



INTERPROFESSIONAL EDUCATION & PRACTICE

Catalogue of Decentralized
Interprofessional Education
Academic Year 2018 – 2019

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Definition of Decentralized Interprofessional Education

Decentralized Interprofessional Education (D-IPE) is a term established by the Department of Interprofessional Education at the UNT Health Science Center. The term allows us to distinguish IPE designed, offered, and controlled by faculty collaborators from distinct colleges and schools *from* IPE designed, offered, and controlled by the Department of IPEP, which is termed as “Centralized IPE (C-IPE).”

As a norm, C-IPE is open to all colleges and schools, including colleges and schools from collaborating universities. C-IPE is designed to meet the fundamental goals of interprofessional education: address the core competencies established by the Interprofessional Education Collaborative (IPEC, 2016) to improve health and health care.

C-IPE has its limitations. C-IPE is not wholly integrated into each college and school and the content (theme/method used to improve knowledge, skills, and attitudes regarding IPE Collaborative Practice) may not demonstrate relevancy to all students. With enhanced effort to incorporate content considered transferable to any health profession or setting, past evaluations indicate a disconnect remains for some students/professions.

Therefore, D-IPE is a solution toward improving the IPE needs of students. **D-IPE is defined as when faculty from varying colleges or schools come together to design and facilitate IPE that is fully embedded into a class or rotation.** Often, the collaboration between colleges and schools are smaller (e.g., 2-4 professions coming together). Smaller collaborations can apply interprofessional collaborative practice content distinctly related to the instruction of a class or rotation.

Coding System for Student Participation in Decentralized IPE

Not all D-IPE is a curricular requirement. Some IPE opportunities are voluntary. For example:

- Faculty may pilot an IPE and request participation from students through student organizations.
- The IPE opportunity is required, but is not offered to all students. For example, students assigned to a rotation may be required to participate in an IPE simulation during that rotation. However, the simulation is not offered during each rotation of students.
- IPE could occur in an elective class. Therefore, IPE is required for the students who register for the class, but as an elective, the class does not reach all students.

Use this table to understand student participation in D-IPE.

Coding System to Identify Level of Requirement for Student Involvement in D-IPE.	
An asterisk placed next to a college or school indicates the following:	
	Required for all students in a distinct college or school
*	Required for all students in a distinct class or rotation, therefore not reaching all students
**	Student participation is voluntary

Initial Level

Initial Level IPE includes some or all of the following criteria:

- Entry level IPE activities with a focus on acquisition of declarative knowledge around IPE core competencies (*Knows* and *Knows How* levels of Miller's Model of Competency Development)
- Typically includes UNTHSC 1st year students on teams made up of a variety of health care professions
- Students have an opportunity to learn about the health care professions and how various professions may work together in the care of a patient or population

IPE classes/events are described in chronological order for the academic year.

Due to the frequency of events and faculty time, information regarding some sessions may be incomplete. If the reader of this document is interested in learning more about a particular activity, please contact the Department of IPEP at ipep@unthsc.edu.

DRAFT

Interprofessional Population Health: Addressing Population Health through an Ethical Framework – Infant Mortality

Date: 09.18.2018

Duration: 2 hours

Faculty Collaborators:

Janet Lieto, DO – Texas College of Osteopathic Medicine, UNTHSC

Richard Baldwin, DO – Texas College of Osteopathic Medicine, UNTHSC

Morten Ostensen, JD – School of Public Health - Masters of Healthcare Administration, UNTHSC

David Farmer, PhD, LPC, LMFT – Department of Interprofessional Education and Practice, UNTHSC

Description:

After a series of lectures on the definition and scope of practice for public health, students from osteopathic medicine and healthcare administration conduct introductions and form a committee to review a public health concern and identify how to solve the issue upstream.

Objectives:

1. Describe the concept of population health
2. Examine the determinants of health
3. Explore fair distribution and participation in health

IPE Core Competencies:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Healthcare Administration	HMAP 6320 Organizational Leadership
Osteopathic Medicine	MEDE 7311 Medical Practice 2

Learning Health Literacy through Health Professional Service Learning

Date: 03.20.2019

Duration: 2 hours

Faculty Collaborators:

Teresa Wagner, DrPH, MS, CPH, RD/LD, CHWI – School of Public Health, UNTHSC

Marie Stark, MSN, RNC-OB – Harris College of Nursing, TCU

Jaime Loke, PhD, MA – Bob Schieffer College of Communication/Journalism, TCU

Description:

The session focuses on the shared responsibility of all professionals in public health and healthcare teams to address health literacy. The session uses maternal mortality as the theme, understanding that health literacy knowledge and skills are highly transferrable toward most contexts. The session begins with a brief lecture on health literacy from faculty. Next, nursing students (or any discipline student) present/demonstrate an assigned service-learning project – to develop health literate materials and tools, designed for new mothers, as an improved communication/education method to abate maternal mortality.

Then, in small inter-professional teams led by a nursing (or any discipline) student facilitator, students examine a patient case describing poor postpartum care. The teams discuss the case to identify what should not have happened and play a Health Literacy Word Game. Student teams then brainstorm and create an inter-professional team communication plan for promoting the health literate materials and tools, which could save the lives of postpartum mothers. Finally, students reflect and debrief on the advantages of developing health literacy tools as an inter-professional team.

Objectives:

1. Express the attitude that effective communication is essential to the delivery of safe, high quality health care and discuss two ways to achieve effective communication through inter-professional teams. (refer for more time/more targeted explanation/ teach-back/follow-up phone calls/discharge checklist)
2. Demonstrate ability giving two examples to select culturally and socially appropriate oral and written content for communication with patients and the public. (use generic or multicultural photos/know your audience/use plain language)
3. Demonstrated knowledge that everyone, regardless of literacy level, benefits from and prefers plain language communication and state three principles to achieve plain language communication. (use 5th-6th grade reading level/use universal precautions/avoid jargon and medical terminology)

IPEC Core Competencies:

Values/Ethics for Interprofessional Practice:

VE1. Place interests of patients and populations at the center of interprofessional health care delivery and population health programs and policies, with the goal of promoting health and health equity across the life span.

Roles/Responsibilities:

RR6. Communicate with team members to clarify each member's responsibility in executing components of a treatment plan or public health intervention.

Interprofessional Communication:

CC2. Communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible.

Teams and Teamwork:

TT7. Share accountability with other professions, patients, and communities for outcomes relevant to prevention and health care.

Pre-class Assignment:

Students reflect upon and identify their role in health literate communication.

College/School	Course (if applicable)
Journalism**	JOUR 10203 – Intro to Journalism
Nursing* (TCU)	NURS 40882 – Public Health Nursing Clinical
School of Public Health (MPH/MHA)	SPH Interlude: required program

DRAFT

Interprofessional Ethics: Mock Ethics Committee Meeting

Date: 03.20.2019

Duration: 2 hours

Faculty Collaborators:

Janet Lieto, DO

Lawrence Cohen, PharmD,

Richard Baldwin, DO

Roy Martin, DDiv

David Farmer, PhD, LMFT, LPC

Julia Reynolds, PA-C

Description:

This session is designed to provide an interprofessional education opportunity that focuses on using a “4-Topics Approach” to ethical problem solving in a hospital setting. The approach incorporates exploration of medical interactions, patient preferences, quality-of-life considerations and contextual features into clinical decision-making. Participants will analyze a clinical scenario and engage in a “mock-ethics committee” activity.

Objectives:

1. Explore end of life decision making. (AOA Competency VII. Systems Based Practice | EPA 9.)
2. Collaborate as a member of an interprofessional team.
3. Explain how an ethical dilemma can have no absolute right or wrong solutions.
4. Describe examples of the difficulties involved in medical decision making when ethical dilemmas are present and offer solutions for determining resolutions.
5. Given an ethical case study, employ the “Four Topics Chart” in analyzing a clinical case and making recommendations for continued care.
6. Demonstrate the ability to work with individuals from other professions to maintain a climate of respect and learning that contributes to decision making.

IPEC Core Competencies Addressed:

Values /Ethics for Inteprofessional Practice:

VE5. Work in cooperation with those who receive care, those who provide care, and others who contribute to or support the delivery of prevention and health services and programs.

VE6. Develop trusting relationships with patients, families, and other team members.

VE7. Demonstrate high standards of ethical conduct and quality of care in contributions to team-based care.

VE8. Manage ethical dilemmas specific to interprofessional patient/population centered care situations.

Roles/Responsibilities:

RR3. Engage diverse professionals who complement one’s own professional expertise, as well as associated resources, to develop strategies to meet specific health and healthcare needs of patients and populations.

RR8. Engage in continuous professional and interprofessional development to enhance team performance and collaboration.

Interprofessional Communication:

CC6. Use respectful language appropriate for a given difficult situation, crucial conversation, or conflict.

Teams and Teamwork:

TT3. Engage health and other professionals in shared patient-centered and population-focused problem-solving.

TT4. Integrate the knowledge and experience of health and other professions to inform health and care decisions, while respecting patient and community values and priorities/preferences for care.

TT5. Apply leadership practices that support collaborative practice and team effectiveness.

TT6. Engage self and others to constructively manage disagreements about values, roles, goals, and actions that arise among health and other professionals and with patients, families, and community members.

TT11. Perform effectively on teams and in different team roles in a variety of settings.

Pre-session Assignment:

Students are assigned a reading assignment on ethical problem solving.

College/School	Course (if applicable)
Osteopathic Medicine	MEDE 7514 Professionalism and Systems-based Practice
Pharmacy	PHAR 7126 Clinical Case Discussions 2
Physician Assistant	MPAS 5405 Clinical Pharmacology

DRAFT

Interprofessional: Seniors Assisting in Geriatric Education – year one

Date: teams of interprofessional students make two visits during the semester, with a team assignment due on 03.08.2019, 04.19.2019

Duration: student team visits typically last one to two hours

Faculty Collaborators:

Janice Knebl, DO, MBA

Brandy Schwarz, PT, DPT, OT, MBA, EdD

Tom Diver, MPAS, PA-C

Lawrence Cohen, PharmD, BCPP, FASHP, FCCP, FCP

Jada Stevenson, PhD, RDN, LD

Diane Hawley, PhD, RN, ACNS-BC, CCNS, CNE

Jennifer Watson, PhD, CCC-SLP, FNAP

Lynn Jackson, PhD, LCSW, ACSW

Description:

The IPE SAGE Program is an incredibly important component of a health care professions student's education. It provides a unique learning opportunity that is typically unavailable for healthcare professional school students. The SAGE program includes six visits over three semesters providing health care professions students with the opportunity to apply their classroom education in the context and care of an older adult. Students practice and demonstrate basic clinical skills, including taking histories, interviewing, conducting physical exams and cognitive assessments, and advising clients on nutrition, home safety, and discussing community resources available to them and advanced care planning.

VISIT 1: Adult Health History

Objectives

Students will be able to:

1. Appreciate the health history process for older people
2. Relate to the senior mentor's experiences of working with various health care professionals and how they have felt about those experiences
3. Recognize the unique and common roles, education and expertise of other health care professionals when learning about a senior's life and health history
4. Identify and apply the components of a geriatric focused health history
5. Discuss the unique health and psychosocial issues that have impacted the senior mentor's quality of life
6. Develop communication skills in an interprofessional team collaboration
7. Describe the characteristics of a successful interprofessional team
8. Assess the interprofessional health care team's performance and identify strategies for improvement
9. Conduct a health history of an older adult with appropriate documentation
10. Measure and interpret a blood pressure and pulse (rate/quality/rhythm)
11. Utilize patient-centered interviewing techniques, demonstrating respect and understanding cultural diversity and individual differences that characterize seniors, and health care team members
12. Communicate effectively with the senior using active and reflective listening
13. Communicate with team members to clarify each member's responsibility in executing the health history prior to the home visit

VISIT 2: Home Environmental/Safety & Functional Assessment

Objectives:

Students will be able to:

1. Relate their own views of “home” to that of a senior
2. Discuss the value that seniors attribute to aging-in-place
3. Discuss environmental risks for older adults
4. Describe how cognitive function affects ADL function for older adults generally and this adult specifically
5. Describe prevention strategies associated with home safety for the older adult
6. Define and describe ADL functional assessment of the older adult
7. Describe how older adults can develop strategies for successful aging-in-place
8. Explain how deficiencies found in the senior mentor’s Mini-Mental Status Exam (MMSE) and Geriatric Depression Scale (GDS) would impact their quality of life and aging-in-place
9. Complete a home environment assessment
10. Screen for depression using the GDS
11. Evaluate an older adult’s risk of falls using the “Get Up and Go Test”
12. Measure and interpret blood pressure (rate/quality/rhythm), pulse, respiratory rate, and severity of pain
13. Perform a functional assessment (ADL and IADL) with analysis of findings
14. Perform a cognitive evaluation using the MMSE and Clock Drawing Test
15. Summarize and teach the older person about the above assessment conclusions

IPEC Core Competencies Addressed:

The learning objectives guiding the interprofessional activity in SAGE is a modified version of the Core Competencies for Interprofessional Collaborative Practice (2011) with an emphasis on geriatric care.

Values/Ethics for Interprofessional Practice:

VE1. Place the interests of patients and populations at center of interprofessional health care delivery and population health programs and policies, with the goal of promoting health and health equity across the life span.

VE3. Embrace the cultural diversity and privacy of patients while maintain confidentiality in the delivery of team-based care. (Students will recognize the diverse and individual differences that characterize the geriatric population and the benefits of an interprofessional team in the assessment of physical, sensory, and cognitive function.)

Roles/Responsibilities:

RR3. Engage diverse professionals who complement one’s own professional expertise, as well as associated resources, to develop strategies to meet specific health and healthcare needs of patients and populations.

Interprofessional Communication:

CC2. Communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible. (Students will identify the benefits of a common language or terminology and procedure to use in discussing and assessing, medication reconciliation, ADLs, Falls Risk, and Cognitive Assessment in working collaboratively with other health care professionals with the geriatric population.)

Teams and Teamwork:

TT3. Engage health and other professionals in shared patient-centered and population-focused problem-solving. (Students will recognize the need to engage other health professionals appropriate to the specific care situation (Geriatric Population) in shared patient/person-centered monitoring and cross monitoring for improve quality of care and patient safety.)

College/School	Course (if applicable)
Dietetics (TCU Junior Level)	---
Nursing (TCU Soph/Junior Level)	---
Osteopathic Medicine	MEDE 7514 Professionalism and Systems-based Practice
Pharmacy	PHAR 7326 Non-Prescription Therapies 2 and IPPE
Physical Therapy	DPHT 7324 Development and Geriatrics
Physician Assistant	MPAS
Social Work (TCU – graduate education)	---

DRAFT

Interprofessional Cultural Competence

Date: 04.19.2019

Duration: 2 hours

Faculty Collaborators:

Caitlin Gibson, PharmD
Annesha White, PharmD
Vic Holms, PA-C
David Farmer, PhD

Description:

Students participate in a patient-led panel and a Q&A session. Patients, representing various special populations, share what they wish future healthcare professionals knew about them. Students are then invited to ask questions of panelists. Finally, students work in interprofessional teams to solve a cultural competency-based case. An implicit bias activity is also woven into the experience.

Objectives:

1. Identify the unique cultures, differences, and experiences represented on the interprofessional health care team and their value in creating respect for patient and population diversity
2. Demonstrate communication skills sensitive to cultural differences of diverse patients that result in recognition and respect for patient and population diversity and translate into quality patient care
3. Gather feedback from panelists on experiences within the panel and recommendations for next year
4. Develop a patient-centered, interprofessional team approach to patient cases

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

VE5. Work in cooperation with those who receive care, those who provide care, and others who contribute to or support the delivery of prevention and health services and programs.

VE8. Manage ethical dilemmas specific to interprofessional patient/population centered care situations.

Roles/Responsibilities:

Interprofessional Communication:

CC6. Use respectful language appropriate for a given difficult situation, crucial conversation, or conflict.

Teams and Teamwork:

TT3. Engage health and other professionals in shared patient-centered and population-focused problem solving.

TT4. Integrate the knowledge and experience of health and other professions to inform health and care decisions, while respecting patient and community values and priorities/preferences for care.

TT8. Reflect on individual and team performance for individual, as well as team, performance improvement.

College/School	Course (if applicable)
Pharmacy	PHAR 7263 Integrated Pharmacotherapy: Special Populations
Physician Assistant	MPAS 5322 Physical Diagnosis

IP Wheelchair Experience

Date: 03.25.2019

Duration: 1 hour

Collaborating Faculty:

Brandy Schwarz, PT, DPT, OT, MBA, EdD

Mike Richardson, PT, DPT, GCS, COMT

Taner Özdil, PhD, MLA, BLA

Karen Bell, PhD, MPH, BS

Description:

ADA Accessibility for Physical Therapy, Public Health, and Landscape Architecture

Objectives:

College/School	Course (if applicable)
Physical Therapy*	DPHT 7231 Therapeutic Interventions 1
Public Health*	BACH
Landscape Architecture and Design (UTA)*	LARC

Intermediate Level

Intermediate Level IPE typically include some or all of the following criteria:

- Intermediate level IPE's focus on applying knowledge of the IPE core competencies to specific situations or settings (*Knows How* and *Shows* levels of Miller's Model of Competency Development)
- Typically includes UNTHSC 2nd year students on teams made up of two or more professions, working collaboratively on a IPE competency topic

IPE classes/events are described in chronological order for the academic year.

DRAFT

Interprofessional: Seniors Assisting in Geriatric Education – year two

Date: teams of interprofessional students make four visits over the course of an academic year, with team assignments due on 09.29.2018, 11.29.2018, 02.27.2019, 04.05.2019

Duration: student team visits typically last one hour

Faculty Collaborators:

Janice Knebl, DO, MBA

Brandy Schwarz, PT, DPT, OT, MBA, EdD

Tom Diver, MPAS, PA-C

Lawrence Cohen, PharmD, BCPP, FASHP, FCCP, FCP

Jada Stevenson, PhD, RDN, LD

Diane Hawley, PhD, RN, ACNS-BC, CCNS, CNE

Jennifer Watson, PhD, CCC-SLP, FNAP

Lynn Jackson, PhD, LCSW, ACSW

Description:

The IPE SAGE Program is an incredibly important component of a health care professions student's education. It provides a unique learning opportunity that is typically unavailable for healthcare professional school students. The SAGE program includes six visits over three semesters providing health care professions students with the opportunity to apply their classroom education in the context and care of an older adult. Students practice and demonstrate basic clinical skills, including taking histories, interviewing, conducting physical exams and cognitive assessments, and advising clients on nutrition, home safety, and discussing community resources available to them and advanced care planning.

VISIT 3: Medications/Pharmacology Assessment

Objectives:

Students will be able to:

1. Recognize the challenge of polypharmacy in older adults
2. Respect the role of various health professionals in identifying the effectiveness of pharmacologic agents
3. Identify personal opinions, values, and experiences influencing their own attitudes about medication management with patients
4. Identify side effects and interactions associated with selected drugs
5. Describe three factors that promote medication non-compliance in older adults
6. Describe pharmacologic changes in aging and the relevance to therapeutic decisions
7. Apply unique and complementary abilities of all members of the IP team to optimize patient care
8. Perform a medication assessment and an in-home medication inspection
9. Measure and interpret blood pressure, pulse (rate/quality/rhythm), respiration and pain
10. Utilize patient-centered interviewing techniques, demonstrate respect and understanding of cultural diversity and individual differences that characterize seniors, and health care team members
11. Communicate effectively with the senior using active and reflective listening

VISIT 4:

Objectives:

Students will be able to:

1. Recognize the impact of solitude on nutritional intake of seniors
2. Recognize the significance of nutritional deficiency as it affects older adult functioning and quality of life
3. Identify personal opinions, values, and experiences influencing own attitudes about nutrition with patients

4. Discuss primary prevention strategies for the elderly targeting nutrition
5. Delineate appropriate nutritional interventions based on health and age
6. Apply the complementary abilities of all members of the IP team to optimize patient care
7. Estimate an older adult's body mass index
8. Determine a senior's nutritional status
9. Educate an older adult on nutritional balance
10. Measure and interpret blood pressure, pulse (rate/quality/rhythm), respiration and pain
11. Access and obtain valid nutritional material and nutritional assessment and conduct an analysis on an older adult
12. Determine differences in nutritional requirements associated with diets for selected health conditions
13. Utilize patient-centered interviewing techniques with the IP team, demonstrating respect and understanding of cultural diversity and individual differences that characterize senior adults
14. Communicate effectively with the senior using active and reflective listening

VISIT 5: Community Resource Assessment & Advance Care Planning

Objectives:

Students will be able to:

1. Appreciate improving and optimizing functionality for older adults using community resources
2. Value an older adults' decision whether or not to accept assistance from community service agencies
3. Relate own views on "advance care planning" to that of a senior
4. Appreciate the individual differences in advance care planning
5. Value the role of self-determination in the advance care planning process
6. Begin the process of self-awareness of one's own personal attitudes as it relates to advance care planning
7. Describe common needs of older adults
8. Learn about community resources that can help meet the needs and maintain the independence of older adults
9. Define advance care planning and why it is important
10. List the steps of advance care planning
11. List events when advance care planning should be updated
12. Discuss appropriate advance health care decisions with a senior mentor
13. Measure and interpret a blood pressure, pulse (rate/quality/rhythm), respiration and pain
14. Do a needs assessment to identify potential community resources that may benefit an older adult
15. Take a life philosophy history, i.e. determine the beliefs of the senior regarding aggressiveness of care and the reasons why or why not.

VISIT 6: Health Literacy Project and Ending the Healthcare Professional/Patient Relationship

Objectives:

Students will be able to:

1. Recognize the importance of using health literacy principles and strategies to help with patient education and management
2. Reflect upon ways the team incorporated health literacy principles and strategies in the project
3. Recognize the value of communication in therapeutic relationships
4. Name key health literacy principles and strategies used in the health literacy project
5. Identify the strategies that promote health literacy
6. Identify and reference quality health education resource(s) used to create the health literacy project
7. Understand the process for terminating a healthcare professional/patient relationship
8. Develop a presentation on a topic that includes the health literacy principles and strategies

9. Measure and interpret a blood pressure, pulse (rate/quality/rhythm), respiration and pain
10. Conduct a meaningful presentation with the senior mentor on a selected topic for health education and management
11. End a healthcare professional/patient relationship in a professional manner

IPEC Core Competencies Addressed:

The learning objectives guiding the interprofessional activity in SAGE is a modified version of the Core Competencies for Interprofessional Collaborative Practice (2011) with an emphasis on geriatric care.

Values/Ethics for Interprofessional Practice:

VE1. Place the interests of patients and populations at center of interprofessional health care delivery and population health programs and policies, with the goal of promoting health and health equity across the life span.

VE3. Embrace the cultural diversity and privacy of patients while maintain confidentiality in the delivery of team-based care. (Students will recognize the diverse and individual differences that characterize the geriatric population and the benefits of an interprofessional team in the assessment of physical, sensory, and cognitive function.)

Roles/Responsibilities:

RR3. Engage diverse professionals who complement one’s own professional expertise, as well as associated resources, to develop strategies to meet specific health and healthcare needs of patients and populations.

Interprofessional Communication:

CC2. Communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible. (Students will identify the benefits of a common language or terminology and procedure to use in discussing and assessing, medication reconciliation, ADLs, Falls Risk, and Cognitive Assessment in working collaboratively with other health care professionals with the geriatric population.)

Teams and Teamwork:

TT3. Engage health and other professionals in shared patient-centered and population-focused problem-solving. (Students will recognize the need to engage other health professionals appropriate to the specific care situation (Geriatric Population) in shared patient/person-centered monitoring and cross monitoring for improve quality of care and patient safety.)

College/School	Course (if applicable)
Dietetics (TCU Senior Level)	---
Nursing (TCU Junior/Senior Level)	---
Osteopathic Medicine	MEDE Medical Practice 3
Pharmacy	PHAR 7326 Non-Prescription Therapies 2 and IPPE
Physical Therapy	DPHT 7324 Development and Geriatrics
Physician Assistant	MPAS
Social Work (TCU – graduate education)	---

Interprofessional Clinical Applications of Basic Science

Date: 10.05.2018

Duration: 2 hours

Collaborating Faculty:

Monica Jenschke, PhD, CRNA

Michael Gatch, PhD

Description:

This IPE activity will team up basic scientists-GSBS students and clinicians-resident registered-nurse anesthetists (RRNAs). The activity will focus on learning about each other's profession, identifying where the professions intersect in healthcare, effective communication for collaboration and engaging each other's expertise to address a clinical issue by designing collaborative research. This activity was designed with graduate students in mind, and the TCU faculty member leading the activity is a former UNTHSC GSBS student. The event has been very popular with students and faculty from both campuses. The first offering occurred in the fall of 2014.

Case Background:

Obstructive sleep apnea (OSA) afflicts over 25 million Americans. OSA is associated with other co-morbidities such as hypertension, diabetes, heart disease, stroke, and depression. Students will work together to discuss OSA pathophysiology, consequences of the disease, and effective treatment and its benefit for surgical patients. After discussion, students will work together to develop the next stage of research studies for unraveling the mechanisms of OSA-induced myocardial damage and to develop biomarkers for severity or early onset of the disease.

The case will be of direct interest to students studying cardiovascular disease, aging, inflammation, neurodegeneration and pharmacology, but will be of value to any student by helping them to identify the clinical relevance of basic science research and by learning to interact with clinically trained peers. Remember: Grant review committees score applications better if they have clearly stated clinical relevance.

Objectives:

1. Discuss the role of nurse anesthetists and basic scientists in improving care – How do basic research scientists and clinicians team up to offer optimal care- identify obstructive sleep apnea (OSA) and use appropriate interventions during surgical anesthesia?
2. Identify a problem in current treatment – OSA leads to significant cardiovascular and neural damage; leads to increase risk of stroke and other adverse events during surgical anesthesia
3. Identify possible physiological, pharmacological, and/or genetic mechanisms
4. Healthcare professionals and basic scientists will work together to identify possible causes, identify likely mechanisms, design effective treatments, and devise students to assess both mechanism and treatment effectiveness

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

VE4. Respect the unique cultures, values, roles/responsibilities of other professions to maintain a climate of mutual respect and shared values.

VE7. Demonstrate high standards of ethical conduct and quality of care in one's contributions to team-based care.

Roles/Responsibilities:

RR7. Forge interdependent relationships with other professionals to improve care and advance learning.

RR8. Engage in continuous professional and interprofessional development to enhance team performance.

Interprofessional Communication

CC4. Listen actively and encourage ideas and opinions of other team members.

CC6. Use respectful language appropriate for a given difficult situation, crucial conversation, or interprofessional conflict.

Teams and Teamwork

TT3. Engage other health professionals – appropriate to the specific care situation – in shared patient-centered problem solving.

TT10. Use available evidence to inform effective teamwork and team-based practices.

College/School	Course (if applicable)
Graduate School of Biomedical Sciences**	---
Clinicians/Residency/Registered Nurse Anesthetists (RRNA) (TCU)	---
Athletic Training (TCU)	---

DRAFT

Interprofessional Medical Error/Patient Advocacy

Date: 01.18.2019

Duration: 2 hours

Collaborating Faculty:

Adenike Atanda, PharmD

Tamara Willmoth, PA-C

Description:

An interdisciplinary patient safety workshop created to facilitate the development of effective interprofessional collaboration and communication skills among pharmacy and physician assistant students.

The workshop includes a 30-minute presentation highlighting fundamental TeamSTEPPS® and medication safety concepts. Afterward, students are divided into interdisciplinary teams to complete two activities highlighting the importance of effective communication via role playing, discussion and patient cases. Faculty from both colleges are involved in the facilitation of the activity. A reflection activity is completed by the students to assess the impact of the workshop on their perceived confidence and proficiency in identifying and addressing medical errors, communication skills and perceived value of interprofessional collaboration.

Objectives:

1. Define medical errors and its impact on patients, their families and other healthcare providers.
2. Identify medical errors and evaluate appropriate strategies to prevent or minimize the occurrence of medical errors.
3. Discuss the importance of interprofessional communication and collaboration.
4. Review the TeamSTEPPS® framework and apply its concepts to improve interprofessional communication and collaboration.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Pharmacy	PHAR 7166
Physician Assistant	MPAS 5205

Advanced Level

Advanced Level IPE typically include some or all of the following criteria:

- IPE activities with a focus on applying procedural knowledge of the IPE core competencies to specific situations and settings (*Shows* and *Does* levels of Miller's Model of Competency Development)
- Typically include UNTHSC 3rd and 4th year students and residency trainees on student teams of four or less professions, working to demonstrate collaborative practice skills

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Interprofessional Code Simulation

Dates: 10.01.2018,10.03.2018, 10.05.2018 | 02.22.2019, 02.25.2019, 02.27.2019

Duration: 2 hours per session

Collaborating Faculty:

Laura Thielke, BSN RN

Marian Gaviola, PharmD

Damon Schranz, DO

Description:

The Mock Code Scenario occurs in the Spring and Fall. This is an IPE collaboration between TCU Harris School of Nursing, Texas College of Osteopathic Medicine, UNT System College of Pharmacy, and Chaplaincy Program at JPS hospital. The activity focuses on communication between members of a medical team in the context of a cardiac arrest. Students from the above professions will respond to a Mock Code. Each student is given a role with regard to their field of study. Students will debrief after the initial scenario on what went well and what went wrong. Students will then again reenact the code scenario with their new skill set obtained from the prior debriefing.

Objectives:

1. Working and communicating with the healthcare team and patient, provide medication management at transitions-of-care, including medication reconciliation, patient education, and provider hand-off.
2. Identify, interpret, and prioritize medication-related problems by collecting and analyzing available subjective and objective information.
3. Provide accurate and appropriate drug information and recommendations by applying the pathophysiology, pharmacology, and pharmacotherapy of medications and diseases commonly encountered in the acute care setting.
4. Synthesize succinct, evidence-based answers to drug information questions posed by patients or members of the healthcare team, utilizing appropriate resources and presenting answers successfully in both written and oral forms.
5. Working with an inter-professional team integrate clinical knowledge, team principles, and ethical principles to provide advanced cardiac life support in a simulated environment.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Chaplaincy	---
Nursing	---
Osteopathic Medicine (year 3)*	MEDE 8809 Family Medicine Clerkship (four week rotation)
Pharmacy	PHAR 7160 Transitions of Care and ACLS

Interprofessional Dietetics Internship

Date: throughout fall and spring semesters

Duration: daily shifts

Collaborating Faculty:

Nusrath Habiba, MD

Jada Stevenson, PhD, RDN, LD

Martha Rew, MS, RDN, LD

Description:

The UNT Health Pavilion Central Family Medicine clinic is a practice site where numerous UNTHSC students complete their clinical rotations. In order to continue IPE training in a clinical setting and promote team-based care, students participate in a weekly interprofessional topic discussion throughout the course of their rotation. These discussions include trainees from osteopathic medicine, pharmacy, and physician assistant programs as well as medicine and pharmacy faculty preceptors. Each week, students and preceptors determine a topic based on patients that seen in clinic. Common topics discussed include cardiovascular diseases (e.g. hypertension, dyslipidemia, heart failure, atherosclerotic cardiovascular disease), pain management (emphasis on an osteopathic approach), asthma/COPD, diabetes, mental health, infectious diseases, geriatric care, and others as requested. Students divide subtopics (e.g. diagnosis, treatment, medication considerations) and take turns presenting their content. Periodically faculty prompt questions to stimulate discussion, such as reviewing clinical pearls or application to a patient case.

The experience: Medicine and PA Students work with Dietetic Interns and Students in an integrated team to screen patients for nutritional needs and to provide nutritional education to family members at the time of the pediatric patient visit. Students work as a team in assessment of nutritional needs and in providing nutritional education to pediatric patients and their caretakers.

Objectives:

1. Promote a team approach to health care by participating in interprofessional topic discussions.
2. Facilitate learning through interprofessional collaboration and application to clinical practice.
3. Strengthen health care professions' medical education through an interprofessional experience.
4. Exhibit professional attitude, behavior, communication and collaboration.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Dietetics (TCU – undergrad internship)	---
Dietetics (Texas Woman's – graduate internship)	---
Osteopathic Medicine*	MEDE 8608 Core Clerkship – Pediatrics (four week rotation)
Physician Assistant*	MPAS 5454 Pediatrics Practicum (four week rotation)

Interprofessional Topic Talks

Dates: occurs each Wednesday throughout the year

Duration: 1 hour

Collaborating Faculty:

Suguna Neelakatan, MD

Jessica Gardea, PharmD

Objectives:

1. To discuss patient cases and rotation experiences with an interprofessional team to learn about, from and with each other to improve care and team performance.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course
Osteopathic Medicine*	MEDE 8810 Core Clerkship Internal Medicine (four week rotation)
Pharmacy*	PHAR 7684 Ambulatory Care Advanced Pharmacy Practice Experience (six week rotation)

Interprofessional Pediatric Mobile Clinic

Date: periodically throughout the academic year

Duration: based on shifts

Collaborating Faculty:

Christina Robinson, MD

Description:

Service learning. There are more than 75,000 uninsured children living in Tarrant County. Lack of insurance coverage keeps many of those children from receiving the health care they need. The UNT Health Science Center Pediatric Mobile Clinic provides high-quality health care to children living in underserved areas of Fort Worth at no cost to families. The Pediatric Mobile Clinic travels to schools, community centers, churches and community organizations throughout Fort Worth, providing health care on board a state-of-the-art mobile medical unit. Families often experience barriers to health care access, including financial hardship, lack of transportation, language barriers, unaffordable costs and lack of insurance coverage. These needs often are accompanied by social distress regarding food, clothing and shelter. The Pediatric Mobile Clinic addresses both the health and social services needs of these children.

Objectives:

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Osteopathic Medicine**	---
Pharmacy**	---
Physician Assistant**	---

Interprofessional Catch 1 for Health

Date: periodically throughout the academic year

Duration: ---

Collaborating Faculty:

Christina Robinson

Description:

Service learning opportunity for...

Objectives:

IPE Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Osteopathic Medicine (year 2)**	---
Physician Assistant**	---
Pharmacy**	---

Interprofessional Education: OMM and PT

Dates: asynchronous learning series, fall and spring semester

Duration: online discussion boards

Collaborating Faculty:

Edward Shadiack, DO

Charles Nichols, DPT

Description:

Opportunity to interact with colleagues in musculoskeletal medicine. Students will review a series of readings and videos and reflect or contribute to the content via an online discussion forum. Students communicate weekly to create an original post and reply to at least one post from a student in opposite schools.

Objectives:

Interprofessional teams of Osteopathic Medical and Physical Therapy students will work together to:

1. Improve interprofessional knowledge and understanding of the shared and unique roles and responsibilities of Osteopathic Manipulative Medicine (OMM) and Physical Therapy (PT) in patient care.
2. Foster interprofessional value and respect through interactive discussions about the treatment philosophies and competencies of OMM and PT in care of the musculoskeletal system.
3. Improve interprofessional communication by identifying, discussing and explaining the unique language utilized within OMM and PT.
4. Identify potential benefits of an integrated team approach to utilize the unique and or complementary abilities of OMM and PT to optimize health and patient care.
5. Utilize a musculoskeletal case scenario, to develop an OMT/PT integrated treatment plan around collaborative interprofessional practice.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Osteopathic Medicine (year 3)	MEDE 8417 Core Clerkship – Manipulative Medicine
Physical Therapy (year 2)	DPHT 7541/7551 Musculoskeletal 1 and 2

Interprofessional Simulation – Post-partum Bleed

Date: 04.17.2019

Duration: four hours

Collaborating Faculty:

Jacquelyn Garda, MD

David Farmer

Description:

Objectives:

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course
Nursing	---
Osteopathic Medicine (year 3)*	MEDE 8607 Core Clerkship – Obstetrics Gynecology
Physician Residents	---

Interprofessional Collaboration Encounters Checklist

Date(s): occurs monthly for the five clinical rotations, in which no end of rotations examination is required

Duration: five clinical rotations, each lasting one month, during the PA clinical year curriculum

Collaborating Faculty:

Jeffrey Mott, DHSc, PA-C

David Farmer, PhD, LMFT, LPC (consulting role)

Jessica Rangel, BSN (consulting role)

Description:

Each student is required to submit a checklist reflecting at least three interprofessional collaboration encounters involving a patient's care. The patient's case log identification from E*Value must be included for the grading faculty to verify. Submissions must be completely de-identified of any patient personal information.

Objectives:

1. To experience, acknowledge, and reflect upon interprofessional collaboration involving patient care.
2. To discuss how applicable TeamSTEPPS® strategies and tools were, or could be, applied during patient or team encounters.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course
Physician Assistant	MPAS 5452 Elective 1 MPAS 5450 Elective 2 MPAS 5099 Interprofessional Education & Practice Elective MPAS 5455 Clinical Practicum Elective 4 MPAS 5451 Underserved Clinical Practicum

IPE Experience – Emergency Medicine

Dates: occurs within clinical rotations and as a reflection exercise

Duration: n/a

Collaborating Faculty:

Rick Robinson, MD FAAEM FACEP

Description:

Description:

The purpose of this learning activity is to provide an opportunity for fourth year Medical Students (MS4s) to explore, reflect upon, and synthesize observations in Emergency Medicine related to interprofessional collaborative practice. IPE is composed of the following modules:

Competency Domain 1 (CD1) – Values and Ethics for Interprofessional Practice

Competency Domain 2 (CD2) – Roles and Responsibilities

Competency Domain 3 (CD3) – Interprofessional Communication

Competency Domain 4 (CD4) – Teams and Teamwork

MS4s will assess the quality of interprofessional collaborative practice in an Emergency Department patient encounter using a provider-debriefing interview to support development of a professional quality reflection paper to be delivered to the Emergency Medicine Core Clerkship Coordinator prior to the end of the 4-weeks rotation.

MS4s will select a patient experience from the Emergency Department in which they are rotation where the patient received care from an interprofessional team of a least four different health-related professionals (i.e. physician, surgeon, pharmacist, nurse, social worker, chaplain, respiratory therapist, hospital administrator, etc.) Examples of such a patient experience might include a trauma or sepsis resuscitation, a cardiac arrest, acute myocardial infarction, stroke activation, or a death notification. MS4s will interview at least four interprofessional members of the treatment team assigned to that patient encounter. MS4s will utilize a structured interview, containing debriefing questions specific to the IPEC's Four Core Competencies of Interprofessional Collaborative Practice. MS4s will use these debriefings to write a three-page double spaced paper offering their reflection as to whether the Emergency Department patient experience represented an integrated interprofessional team-based approach or a collocated providers providing individual and separate care to the patient. Reflective conclusions must be supported by evidence gained through the debriefing process that compares and contrasts the patient experience relative to the four IPEC Core Competencies.

MS4s will reflect on how the quality of interprofessional teamwork impacted the quality of patient care, patient safety, and the overall patient experience. MS4s will also reflect on how they, as a patient or patient family member, would like the treatment team to approach their care in a similar Emergency Department experience.

This reflective IPE debriefing paper must be submitted to the Emergency Medicine Core Clerkship Coordinator prior to the last date of the rotation. Each paper will be evaluated by the Department of Emergency Medicine Faculty in collaboration with IPE Faculty. Satisfactory completion of this learning activity is required to receive a passing grade for the Clerkship. The Department of Emergency Medicine will remediate this learning activity for students who do not satisfactorily complete it on time and with respect to the expected content.

Objectives:

The following objectives are related to IPE:

Goal – Work effectively, and with increased independence, as a part of an interprofessional team caring for patients in preparation for residency training:

1. Effectively communicate with other members of the health care team... while demonstrating respect, reliability, helpfulness, and initiative modeling the highest degree of professional behavior.

2. Establish excellent rapport with patients as their primary caregiver (without misrepresentation of Student Status), including addressing the emotional and social needs of the patient and appropriate family members.

Goal – Demonstrate interpersonal and written communication skills that results in effective information exchange and collaboration with patients, their families, and all members of the health care team.

1. Communicate effectively with patients and families across a broad ranges of socioeconomic and cultural backgrounds
2. Demonstration relationship building skills in each clinical encounter and interprofessional exchange
3. Include the patient and family in decision-making process to the extent they desire.

Goal – Continue to develop and refine life-long learning skills and professional behavior.

1. Recognize limits and deficits in knowledge, skills, and attitudes and initiate a plan to obtain help from faculty, colleagues, and other information recourses.
2. Read daily about issues that affect patient care.
3. Always place the needs of the patient first and act as a patient advocate.
4. Demonstrate personal accountability to patients, colleagues, and staff, in order to provide the best patient care.
5. Demonstrate integrity, compassion, respect, altruism, and empathy when interacting with all members of the health care team and patients and their families.
6. Demonstrate culturally effective care by understanding the important role of culture in the care of each patient, recognizing how one’s own beliefs affect patient care, and eliciting the cultural factors that may influence the care of the patient
7. Identify strengths, deficiencies, and limits in one’s knowledge and clinical skills through self-evaluation.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course
Osteopathic Medicine	MEDE 8403 Emergency Medicine Core Clerkship

Interprofessional Education and Practice OB-GYN

Dates: occurs within the clinical rotation

Duration: n/a

Collaborating Faculty:

Jacquelyn Garda, MD

Description:

The purpose of this experience is to give the student a chance to gain a better understanding of the role of their nursing staff colleagues in Women's Health.

CD1- Values/ethics for Interprofessional Practice

CD2- Roles/Responsibilities

CD3- Interprofessional Communication

CD4- Teams and Teamwork

The experience: Medicine Students are paired with Nursing Staff for a shift

Each medical student rotating on the JPS OB/GYN rotation will have the opportunity to work with a member of the nursing staff for an entire shift on Labor and Delivery, 2 South (AP/PP/GYN) or both during their rotation.

The student will be present for the patient check out in the morning between the nursing staff (6:30 AM). They will then work with the nurse throughout the day, helping them perform their patient care duties. They will then participate in the evening check out between the nursing staff (6:30-7 PM).

Objectives:

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course
Osteopathic Medicine*	MEDE 8607 Core Clerkship – Obstetrics & Gynecology

Interprofessional Education and Practice Activities – Surgery

Dates: occurs within the clinical rotation

Duration: n/a

Collaborating Faculty:

Alan Yuvarti, DO

Description:

Specific inter-professional learning activities will vary depending upon the individual characteristics of the clinical site and factors such as the team composition, resources, student mix, models of supervision, identified site needs. Listed within the objectives are examples of valuable inter-professional learning experiences, in which you and your attending or resident may choose to engage.

Objectives:

1. Interprofessional surgery team along with attending and or resident conduct a brief discussion of what each Interprofessional team member's role/responsibility and scope of practice will be on the team.
2. Provide direct patient care as an Interprofessional team, participating in Interprofessional team patient centered care planning.
3. Attend scheduled clinical team meetings with attending or residents to discuss (brief) on assigned patients. Participate in and observe the Interprofessional team interaction contributing to development of a patient centered care plan. Ask for feedback on clinical skills and participation as an effective team member.
4. Shadow attending or resident and observe and reflect on their modeling of Interprofessional team leadership, communication and teamwork skills then share feedback of those reflections with attending or resident. (e.g., preparing for team meetings, following team guidelines for discussion, encouraging participation, seeking clarification, contributing to an Interprofessional plan of care, modeling respect and value for team members, and approach to dealing with conflict.)
5. Medicine Students are paired with Nursing Staff for a shift to gain understanding of the roles/responsibilities, scope of practice, task assistance and appropriate tools and strategies to enhance Interprofessional teamwork between physicians and nurses.
6. Learn about the roles and responsibilities and scope of practice of Interprofessional team members by:
 - a. Observing them interacting with and treating their patients or
 - b. Assessing shared patients with other students and discussing the different roles you each have in managing the patient's health care.
7. If there are other Interprofessional health professions students on the team:
 - a. Spearhead the development of in Interprofessional student group/team with weekly discussion of a shared clinical case. (e.g., Team member individually present their findings and the team establishes a set of shared patient goals. Students review each other's clinical notes and discuss role and scope of practice overlaps and similar and different approaches to patient centered care across the professions represented on the team.) Members of the team set the agenda, develop team rules, and take on team roles including chairperson, timekeeper, and recorder, practicing effective team member and leader characteristics.
 - b. Establish Interprofessional student Brown Bag Lunches for discussing topics focused on team development and effective teamwork to enhance students' knowledge of the value to patient care through the various knowledge, skills and values of Interprofessional team members. (Examples of topics may include the purpose and value of Interprofessional teams, group dynamics, team communication, conflict management, and team leadership models.)

- c. Students can work as a team to discuss and write up best practice guidelines for a specified clinical problem that warrants an Interprofessional approach to patient care.

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork

College/School	Course
Osteopathic Medicine*	MEDE 8811 Core Clerkship – Surgery

Interprofessional Education and Practice – Psychiatry Clerkship

Dates: occurs within the clinical rotation

Duration: n/a

Collaborating Faculty:

Cheryl Hurd

Description:

The purpose of these experiences is to give the student a chance to gain a better understanding of the role of their additional colleagues in psychiatry. These include nursing staff, social work staff, dietary staff, legal liaisons, non-physician providers, case management and pharmacy staff.

The experience: Each medical student rotating on the JPS psychiatry rotation has had the opportunity to work with members of the above-mentioned staff for the entire core rotation. When on the inpatient unit, the students attend court, meet daily with the treatment team that includes nurses and social work, and can participate in the group therapy sessions with the social workers. In addition, several students have been assigned to work with non-physician providers for part of their rotation, including nurse practitioners and physician assistants.

The experience: Students also rotate in emergency psychiatry during their core rotations. In the Psychiatry Emergency Center, they work with the attending physicians, resident physicians, nurse practitioners, physician assistants, social workers, nurses (as well as nursing students) and psychiatry technicians throughout their time on the unit. During the consultation/liaison rotation, the students have the opportunity to meet with the interdisciplinary treatment team every weekday. This team includes case management, social work, pharmacy, nursing leadership, dietitians and physicians or non-physician providers from other departments. Additionally, during the consultation/liaison rotation, students interface daily with other medical departments and nursing staff in regards to the care of their assigned patients.

Objectives:

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IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork

College/School	Course
Osteopathic Medicine*	MEDE 8409 Core Clerkship - Psychiatry

Interprofessional Care of the Geriatric Patient

Dates: occurring within the clerkship rotation as an assignment

Duration: n/a

Collaborating Faculty:

Sarah Ross, DO MS CMD

Janice Knebl, DO MBA

Barbara Harty, RN GNP

Alvin Mathe, DO FACP FACOI

Kristen Reuter, MSSW LMSW

Sherry A Reese, RN FNP

April Weichman, PhD

Nori Watson, DO

Melissa Hudson, MD

Shara Elrod, PharmD BACT

Kathlene Camp, PT DPT

Ashlee Britting, PT DPT GCS

Elizabeth Classen, MSN AGACNP-BC

Mary Quiceno, MD FAAN

Janet Leito, DO CMD

Susan Weather, DO

Roy Martin, DMin

Description:

Examination of a patient and interview of health professions colleague (or their health professions student) must be completed and written report submitted to Canvas by the last Monday of your rotation.

Goal: Students learn the value of other professions in assisting with the care of the Geriatric patient.

CHOOSING A PATIENT CASE

Work with your preceptor to choose a patient case to use for this assignment. Your patient must be receiving or be referred to receive services from a health professional of another discipline.

Accepted health professional disciplines for this assignment include: Physical Therapy, Occupational Therapy, Speech Therapy, Pharmacy, Dietetics, and Social Work

Your collaborating health professional may be a student working under a licensed health professional or a licensed practicing health professional.

You may elect to write about a patient you interact with in any setting (hospital, nursing home, office).

You may communicate with your collaborating health professional by phone, if in person interaction is not possible.

Objectives:

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

Students will place the interests of patients and populations at the center of interprofessional health care delivery through creating a common mental model and understanding of the unique and shared needs of the geriatric population.

Students will recognize the diverse and individual differences that characterizes the geriatric population and the benefits of an interprofessional team in the assessment of the unique geriatric case study.

Roles/Responsibilities:

Students will recognize the need to engage diverse healthcare professionals to complement their own professional expertise, as well as, use the associated resources available to develop strategies to meet the needs of the geriatric patient.

Interprofessional Communication:

Students will recognize a common language or terminology and process to use in discussing and assessing the following content areas: medication reconciliation, physical, and cognitive assessment in working collaboratively with other health care professionals with the geriatric patient.

Teams and Teamwork:

Students will recognize the need to engage other health professionals appropriately to address the specific care situations in shared patient/person-centered monitoring and cross-monitoring for improved quality of care and patient safety.

College/School	Course
Osteopathic Medicine*	MEDE 8426 Geriatrics Clerkship

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Acknowledgments:

Special thanks is extended toward all faculty, staff and students who support excellence in interprofessional education and interprofessional collaborative practice.

Interested in learning more?

For further information regarding the exercises and assignments described in this document, contact the Department of Interprofessional Education and Practice at ipep@unthsc.edu.

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