Creating an IPE Decision Making Course at the University of Michigan Lessons Learned

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UM Environment

- Large University
  - Three campus: 61,268 students
  - Ann Arbor Campus
    - 43,710 students (28,283 UG; 15,427 Grads)
    - 19 schools and colleges
    - Research Intensive
- Health Focus
  - Large Academic Health Center (1000 IP Beds and multiple ambulatory care centers)
  - Seven Health Sciences Schools: Dentistry, Kinesiology, Medicine, Nursing, Pharmacy, Public Health, Social Work
  - All located in Ann Arbor
  - All top ranked
Our IPE Efforts

• Early pilot efforts began in 2012
  – Faculty initiated
  – Limited resources allocated
• Full scale commitment began in Jan, 2015
  – Funded 5.5 year commitment of $6 million
    • $3 million from Provost (Third Century Initiative)
    • $3 million from HSC Deans
    • Creation of the UM Center of Interprofessional Education
• Three stages to full implementation
  – Early phase (1.5 yrs.): organizational, quick wins, faculty champions
  – Mid phase (2.0 yrs.): adding courses, structural improvements
  – Final phase (2.0 yrs.): full integration of program

Approach: Continuum of IPE

Exposure
Allow students to develop sense of their profession
Allow students to understand areas of collaboration

Immerse
Practicing interprofessional skills in classroom setting

Master
Applying skills in practice setting under supervision

### Current Course Sequence

<table>
<thead>
<tr>
<th>Course</th>
<th>IPE Continuum</th>
<th>Description/purpose</th>
<th>Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intro to health policy</td>
<td>Exposure</td>
<td>Introducing concepts of health policy, online (MOOC)</td>
<td>Open to all HS students (attracts dentistry, nursing, and public health)</td>
</tr>
<tr>
<td>Service Learning</td>
<td>Exposure</td>
<td>Introducing students to patients with unmet needs</td>
<td>Required for pharmacy students, open to all HS students (attracts kinesiology and public health)</td>
</tr>
<tr>
<td>Breaking Bad News</td>
<td>Immersion</td>
<td>Simulated training on how to break bad news to patients</td>
<td>Required for medical students and elective for social work students</td>
</tr>
<tr>
<td>Clinical Decision Making*</td>
<td>Exposure/Immersion</td>
<td>Clinical decision making and team based practice</td>
<td>Required for Dentistry, pharmacy and some SW students, elective for others</td>
</tr>
<tr>
<td>Collaborative Care Rotation</td>
<td>Master</td>
<td>Providing care to patients with unmet needs at a FQHC</td>
<td>Elective for dentistry and nursing students</td>
</tr>
</tbody>
</table>
Course Characteristics

• Learning Goals:
  – Roles/background of other professions
  – Effective role communication
  – Team behavior
  – Multidisciplinary group clinical decision making (case based)

• Course activity:
  – Emphasis on active learning techniques
  – Students assigned to a multidisciplinary team that lasts throughout semester
  – Team reviews different complex cases developed by all faculty
  – Cases are designed to emphasize a problem common to each of the professions (e.g., med error in pharmacy)

Course Logistics

• Course started in January 2015
  – 2 credit hours
  – Meets every Wednesday

• Involved five of the health science schools
  – Dentistry, Medicine, Nursing, Pharmacy, and Social Work
  – 11 faculty
  – 2 from each school (3 from medicine)
  – Faculty are assigned to teach in pairs

• Grading: points assigned to pre-work, in class and team assignments
Number of Students Enrolled

<table>
<thead>
<tr>
<th>School</th>
<th>Level</th>
<th>Required or Elective</th>
<th>Targeted Pool (estimate)</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dentistry</td>
<td>Third year</td>
<td>Required</td>
<td>114</td>
<td>114</td>
</tr>
<tr>
<td>Medicine</td>
<td>Third/fourth year</td>
<td>Elective</td>
<td>180</td>
<td>19</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>Third year</td>
<td>Required</td>
<td>75</td>
<td>75</td>
</tr>
<tr>
<td>Nursing</td>
<td>2nd year Advanced Practice</td>
<td>Elective</td>
<td>140</td>
<td>13</td>
</tr>
<tr>
<td>Social Work</td>
<td>1st year Masters</td>
<td>Required for subset, others elective</td>
<td>100</td>
<td>35</td>
</tr>
<tr>
<td>Total enrolled</td>
<td></td>
<td></td>
<td>509</td>
<td>256</td>
</tr>
</tbody>
</table>

Impact on Faculty

- Like the students, faculty learned more about the other disciplines when preparing and managing the cases
- Faculty needed to learn new teaching skills or expand on their existing ones
  - Active learning focus
  - Team based decision making
  - Facilitation of a multidisciplinary group discussion
gs1   I would eliminate the denominator in this column. While there may be 100+ medical students most of them were not able to take it for a variety of reasons. I think the same is true for SW.

Gundy, 4/20/2015
Impact on Students

- Comprehensive formal evaluation will be performed at end of semester and reported later in year by course faculty.
- Initial impressions: very positive
  - See [https://www.youtube.com/watch?v=M9a1EOu0-Ds#t=22](https://www.youtube.com/watch?v=M9a1EOu0-Ds#t=22)

Lessons Learned

A Plan to Move Forward
Time and Place

- Getting students from all schools for one time and place is difficult if not impossible
  - Curricula conflicts
  - Space limitations
- Action plan
  - Exploring the role of technology
    - Augment, but not replace, group interaction
    - Examples
      - online instruction augmented with flexible group meetings
      - Greater use of simulations

Faculty Skills

- Most faculty are not prepared to teach in an appropriate IPE format
  - Experience in teaching in an active learning situation
  - Assisting team based learning
  - Effective group facilitation
  - Understanding of multiple professions
- Action plan
  - Select faculty “champions” for first phase
    - Encourage faculty initiated ideas (pilot grants/idea exchange)
    - Give rewards, recognition and resources (training/support)
  - Prepare for course transitions to less engaged faculty
    - Focus on incentives and training
    - Provide additional classroom management support during transition
Educational Offerings

• What is the proper mix of course experience needed for all students?
  – Goal is for every student enrolled in a UM Health Science School to be properly prepared work in a multidisciplinary health care environment upon graduation.
  – Proper progression from exposure to immersion to mastery
  – Curricular vs extra curricular vs co-curricular experiences
• Action plan
  – Shift most of the “exposure” experiences to first program year
  – Emphasis on immersion and mastery in later years
    • Greater use of simulation
    • Enhance team exposure to patient care site
  – Work with student groups to develop co- and extra-curricular activities
  – Ensure interaction with students from all schools
  – Evaluate use of passport systems to assess accomplishment

Linking Education with Practice

• How do we develop the proper link between didactic coursework and collaborative care models?
  – Course preparation must lead to practice implementation
  – Need an operational definition/evidence of the ideal collaborative care model
• Action plan
  – Identify and develop best practice sites
  – Develop course-practice linkages (e.g., Dental school special needs clinic)
Summary

• Great opportunity for transformation of health professional education at UM
  — Goal to create leaders and change agents
• Wonderful chance to advance educational scholarship and innovation among interested UM faculty
• Proper response to the demand that we change our approach to efficiently creating a healthier nation

Thank You!

“The art (of medicine) is long, life is short”
Hippocrates

Grazie

Gracias

Obrigado!