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Interprofessional Education and Care Newsletter

From the Editors

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Winter 2012

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Welcome to the latest edition of the JCIPE Interprofessional Education and Care Newsletter! Since our last edition, we have had some changes at JCIPE. First, founding Co-Director Dr. Molly Rose has begun a phased retirement and stepped down from her JCIPE position. Although parting is always bittersweet, we are thrilled that Molly is continuing to champion interprofessional education from her position in the Jefferson School of Nursing (JSN), and also still serving as chair of our Evaluation Workgroup. At the same time, transitions bring us the joy of new partners – and we are delighted to introduce Elizabeth Speakman, EdD, RN, CDE, ANEF as the new Co-Director of JCIPE. Liz has been a nurse educator for 27 years. She came to JSN in 2003. She has served as Assistant Dean of the RN-to-BSN program and most recently as Associate Dean for Student Affairs.

Dr. Speakman's practice settings include critical care, post-anesthesia care unit, emergency room and community health nursing – all settings where interprofessional practice is crucial to patient care! Dr. Speakman's research interests center on adult higher education, specifically retention and intervention strategies; and in community health nursing. She is principal investigator on the Robert Wood Johnson Foundation, New Careers in Nursing grant which to date has funded \$380,000 in scholarships for second degree nursing students enrolled in the one year Facilitated Accelerated Course Track (FACT) program. In addition to service in numerous professional organizations, Dr. Speakman serves as a Board of Governor for the National League for Nursing working with legislators and other health care disciplines to support interprofessional education initiatives. Dr. Speakman is recognized nationally as a leader in education and was inducted as a Fellow in the Academy of Nursing Education and at TJU, received the Dean's Faculty Achievement Award for excellence in teaching, research and service. She has brought terrific energy and new insights into our work at JCIPE. Welcome Liz!

This edition of the Newsletter comes on the heels of the incredible energy of *Collaborating Across Borders III*, which provided an amazing forum for sharing new IPE curriculum and strategies while reinforcing that now, more than ever, the healthcare system needs us to train professionals as members of highly effective teams. We all came home even more committed than ever to our mission. And Jefferson was well represented, with 17 presentations by a large delegation of faculty and students.

Inside, you will find descriptions of two exciting programs aimed at improving teamwork in the clinical setting – a journal club bringing the inpatient and outpatient staff of a busy academic urology practice together for the first time, and *in situ* obstetrical training drills that are making a difference in teamwork and patient safety. The Evaluation Column in this edition features a description of a mixed methods, longitudinal evaluation of the impact of IPE on future practice.

Enjoy!

Christine A. Arenson, MD
Elizabeth Speakman, EdD, RN, CDE, ANEF
Editors

Interprofessional Education in a Department of Urology

Maryann Sonzogni, RN, BSN
Department of Urology
Thomas Jefferson University Hospital

Optimum health care delivery requires increasing reliance allied health care professionals who are members of highly functioning teams. However, few allied health care professionals are trained in the specific field of urology. Within our urology department, care of patients is fragmented into different segments with little to no crossover of staff. Patient care may benefit from specialty training and additional education sessions for those involved in patient care. Interprofessional Education (IPE) offers a potential way to improve collaboration and may enhance health care outcomes.

The purpose of our pilot program was to design and implement an IPE program within our Department of Urology. The IPE program will apply supplementary training and teaching methods for allied health care professionals.

The method was to develop a comprehensive IPE program for members of the urology team involved in either inpatient or outpatient care. This included nurses, surgical technologists, nurse practitioners, physician assistants, medical assistants, and administrative/clerical personnel who have patient contact. Participation is on a voluntary, non-compensatory basis. The program consists of two major components: Journal Club and The Urology Symposium. The Journal Club meets quarterly to review 4-6 papers, one being a review article, regarding various topics at each meeting. The Urology Symposium is held annually at an off-site location where physicians and allied health care professionals are present. The attendees at the Urology Symposium are members of the Jefferson Department of Urology, past and present. Lectures and presentations are given by physicians and residents on assorted topics. Outcome measures for both the Journal Club and the Symposium include routine participant feedback via anonymous, self reported questionnaires.

All allied health care professionals of the urology department are invited to attend the Journal Club which has been held quarterly since March 2010. The Journal Club includes a brief review of each paper, followed by a group discussion. The articles are picked by the physician moderators of each session, and the nurse who founded the Journal Club. Physician moderators are at hand to answer questions and facilitate the discussion in an informal, relaxed environment. Topics previously covered were: endourology, prostate cancer/treatment, female urology/incontinence, kidney stones/ treatment.

Participants are asked to fill out a questionnaire and turn it in at the end of each meeting (Journal Club and the Urology Symposium). Data is collected on the likes/dislikes of each session, asking whether the information provided will help participants in their practice, as well as suggestions for future topics. With the feedback collected so far, it has been shown that 54 percent of participants think the interaction with physicians is the biggest advantage. Being in a relaxed environment allows

staff to feel more comfortable asking questions, and permits more time for the physicians to answer them. 100% of participants at every session have said that the information provided will help them in their professional practice. Based on feedback, we will be incorporating more features of lecture into the Journal Club sessions.

Some of the dislikes included: 31 percent suggesting fewer articles be presented, and 18 percent asking that there be more time for discussion, and less focus on reading from the article itself.

The Journal Club is usually held mid-week between five and seven pm. Most staff has finished their shifts by this time, and willingly stay for the entirety of the session. The attendance at each session has shown that our Journal Club has been positively received, and that our staff is dedicated and eager to expand their knowledge. St. Pierre (2009) saw nursing journal clubs as a great method to change nursing practice. "A hospital based nursing journal club can be a fun and interesting way to improve the quality of nursing care by providing the impetus to change practice."¹ This is exactly what we were aiming for when we developed this program, and so far the results have been encouraging.

In the near future, we plan to give out a questionnaire to patients asking how they perceived their experience within our department (patient office and in the operating room). We will then compare this questionnaire to those given in the past, hoping to see a positive outcome that can be contributed to our meetings. Also, at the next Journal Club meeting, we will be asking attendees to fill out an evaluation regarding their experiences in collaborating with staff and physicians since the Journal Club was implemented. We also hope to see a positive outcome relating to teamwork and an increase in knowledge amongst all staff.

Reference

1. St. Pierre J. Changing nursing practice through a nursing journal club. *MedSurg Nursing*. 2005;14(6):390-392.

Team Training Obstetrical Simulation Drills to Improve Perinatal Outcomes

Deborah A. Cruz, MSN, RNC, CRNP and Carol Carofiglio, PhD, MSN
Department of Obstetrics and Gynecology
Thomas Jefferson University Hospital

Sixteen year-old, timid Noelle arrived on the labor floor with complaints of severe abdominal pain and headache, onset earlier today at school. During her intake, she confided to her nurse that she is probably about 7 months pregnant with no prenatal care. Only her boyfriend knew. Her parents were oblivious. Noelle was petrified to tell her mother of the pregnancy. Mom arrived on the labor floor about thirty minutes later and was shocked to discover her daughter's condition. The physician explained the situation to Mom. Noelle was 30 weeks pregnant, hypertensive with seizures. Mom could barely comprehend her daughter's illness, much less the realization that there was also a baby, one who would be premature if born today. Mom heard discussions among the staff and more medications were administered. Noelle's mom blurted out comments of "seizure", "high blood pressure", "magnesium", "emergency cesarean section", "delivery" echoed around her. Mom's concern was not for the baby but only her daughter's safety. "What about my daughter? Don't worry about the baby; make sure my daughter is ok." Mom sat in the chair, defeated and frightened, sobbing intermittently. Noelle was rolled out of the room to the OR...

Did Noelle receive the emergent medical treatment consistent and appropriate for eclamptic seizures? Was there effective, sensitive communication to the patient and family? Clinical situations arise regularly that require staff to respond not only to the medical emergency but also the psychosocial impact to the patient and family members. How do we prepare staff to maintain dual focus?

The above scenario is one of the ongoing OB simulations conducted on the Obstetrical Units over the past 5 years. Initially developed for resident and nursing education, each drill is evaluated for participant clinical knowledge and management of emergent situation. An interprofessional team* is working to add a new focus of the OB Drills centers on team building concepts and communication among the healthcare team. In addition to assessment of participant clinical knowledge, scenarios include psycho-social aspects of caring for patients and dealing with family members as well as team members. Scenarios simulate difficult family interactions, hostile patients, disagreement among staff, and unexpected clinical situations. Drills are videotaped and used in immediate debriefing with participants as well as other educational opportunities. Simulation summary reports are reviewed at an interprofessional forum to further identify learning

opportunities for interdepartmental staff. Systems issues are brought to the attention of unit management for follow-up and resolution.

As of April 2011, we conducted 2 drills involving 17 participants. Drill summaries have identified opportunities for growth such as:

- Teamwork: Clearer role clarification and nursing not feeling empowered to address conflicting opinions.
- Communication: Verification of orders and lines of responsibility; involvement of patient and family
- Situation monitoring: Use of emergency equipment, clarity in patient plan of care, clinical knowledge and decision making
- Systems Issues: Medication availability, equipment accessibility.
- Leadership: Use of chain of command, knowledge of back-up physician availability

These opportunities have been addressed in interprofessional forums with recommendations for practice change. These drill sessions were videotaped. We are in the process of editing for ongoing educational in-services. A survey is being conducted of nursing and physician staff attitudes toward teamwork. The project will continue over the next year and the team will continue to develop the interprofessional team skills, improved communication patterns, and strengthened teamwork. In addition, the drill project will incorporate into a Balanced Score Card Project for Quality and Safety: *Life Wings: Improve teamwork and communication in Obstetrics by implementing crew resource management.*

*Interprofessional team members: Debbie Cruz, MSN, RNC, CRNP; Carol Carofiglio, PhD, MSN; Carmen Sultana, MD; Jane Huffnagle, MD, Suzanne Huffnagle, MD; Ksenia Zukowsky PhD, APRN, NNP-BC

This pilot project described is supported in part by Jefferson Interprofessional Education Center (JCIPE): Interprofessional Education and Care Practicum.

Exploring and Evaluating Interprofessional Training: A Brief Overview

Barret Michalec, PhD
Department of Sociology
University of Delaware

This paper provides a general overview of an upcoming evaluation plan with JCIPE that began this fall. This plan was constructed primarily because although numerous training institutions have constructed and implemented various courses and programs designed to provide students with extensive learning opportunities steeped in interprofessional education (IPE)¹⁻³, projects employing longitudinal and/or mixed-methods approaches to understanding the multi-faceted barriers to and facilitators of IPE within health professions training have been quite limited⁴. Similarly, few evaluation plans have attempted to unearth if and how students are exposed to interprofessional values outside of IPE-specific programs or how these team-based values may translate to students' later professional practice.

It is imperative to not only dissect the components of IPE programs and explore students' perceptions of teamwork training but also examine to what degree the charges put forth by IPE are retained by those exposed to these programs. Therefore, this forthcoming research endeavor serves a multitude of purposes: 1) to examine and evaluate elements of the *Health Mentors Program (HMP)*, 2) to explore the perceptions of students from different health disciplines regarding the *HMP*, interprofessional training within their discipline, and the value and status they place on other health care professions, 3) to better understand how students' may or may not engage in teamwork and collaboration during their professional practice, and 4) to highlight facilitators and barriers at Jefferson regarding the teaching and learning of interprofessionalism.

The sample for this project includes all entering (Fall 2011) students in each health profession (Medical, Nursing, Physical Therapy, Occupational Therapy, Pharmacy, Couple and Family Therapy) at Thomas Jefferson University. The projects' objectives are examined through both quantitative (series of surveys) and qualitative (in-depth interviews) methodologies. The surveys are utilized to properly measure students' perceptions of interdisciplinary education (IEPS)⁵, attitudes toward interprofessional health care teams (Heinemann Scale)⁶, stereotypes of other health professions (SSRQ)^{7,8}, and socio-demographic characteristics. Surveys will be administered to all students in September 2011, and again in May 2013. Students in programs that do not conclude after two years (Medicine, Pharmacy, and Physical Therapy) will be surveyed again at the end of their program. All students will be approached three years into their professional practice to complete a final survey.

In-depth, structured interviews with a sub-sample of students from each health care discipline will be conducted to:

1) investigate potential barriers and facilitators related to interprofessional education, 2) explore if and how aspects of the *HMP* and each disciplines' particular training may influence students' perceptions towards interprofessionalism. Interviews will be held towards the end of each academic year (April/May 2012 and 2013). Much like the surveys, those students interviewed whose programs do not end in two years will be

approached again to be interviewed at the end of their respective program, and all interviewed will be approached to be interviewed three years into their professional practice.

My previous research regarding the socialization and professionalization processes of those in the health care fields includes a two-year pseudo-ethnography of preclinical medical students, a one-year exploratory study with clinical nursing students, and a current study investigating if/how primary care practices engage in empirical/clinical research. Therefore, this comprehensive project not only fits with my research/methodological interests but also gives me the opportunity to work with the great team of scholars from JCIPE. This collaborative effort not only fills gaps in the current IPE literature (specifically the lack of longitudinal and mixed-method approaches), but extends the notion of "evaluation" to include examining interprofessional training within the students' own health discipline and the extent to which IPE values are maintained and cultivated in professional practice as well.

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In the News

[APTR/Healthy People 2020](#)

Congratulations to the HMP Faculty and Staff Team. The Association for Prevention Teaching and Research (APTR) has accepted Jefferson's application Transforming Healthcare Education: An Interprofessional Approach to Prevention, Health Promotion and Wellness as part of the Healthy People 2020 and Education for Health Successful Practices Initiatives sponsored by the APTR Health People Curriculum Task Force. The case study will soon be featured on the Healthy People 2020 website. Congratulations to Laurie Collins, MD (Jefferson Medical College), Nethra Ankam, MD (Jefferson Medical College), Christine Arenson, MD (Jefferson Medical College/JCIPE), Leigh Ann Hewston, PT, MEd (Jefferson School of Health Professions, Department of Physical Therapy), Christine Jerpbak, MD (Jefferson Medical College), Marcia Levinson, PT, PhD (Jefferson School of Health Professions, Department of Physical Therapy), Shelley Wallock, DrPH, OTR/L (Jefferson School of Health Professions, Department of Occupational Therapy), Julia Ward, PhD, RN (Jefferson School of Nursing), Reena Antony, MPH, BSN (JCIPE) and Sokha Koeuth, BA (JCIPE).



[Collaborating Across Borders \(CAB III\)](#)

Fifteen Jefferson faculty, staff, and one student attended [Collaborating Across Borders \(CAB\) III, An American-Canadian Dialogue on Interprofessional Health Education & Practice](#), November 19-21, 2011, held in Tucson, AZ. CAB III is the third biennial Canada-United States joint conference devoted to the advancements of interprofessional health education and practice - and will be the largest interprofessional education meeting ever held.

We are delighted to share with you how well represented Jefferson was at CAB III. Jefferson was represented with four posters and 13 podium presentations, in addition to having 2 members on the board of the American Interprofessional Health Collaborative, one of the meeting's sponsors. Work of many Jeffersonians, including the Health Mentors Program, clinical skills training, professionalism training, and our robust evaluation data, among others, was shared.



Upcoming Faculty and Staff Development Programs

[Manuscript Writing Workshop](#)

The seven-session workshop series is designed for faculty/staff who have participated in an interprofessional project but have not yet written a manuscript for publication. By the end of the workshop sessions, participants will: choose an appropriate journal to submit a manuscript, write a manuscript on an interprofessional education or care project, obtain peer feedback on manuscript and submit a completed manuscript to a selected journal. Our 2011-2012 writing workshop series began on Wednesday, October 26, 2011 in 208/209 Hamilton Building from 1-2pm. 2012: January 25, March 14, March 28, April 11, April 25 and May 9—all Wednesdays from 1 to 2pm.



[Interprofessional Education and Care Practicum](#)

This 5-session practicum is a hands-on didactic and interactive experience for faculty and staff who are interested in developing a pilot interprofessional education (IPE) or care (IPC) project in either an educational and/or practice setting. Jefferson faculty will mentor you in planning, delivering, and evaluating your interprofessional education or care project.

Participants will attend 5 sessions to gain specific skills in IPE development, finding an IPE teaching team, computer assisted technologies, learning objectives and evaluations.

[Winter 2012 Schedule](#)

Session 1	February 2nd	General Principles of interprofessional education, including selection of settings and level of learners, teaching methods - Christine Arenson, MD
Session 2	February 9th	Computer learning strategies - Dan Kipnis, MSI and Kathleen Day, MS, AISR
Session 3	February 16th	Program development, including developing measurable objectives and linking activities to learning objectives - Leigh Ann Hewston, PT, MEd
Session 4	February 23rd	Program evaluation - Kevin Lyons, PhD and Carolyn Giordano, PhD
Session 5	March 1st	Putting it all together - Christine Arenson, MD and Elizabeth Speakman, EdD, RN, CDE, ANEF

To learn more about the Interprofessional Education and Care Practicum, visit JCIPE's website at <http://jeffline.jefferson.edu/jcipe/> or contact Cassie Mills at Catherine.Mills@jefferson.edu.

Upcoming Faculty and Staff Development Programs

Faculty Recruitment for the Health Mentors Program

Join other Jefferson faculty and help prepare our students for interprofessional collaborative team practice! Please volunteer to lead Interprofessional (IPE) Small Group Sessions at Jefferson.

1. Monday, March 19, 2012 Year Two Module 4 IPE Small Group Session “Self Management Support and Healthy Behaviors”
(Session A: 12 pm-12:50 pm and/or Session B: 1 pm-1:50 pm)
2. Monday, April 16, 2012 Year One Module 2 IPE Session “Preparing a Wellness Plan”
(Session A: 12 pm-12:50 pm and/or Session B: 1 pm-1:50 pm)

New to Health Mentors Program? We will be hosting a faculty training session for both Modules 2 and 4 IPE small group sessions. For more information and/or interested in co-facilitating a small group session, please contact Sokha Koeuth by email (sokha.koeuth@jefferson.edu) or phone (215-955-3757). Thank you so much for your teaching and leadership.



Register today for JCIPE’s 2012 Conference!

Interprofessional Care for the 21st Century: Redefining Education and Practice

Friday, May 18, 2012 ☞ 4:00pm – 6:30pm

Keynote Speaker: Carol A. Aschenbrener, MD

Executive Vice President, Association of American Medical Colleges

Saturday, May 19, 2012 ☞ 8:00am – 4:00pm

Keynote Speaker: Susan M. Meyer, PhD

Associate Dean for Education and Professor, School of Pharmacy

University of Pittsburgh

The purpose of this conference is to showcase scholarly work and works in progress advancing interprofessional education and/or practice. This conference reflects on innovative implementation and evaluation strategies of the interprofessional competencies. Educators, clinicians, practitioners, researchers, health system leaders, policymakers, patient organizations, students and other interested stakeholders in the health and social services arena should attend. For more information, visit <http://jeffline.jefferson.edu/>.



Save the Date! Interprofessional Education Collaborative (IPEC) 2012 Institute:

Building Your Foundation for Interprofessional Education

Sponsored by AACP, American Association of Colleges of Nursing, AACOM, ADEA, AAMC, ASPH

May 21-23, 2012 at Hyatt Dulles, Herndon, Virginia

For more information, contact institute@aacp.org.



Ehpic 2012—Educating Health Professionals in Interprofessional Care

Advancing the Future of Healthcare through Interprofessional Learning—a certificate course

Sponsored by the Centre for Interprofessional Education, University of Toronto

June 18-22, 2012 at St. Andrew’s Club & Conference Centre, Toronto, Canada

Abstract submission deadline is April 4, 2012.

For more information, visit: <http://events.cepdutoronto.ca/website/index/IPE1202-C>.



Collaborative Change Leadership: A Certificate Program for Healthcare & Health Education Leaders

Sponsored by the University Health Network & the University of Toronto, Centre for Interprofessional Education

September 2012—June 2013 (five in-class sessions) in Toronto, Canada

Application deadline is April 30, 2012.

For more information, visit <http://www.ipe.utoronto.ca/>.



All Together Better Health VI

6th international conference for Interprofessional Education and Collaborative Practice

Sponsored by InterEd, the international association for Interprofessional Education and Collaborative Practice

October 5-8, 2012 in Kobe, Japan

Abstract submission deadline is March 31, 2012.

For more information, visit www.k-con.co.jp/atbh6.html

Jefferson InterProfessional Education Center

<http://jeffline.jefferson.edu/jcipe/>



Jefferson InterProfessional Education Center

1015 Walnut Street, Suite 411 Curtis
Philadelphia, PA 19107

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