Impact of Program Review on IPE Programming and Assessment

Sheree Aston, OD, MA, PhD
John Tegzes MA, VMD, Dipl. ABVT
David Dickter, PHD
Western University of Health Sciences (WesternU)
Overview

- Program Review at WesternU
- University Requirement for all Programs
- Self Study Standards
- Site Team Report
- Recommendations
- Action Plan
I. Mission, History, and Goals of the Program
II. Student Learning Outcomes
III. Assess the Curriculum
IV. Assess the Faculty
V. Assess the Student Body
VI. Assess the Physical Facilities
VII. Assess the Staff
VIII. External Environment
IX. Conclusion
• IPE Program Review
• Self Study Team
• 5 Year Mark
• Pomona Campus
• Study Submitted August 2014
• External Site Team
• External Team Final Report 2015
• Post Review Actions
• Early IPE Program Review Impact 2016
Recommendation #1:
Renew a Shared IPE Vision

Hold a Facilitated IPE Retreat with the Provost, Vice Provost, IPE Program Team Leaders, Deans & Associate Deans and Oregon Partners

Goal: IPE Vision & Priority Program Outcomes
Recommendation # 2 and 3

Update Program Coursework, Measures and Assessment

Develop additional or revised activities/elements within courses that have stronger focus on knowledge assessment and behavior outcomes

Develop knowledge and clinical assessment strategies
Completed Program Review:

Impact on IPE Program

2016

- Shared Vision Retreat (August 2015)

- IPE Vision Statement (September 2015)

To be a global leader in interprofessional education, practice, and research by preparing health professionals to transform healthcare

- 12 Priority IPEC Competencies
IPE Program Improvements (Fall 2016) – First Year Case Based Course

- Narrative Medicine: Sessions now utilize story-telling technique that draws on the perspectives of patients in each IPE case

- Skills Bursts: Sessions include segments focusing on a particular skill, including
Completed Program Review:

Impact on IPE Program

2016

IPE Outcomes Assessment Improvements

• IPE 5000 series - Focus on Skills (versus Attitudes): Self-appraisals of skills administered pre/post for 1st year students (start/end of year), replacing RIPLS (October 2016)

• Knowledge Assessment: Pre/post test of scope-of-practice & TeamSTEPPS introduced for 1st year students (October 2016)
IPE Outcomes Assessment Improvements

- Peer Evaluation: Planning for peer-evaluated skills assessment for 1st year students

- Feedback about IPE skills: Investigating how to give feedback on team-based standardized patient simulations. Evaluation of peer vs. faculty-led feedback on team OSCE for 2nd or 3rd year
Completed Program Review:

Impact on IPE Program

2016

Identification of measurable IPE behaviors and skills

- IPEC Competencies converted into 8 IPE Program Core Competencies (Spring 2016)

- Clinical Practice Sites rated importance of the IPE Program Core Competencies (Summer 2016)

- IPE program adopts the new 8 Competencies
8 Interprofessional Practice (IPP) Skills (priority order)

Consistently includes the patient and caregivers in discussions about the healthcare provided to the patient, and actively seeks their input into treatment plans.

Makes referrals and/or consults to appropriate providers from other professions, verbally or in writing.

Verbal communication is clear, sufficiently loud enough to be heard and understood, and avoids the use of profession-specific jargon and abbreviations.
• IPP Skills Continued:

• Elicits a patient history or narrative that extends more broadly beyond own profession, in order to ascertain all the patient’s healthcare needs and goals.

• Actively seeks input, both verbally and in writing, from various healthcare professions and providers during times of ethical challenges related to treatment options.

• Effectively addresses conflict with a member of another profession, such as differences of opinion.
IPP Skills Continued

• Avoids the use of profession-specific jargon and abbreviations in written communication via health record notations, emails, formal letters, or other electronic transmissions; adequately describes the situation, background, assessment, and recommendations in a succinct manner that is understandable across professions.

• During team interactions, mentions the unique contributions of other health professionals.
Conclusion

Questions?

Thank-You!