



# An Interprofessional Education Collaborative (IPEC) Competency-focused Workshop to Optimize Team Performance

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## WHAT WE LEARNED

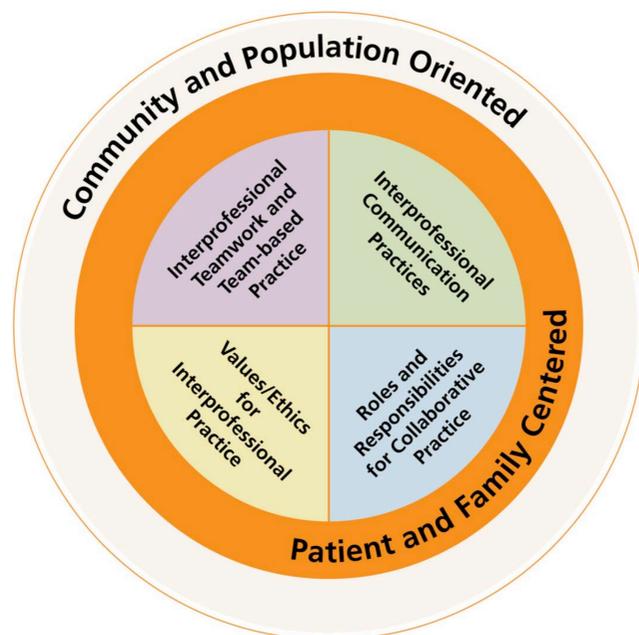
- This innovative series of workshops was impactful and resulted in self-reported attainment of workshop objectives
- Participants reported high commitment of applying the concepts in the workplace to improve outcomes
- Additional study is needed to assess impact on work practice

## BACKGROUND

- Healthcare professionals must collaborate and communicate effectively as members of clinical teams to deliver high quality care.
- Relatively few practitioners have had formal training in effective interprofessional (IP) practice
- The Interprofessional Education Collaborative (IPEC) has published the Core Competencies for IP Collaborative Practice.

## OBJECTIVES

- To develop an innovative educational program for IP teams to strengthen competence in IPEC competencies
- Workshop objectives: 1) examine personal and professional values and roles and their impact on collaborative practice, 2) apply relationship building principles to perform effectively as a team, and 3) integrate quality improvement tools into work processes to aid team-based care



## METHODS

- 17 faculty from 8 different professions representing 7 local healthcare facilities planned and conducted the workshops in Spring 2013 and 2014
- Recruited IP teams from long-term care, acute care, and ambulatory settings
- Three 3-hour sessions over 12 weeks (2013); 7 weeks (2014)
- Between-session team application assignments

Session 1	Session 2	Session 3
<b>Values and Ethics/ Roles and Responsibilities</b> <ul style="list-style-type: none"> <li>• Motto and Values Worksheet</li> <li>• Articulate a Team Value and Motto</li> <li>• Map Tasks of Professionals for a Clinical Case</li> <li>• Feedback &amp; Discussion</li> </ul>	<b>Communication/ Teamwork</b> <ul style="list-style-type: none"> <li>• Interview Team Members</li> <li>• Video Case</li> <li>• Role Play</li> <li>• Interactive Lecture</li> <li>• Group Discuss</li> </ul>	<b>Putting it All Together</b> <ul style="list-style-type: none"> <li>• Case Study</li> <li>• Quality Improvement Tools</li> <li>• Matrix</li> <li>• Interprofessional Teamwork Inventory</li> </ul>

**Matrix:** Novel tool designed by faculty to facilitate the teams examining IP performance and planning improvements in each domain

Assessment of Interprofessional Collaboration* *To be completed with a patient scenario or problem in mind	
Patient scenario or problem:	
What are examples of your team's <b>successful</b> demonstration of the IPEC domain?	What are examples of your team's <b>challenges</b> related to the IPEC domain?
What steps might be taken to address these challenges – both as an interprofessional team and individually by profession?	

## PARTICIPANTS

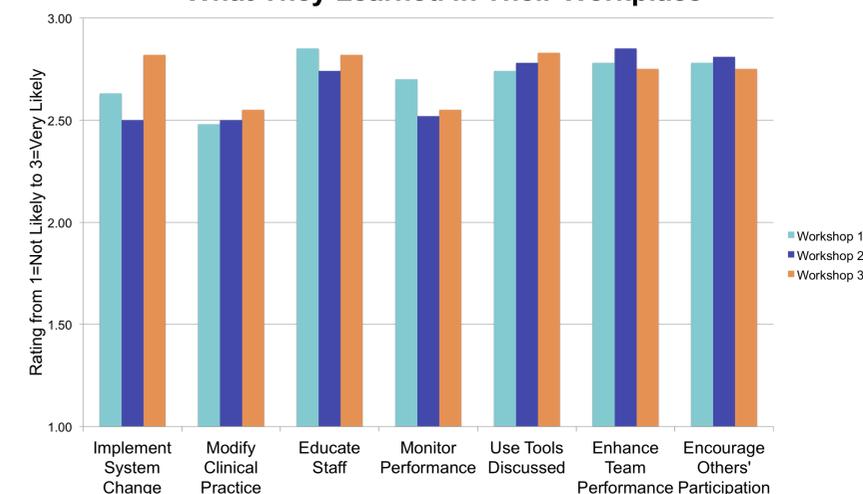
- **2013:** 5 Teams (3 nursing home, 1 hospital, 1 ambulatory), 26 participants, 13 professions
- **2014:** 5 Teams (2 nursing home, 1 adult day health, 2 academic educators), 16 participants, 5 professions

## RESULTS

### Participant Ratings:

- Overall impact of workshops on interprofessional collaborative practice by session:  
1 = 2.75, 2 = 2.82, 3 = 2.75 (3-point scale)
- Usefulness of content by session:  
1 = 3.68, 2 = 3.75, 3 = 3.42 (4-point scale)
- Achieved workshop objectives by session and year:  
2013(4-point scale): 1 = 3.7-3.8, 2 = 3.7-3.9, 3 = 3.4  
2014(5-point scale): 1 = 4.3-4.7, 2 = 4.5-5, 3 = 4-4.2
- 100% would recommend the workshop series

### Participants Had High Expectations of Applying What They Learned in Their Workplace



### Participant Testimonials 6 Months after Last Workshop

“The value of participation in the IPEC workshop was that we finally developed a process for managing transitions of care that works. We'd been working on this challenge but never really got it resolved until this team took it on as a project.”

Deborah Teasley, PhD President & CEO Southern Regional AHEC

“The IPEC workshop brought our falls team closer together. It allowed us to be able to see other members' viewpoints, while we gained additional skills to develop action plans. As a leader, I also gained insight into areas where good intentioned leaders may be stifling the creativity of their team.”

Roy Hudson, RN, MSN, BS, CNML Clinical Operations Director Duke Raleigh Hospital