CREATING FACULTY ENGAGEMENT IN INTERPROFESSIONAL LEARNING EXPERIENCES

SETON HALL’S PERSPECTIVE

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IPE TASKFORCE MEMBERS
ENGAGEMENT FOSTERS AN UNDERSTANDING OF THE IMPORTANCE OF THE IPE JOURNEY

Interprofessional Education (IPE)

Interprofessional Practice (IPP)

Patient-Centered Care (PCC)
KEY PLAYERS IN STRUCTURING MEANINGFUL IPE JOURNEY

- Faculty
- Students
- Experience
IMPERATIVE TO THE SUCCESS IPE JOURNEY

FACULTY

SUPPORT & ABILITIES
SHU DEVELOPED AND EXECUTED A 5 STRATEGIC PLAN: EMBRACING FACULTY NEEDS TO ULTIMATELY MEET STUDENT NEEDS

- Faculty based IPE taskforce
- **Faculty awareness via assessment**
- Foundational faculty development experiences (Internal/External)
- Faculty reassessment
- IPE Center formation
Initially
- Baseline
- IPE Faculty Survey

IPE Seminars (in house)

Follow Up
- IPE Faculty Survey

IPE Expert Retreat
- "Exploring Possibilities in IPE"

Recurring
- Faculty to faculty brown bag
- SOTL lunches

Mentor the mentors program

Website learning resources

School wide curricular mapping
Table 1. Initially faculty perceived barriers associated with IPE implementation (percent agreement (n))

<table>
<thead>
<tr>
<th>Perceived Barriers</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of faculty awareness of IPE</td>
<td>81.8% (9)</td>
<td>18.8% (2)</td>
<td></td>
</tr>
<tr>
<td>Institutional challenges</td>
<td>81.8% (9)</td>
<td>18.8% (2)</td>
<td></td>
</tr>
<tr>
<td>Faculty’s incorrect definitions of what is and is not IPE</td>
<td>81.8% (9)</td>
<td>9.1% (1)</td>
<td>9.1% (1)</td>
</tr>
<tr>
<td>Lack of clear institutional mission</td>
<td>81.1% (9)</td>
<td>9.1% (1)</td>
<td>9.1% (1)</td>
</tr>
</tbody>
</table>
Table 2. Initial Faculty’s Perception of What IPE Opportunities Affords Students ((Percent Agreement (n))

<table>
<thead>
<tr>
<th>IPE Provides Students with Opportunities to:</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explore unique contribution of other health professions</td>
<td>100% (11)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engage in the development of effective communication skills with other health professionals</td>
<td>80% (9)</td>
<td>20% (2)</td>
<td></td>
</tr>
<tr>
<td>Explore a mechanism to foster one’s own recognition of their role as an interdisciplinary health care team member</td>
<td>100% (11)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop interpersonal skills for collaborative patient care</td>
<td>90% (10)</td>
<td>10% (1)</td>
<td></td>
</tr>
<tr>
<td>Explore ethical and legal issues associated with health care</td>
<td>64% (7)</td>
<td>18% (2)</td>
<td>18% (2)</td>
</tr>
<tr>
<td>Evaluate information critically</td>
<td>55% (6)</td>
<td>45% (5)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Agree</td>
<td>Neutral</td>
<td>Disagree</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------------------</td>
<td>-------------</td>
<td>-------------</td>
<td>-------------</td>
</tr>
<tr>
<td>IPE programs must be evaluated to see the fit between interprofessional education and</td>
<td>81.8%(9)</td>
<td></td>
<td>18.2% (2)</td>
</tr>
<tr>
<td>interprofessional collaborative practice</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IPE programs must be evaluated to see the fit between interprofessional education and</td>
<td>72.7%(8)</td>
<td>18.2%(2)</td>
<td>9.1% (1)</td>
</tr>
<tr>
<td>professional core competencies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outcomes relevant to IPE must improve population health</td>
<td>54.5%(6)</td>
<td>27.3%(3)</td>
<td>18.2% (2)</td>
</tr>
</tbody>
</table>

Table 3. Initial Faculty perceptions regarding IPE Program Evaluation and Outcomes percent agreement (n)
Table 4. Initially Faculty perceived that learning experiences associated with IPE experiences should encompass (percent agreement (n)).

<table>
<thead>
<tr>
<th>Exposure activities for introducing concepts</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>63.6% (7)</td>
<td>27.3% (3)</td>
<td>9.1% (1)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Immersion activities for development</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>81.8% (9)</td>
<td>9.1% (1)</td>
<td>9.1% (1)</td>
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</table>

<table>
<thead>
<tr>
<th>Competence assessment for entry to practice readiness</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>45.5% (5)</td>
<td>36.3% (4)</td>
<td>18.2% (2)</td>
</tr>
</tbody>
</table>
SO WHAT DOES OUR FACULTY SAY NOW!

Overall faculty post implementation survey data support that

• Task Force Strategic Plan for implementing an inter-professional evidenced-based educational model provided a positive foundation for the advancement of inter-professional evidenced-based practice and did support the faculty

• Perceptions of the faculty are broadened and consistent with regard to IPE tenets.

• Faculty responses confirmed their willingness to address perceived barriers that might inhibit the success of an IPE infusion plan into their current curriculum.
As faculty we must ensure the development of “HABITS OF MIND” (Sullivan, 2005) not only for our students but ourselves.
TAKE HOME MESSAGE

Prepare Faculty

Engage Faculty

Empower Faculty
Your present circumstances do not define where you can go; they merely determine where you start.....

Nido R. Qubein
SO WHAT'S THE NEXT STEP.....

IPE Strategic Plan

- reassess
- reflect
- reapply
- revise
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REFERENCES


