WHO IS LIU?
- Multi-campus university
- 8th largest private university in the US
- Teaching-intensive university
- Tuition-driven
- Diverse student and faculty population
- 20+ different health professional programs
  - No Medical School
  - No Academic Medical Center
  - Not a Research I Institution

WHY IPE?
- Growing IPE focus from WHO, IOM, IPEC
- Affordable Care Act calls for collaborative care
- Recognition of need to adjust curriculum to prepare students for changing practice.
- Accreditation standards across 3 LIU health related colleges & schools were changing:
  - College of Pharmacy
  - School of Health Professions
  - School of Nursing
- IPE Taskforce formed in 2012-2013 Academic Year

SETTING GOALS
- START WITH FACULTY
  - Faculty have primacy in curriculum development
  - Need faculty buy-in to incorporate IPE
  - 3 annual IPE faculty development programs
- PROVIDE STUDENTS WITH IPE EXPERIENCE
  - Large numbers of students, but limited resources
  - Start with focus on Roles & Responsibilities
  - Large-scale (400+ students) 2-hour event
    - First one in 2013
    - Great response from students & faculty
  - Taskforce member involvement in IPEC 2014 led to idea for Fall 2014 IPE Ethics Event

FOCUSING ON ETHICS
- Fall 2014 event with 600 students from 10 different programs
  - Pharmacy
  - Nursing
  - Physical Therapy
  - Occupational Therapy
  - Physician Assistant Program
  - Respiratory Care
  - Social Work
  - Public Health
  - Athletic Training
  - Diagnostic Medical Sonography
- PROGRAM AGENDA
  - Introduction to ethics in professional education & practice.
    - Four Bio-ethical principles
    - Outline of basic steps for analyzing & responding to ethical dilemmas.
    - Case study discussions in faculty-facilitated small groups of 10 students.
    - Large group debriefing session
    - Some students had participated in previous R&R event; others had not

IMPROVEMENT FROM FEEDBACK
- Student attendees & Faculty facilitators said:
  - Great opportunity to work together as a team
  - Appreciated hearing different perspectives
  - The case was too clinically oriented
  - Not all students saw their own role in the case
  - Students needed opportunity to explore their role first before tackling ethical issues
  - Disappointment that not all professions were represented in each small group
- Changes made for Second Ethics Event in April 2016
  - Offered R&R in Fall 2015, Ethics in Spring 2016
  - Encouraged students attend both events in sequence
  - Participation from small group of pediatric attending physicians & residents from nearby hospital
  - Minor changes to introductory presentation
  - Case study redesigned
    - Interdisciplinary transplant team evaluating candidates for liver transplant
    - Less clinical
    - Controversial scenarios, to encourage robust discussion
    - Allow for broader analysis

PRELIMINARY RESULTS FROM 2016
- Increase in student & facilitator satisfaction
  - Students appreciated opportunity to collaborate with students outside their programs
  - Students valued diversity of opinion
  - Facilitators & students reported higher agreement that program met objectives this time, compared to 2014
- Challenges Identified
  - Facilitators reported difficulty connecting activity to IPEC goals
  - Students struggled to connect activity to IPEC goals
- Suggestions:
  - Use video to illustrate case scenario
  - Increase time for group discussions

CONCLUSIONS
- Importance of utilizing activity that engages students across the professions
- Feedback from 2016 event will inform 2017 event.