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Mission

The mission of the Center for Interprofessional Education and Collaborative Care is to improve health through collaboration by:

- Implementing interprofessional models of care that advance patient and population health,
- Promoting research-driven innovations in interprofessional education and practice,
- Educating students and practitioners to lead in an evolving interprofessional health care environment.

Save the Date

The Fifth Annual Emswiller Interprofessional Symposium will take place on Saturday, February 4, 2017 at Lewis Ginter Botanical Garden near Richmond, VA.

Invited are:

- abstract submissions
- emerging leaders in interprofessional excellence nominations
- sponsorship opportunities

More information and submission and nomination instructions available from ipe.vcu.edu/ipecconference.

Upcoming Events


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A Case Study of Leading Better Interprofessional Practice

Alan Dow

“Having been the family member of a patient at another hospital, I have seen how frustrating medicine can be,” said Sarah Hartigan, MD, a practicing hospitalist in the Department of Internal Medicine. “The care was really fragmented, and no one did a good job addressing my family member’s pain. I want to do a better job for my patients.”

Inspired by work done at Emory University and elsewhere, Dr. Hartigan has championed an approach called Structured Interprofessional Bedside Rounds (SIBR). As part of the SIBR approach, each patient is seen by an interprofessional team representing medicine, nursing, pharmacy, social work, and care coordination. Implementing the approach required two main changes to the care of hospitalized internal medicine patients.

First, Dr. Hartigan needed her patients to be located on one or two nursing units. This change allowed the doctors, nurses, and other healthcare workers to share patients more frequently. In addition, it drastically diminished the barriers that distance presented to the care of patients. This change was no small feat. It required commitment from leaders of the health system and internal medicine, and a lot of hard work by the group that manages bed assignments in the hospital.

Second, Dr. Hartigan implemented the SIBR approach. SIBR involves following a script to ensure a focus on the patient and collaboration across profession. At the bedside of the patient, each team member presents their plan for the day. The patient sees the team collaborate and provides input to shape care that will unfold over his or her stay and as he or she transitions out of the hospital.

This approach reinvents the rounding process traditionally ingrained in inpatient medicine. Instead of the attending physician being the center of the process, the patient becomes the center of the process. Everyone has a chance to speak as well as an opportunity to listen to each other. Patients feel more involved in their care and seem to be noting some benefits.

“One gentleman who had been hospitalized here a number of times said that for the first time, he felt like he was being treated with respect.”

Director’s Message

On the frontline of healthcare, people are cared for by practitioners in specific settings. Those settings—the clinic, the operating room, the ward, or the community—shape how care is delivered, including who is on the healthcare team and what kind of services an individual can receive. While we focus a lot on interprofessional education in the Center, at the end of the day, better interprofessional practice is the goal, and improving interprofessional practice depends on the setting and the healthcare workers in that setting.

In this issue, we described the implementation of SIBR in the inpatient setting. This type of clinical transformation is essential and complementary to other efforts under the Center. We need to change practice to better support interprofessional collaboration. Likewise, we also talked about global health in this issue and how students and faculty travel to other countries to learn from those settings. These trips provide a new perspective and can make us rethink our work at home.

We need healthcare practitioners who value interprofessional collaboration and see its potential. Perhaps most importantly, we need future leaders in healthcare who can take classroom concepts and apply them to change how we deliver care on the frontline. That’s our goal—and we are fortunate to work at a place where faculty, practitioners, leaders, staff, and students are all committed to this aspiration.

Alan Dow, MD, MSHA is the Assistant Vice President for Health Sciences for Interprofessional Education and Collaborative Care, and Professor of Internal Medicine in the VCU School of Medicine.

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Core Faculty and Staff

- Alan Dow, MD, MSHA
- Charles Alexander, MA
- Melissa Burton, BS
- Sharon Lanning, DDS
- Kathy Lockman, PhD
- Colleen Lynch, MSN, RN, CPHQ, CPPS
- Elizabeth Nicolazzi, MBA, PMP, CCRP

Newsletter Staff

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“One gentleman who had been hospitalized here a number of times said that for the first time, he felt like he was being treated with respect.”
Spotlight on Steven Crossman

Dr. Crossman attended the VCU School of Medicine, MCV Campus in Richmond, VA from 1991-1995. He graduated with plans to become a rural family doctor and attended residency in Yakima, Washington - one of the University of Washington WWAMI family medicine residency programs. At the conclusion of residency, Dr. Crossman returned to Virginia and practiced rural family medicine for three years.

During this time, he also served as an affiliate faculty in the VCU Department of Family Medicine precepting students in the office as a part of the third year family medicine clerkship and also teaching in the Foundations of Clinical Medicine course.

The PEC teaching roles spurred an interest in academic family medicine, and after those three years in Virginia, Dr. Crossman accepted an academic family medicine position at the University of Illinois in Chicago. He worked there for four years before returning to the VCU Department of Family Medicine in 2005 as residency faculty on the INOVA Campus. In 2007, he returned to Richmond in his current position of Director of Medical Education in Family Medicine. He is a faculty member in the IPEC 501 Foundations of Interprofessional Education course as well as co-course director of the new IPEC Global Health Elective.

Reving Up for Fall: They’ve Got This!

Sharon K. Lanning

A class size of nearly 500 students from six health sciences professional programs would be daunting for most educators. But not for the talented and dedicated faculty of the Foundations of Interprofessional Practice course (IPEC 501). They’ve got this!

The 2016 fall semester marks the second offering of the Foundations of Interprofessional Practice course (IPEC 501).

As students in the health professions begin their professional journey across the country, they develop knowledge of anatomy, physiology and patient assessment. But at VCU, students also begin to develop an understanding of collaborative care, profession-specific roles and responsibilities, and team skills.

During IPEC 501, eighty-eight interprofessional student teams of five to six students will tackle these areas. Each team is assigned a faculty member, each faculty member has five to six teams for whom they facilitate student learning and collaboration throughout the semester.

This year, 21 faculty, representing all five health sciences professional schools, lead the creation and implementation of the course. Through this interprofessional effort, a cohort of course faculty meet frequently to review student course evaluations and fine-tune learning objectives, assignments and student assessment structure. Enhancements to the course are many, most noteworthy is the greater use of case-based instruction. Students have greater opportunities, during this iteration of the course, to work closely with students from other professional programs in discussing complex real-life scenarios, including a newly added standardized patient interaction.

Since the initial offering of the course in fall 2015, many faculty have taken advantage of development opportunities supported by VCU’s Center for Interprofessional Education and Collaborative Care to enhance their teaching effectiveness within the course. Most recently, course faculty attended a workshop offered by VCU’s Center for Human Simulation and Patient Safety.

Drs. Cheryl Bodamer and Cathy Grossman instructed course faculty in the debriefing technique of advocacy and inquiry. During this session, faculty practiced this technique with one another. An additional offering discussed Student Determination Theory with Dr. Constance Tucker. But perhaps the biggest learning comes from working with each other and the students. With such an excellent opportunity to learn about, from, and with a diverse group of health professionals, IPEC 501 educates faculty as well as students.

Sharon K. Lanning, D.D.S., is the Course Director of Interprofessional Practice, and Professor of Periodontics in the VCU School of Dentistry.