Jefferson Implements Interprofessional Education Program

This is the first article in an ongoing series focusing on Jefferson’s Interprofessional Education (JCIPE) activities.

Interprofessional approaches to practice have been suggested as a way to address the complexity and risks associated with chronic conditions related to the aging population in the United States. Interprofessional education (IPE) is fast becoming an accepted way to prepare future health professionals to successfully collaborate as members of health care teams. The most current definition driving programs of IPE is, “what occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care.”

In response to this need for new models of care and education, Thomas Jefferson University implemented the Jefferson InterProfessional Education Center (JCIPE) in 2007 with the mission; “To promote excellence in health through interprofessional education and scholarship.” The Center is a collaborative effort, reporting to the Senior Vice President of Academic Affairs, with co-directors from medicine and nursing. Representatives from University administration, faculty from all schools, departments, and research and clinical simulation units, and students participate. The Center has developed a comprehensive approach, consisting of interprofessional preclinical/didactic education, clinical simulation and clinical education within team-care settings in a variety of venues including Thomas Jefferson University Hospitals. JCIPE has been engaged in a variety of student curricula activities. Two teaching videos on hospital and home care interprofessional practice were planned and produced by Jefferson faculty from medicine, nursing, pharmacy, occupational therapy, physical therapy, radiological science, couple and family therapy, and bioscience technology. Health professionals and students identified the need for information about the roles and education of other health professions. In response, JCIPE developed posters/handouts regarding selected health professions accompanied by video descriptions by the Dean or Chair of the Jefferson program. These resources are available for use as teaching resources and can be accessed by anyone from JCIPE’s website (http://jeffline.jefferson.edu/jcipe). Other projects of interest, initiated in collaboration with the Eastern Pennsylvania and Delaware Geriatric Education Center (EPaD), include: interprofessional geriatric care web-based self-study modules; Objective Structured Clinical Exam (OSCE) focused on clinical skills for an interprofessional discharge planning team; and an interprofessional falls assessment clinic.

JCIPE held its first IPE conference in October 2008 to share the activities of the Center with the larger University community. A second, more regional conference is being planned for March 12 and 13, 2010. Members of JCIPE facilitated two Jefferson interprofessional faculty groups to participate in the Association of Prevention, Teaching and Research seminar and projects. As part of a faculty development initiative, JCIPE conducted a Mini Grant Program and funded three interprofessional projects during the past academic year. Projects included orientation of health professionals working with immigrant/refugees, expansion of interdisciplinary care course, and cultural competency training for medical residents and nurse practitioners. Ongoing interprofessional education research and scholarly seminars on evaluation and faculty networking are currently in progress or development. Finally, the EPaD Geriatric Education Center, with JCIPE participation, recently implemented an interprofessional fellowship program.

Future plans by members of the JCIPE community are: continued refinement of the existing curricula; increasing the number of IPE programs; continued focus on evaluation of all programs; development of a model to assess patient outcomes related to IPE; and finally, to assess the long-term impact on patient care and practice choices by Jefferson graduates.

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