



THE UNIVERSITY *of* NORTH TEXAS
HEALTH SCIENCE CENTER *at* FORT WORTH

Catalogue of Decentralized Interprofessional Education

Academic Year 2020-2021

The intent of this catalogue is to highlight to the community and stakeholders the diversity of Interprofessional Education at our university provided by collaborating faculty. These faculty champion IPE by creating and facilitating IPE specific to course content.

This catalogue may not reflect all interprofessional education or collaborations within or with other institutions/universities. If the reader is aware of interprofessional education not highlighted in this document, visit this [LINK](#) to notify the Department of IPEP.

Table of Contents

Definition of Decentralized Interprofessional Education	4
Coding System for Student Participation in Decentralized IPE	4
Initial Level	5
Interprofessional Population Health: Introduction to Social Determinants of Health	6
Interprofessional: Seniors Assisting in Geriatric Education – semester one	7
Interprofessional Ethics: Mock Ethics Committee	9
Interprofessional Activity for Pre-Professionals	11
Intermediate Level	13
Interprofessional Clinical Applications of Basic Science	14
Interprofessional: Seniors Assisting in Geriatric Education – year two	15
Interprofessional Cultural Sensitivity	17
Interprofessional Culinary Medicine	18
Advanced Level	20
Interprofessional Code Simulation	21
Interprofessional Dietetics Internship	22
Interprofessional Pediatric Mobile Clinic	23
Interprofessional Catch 1 for Health	24
Interprofessional Collaboration Encounters Checklist	25
IPE Experience – Emergency Medicine	26
Interprofessional Education and Practice Activities – Surgery	28
Interprofessional Care of the Geriatric Patient	30
Acknowledgments:	32

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. Designed to meet the fundamental goal of interprofessional education, C-IPE addresses the core competencies established by the Interprofessional Education Collaborative (IPEC, 2016) to improve health outcomes.

The content of C-IPE addresses interprofessional collaborative practice at the macro-level. By doing so, students are introduced to each core competency systematically so that students can *know*, *know how*, and *show* (Miller’s Model) ICP knowledge, skills, and attitudes, this leading up to the ultimate outcome where the learner *does* ICP. C-IPE affords this common curriculum for each college and school. However, C-IPE has its limitations. The content is foundational so to meet all learner levels and the content may not necessarily fit neatly within the overall curriculum for each student at particular times. Furthermore, despite effort to design inclusive learning and facilitation, students may not gather the relevancy of the learning. While C-IPE survey data shows an increase in students valuing IPE, a disconnect remains for some.

Therefore, D-IPE is a solution toward improving the IPE needs of students. **D-IPE is defined as when faculty from more than one profession come together to design and facilitate IPE that is fully embedded into a class or rotation for learners of more than one profession.** 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.

Some of the IPE described in this catalogue are assigned only to one profession. We include these descriptions because the assignment requires active involvement with interprofessional colleagues and reflection exercises regarding interprofessional collaborative practice. These assignments may also include interprofessional peer, faculty, or preceptor feedback so to establish growth in interprofessional practice.

Coding System for Student Participation in Decentralized IPE

Not all D-IPE is a curricular requirement. Some D-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 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 does not occur during each rotation of students.
- IPE could occur within 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 more than one health care profession
- 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

We use chronological order to list the IPE classes/events of the academic year.

Information regarding some sessions may be incomplete. Should the reader of this document be interested in learning more about a particular activity, please contact the Department of IPEP at ipep@unthsc.edu.

Interprofessional Population Health: Introduction to Social Determinants of Health

Date: 10.14.2020

Duration: 2 hours

Collaborating Faculty:

Janet Lieto, DO, FACOFP

Kim Fulda, DrPH

Shane Fernando, PhD

Sumihiro Suzuki, PhD

David Farmer, PhD, LPC, LMFT, FNAP

Description:

This IPE focuses on understanding social determinants of health with an interprofessional approach, implementing multidisciplinary learning activities. The goals of this section are to introduce students to public health and the social determinants of health, identify some of the major achievements of public health in the US and globally, identify how social determinants of health may negatively or positively impact health outcomes, identify how stakeholders can work together to address social determinants of health, and have public health and medical students work in interprofessional teams to explore how health care and public health in coordination with other fields can collaborate to integrate clinical care and public health interventions to optimize population health.

Objectives:

1. Discuss social determinants of health and how they are associated with public health.
2. Discuss how public health achievements have affected the health of the population.
3. Explain how social determinants of health can affect the health at the individual and population level (examples: systemic racism, culture, others)
4. Examine how stakeholders can work together to improve social determinants of health.
5. Discuss how interprofessional teams of public health and clinicians can work together to improve population health (examples: considering cultural differences).

IPE Core Competencies:

Values/Ethics for Interprofessional Practice:

Roles/Responsibilities:

Interprofessional Communication:

Teams and Teamwork:

College/School	Course (if applicable)
Osteopathic Medicine	MEDE 7513 Professional Identity and Health Systems Practice
School of Public Health – MPH, MS, NAH	Required Co-curricular - Interlude: Professional and Academic Development – Year 2

Interprofessional: Seniors Assisting in Geriatric Education – semester one

Date: Teams of interprofessional students make two visits during the semester, with a team assignment due on 03.07.21 and 04.18.21

Duration: student team visits typically last one to two hours

Collaborating Faculty:

Janice Knebl, DO, MBA

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

Jennifer Crumm, MPAS, PA-C

Lisa Killam-Worrall, PharmD

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 Seniors Assisting in Geriatric Education (SAGE) Program is an innovative, instructional program designed to enhance and strengthen training in geriatrics. This program is a collaboration between the University of North Texas Health Science Center (UNTHSC) Department of Geriatrics, Department of Interprofessional Education, and Texas Christian University (TCU).

The SAGE Program consists of an educational curriculum and community-based outreach program, aimed at increasing student opportunities for early exposure to older adults and issues of geriatrics. The program strives to create meaningful relationships for an inter-professional health professions team of students to gain knowledge about today's older adult population and their needs, while guiding the next generation of healthcare professions. The educational component involves students interacting with each other and their assigned older adult through structured assignments delivered in the home environment. Interprofessional student teams of three or four are matched with a senior volunteer in the community, aged 65 and older, known as a "Senior Mentor."

The SAGE Program includes four visits over a one-year period. Starting in the spring semester and ending in the fall semester, where two visits occur each semester. Health care professions students 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 and cognitive screening, and providing information about safety, advance care planning, and community resources.

Learning uses a blended format, where students review pre-work, attend a team visit with their senior mentor, and complete a post assignment as a team.

Objectives:

1. Discuss the diverse and individual differences that characterize the geriatric population and the benefits of an interdisciplinary team in the assessment of physical, sensory, and cognitive function.
2. Collaborate with an inter-professional healthcare team to develop strategies to meet the needs of the geriatric population, recognizing unique roles, education, and expertise of the team.
3. Identify the benefits of a common language or terminology and procedure to use in working collaboratively with other health care professionals with the geriatric population.
4. Communicate effectively with an older adult using patient-centered interviewing techniques, active and reflective listening, and with respect and understanding of cultural diversity.
5. Identify environmental, health, cognitive, and/or psycho-social issues that have impacted the Senior Mentor's quality of life.
6. Perform healthcare screenings on an older adult including the collection of vital signs, mini-cognitive screening, ADL and IADL review, falls risk assessment, nutrition and body mass index, swallowing screen, home environment safety assessment, and medication overview.
7. Summarize and educate the older adult about the healthcare screenings and provide appropriate resources and information based on the results.

VISIT 1: Adult Health History

Goal: Learn to conduct and document a health profile, using a patient-centered interview technique, with geriatric adults within an inter-professional healthcare team. This experience helps students recognize the uniqueness of the geriatric population as well as respect the differing roles, training, and expertise of the other healthcare professions.

VISIT 2: Medication/Pharmacology Assessment

Goal: Learn to conduct/document a medication/pharmacology assessment on an older adult and consider the potential drug interactions and side effects. You also should learn to define, discuss, and reflect on the value of advance care planning. Additionally, you should apply the unique/complementary abilities of all team members to optimize communications with each other and the senior mentor. This experience should help you recognize the uniqueness of the geriatric population as well as respect the differing roles, training, and expertise of other health care professions.

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 (year 1)	MEDE 7514 Professional Identity and Health Systems Practice
Pharmacy (year 1)	PHAR 7326 Non-Prescription Therapies 2 and IPPE
Physical Therapy (year 1)	Required Co-curricular
Physician Assistant (year 1)	MPAS 5260 Head, Eyes, Ears, Nose, & Throat (HEENT)
Social Work (TCU – graduate education)	---
Speech-language Pathology	---

Interprofessional Ethics: Mock Ethics Committee

Date: 03.17.2021

Duration: 2 hours

Faculty Collaborators:

Bryn Esplin, JD, HEC-C, CPPS
Janet Lieto, DO, FACOFP, CMP

Julia Reynolds, PMAS, PA-C
Lauren Dobbs, PA-C, MMS

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 an interprofessional “mock-ethics committee” activity.

Objectives:

1. Explore end of life decision making and legal considerations. (AOA Comp: VII, Systems Based Practice: Interprofessional Collaboration; EPA Milestone 7, 9. Collaborate as a member of an interprofessional team)
2. Explain how ethical dilemmas may have no absolute right or wrong solutions and involve multiple confounding factors.
3. Give examples of the difficulty of decision making in an ethical case and how resolutions are determined by stakeholders.
4. Employ the Ethics Four Topic Model in making recommendations for the resolution of a Case Study. (EPA Milestone 7, 9. Collaborate as a member of an interprofessional team)
5. Demonstrate the ability to work collaboratively with other professional with particular emphasis on fostering a culture of respect and appreciating diverse perspectives and skillsets. (AOA Comp: VII. Systems Based Practice: Interprofessional Collaboration, II. 4, 6: Patient-centered, IPE Plan)

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.

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.

Assessment:

Pre-session assessment survey = 5 points

Post-session assessment survey = 5 points

College/School	Course (if applicable)
Osteopathic Medicine	MEDE 7514 Professionalism and Systems-based Practice
Pharmacy	PHAR 7126 Clinical Case Discussions 2
Physician Assistant	MPAS 5211 Clinical Integrated Medicine

Interprofessional Activity for Pre-Professionals

Date: 03.08.21 – 03.14.21

Duration: 1 week

Mode: Virtual

Collaborating Faculty:

Stephen Mathew, PhD

Brandy Roane, PhD

Description:

This IPE activity will team up pre-professional students who are doing their MS in Medical Sciences, MS in Clinical Research Management and MS in Biotechnology. A majority of the MS in Medical Sciences students aspire to become either a physician or a dentist or a pharmacist or a physician assistant while the MS in Clinical Research Management and Biotechnology students aspire to become clinical researchers and scientists respectively. The activity will focus on learning about the roles and responsibilities of different healthcare professions, effective communication for collaboration and engaging each other's expertise to address a research ethical issue by role-playing the different professions. This IPE activity is a required component of the course BMSC-5121: Ethical, Legal, and Social Issues for Responsible Clinical Research for both the face-to-face and fully online program students.

The first offering occurred in the fall of 2014.

Case Background:

The case, based upon an ethical issue, described in the prescribed textbook for the class, titled *"The Brewsters"*. A physician and PI of the clinical study for an investigational drug for cancer enrolled Mrs. Gloria Brewster in a clinical trial without her informed consent. Each IPE Team member will be part of a research ethics board convened to discuss this ethical issue. Each student will select a role as described below and role-play the scenario and offer solutions to effectively mitigate the issue and avoid recurrence of such issues. Since, this activity was to be done in a virtual setting the team members would meet at a time convenient to them to discuss the case and enact a Research board ethics meeting. The team is required to record their role-play and upload the video file (mp4) along with their discussion question comments. Roles:

IRB Chair

IRB Coordinator/Reporter

Physician 1

Oral surgeon/Dentist

Pharmacist

IRB Reviewer

Clinical Coordinator

Clinical Manager

Primary Investigator

Social worker

Community Member

Non-affiliated IRB Member

Objectives:

1. Understand the roles and responsibilities of different healthcare professions involved in clinical research and compliance.
2. Discover where the professions intersect.
3. Develop effective communication techniques to improve healthcare.
4. Engage in team-centered problem solving

IPEC Core Competencies Addressed:

Values/Ethics for Interprofessional Practice:

VE4. Respect the unique cultures, values, roles/responsibilities, and expertise of other health professions and the impact these factors can have on health outcomes.

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

Roles/Responsibilities:

RR4. Explain the roles and responsibilities of other providers and how the team works together to provide care, promote health, and prevent disease.

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 conflict.

Teams and Teamwork

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

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

College/School	Course (if applicable)
Graduate School of Biomedical Sciences	BMSC-5121- Ethical, Legal, and Social Issues for Responsible Clinical Research (both Face-to-Face and Online students)

Total number of participating students: Face-to-Face – 210 students; Online program – 72 students

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

We use chronological order to list the IPE classes/events of the academic year.

Interprofessional Clinical Applications of Basic Science

Date: 09.25.20

Duration: 2 hours

Collaborating Faculty:

Monica Jenschke, PhD, CRNA

Adam King, PhD, MS

Michael Gatch, PhD

Stephen Mathew, PhD

Description:

Translational research bridges the gap between basic science and clinical practice. This workshop brings together basic science researchers and healthcare professionals to collaborate on a clinically relevant topic in need of basic science research.

Objectives:

1. Engage students to discuss the interaction of their various science disciplines.
2. Offering the students the experience of interdisciplinary collaboration.
3. Students from various backgrounds sharing the role of research in their field.

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)	---

Interprofessional: Seniors Assisting in Geriatric Education – year two

Date: Teams of interprofessional students make two visits over the course of the semester, with team assignments due on 10.09.20 and 11.13.20

Duration: student team visits typically last one to two hours

Collaborating Faculty:

Janice Knebl, DO, MBA

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

Jennifer Crumm, MPAS, PA-C

Lisa Killam-Worrall, PharmD

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.

Objectives:

1. Strengthen the UNTHSC's health care professions students' medical education through increased development and competency in the attitudes, knowledge, and skills in the care of older adults. In this experience with their senior mentor health care professions' students will be able to:

- a) Obtain a medical history and mental status exam
- b) Practice history and physical assessment skills
- c) Perform evaluations, assessments, advance care planning
- d) Complete other assignments as assigned in their program

2. Strengthen health care professions' medical education through an interprofessional team experience. Through this experience, students will:

- a) Learn about, with, and from collaborating health care professionals
- b) Work together as a team member with other health care professions
- c) Develop appreciation for the importance of an interprofessional team approach with older adults

3. Allow an opportunity for seniors to assist in health care professions' students' development of competency in attitudes, knowledge, and skills in their care of older adults. To ultimately impact the way future doctors and health care professions' care for older adults. By participation in the SAGE program, senior mentors will assist in the geriatric education of UNTHSC health care professions' students by participating in:

- a) The exchange of demographic, biopsychosocial, and life-transition information through written questionnaires, interviews, surveys, and or evaluations
- b) Scheduled SAGE visits and assignments with their assigned medical students
- c) Providing evaluative feedback on their experience with their assigned students
- d) A program-related to geriatric education; attitudes about medical professions; demographic and biopsychosocial factors and life-transition issues related to aging

VISIT 3: Medications/Pharmacology Assessment

The goal of Visit 3 is to learn to conduct/document a medication/pharmacology assessment on an older adult and consider the potential drug interactions and side effects. You also should learn to define, discuss, and reflect on the

value of advance care planning. Additionally, you should apply the unique/complementary abilities of all team members to optimize communications with each other and the senior mentor.

This experience should help you recognize the uniqueness of the geriatric population as well as respect the differing roles, training, and expertise of other health care professions.

VISIT 4: Health Literacy Project and Ending the Healthcare Professional/Patient Relationship

The goal of Visit 4 is to collaboratively develop and provide evidence-based teaching on a health or wellness topic to an older adult, using appropriate health literacy strategies. Students will also identify the process and follow the steps to end the healthcare professional/patient relationship.

This experience should help you recognize the uniqueness of the geriatric population as well as respect the differing roles, training, and expertise of other health care professions.

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 (year 2)	MEDE 7514 Professional Identity and Systems Based Practice
Pharmacy (year 2)	PHAR 7130 IPPE Found. of Care I
Physical Therapy (year 2)	Required Co-curricular
Physician Assistant (year 2)	MPAS 5243 Clinical Integrated Medicine 3
Social Work (TCU – graduate education)	---

Interprofessional Cultural Sensitivity

Date: 04.09.21

Duration: 2 hours

Collaborating Faculty:

Caitlin Gibson, PharmD, BCPS, BCCP
Annesha White, PharmD, MS, PhD

Vic Holms, MPAS, PA-C
David Farmer, PhD, LMFT, LPC, FNAP

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 5241 Clinical Integrated Medicine

Interprofessional Culinary Medicine

Date:

Elective course offered each spring semester.

Duration:

Six weeks, Wednesday evenings for 3 hours

Collaborating Faculty:

Maria Crompton, DO

Kelly Fisher, DCN, RD, CSP, LD

Anne VanBeber, PhD, RD, LD, FAND, CCMS

Description:

An Interprofessional Culinary Medicine Education initiative between the TCU Department of Nutritional Sciences and the University of North Texas Health Science Center (UNTHSC), in collaboration with University of Texas (UT) Southwestern Moncrief Cancer Institute in Fort Worth, began in 2013. The *Health Meets Food* curriculum has been offered to first year medical and physician assistant students from UNTHSC during the spring semester, with almost 200 medical and health students completing the course thus far.

Dietetics students (senior year) from the TCU Coordinated Program in Dietetics work as culinary nutrition educators to foster an interprofessional education collaborative for students in the medical, allied health, and dietetics fields. Under the supervision of the TCU faculty, pre-course responsibilities of the senior dietetics students include writing lesson plans and handouts, creating production schedules, grocery shopping, and organizing cooking labs.

The course includes six hands-on culinary workshops conducted over six-weeks on Wednesdays from 4:30-7:30 pm. The following *Health Meets Food* modules are currently offered:

Module 1 – Safety and Sanitation; Introduction to Culinary Medicine

Module 3 – Fats, Lunch/Sandwiches

Module 6 – Sodium Reduction/Flavor Building, Renal Homeostasis, Dinner

Module 7 – Carbohydrates, Snacks/Desserts

Module 10 – Cancer Risk Reduction and Recovery

Module 16 – Anti-Inflammatory Diet

Course expectations for the medical/physician assistant students include the completion each week of pre-workshop online PowerPoint readings, journal article readings, and a quiz. Three medical/physician assistant students are paired with one dietetics student in the culinary workshop. Students are welcomed to the workshop each week by TCU Nutritional Sciences faculty, who give a short briefing on the topic and summarize learning points from the module. Brief instructions are given, and then time is provided for each group of medical/physician assistant/dietetics students to discuss their assigned recipes, delineate tasks, and highlight the nutritional attributes and sensory qualities before moving into the kitchens to prepare their recipes.

Kitchen safety, sanitation of food, knife skills, time management, teamwork, sensory quality of foods, enjoyment of eating, and nutrition presentation in front of a live audience are hallmarks of the program as students gain culinary confidence over the six-week course. Each group of medical/physician students presents their plate of food to the entire class while highlighting nutrition and sensory qualities of the dish. They are briefed regarding specific and individual information about their recipes by their dietetics student team leader.

Following the presentation of the completed recipes, students engage in an enjoyable seated eating experience to sample the foods. Mindful eating is discussed during this time. While eating, students are led in discussion by a UNTHSC faculty member in reviews of patient cases that incorporate disease pathophysiology and biochemistry with the culinary aspects of the food presented. A registered/licensed dietitian from UT Southwestern Moncrief Cancer Institute also

provides a brief summary of how culinary medicine expertise can successfully be implemented in medical nutrition therapy to patients in the clinical and community settings.

College/School	Course (if applicable)
Dietetics (TCU)*	---
Osteopathic Medicine**	MEDE 7000 Culinary Medicine (elective)
Pharmacy**	(elective)
Physician Assistant**	(elective)

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

We use chronological order to list the IPE classes/events of the academic year.

Interprofessional Code Simulation

Dates: cancelled due to COVID-19

Duration: 2 hours per session

Collaborating Faculty:

Laura Thielke, BSN, RN, CNL
Marian Gaviola, PharmD

Damon Schranz, DO, FACOFP, HPF

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 (year 3)	PHAR 7160 Transitions of Care and ACLS

Interprofessional Dietetics Internship

Date: throughout fall and spring semesters

Duration: daily shifts

Collaborating Faculty:

Nusrath Habiba, MD

Martha Rew, MS, RDN, LD

Kelly Fisher, DCN, RD, CSP, 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 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, MD

Description:

Service learning opportunity where interprofessional teams of students visit elementary schools to conduct free physicals, hearing, vision, and oral screenings; and provide appropriate resources and referrals.

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 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, FNAP (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:

Jeff Beeson, DO

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 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 an 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 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 FACO

Kristen Reuter, MSSW LMSW

Sherry A Reese, RN FNP

April Wiechmann, PhD

Nori Watson, DO

Melissa Hudson, MD

Kathlene Camp, PT DPT

Ashlee Britting, PT DPT GCS

Elizabeth Classen, MSN AGACNP-BC

Mary Quiceno, MD FAAN

Janet Lieto, DO CMD

Susan Weather, DO

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

Students work with their preceptor to choose a patient case to use for this assignment. The patient must be receiving or be referred to receive services from a health professional of another discipline.

Targeted health professional disciplines for this assignment include:

Physical Therapy

Dietetics

Occupational Therapy

Social Work

Speech Therapy

Mental Health Professional

Pharmacy

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

Students may elect to write about a patient interaction within any setting (hospital, nursing home, office). Students summarize a patient case, indicating the primary diagnosis that corresponds to the reason for interprofessional involvement, describing the recommendations given by the consulted health professional, describing the plan of care for the patient as determined by the physician and consulting professional and how the plan changes based on additional insight from the interprofessional collaboration and the patient's involvement in the treatment plan. Additionally, students describe the experience of

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

Objectives:

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

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

Acknowledgments:

The Department of IPE would like to extend special thanks toward all faculty, staff, and students for supporting excellence in interprofessional practice education and interprofessional collaborative practice.

For further information regarding the exercises and assignments described in this document, contact the Department of Interprofessional Education and Practice at ipep@unthsc.edu. We will gladly connect you to more information.