

Preparing a Collaborative Practice Ready Workforce: Report on IPE/IPP in Academic Programs

Carolyn Wiles Higdon, PhD, CCC-SLP, Fellow-ASHA, Fellow-NAP
Professor, CAPCSD IPE/IPP Committee, University of Mississippi

Loretta M Nunez, MA, AuD, CCC-A/SLP, ASHA Fellow, FNAP
Director of Academic Affairs and Research Education, ASHA

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Carolyn Higdon

Disclosures

Financial Disclosures

Faculty member at the University of Mississippi
No financial support from CAPCSD or Ole Miss

Non-Financial Disclosures

Chair of CAPCSD IPP IPE Committee
Member of CAPCSD and ASHA





Loretta Nunez

Disclosures

Financial Disclosure

- ASHA staff member
- Receives a salary from ASHA
- Leads ASHA's strategic objective on IPE/IPP

Non-financial Disclosure

- ASHA member
- ASHA staff liaison to IPEC



Learner Objectives

1. Identify data collected through the CAPCSD IPE/IPP Member Survey and the CSD Education Survey on interprofessional education in CSD academic programs.
2. Apply the data to further academic programs' IPE/IPP offerings and opportunities for IPE research.
3. Describe ways to bridge interprofessional education to practice and research within IPE curricula.

Why IPE/IPP?

- ✓ Prepare for real world, evolving service delivery and payment models
- ✓ Actualize a “collaborative practice-ready workforce”
- ✓ Deliver services as part of a continuum of care with others
- ✓ Responsive to demand for accountability, outcomes, and efficiencies



IPE/IPP Drivers In Professional Contexts



Schools

- ✓ Demand for increased accountability
 - ✓ Every Student Succeeds Act (ESSA)
 - ✓ Individuals with Disabilities Education Act (IDEA)
 - ✓ Multi-tiered Systems of Support (MTSS), including Response to Intervention (RTI)
 - ✓ State educational standards (includes Common Core State Standards)
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Health Care

- ✓ Institute for Health Improvement (IHI) Triple or Quadruple Aim
- ✓ Transition from fee for service to value-based service payment models
- ✓ Demands for more affordable and more convenient care
- ✓ Focus on “population health,” not just health care
- ✓ Innovation in care delivery (e.g., telehealth, continuum of care)

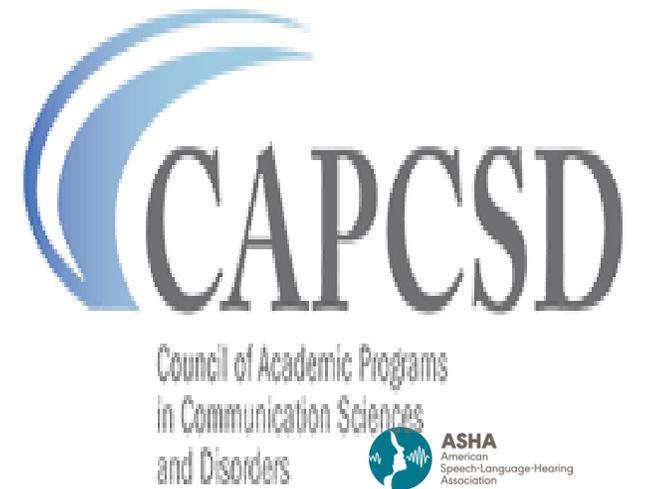
CAPCSD Member IPE/IPP Survey



Council of Academic Programs
in Communication Sciences
and Disorders

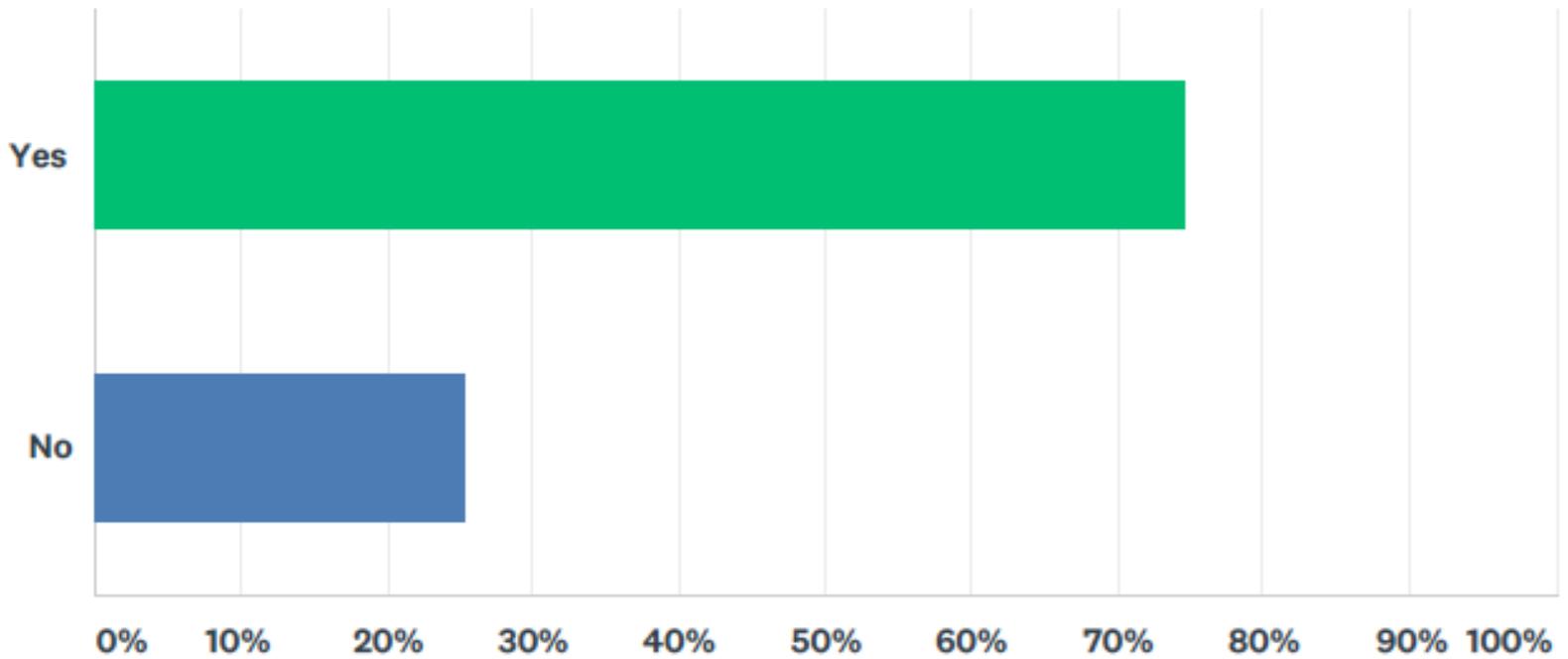
Question 1: 124 programs

What is the name of your institution?



Question 2: Do you have a formal IPE/IPP program(s) for students in CSD?

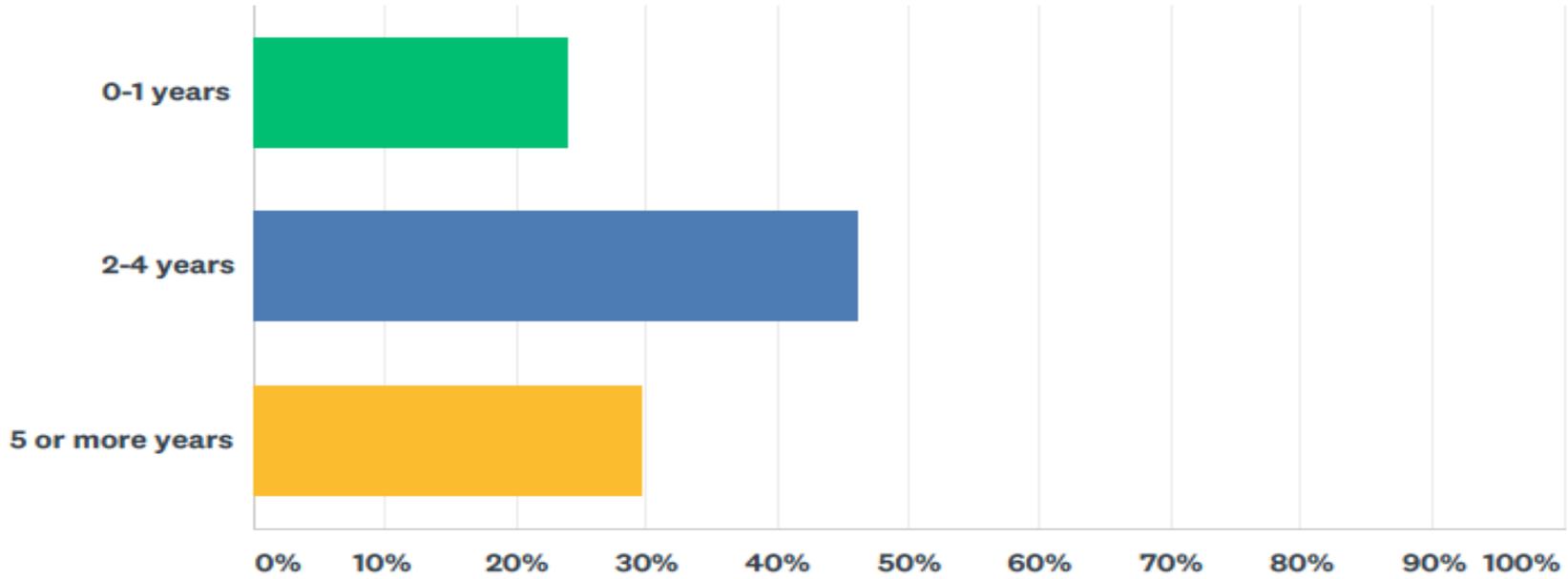
Answered: 126 Skipped: 2



ANSWER CHOICES	RESPONSES	
Yes	74.60%	94
No	25.40%	32
TOTAL		126

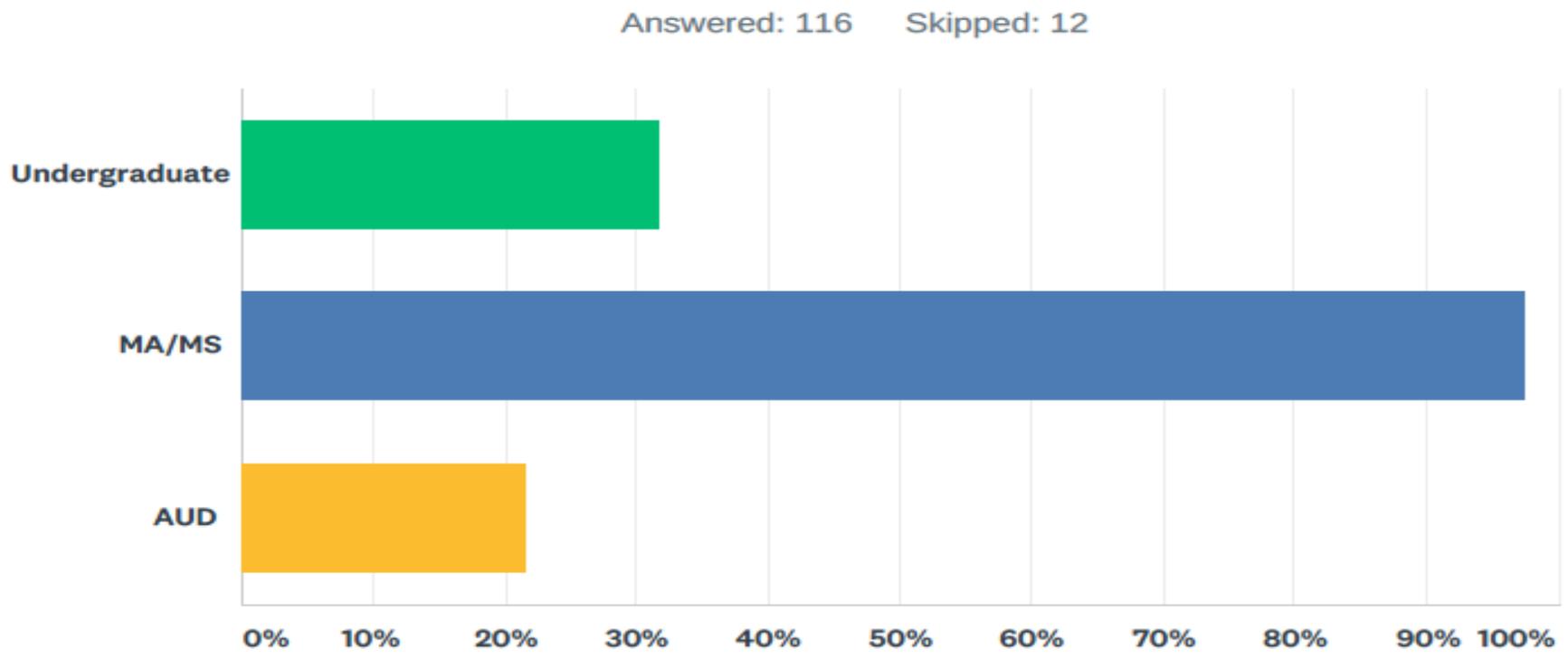
Question 3: How long have you had a formal IPE/IPP program?

Answered: 108 Skipped: 20



ANSWER CHOICES	RESPONSES	
0-1 years	24.07%	26
2-4 years	46.30%	50
5 or more years	29.63%	32
TOTAL		108

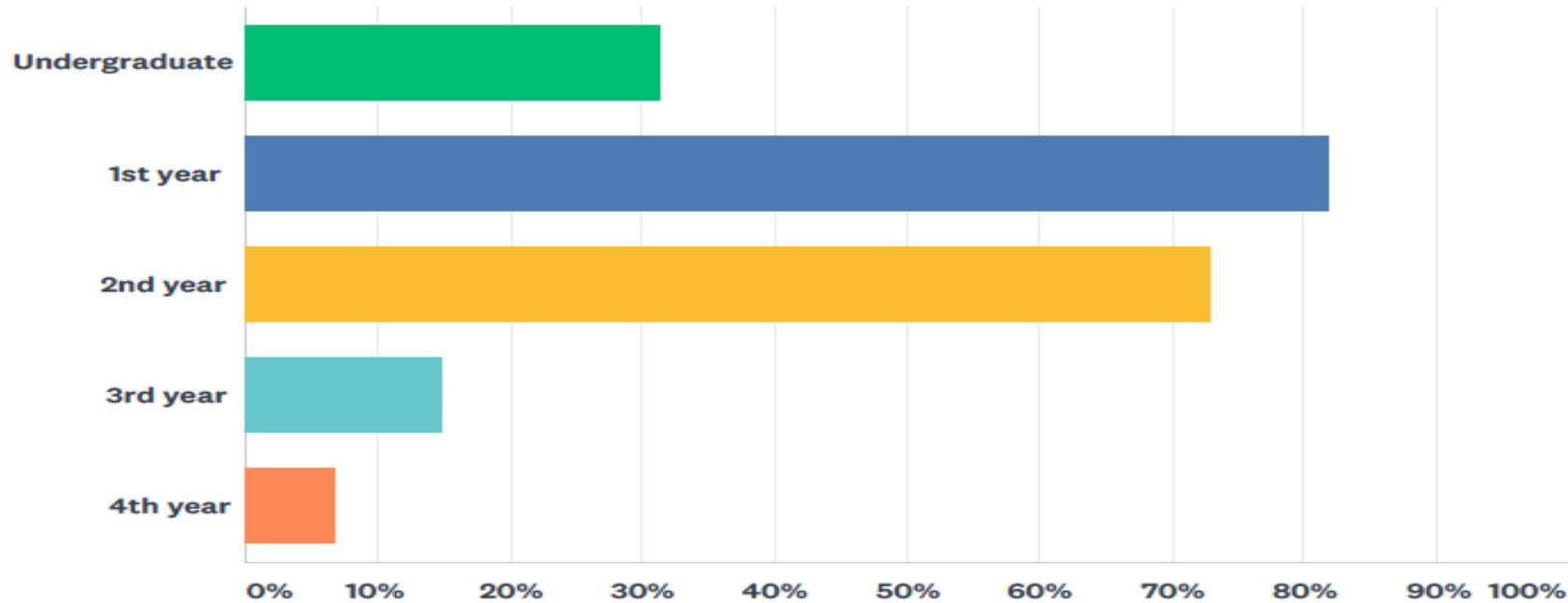
Question 4: Describe the students engaged in IPE/IPP (select all that apply)



ANSWER CHOICES	RESPONSES
Undergraduate	31.90% 37
MA/MS	97.41% 113
AUD	21.55% 25
Total Respondents: 116	

Question 5: At what point in the student's curriculum do they participate in IPE/IPP? (select all that apply)

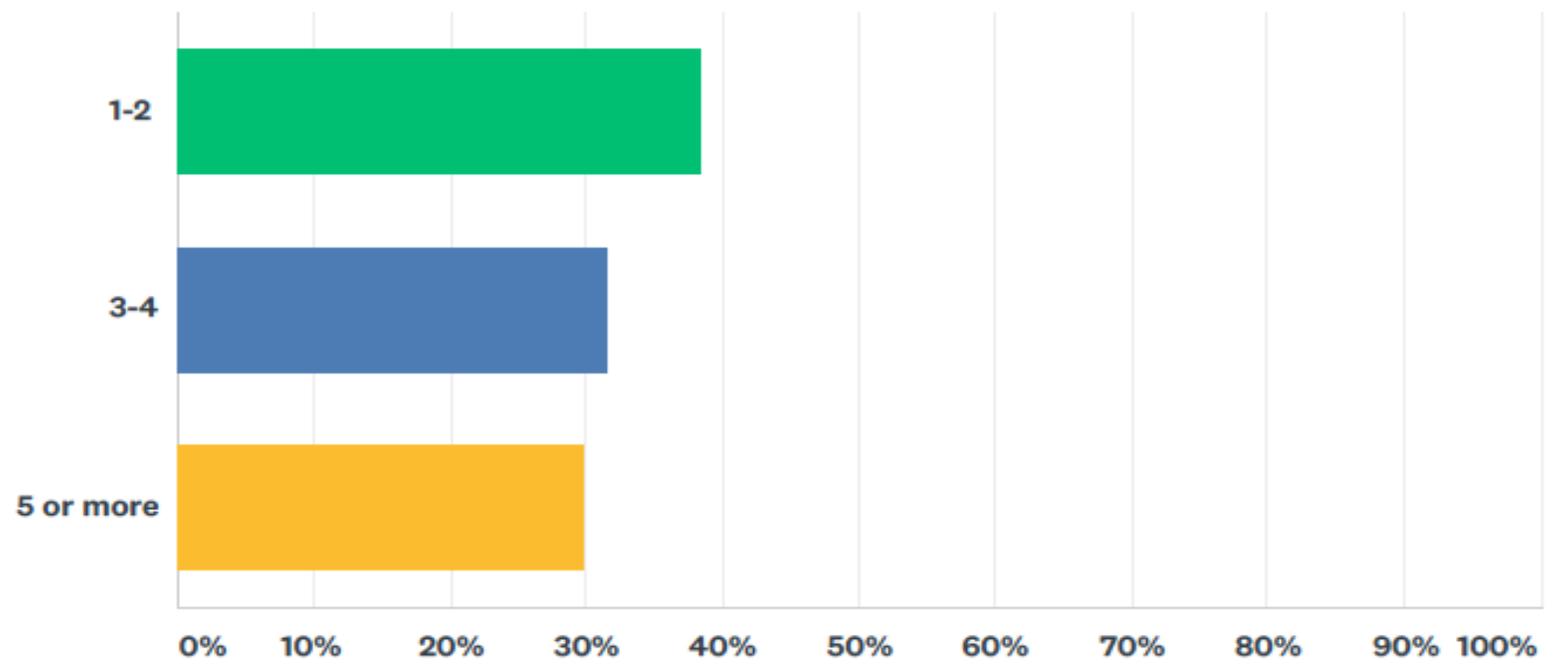
Answered: 115 Skipped: 13



ANSWER CHOICES	RESPONSES	
Undergraduate	31.30%	36
1st year	81.74%	94
2nd year	73.04%	84
3rd year	14.78%	17
4th year	6.96%	8
Total Respondents: 115		

Question 6: How many IPE/IPP events do students participate in during their program?

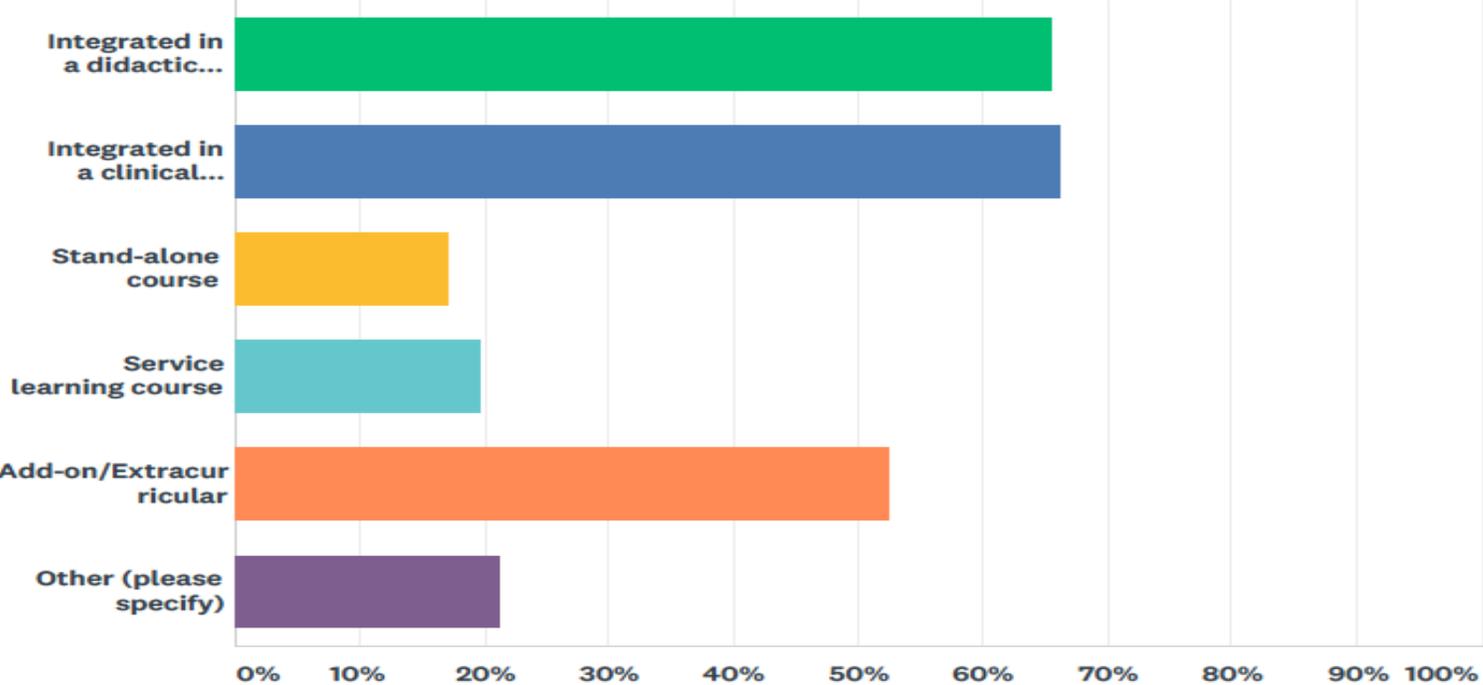
Answered: 117 Skipped: 11



ANSWER CHOICES	RESPONSES	
1-2	38.46%	45
3-4	31.62%	37
5 or more	29.91%	35
TOTAL		117

Question 7: Where are IPP/IPE concepts integrated into your program? (select all that apply)

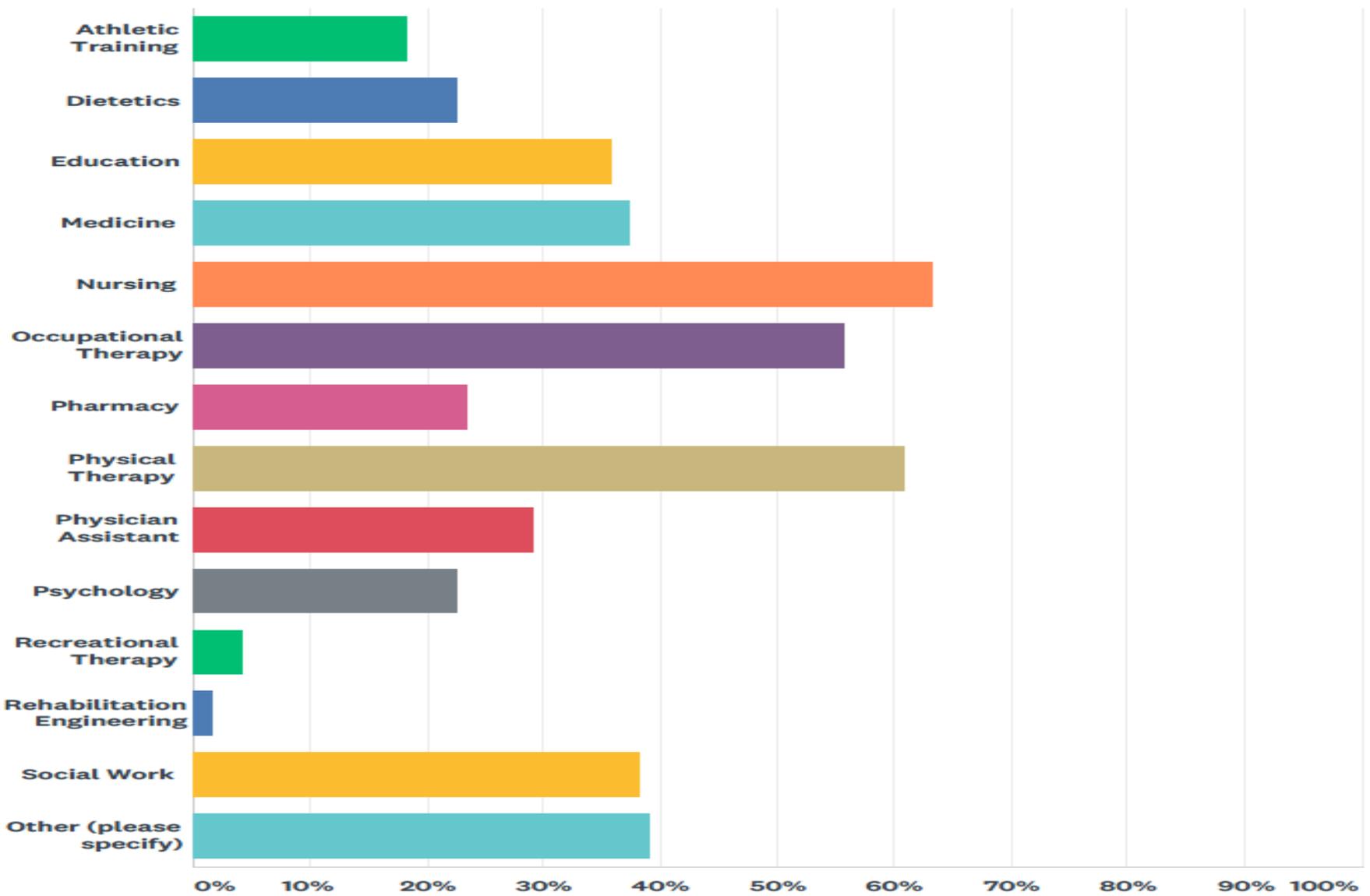
Answered: 122 Skipped: 6



ANSWER CHOICES	RESPONSES	
Integrated in a didactic course	65.57%	80
Integrated in a clinical course	66.39%	81
Stand-alone course	17.21%	21
Service learning course	19.67%	24
Add-on/Extracurricular	52.46%	64
Other (please specify)	21.31%	26
Total Respondents: 122		

Question 8: What disciplines are involved in IPE/IPP sessions? (select all that apply?)

Answered: 120 Skipped: 8

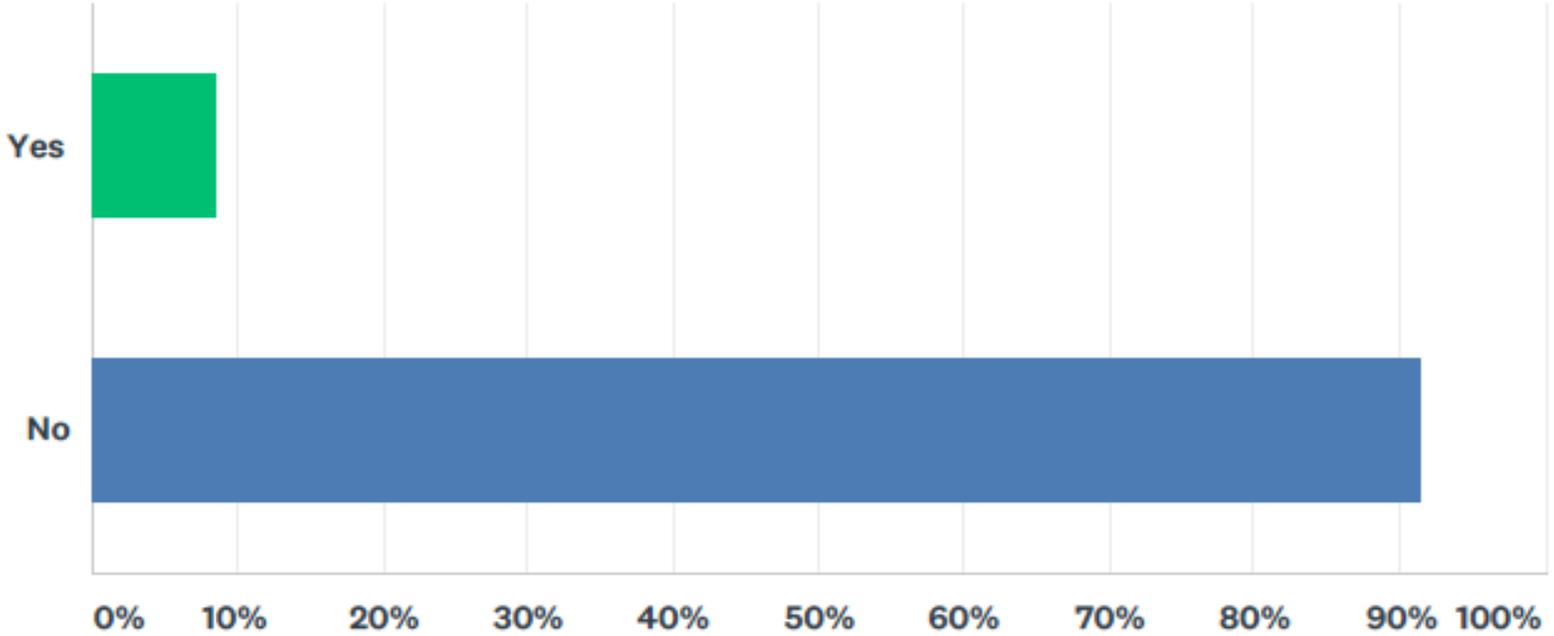


Question 8: What disciplines are involved in IPE/IPP sessions? (select all that apply?)

ANSWER CHOICES	RESPONSES	
Athletic Training	18.33%	22
Dietetics	22.50%	27
Education	35.83%	43
Medicine	37.50%	45
Nursing	63.33%	76
Occupational Therapy	55.83%	67
Pharmacy	23.33%	28
Physical Therapy	60.83%	73
Physician Assistant	29.17%	35
Psychology	22.50%	27
Recreational Therapy	4.17%	5
Rehabilitation Engineering	1.67%	2
Social Work	38.33%	46
Other (please specify)	39.17%	47
Total Respondents: 120		

Question 9: Do you have a formal IPE/IPP Student Organization?

Answered: 128 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	8.59%	11
No	91.41%	117
TOTAL		128

What did we learn from this survey?

- Formal and informal IPP IPE/variation in interpretation
- About 50% response rate from member programs
- Revised IPEC core competencies
- IPE is included on university websites
- The need to develop pathways/avenues to support the transition of knowledge, skills and competencies about IPE to IPP
- The need for more research in the IPP and the transition to IPP domains
- The need for more work in the IPE and IPP aspects in the educational settings.



ASHA

SO2: IPE/IPP

*Performance Measure data collected via
the CSD Education Survey*

 **CSD Education Survey**

Strategic Objective 2



Strategic Objective 2: Advance Interprofessional Education and Interprofessional Collaborative Practice (IPE/IPP)



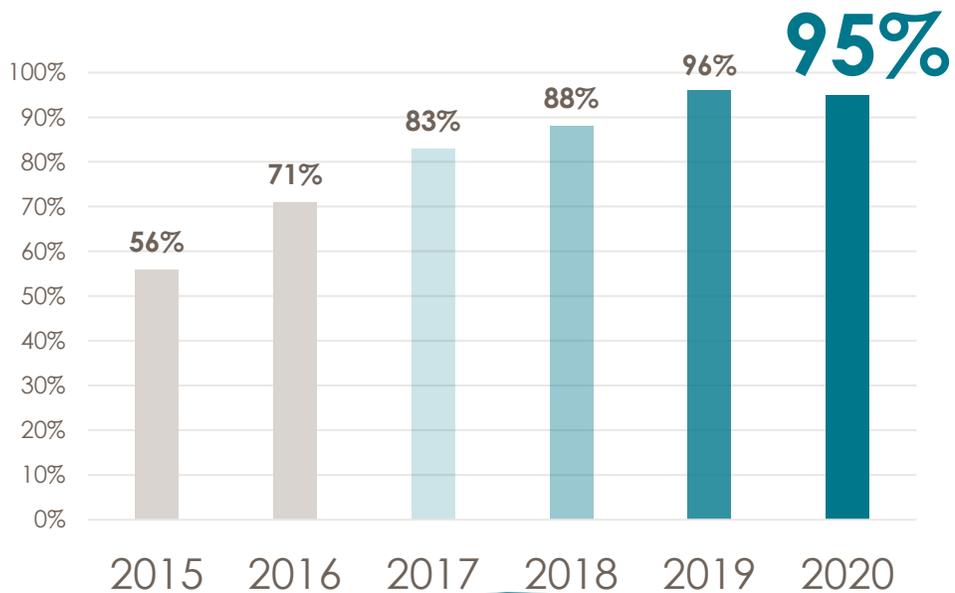
Outcome: Academic programs employ IPE models of personnel preparation and both students and ASHA members are engaging in interprofessional collaborative practice



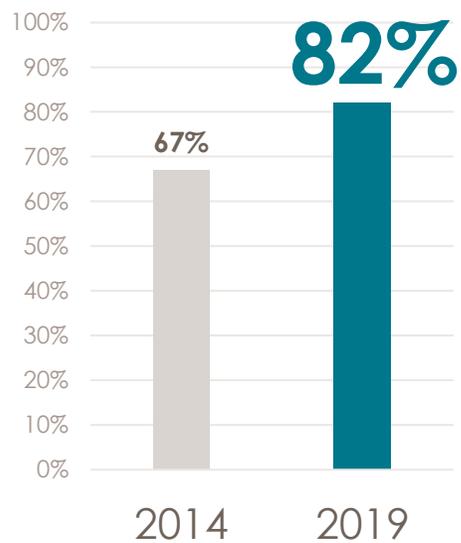
Performance measures: 80% by 2025

1. % of CSD academic programs that have IPE models in place
2. % of ASHA members participating in interprofessional collaborative practice
3. % of NSSLHA students engaged in interprofessional clinical practicum experiences

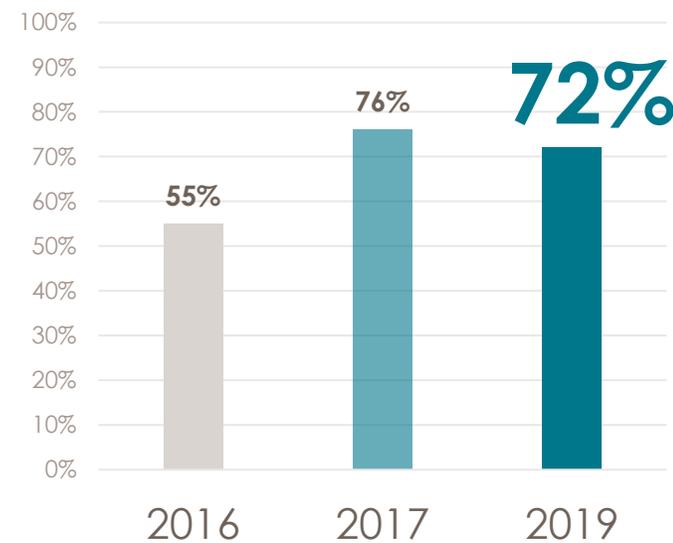
Progress Made to Date



% of Academic Programs Incorporating IPE Approaches

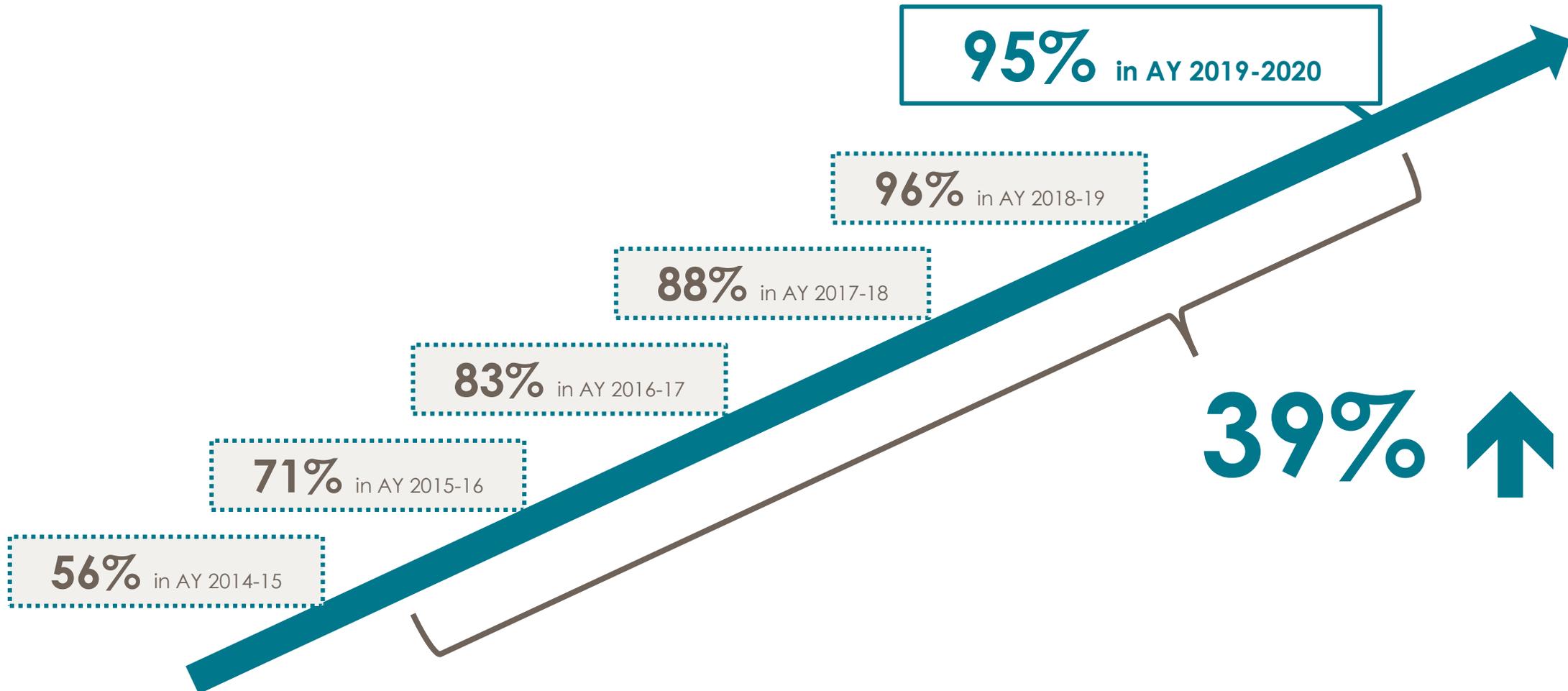


% of NSSLHA Students Engaged in IPE



% of Members Engaged in IPP

IPE in CSD Programs



Number of Programs Implementing IPE/IPP Approaches (2019-2020)

AREA OF STUDY AND DEGREE TYPE	NUMBER OF		
	EXISTING PROGRAMS	PROGRAMS RESPONDING	PROGRAMS THAT IMPLEMENT IPE/IPP
Audiology			
Clinical Doctorate: Entry Level	80	74 (93%)	66 (89%)
Clinical Doctorate: Post Entry Level	4	2 (50%)	0 (0%)
Speech-Language Pathology			
Master's	290	275 (95%)	266 (97%)
Clinical Doctorate: Post Entry Level	8	7 (88%)	7 (100%)
Total	382	358 (94%)	339 (95%)

IPE Survey Questions

Does the degree program employ interprofessional education or interprofessional practice (IPE/IPP) approaches in the academic and/or clinical curriculum? (help text provides the WHO definition of IPE/IPP)

If “Yes” the program is prompted to respond to a follow up question:

Please indicate the IPE/IPP approaches that are employed. (Select all that apply)

Survey Response Options – Core IPE Framework

1. **Explicit IPE learning constructs**, competencies, and outcomes are targeted in IPE learning activities such as Interprofessional Education Collaborative [IPEC] Core Competencies
2. **Two or more professions** are part of the IPE/IPP approach
3. **IPE/IPP outcomes target a continuum of learning** (e.g., attitudes/perceptions, knowledge/skills, performance in practice)
4. **Connecting IPE/IPP academic learning to clinical practice** ensures application and performance in practice

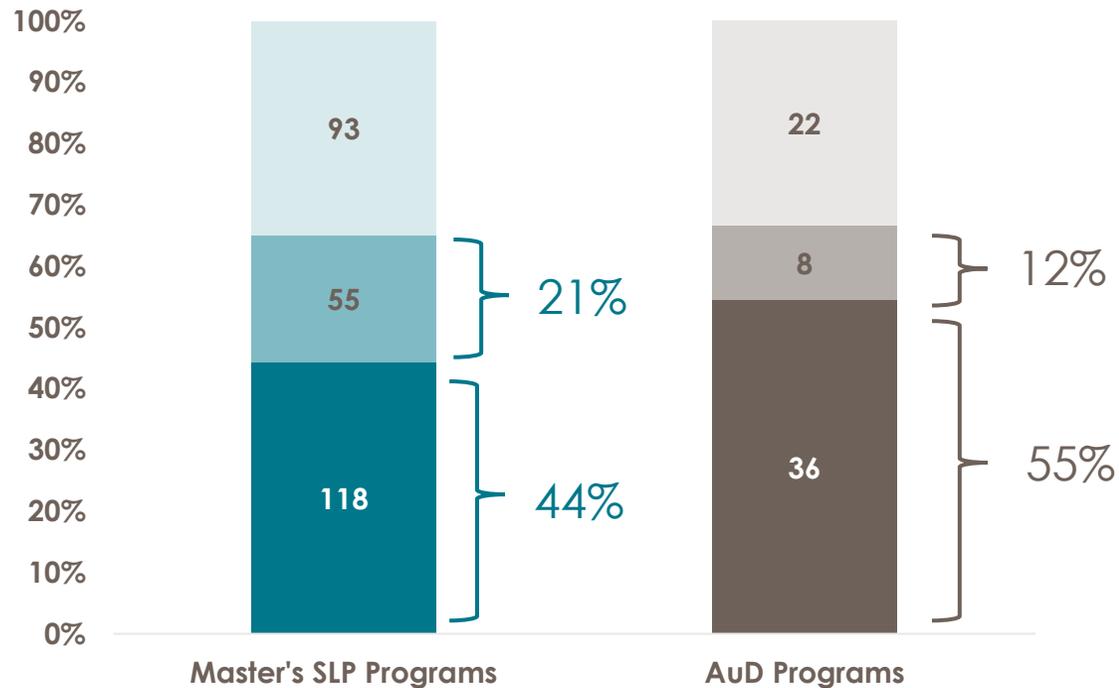
Survey Response Options – Implementation Mechanisms

- **Combining faculty** across disciplines to teach courses
- **Integrating students** from two or more professions in IPE courses
- **Case-based learning** using an IP team approach
- **Problem-based learning** using an IP team approach
- **Clinical practica** using IP teams or cases
- **Simulations** using an IP team approach
- **Grand rounds** with two or more professions participating
- **Debriefing** with students and facilitators after IPE learning

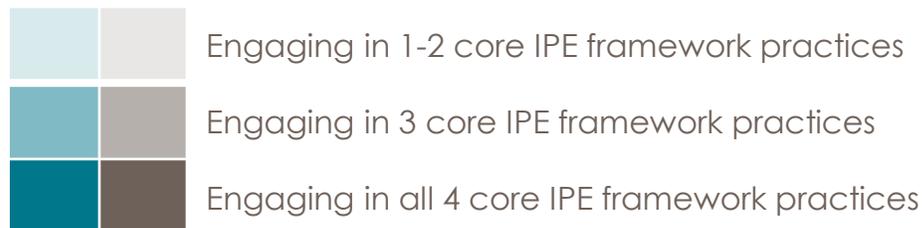
Survey Response Options – Implementation Mechanisms

- **Interprofessional research projects**
- **Journal groups** that include two or more professions
- **IP service-learning projects**
- **IPE events** (1-day IPE events or workshops)
- **Other** (e.g., “interdisciplinary aphasia camp,” “full course”)

Percent of CSD Programs Implementing Core IPE Framework

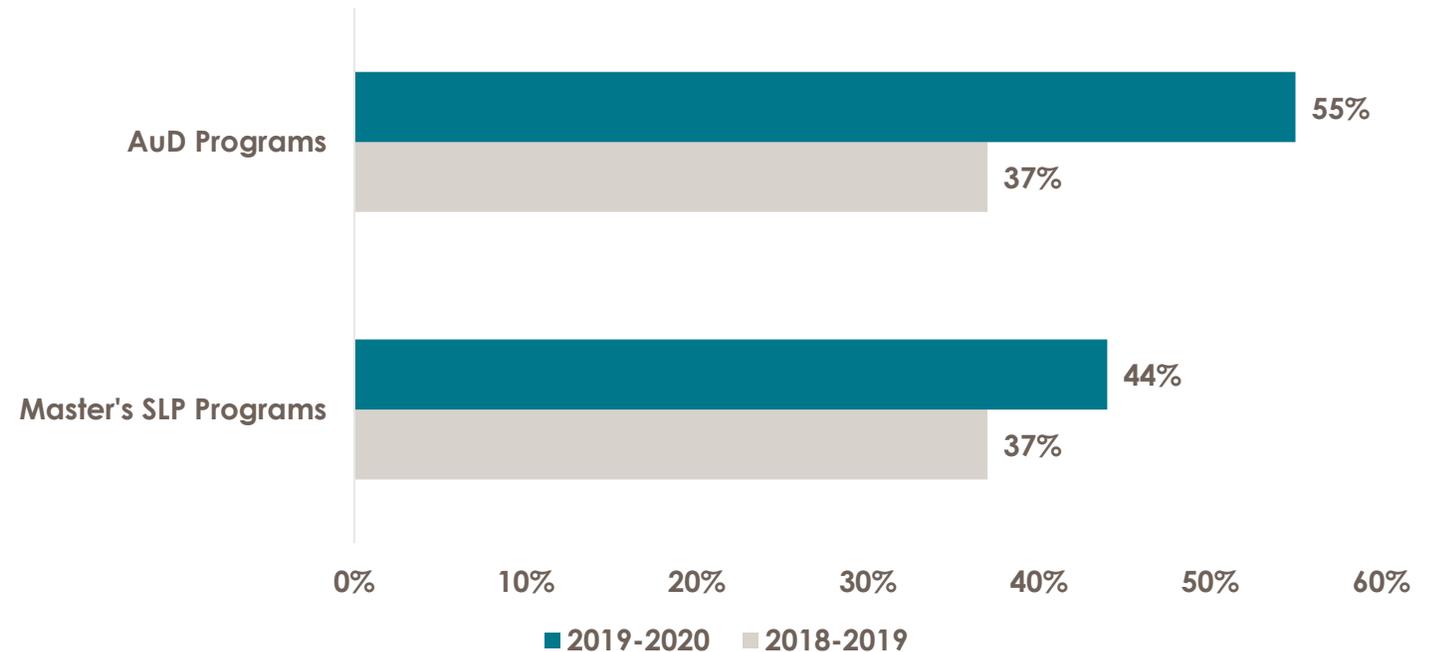


More than half the programs that reported engaging in IPE/IPP practices reported that they incorporated three to four core IPE framework items into practice

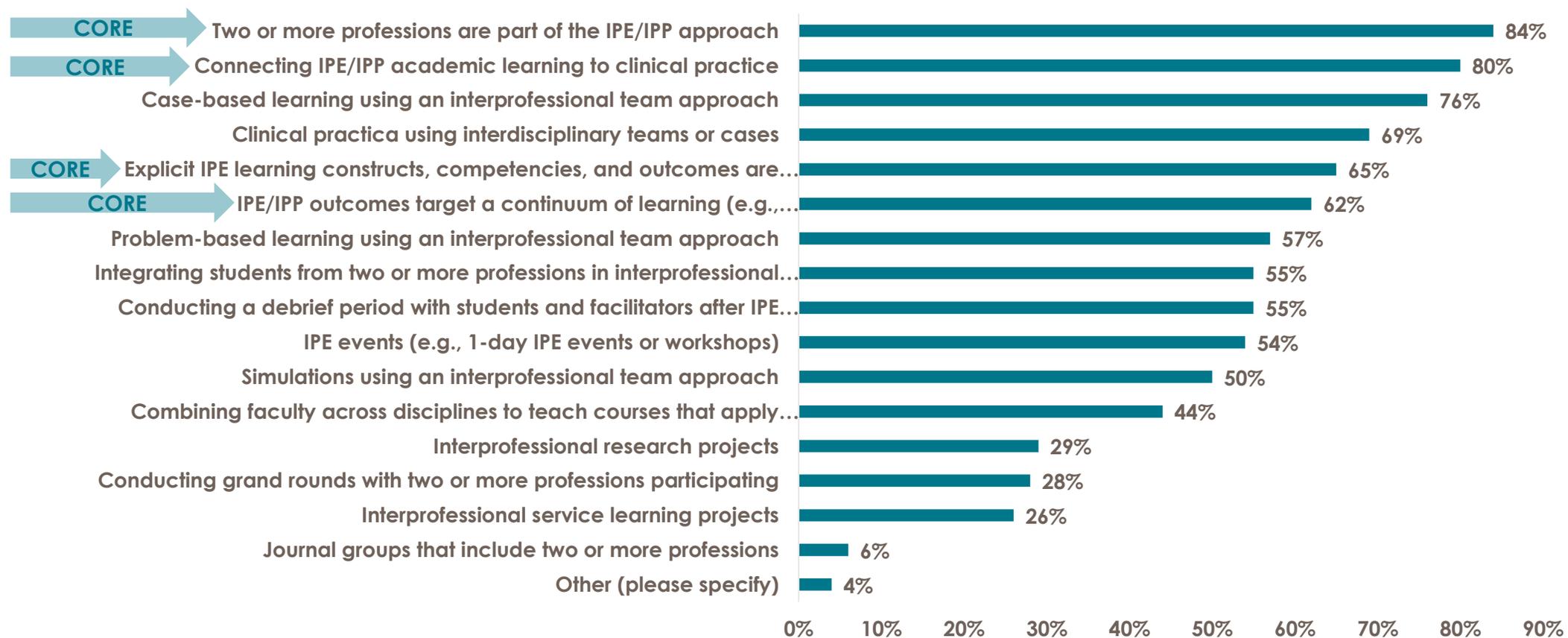


Core IPE Framework implemented over the past two academic years

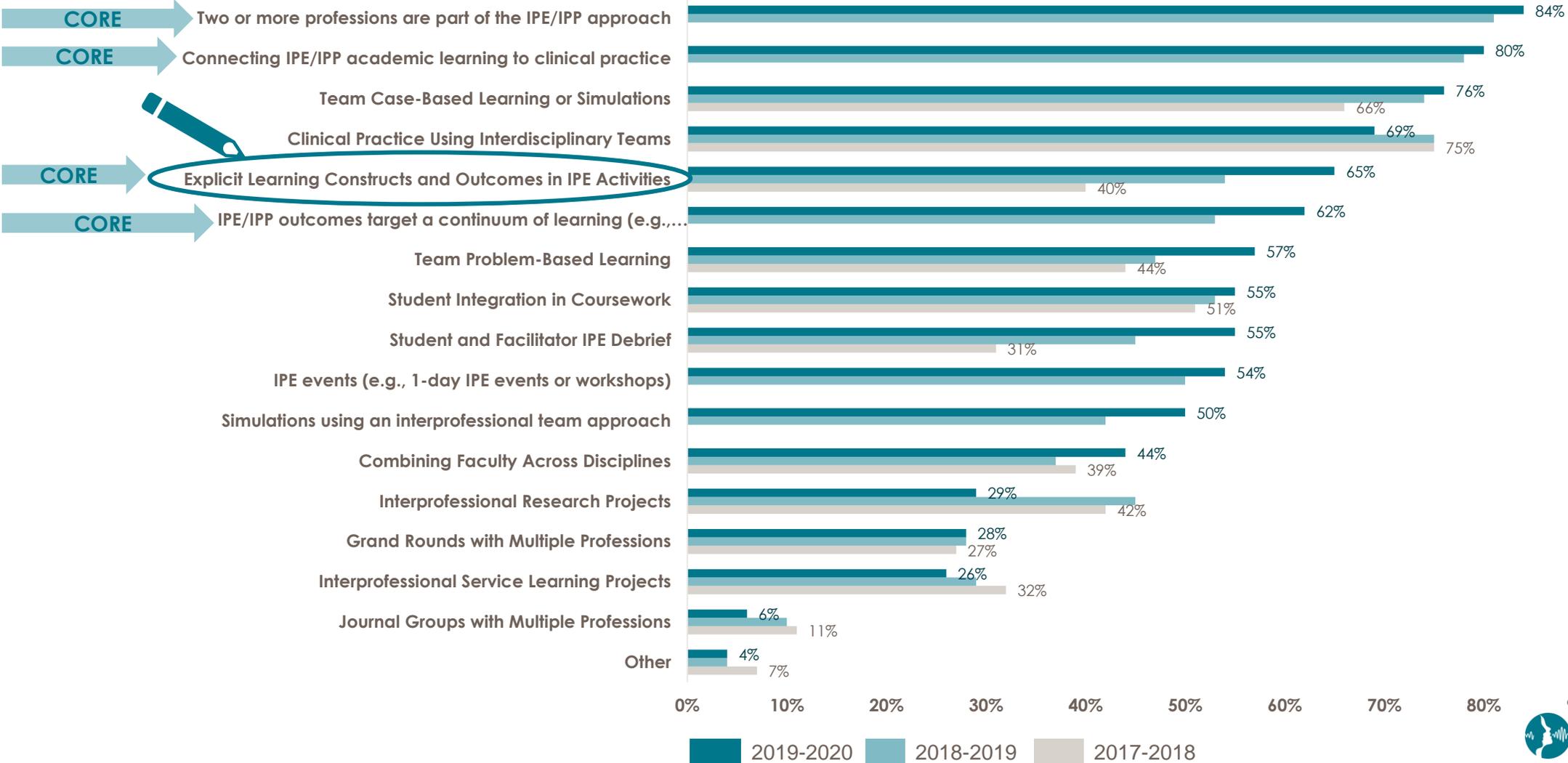
The percent of programs that reported incorporating the four core IPE framework items into practice increased between the 2018-2019 and 2019-2020 academic years



Percent of Programs Implementing Each IPE/IPP Approach (2019-2020)



Use of IPE/IPP Approaches Over Time



75% or More of Programs Implement

IPE/IPP APPROACH	NUMBER	PERCENT
Two or more professions are part of the IPE/IPP approach	285	84%
Connecting IPE/IPP academic learning to clinical practice	271	80%
Case-based learning using an interprofessional team approach	259	76%

50-74% of Programs Implement

IPE/IPP APPROACH	NUMBER	PERCENT
Clinical practica using interdisciplinary teams or cases	234	69%
Explicit IPE learning constructs, competencies, and outcomes are targeted in IPE learning activities	222	65%
IPE/IPP outcomes target a continuum of learning (e.g., attitudes/perceptions, knowledge/skills, performance in practice)	210	62%
Problem-based learning using an interprofessional team approach	192	57%
Conducting a debrief period with students and facilitators after IPE learning activity	186	55%
Integrating students from two or more professions in interprofessional coursework	185	55%
IPE events (e.g., 1-day IPE events or workshops)	183	54%
Simulations using an interprofessional team approach	169	50%

25-49% of Programs Implementing

IPE/IPP APPROACH	NUMBER	PERCENT
Combining faculty across disciplines to teach courses that apply across multiple disciplines	149	44%
Interprofessional research projects	100	29%
Conducting grand rounds with two or more professions participating	95	28%
Interprofessional service learning projects	88	26%

< 25% of Programs Implementing

IPE/IPP APPROACH	NUMBER	PERCENT
Journal groups that include two or more professions	20	6%
Other (please specify)	14	4%

Key Take-Aways

95% of CSD academic programs are implementing IPE approaches

- Approx. half of CSD programs implement all 4 core IPE framework items typical of exemplary IPE Centers/Programs
- An additional 20% implement at least 3 of the 4 core IPE framework items typical of exemplary IPE Centers/Programs

Need to increase

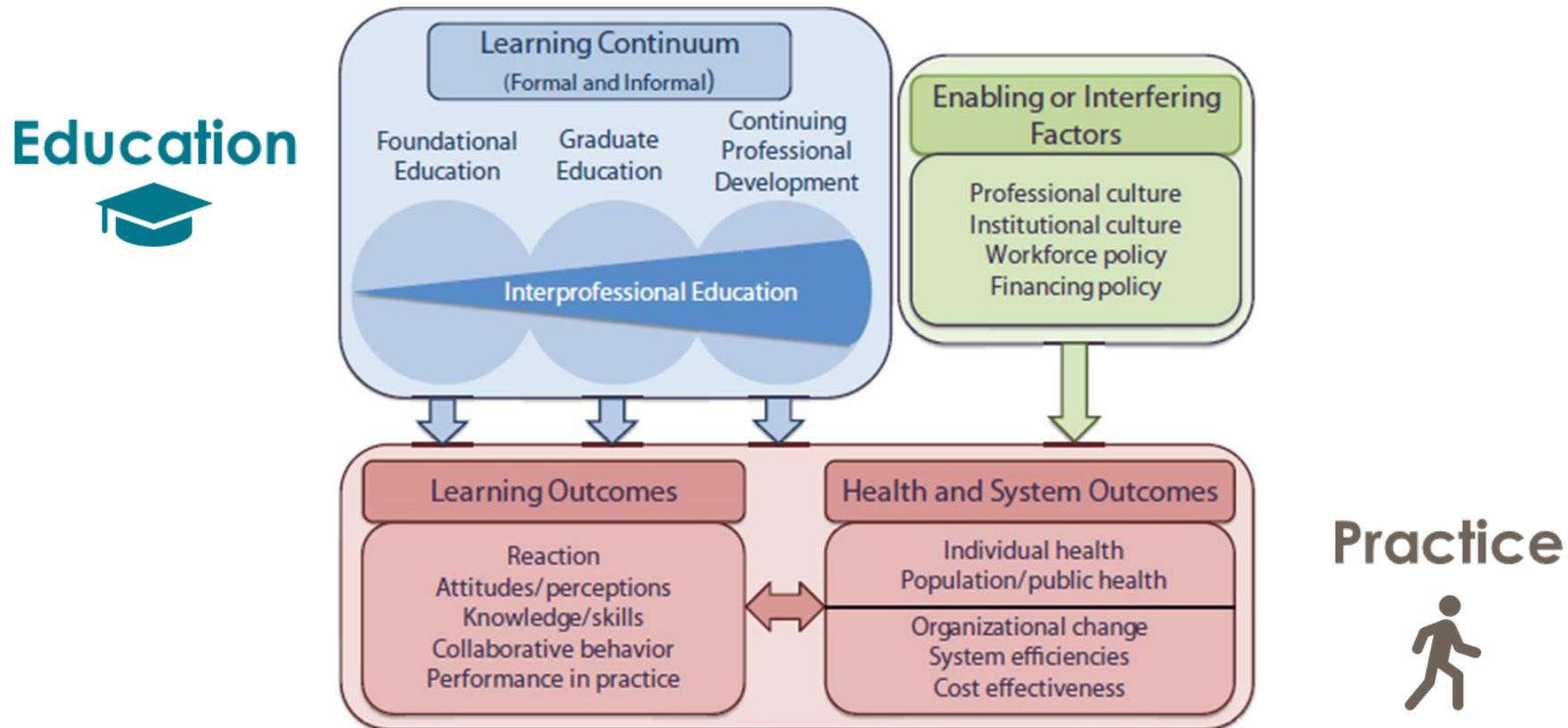
- The percent of programs implementing all 4 core IPE framework components
- The use of explicit learning constructs such as the IPEC Core Competencies in designing IPE
- The continuum of IPE activities beyond attitudes/perceptions to acquisition of knowledge/skills and performance of IPP in practice settings
- Opportunities for IPE/IPP research as part of IPE
- Instruction about the role of IPP teams in changing systems-level policy that addresses the social determinants of health and improves population health

Resources



Bridging IPE, IPP and Research

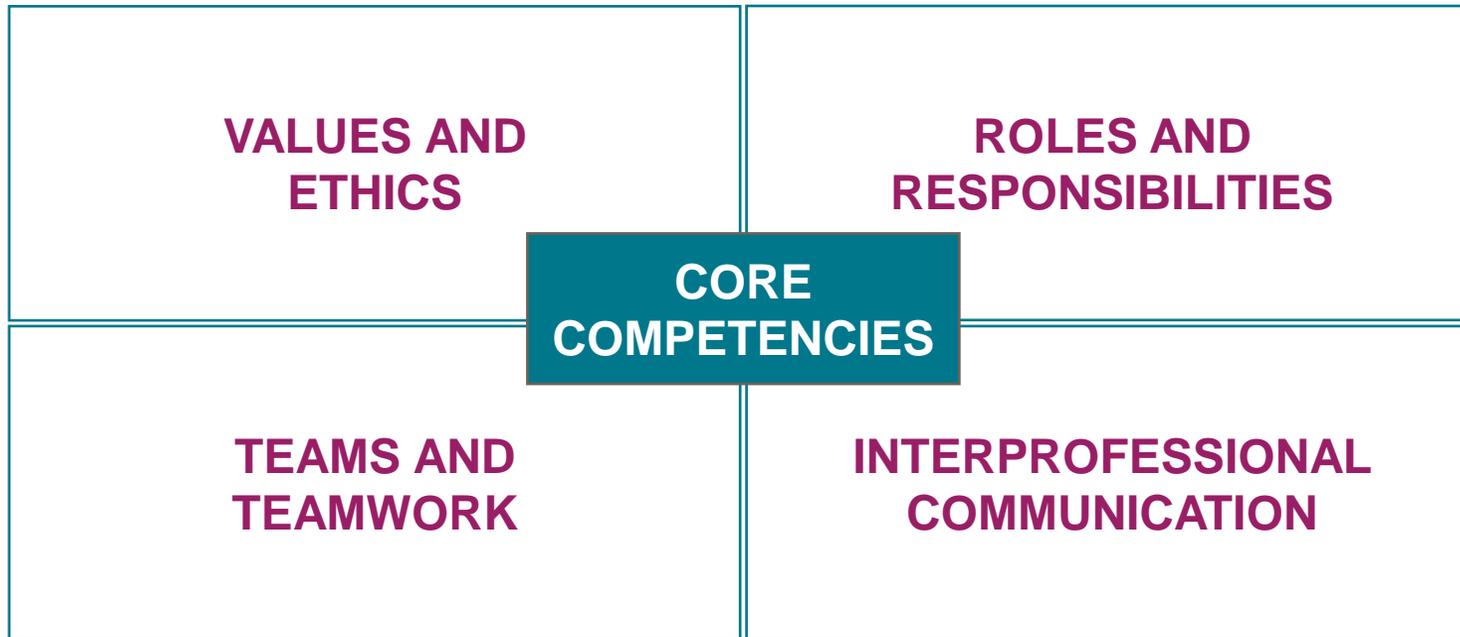
IOM Interprofessional Learning Continuum Model



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IPEC Core Competencies

(Competencies guide IPE instruction and evaluation of learners)



Interprofessional Education Collaborative (2016) *Core competencies for interprofessional collaborative practice: 2016 update*. Washington D.C.: Interprofessional Education Collaborative
https://ipecollaborative.org/uploads/IPEC-2016-Updated-Core-Competencies-Report_final_release_.PDF.

Kirkpatrick's Expanded Outcomes Typology

(A framework for learner evaluation)

Level 1: Learner's Reaction	Learners' views on the learning experience and its interprofessional nature
Level 2A: Modification of Attitudes/ Perceptions	Changes in reciprocal attitudes or perceptions between participant groups; changes in attitudes or perceptions regarding the value and/or use of team approaches to caring for a specific client group
Level 2B: Acquisition of Knowledge/Skills	Including knowledge and skills linked to interprofessional collaboration
Level 3: Behavioral Change	Individuals' transfer of interprofessional learning to their practice setting and their changed professional practice
Level 4A: Change in Organizational Practice	Wider changes in the organization and delivery of care
Level 4B: Benefits to Patients, Families, and Communities	Improvements in health or well-being of patients, families, and communities

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Common Components of IPE Curricula

HEALTH PROFESSIONS

2 or more

LEARNER OUTCOMES

Grounded in IP competencies (e.g., IPEC Core Competencies)

CURRICULUM FRAMEWORK

Exposure (novice), immersion (intermediate), competence (advanced)

TYPES OF ACTIVITIES & EXPERIENCES

IP courses, workshops, observations, high fidelity simulations, case scenarios, service-learning experiences, team projects, IPE Events, IP practicum experiences

SETTINGS

Multiple and varied experiences; classroom and clinical environments; research

References

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 - IOM Interprofessional Learning Continuum Model (Figure 3-2, page 29)
 - Kirkpatrick's Expanded Outcomes Typology (Table 3-1, page 33)
- Cahn, Peter S. (2020). How interprofessional collaborative practice can help dismantle systemic racism. *Journal of Interprofessional Care*, 34:4, 431-434, DOI: 10.1080/13561820.2020.1790224. Retrieved from <https://doi.org/10.1080/13561820.2020.1790224>

Contact AcademicAffairs@asha.org

ASHA Resources and Opportunities in 2021

New IPE/IPP webpages will be published later this year

<https://www.asha.org/practice/interprofessional-education-practice/>

ASHA Stipend Program to attend IPEC Institutes (Spring/Fall)

<https://www.asha.org/practice/ipe-ipp-stipend-program/>

ASHA Faculty Development Institute (AFDI) with IPE track

Virtual event on Oct. 1-3, 2021

<https://www.asha.org/academic/faculty-development-institute/>