside Nurse and Respiratory Therapist (RT) were sought out to briefly discuss how the ABCDEF bundle applied to their patient. A physician was often present. If the patient met criteria for a spontaneous breathing trial (SBT), the RT made the changes immediately. After a few months, a physical therapist joined ABCDEF rounds, a physician was always present, and the review was expanded to all MICU patients. As a result of coordinated ABCDEF rounds, Physical and Occupational Therapy are now able to obtain orders for mobility early in the morning, request adequate staff to mobilize patients, and create a schedule around planned procedures. With interprofessional collaboration, a script was created for ABCDEF rounds and team members now include the bedside nurse. respiratory therapist, physical or occupational therapist, and a physician who enters orders as needed and confirms that all team members are heard before moving on to the next patient. In addition to ABCDEF components, quality measures such as the continued need for central venous access, nutritional

Earlier this year, members of the medical intensive e unit (MICU) attended an interprofessional rkshop that utilized Awakening/Breathing/Choice status, and presence of wounds are also addressed. Use of the script ensures that these structured rounds take less than three minutes per patient.

> In addition to the ABCDEF rounds, education about the bundle takes place in other venues. The pharmacist leads the interprofessional sedation committee, participates in the development of health system-wide policies and procedures reflecting best evidence-based practice, and provides interprofessional education to nurses, physicians, and respiratory therapists regarding ABCDEF bundle components, pain and sedation algorithms, medication selection, and neuromuscular blockade. Nurse educators provide training to the nursing staff regarding delirium assessment, utilizing CAM-ICU scores, and documenting assessments accurately.

> The MICU ABCDEF rounds bring together the interprofessional team to set the patient's plan in motion first thing in the morning. The team's listening skills have improved, and they are able to reflect on how the work of other members impacts the patient. Since the implementation of daily ABCDEF rounding, the MICU's unit acquired pressure ulcer rate has decreased slightly, catheter associated urinary tract infections and central line associated blood stream infections are being maintained at levels below goal, device utilization rates are decreasing, and the average ventilator days are hovering around the lower limit.

Claire Sokas, Sidney Kimmel Medical College Chelsea Gorman, Jefferson School of Nursing Thomas Jefferson University Philadelphia, PA

Interprofessional Education (IPE) Grand Rounds is an innovative student-run initiative designed specifically to increase the clinical relevance of IPE for all health professions students. By creating new opportunities for students from medicine, nursing, physical therapy, occupational therapy, couple and family therapy, physician assistant and pharmacy to interact with health professionals who are actively participating in interprofessional work environments, the IPE Grand Rounds program allows students to develop a more complete picture of what it means to be a member of a collaborative practice team. During these sessions, students and panelists discuss both the benefits of working with team members from professions other than their own, as well as the real-world challenges they face in practice. While exploration of the effectiveness of IPE Grand Rounds in helping medical and other health professions students achieve IPE core competencies is currently underway, initial positive feedback indicates that this extracurricular experience may help to bridge the gap between interprofessional education curricula and collaborative practice.

#### **Claire Sokas, Medical Student:**

The most exciting day of medical school for me, thus far, was my first day of clinical rotations during third year. I was fresh from my board exam, and now the youngest member of the white surgery team in the hospital! The opportunity to see my first patient and to take ownership of my learning from the classroom to the clinic was challenging and overwhelming, made even more so by my 4AM start. Every day I am amazed by the coordination and teamwork across specialties and disciplines required to effectively take care of patients. I had learned about medicine in my first two years of medical school, but the complexity of patient care beyond a diagnosis wasn't a reality until I joined an interprofessional team.

I had first been exposed to IPE through our Health Mentors Program, and have been working with JCIPE for the past few years. This past Spring, a group of students and faculty began to explore new opportunities to introduce students to interdisciplinary teams in the real world. We formed our own interprofessional team of sorts—a medical student, a nursing student and two pharmacy students—to look for more health mentors. However, the mentors we were searching for were no longer patients, but physicians, nurse

practitioners, pharmacists and other clinicians; these mentors were faculty and staff that we were eager to learn from and one day hope to call our colleagues. Our monthly lecture series introduces a new practice team to students from all Jefferson health professions schools at all learning levels. It's a lunchtime lecture, and the combination of free food and stellar speakers has elicited a great turn-out!

#### **Chelsea Gorman, Nursing Student:**

One of the major reasons that I decided to pursue my nursing education at Jefferson was the university's emphasis on interprofessional education. I knew that major culture shifts were occurring in the world of health care and I was eager to take part. During my first semester at Jefferson, I participated in the Health Mentors curriculum. This program helped me to better understand the experiences, knowledge, and roles of students from other professions. As I began my first clinical rotation, however, I quickly realized that I had very little understanding of how health care professionals worked collaboratively in a clinical setting.

When the opportunity arose, I decided to join a committee of students interested in creating a new IPE experience. Over the course of several meetings, the mission and format of IPE Grand Rounds began to take shape. The enthusiastic feedback from our pilot event in April let us know that our peers were also eager to learn how to apply their interprofessional education in a clinical setting. I feel that we have succeeded not only in creating an extracurricular experience that will enhance students' understanding of collaborative teamwork, but also in demonstrating the effectiveness of student "collaborative practice teams" in strengthening interprofessional education.

JCIPE would like to invite students of all health professions to submit their interprofessional research to be published! Interested students can contact Claire (claire.sokas@jefferson.edu) or Chelsea (chelsea.gorman@jefferson.edu).

#### Susanne P Boyle, BSc, MSc, PhD, FHEA<sup>1</sup>, Matthew Ramirez<sup>1</sup> and Lynn Sheridan<sup>2</sup> <sup>1</sup>Mimas, University of Manchester, Manchester, England, UK. <sup>2</sup>School of Health and Life Sciences, Glasgow Caledonian University, Glasgow, Scotland, UK.

A recent review of pre-qualifying interprofessional education in the UK reported the practical challenges of synchronising interprofessional education<sup>1</sup>. Whilst it was noted that online interprofessional courses were developed primarily to overcome timetabling conflicts of students and clinicians from various health professions, it was recognised that a blended learning approach with appropriate student support could enable an effective interprofessional education experience with lower running costs and reduced disruption. It was found, however, that despite the ubiquity of e-learning in interprofessional education there seemed to be less sharing than expected<sup>1</sup>.

This study aimed to investigate the applicability of Augmented Reality (AR) as an innovative approach to enhancing online interprofessional education and to demonstrate the potential for building capacity in the development of quality interprofessional education Open Educational Resources (OERs) which may be adopted, adapted and re-purposed to enable efficient embedding of good practice within Higher Education Institutions (HEIs) and beyond. It builds upon an initiative within Scotland, one of 14 countries that has made a national commitment to Open Education<sup>2</sup>, and draws upon the skills and experiences of a multi-professional team.

Research has shown that AR environments may increase students' motivation, interest and engagement<sup>3</sup> and this was important given the geographically distant location of the intended student cohorts and the emphasis being placed on student self direction for elements of the OER scenario.

The "IPE in the City Resource" drew upon the strengths of "Clydetown", an online virtual community which includes virtual families helping the student to see the "person in situation"<sup>4</sup> and a recently developed "AR in the City Resource"<sup>5</sup>. The latter resource was developed in collaboration with the Higher Education Academy, British Sociological Association, the British Criminology Society and Mimas. It was designed for sociology students to enhance their understanding of quantitative methods (see Figure 1).

In redesigning the "AR in the City" resource, the first objective was to identify an area of common teaching across the health and social care curricula<sup>6</sup>. We focused on the role of the professional in the promotion of knowledge and understanding to facilitate informed choice. The team designed an OER with a purposely challenging scenario, situated around cochlear implants, which specifically explored the impact of family values, deaf culture, beliefs and limited healthcare resources as influencers of decision making.

The resultant "IPE in the City" resource is modelled on Glasgow (see Figure 2), focuses on three areas within "Clydetown" and includes ethnicity, housing and health data. The resource uses open source code, can be accessed via a mobile app, has comprehensible, simple step-by-step instructions (Figure 3) and draws upon UK Census data and health data from Information Services Division (ISD) Scotland databases.

Looking to past successes, a Team Based Learning approach which included a range of preparatory activities<sup>6</sup> including pre-reading of materials and familiarisation with the AR resource in preparation for the tutor-moderated discussions was employed to facilitate individual student readiness and optimal engagement throughout the unfolding family scenario.

In summary, inclusion of AR technology in parallel with quality video resources has resulted in the development of an online, digitally rich IPE resource which supports a learning experience that is situated and employs family narratives, authentic voices and cultural insights to help students visualise and identify with the patient and client scenarios. The "safety" of the online environment and intentional inclusion of potentially provocative scenarios facilitates the development of learner skills in professional communication, collaborative working, sensitive disagreement and negotiation. Adoption of Creative Commons Licensing and sharing of the OER via Jorum (www.jorum.ac.uk), the UKs largest free and open access repository, maximises the potential for resource access, reuse and, where appropriate, repurposing of the constituent parts.

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### Continued

### Developing an Open Educational Resource for Interprofessional Education (IPE)

#### Susanne P. Boyle, et.al.

 McDonald H, McFadyen CE, Boyle SP. (2012). Development and Evaluation of a Novel Interprofessional Learning Activity Addressing the Management of Phenylketonuria. Creative Education 2013. Vol.4, No.3, 189-193.

#### **Figures**



Figure 1: AR in the City (http://teamscarlet.wordpress.com/2014/11/10/ar-in-the-city-its-finished/



Figure 2: IPE in the City Experience



Figure 3: Easy to Follow Instructional Steps for Tutors and Staff.

# **Health Mentors Program**

# What Our Health Mentors Have to Say About the Program:

"I think it's a great program. I believe the students that I worked with have a better understanding of chronic illness in that it affects everyone differently."

"I found compassion, which encouraged me to continue fighting for my health."



# What Our Health Mentors Have to Say To and About the Students:

"It's an excellent program. I learned so much from you all. You are not even in the field yet, and it gives me hope knowing who could be my next doctor, physician, or pharmacist I might talk to."

"Learn all you can learn because when you get out there it is so different. A book is a book, but it is nothing like dealing with a person. Nobody can describe that feeling for you or even put that in words."

### Jefferson Teamwork Observation Guide (JTOG): A Pilot Project

David George, MD<sup>1</sup> Elizabeth Speakman, EdD, RN, ANEF, FNAP<sup>2</sup> Kellie Smith, EdD, RN<sup>2</sup> Kevin Lyons, PhD<sup>2</sup> Carolyn Giordano, PhD<sup>2</sup> <sup>1</sup>Reading Hospital, Reading, PA <sup>2</sup>Thomas Jefferson University, Philadelphia, PA

The critical need for students to learn to be effective members of interprofessional teams in preparation for collaborative practice-ready care provision now and in the future has been well documented<sup>1</sup>. There are increasing opportunities for students to observe interprofessional events to assist them in doing so, but often their role is passive and the teams may not demonstrate the highest level of patient -centered care, minimizing the student learning.

The Jefferson Teamwork Observation Guide (JTOG) was created as a teaching tool for interprofessional education (IPE) to help students recognize the characteristics of well-functioning teams. Derived from the literature which describes effective team behavior, JTOG was developed to be an easily used instrument to measure IPE competencies in various settings, including simulation and real practice environments. JTOG developers continue to assess its value in various educational environments.

To this end, fourteen senior graduate students from Jefferson's School of Nursing and 20 Sidney Kimmel Medical College students on 3rd year clerkships participated in a pilot project over a three-month period at Reading Hospital. The students were asked to complete the ITOG tool while observing one interprofessional event during their clinical training experience. In addition, the graduate nursing students completed a reflective activity to describe their perception of how well the team collaborated and functioned as a whole. Overall, students found the JTOG easy to use and compliance was 100%. During the post-observation sessions, students were able to identify the elements of strong leadership and team functioning and noted that when a group of individuals consistently worked together, it seemed to function better as a team. Interestingly, students also discussed the need to feel a part of and become empowered to participate in interprofessional team meetings during their clinical rotations.

The pilot exercise supported the ease of use of the JTOG tool as well as the value of the reflective sessions. There appears to be reasonable face validity based upon similar responses to common observations. Although further testing of validity and reliability are in order, the pilot project supports ongoing study of the application of JTOG in student interprofessional education.

#### **Reference**:

 World Health Organization (WHO). Framework for Action on Interprofessional Education & Collaborative Practice. Geneva, Switzerland: WHO Department of Human Resources for Health; 2010. Available at http:// whqlibdoc.who.int/hq/2010/ WHO\_HRH\_HPN\_10.3\_eng.pdf.

#### 8003

### Congratulations IPE Grand Rounds Student Organization

Congratulations, IPE student leaders! JCIPE is so proud of all of you and thrilled to see your hard work come to fruition with the establishment of this new student organization. Well done!

JCIPE looks forward to continuing to support you all in any way that we can to ensure the ongoing success of the exciting new Grand Rounds program and all future student-led IPE activities. The student leaders are: Amanda Gibson (Pharmacy); Jessica Verzella (Pharmacy); Chelsea Gorman (Nursing); Cathy Lee (Physical Therapy); Claire Sokas (Medicine); Laura Edquist (FACT); Jobin Kalathil (FACT); Eyal Levy (FACT); Colleen Brill (Radiologic Sciences). Congrats again!

# INTERPROFESSIONAL EDUCATION AND CARE NEWSLETTER



CALL For ABSTRACTS September 29 – October 2, 2015 The Hotel Roanoke & Conference Center

### New Extended Abstract Submission Deadline: January 26, 2015

The fifth Collaborating Across Borders Conference (CAB V) recognizes how far we've traveled along the interprofessional journey and understands that there is still much left to do if we are going to truly make a difference in the quality of health and social care. CAB V is a joint conference linking Canada and the United States on issues related to interprofessional education (IPE) and interprofessional collaborative practice (IPCP). CAB V continues the tradition of focusing on advances in interprofessional practice, education, leadership and policy in North America and includes presentations relevant for all audiences. The conference will feature best practices, showcase theoretical models, evidence-based outcomes and lessons learned, and provide a venue for scholarly dialogue and productive networking.

#### For more information regarding CAB V please go to: http://info.vtc.vt.edu/cabv/

#### 8003

#### JCIPE is accepting nominations for the annual James B. Erdmann, PhD Awards in Excellence in Interprofessional Education & Collaborative Practice. Deadline: January 30, 2015.

- James B. Erdmann, PhD Award for Excellence in Interprofessional Education—This award honors one faculty member from the Sidney Kimmel Medical College and one faculty member from Jefferson Schools of Health Professions, Nursing, Pharmacy, or Population Health who demonstrate excellence in interprofessional education, and whose efforts have resulted in sustained impact on interprofessional collaboration to improve the education of Jefferson students.
- James B. Erdmann, PhD Award for Excellence in Interprofessional Collaborative Practice—This award honors two clinicians/practitioners from Thomas Jefferson University/Thomas Jefferson University Hospital whose leadership efforts in interprofessional collaborative practice have impacted colleagues, staff, students and patients.
- James B. Erdmann, PhD Award for Excellence in Interprofessional Education and Collaborative Practice for Administrators/Staff—This award honors two administrators and/or staff members from the Jefferson community who are not faculty members and who demonstrate excellence in the support of interprofessional education, and whose efforts have resulted in sustained impact on interprofessional collaboration to improve the education of Jefferson students.

Nomination materials are due by Friday, January 30, 2015Mail:JCIPE, 130 S. 9th Street, 1056 Edison, Philadelphia, PA 19107Email:Letter of Nomination (pdf format) to Catherine Mills (catherine.mills@jefferson.edu)For more information, please contact Catherine Mills (catherine.mills@jefferson.edu).

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