Implementation of an Interprofessional Education (IPE) Clinical Experience into a Safety-Net Primary Care Clinic

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Objectives

• List the drivers for IPE and Interprofessional Collaboration (IPC).
• Describe the details of IPE clinic including participating disciplines, frequency of clinic, and the IPE clinic model.
• Detail results of first year outcomes from the IPE clinic.
• Discuss next steps for sustainability of the IPE clinic.
Drivers of IPE and IPC

• Graduates expected to work in IP teams upon graduation, but rarely taught how to effectively do so while in school.
• Prevent medical errors/ improve health outcomes
• Address health care reform and evolving shortage of primary care providers
• Discipline specific organization and accreditation bodies now strongly encouraging or mandating IPE be infused within curricula
Mercy Health Clinic

• One of 12 safety-net clinics in the Montgomery Care program of the Primary Care Coalition of Montgomery County.
• Serves low income, uninsured patients
• Provides a variety of services
  – Primary preventative care
  – Diagnosis and treatment of general acute and chronic medical problems
  – Management of chronic medication conditions
  – Referrals for consultation
IPE Clinic Details

• IPE Clinic began in Fall 2014
  – Pharmacy
  – Nursing (RN to BSN; adding DNP for fall '16)
  – Social Work (BSW and MSW)

• Goals of IPE Clinic
  – To enhance and expand care for medically complex, uninsured, ethnically diverse patients through coordinated interprofessional care.
  – To educate and train healthcare professional students from pharmacy, nursing, and social work programs at the University of Maryland, Baltimore (UMB) and the University of Maryland, Baltimore County (UMBC) to efficiently and effectively provide coordinated care through mastery of the Interprofessional Education Collaborative (IPEC) Core Competencies for Interprofessional Practice.
IPE Clinic Details (Con’d)

• IPE clinic orientation prior to seeing patients
  – Intro to IPE
  – Introduce IPEC competencies
  – Standardized patient (SP) simulated IPE clinic visit

• IPE clinic is half day every other week during academic semester

• IPE clinic specifics
  – Team huddle prior to patient visit
  – Gather info from the patient
  – Team debrief on info gathered with preceptor
  – Communicate plan and follow up to patient
  – Debrief on team dynamics
IPE Clinic Details (Con’d)

- IPE Clinic Flowsheet
- Outcomes tracked
  - Interventions made
  - Team Skills Scale (TSS)
  - IPEC Competency survey
  - ICAR/modified ICAR
Results – First Year

• 18 students participated in the clinic
  – 8 nursing
  – 6 pharmacy
  – 4 social work

• Examples of interventions made by IPE Clinic
  – Medication and chronic condition education
  – Medication adjustment to reach therapeutic goals
  – Enhanced access to medication, food and clothes
  – Referrals to specialty clinics, screening, etc.
Intervention Percentages for Year 1 of IPE Clinic

- Total: Medication Therapy related change 14%
- Total: Referrals 19%
- Vaccinations 2%
- Release of records 4%
- Lab work 8%
- Scheduling Appointments 14%
- Education 29%
- Assistance to obtain Medication or Treatment 10%
- Total: Referrals 20%
<table>
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<tr>
<th>Survey Item</th>
<th>N pre</th>
<th>N post</th>
<th>Pre</th>
<th>Post</th>
<th>P value</th>
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<tbody>
<tr>
<td>Function effectively in an interdisciplinary team</td>
<td>18</td>
<td>15</td>
<td>3.7</td>
<td>4.2</td>
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<tr>
<td>Treat team members as colleagues</td>
<td>18</td>
<td>16</td>
<td>4.3</td>
<td>4.6</td>
<td>0.5</td>
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<tr>
<td>Identify contributions to patient care that different disciplines can offer</td>
<td>18</td>
<td>16</td>
<td>3.7</td>
<td>4.6</td>
<td>0.003</td>
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<tr>
<td>Apply your knowledge to caring for a person in the team care setting</td>
<td>18</td>
<td>16</td>
<td>3.8</td>
<td>4.5</td>
<td>0.01</td>
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<tr>
<td>Ensure that patient/family preferences/goals are considered when developing the team's care plan</td>
<td>18</td>
<td>15</td>
<td>4</td>
<td>4.47</td>
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<td>Handle disagreements effectively</td>
<td>18</td>
<td>16</td>
<td>3.9</td>
<td>4.2</td>
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<tr>
<td>Strengthen cooperation among disciplines</td>
<td>17</td>
<td>14</td>
<td>3.7</td>
<td>4.6</td>
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<tr>
<td>Carry out responsibilities specific to your discipline’s role on a team</td>
<td>18</td>
<td>16</td>
<td>3.8</td>
<td>4.6</td>
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<tr>
<td>Address clinical issues succinctly in interdisciplinary meetings</td>
<td>18</td>
<td>16</td>
<td>3.9</td>
<td>4.4</td>
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<td>Participate actively at team meetings</td>
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<td>16</td>
<td>4.1</td>
<td>4.4</td>
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<tr>
<td>Develop an interdisciplinary care plan</td>
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<td>15</td>
<td>3.7</td>
<td>4.2</td>
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<tr>
<td>Adjust your care to support the team goals</td>
<td>15</td>
<td>16</td>
<td>3.7</td>
<td>4.4</td>
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<tr>
<td>Develop intervention strategies that help patients attain goals</td>
<td>17</td>
<td>16</td>
<td>3.8</td>
<td>4.4</td>
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<td>Raise appropriate issues at team meetings</td>
<td>18</td>
<td>16</td>
<td>3.6</td>
<td>4.4</td>
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<td>Recognize when the team is not functioning well</td>
<td>16</td>
<td>16</td>
<td>3.8</td>
<td>4.3</td>
<td>0.15</td>
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<tr>
<td>intervene effectively to improve team functioning</td>
<td>18</td>
<td>15</td>
<td>3.6</td>
<td>4.1</td>
<td>0.09</td>
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<tr>
<td>Help draw out team members who are not participating actively in meetings</td>
<td>18</td>
<td>16</td>
<td>3.1</td>
<td>4.2</td>
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IPEC Competency Survey Instrument

- Student self-assessment measure
- 42 item likert scale (SD, D, N, A, SA)
- Measures perceived achievement of the competencies defined by the IPEC expert panel

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</thead>
<tbody>
<tr>
<td>Engage diverse healthcare professionals with complementary professional expertise to develop strategies to meet specific patient care needs.</td>
<td>10</td>
<td>12</td>
<td>4</td>
<td>4.8</td>
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<tr>
<td>Choose effective communication tools and techniques to facilitate discussions and interactions that enhance team function.</td>
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<td>11</td>
<td>4.1</td>
<td>4.7</td>
<td>0.05</td>
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</table>
Challenges / Lessons Learned

- Must have clinical site buy-in and dedicated discipline-specific preceptors
- Must build in time for assessment
- Maintaining interrater reliability between pre/post ICAR
- Students from different disciplines are at IPE Clinic for different amounts of time.
- Use of the IPE Clinic Visit Flowsheet is crucial to maintain visit efficiency
Next Steps

• The IPE Team has secured the National Center for IPE “Accelerating Interprofessional Community-Based Education and Practice” grant award.
  – Goal: Work with a community partner and the individuals and families that it serves to develop innovative, creative and sustainable interprofessional clinical initiatives that accelerate their existing interprofessional education
  – 2 year grant
  – Expanded IPE Clinic to two additional new community sites (3 total)
  – Focused the patient population of IPE Clinic to patients with uncontrolled DM and a concomitant psychosocial concern such as depression or anxiety
  – New outcomes measured: A1C, PHQ-9
  – Continued outcomes measured: TSS, IPEC Competency Survey, modified ICAR
Future Planning

• Explore grants for continued expansion of the IPE Clinic model across the Montgomery County and the state of Maryland.

• Develop new models of IPE Clinic which include “in-house” preceptor-led IPE Clinics to main sustainability.
Questions?

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