Linking Interprofessional Workforce Development and Practice Transformations

Barbara F. Brandt, PhD, Director
Associate Vice President for Education
The National Center for Interprofessional Practice and Education
nexusipe.org

We’re shaping the future of our evolving health care landscape by creating a true partnership and shared responsibility between practice and education – what we call the “Nexus” – to enhance the patient experience, improve population health and lower costs.

1,488
IPE RESOURCES

2,395
COMMUNITY MEMBERS

39
EDUCATIONAL OFFERINGS

21
RESEARCH PROJECTS

INFORMING
CONNECTING
ENGAGING
ADVANCING

Browse resources and stories and learn about us and the Nexus.

View the member directory, scan resource collections and join a group discussion.

Find an educational opportunity and the latest IPE events.

Learn about work occurring at sites across the U.S. and read our latest research.
Linking Workforce Development and Practice Transformations

Resource Type:
Presentation

Webinar presentation to CMMI SIM program: December 3, 2015
Barbara Brandt

Authors:
Barbara Brandt, National Center for Interprofessional Practice and Education

Upload File:
CMMI - SIM webinar final.pdf

Subject:
Education & Learning
The Nexus

Submitted by Barbara Brandt on Dec 2, 2015
- 7:47pm CST
Objectives

Describe the National Center for Interprofessional Practice and Education

Discuss what we are learning about IPE and workforce development

Describe the National Center resources and services

Ignite the IPE movement!
Interprofessional education “occurs when two or more professions learn with, about, and from each other to enable effective collaboration and improve health outcomes.”

Interprofessional, collaborative practice “occurs when multiple health workers and students from different professional backgrounds provide comprehensive health services by working with patients, their families, carers (caregivers), and communities to deliver the highest quality of care across settings.”

Adapted from:
The Centre for the Advancement of Interprofessional Education, UK, 1987
The National Center for Interprofessional Practice and Education:

- Vision and Goals
- The Nexus
- Strategic Engagements
- IPE Research
We believe high-functioning teams can improve the experience, outcomes and costs of health care.

National Center for Interprofessional Practice and Education is studying and advancing the way stakeholders in health work and learn together.

National Center Funders

- Health Resources and Services Administration Cooperative Agreement Award No. UE5HP25067
- Robert Wood Johnson Foundation
- Gordon and Betty Moore Foundation
- Josiah Macy Jr. Foundation
To provide the **leadership, evidence** and **resources** needed to guide the nation on the use of interprofessional practice and education as a way to enhance the experience of health care, improve population health, and reduce the overall cost of care.
We Do This By...

- **Co-creating** and **evaluating** interprofessional practice and education models that reconnect education and collaborative practice in Nexus sites across the U.S. and show the impact of this work on the Triple Aim.

- **Strengthening** and **increasing** the availability of evidence about the effectiveness of interprofessional practice and education in achieving the Triple Aim.

- **Leading** and **facilitating** the national dialogue among stakeholders in education and health care about the effectiveness of interprofessional practice and education in achieving the Triple Aim.
The Nexus: Our Vision for Health

The Triple Aim of Alignment
- Improving quality of experience for patients, families, communities and learners
- Sharing responsibility for achieving health outcomes and improving education
- Reducing cost and adding value in health care delivery and education
Strategic Undertakings of the National Center

- Resource Center (nexsusipe.org): growing number of tools, information and resources
- Nexus Innovations Network - intervention research for data generation and IPECP model testing linking interprofessional practice and education to outcomes
- Sound informatics platform -- National Center Data Repository (NCDR) -- to house generated data for analysis from multiple sources
- Peer reviewed publications and reports
- Presentations, meetings and webinars
- Organizational partnerships
- Contracts for customized services
Select Presentations, Consultations, Partnerships and Contracts for Services

1199/SEIU Funds
American Assembly for Men in Nursing
American Interprofessional Health Collaborative
AMA – Accelerating Change in Medical Education
Association of Nurse Professional Development
American Association of Colleges of Nursing
American Interprofessional Health Collaborative
Association of Academic Health Centers
Association of Nursing Professional Development
Association of Specialized and Professional Accreditors
California Institute for Nursing and Health Care
HRSA Nurse Education, Practice, Quality and Research grantees
Indiana Center for Nursing
Josiah Macy Jr. Foundation

IOM Future of Nursing
IOM Global Forum on Innovations in Health Professions Education
Macy T3 Faculty Development Program
National Advisory Council on Nurse Education and Practice
National Association of Community Health Centers
National Governors Association
National Health Policy Forum
National League of Nursing
National Nursing Centers Consortium
National Quality Forum
Nursing Organizations Alliance
Patient-Centered Primary Care Collaborative
University of North Carolina Cecil G. Shep Center
VA Centers of Excellence in Primary Care
Nexus Innovations Network, HRSA NEPQR, and the National Center Data Repository

- Growing research networks (NIN, NEPQR)
- Links practice and education
- Comparative effectiveness research
- National Center Data Repository
- National Center implementation support
- Actionable measurement
Nexus Innovations Network and NCDR

- Nexus Innovations Network team and Scientific Review Team operate in a mode of continuous improvement.
- Latest refinements are designed to create clear expectations and speed cycle time to site gathering data.
- Process also helps identify where sites are in the journey and readiness for success.
51 Projects in Process

Among active and incoming projects, we anticipate:

- **160** separate submissions of intervention data will go into the NCDR.
- **480** cumulative months of inter-professional care delivery will be studied.
19 active intervention projects address 10 categories

- Simulation Tools
- Electronic Health Records
- Transitions of Care
- Expanding Roles
- Quality & Safety
- Community-based Clinics
- Hospital Settings
- Chronic Conditions
- Primary Care Settings
- Education Improvements
What we are learning about IPE and workforce development
Interprofessional Education and Collaborative Practice: Welcome to the “New” Forty-Year Old Field

*Healthcare* 2015, 3, 1158-1173; doi:10.3390/healthcare3041158

Concept Paper

The Application of Informatics in Delineating the Proof of Concept for Creating Knowledge of the Value Added by Interprofessional Practice and Education

Frank Cerra 1, James Pacala 2, Barbara F. Brandt 1 and May Nawal Lutfiyya 1,*

1 National Center for Interprofessional Practice and Education, University of Minnesota, Minneapolis, MN 55455, USA; E-Mails: cerra001@umn.edu (F.C.); brandt@umn.edu (B.F.B.)

2 Department of Family Medicine and Community Health, University of Minnesota, Minneapolis, MN 55455, USA; E-Mail: pacal001@umn.edu

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Four Nexus Innovations Network Group Examples

**Pioneer Group:** Medical University of South Carolina

**Second Wave:** South Dakota Interprofessional Practice and Education Collaborative

**Third Wave:** New sites actively onboarding

**Fourth Wave:** Contract for NC services – beginning 2016
<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
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<tbody>
<tr>
<td>1990s</td>
<td>Long standing commitment to IPE – dates back to the 1990s</td>
</tr>
<tr>
<td>2007</td>
<td>Refreshed commitment in Southern Association of Colleges and Schools Quality Enhancement Plan: IPE</td>
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<tr>
<td></td>
<td>“Extremely important: AND the stakes are high that it is successful.”</td>
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<tr>
<td>2012</td>
<td>Major leadership changes, including IPE Pioneer Site</td>
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<tr>
<td>2013 - 15</td>
<td>Re-organization; National Center project: TeamSTEPPS – student observations of actual clinical teams, entering data into the NCDR</td>
</tr>
<tr>
<td>2015</td>
<td>First cycle of data; Refresh of SACS QEP: Interprofessional, Collaborative Practice focus</td>
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</tbody>
</table>
“We really solidified since the National Center team came in June. We were not ready developmentally.”
‘It’s time for action. It’s time for all the players to get involved.’

- Dr. Carla Dixon, Chair, USD Department of Nursing and chair of South Dakota Interprofessional Practice and Education Collaborative

Leading South Dakota to a Healthier Future

Nursing Program Chair Guides Interprofessional Movement in South Dakota

by Peter Garrels
Among the motivating factors for the National Center is the need for rigorously produced and scientifically sound evidence regarding IPECP.

- Proof of concept published by Healthcare, November 2015. (Open access available)

- Establishes that the National Center methodology meets criteria for “proof of concept” by demonstrating the successful linking of data collected from different NCDR surveys in order to answer questions about the impact of interprofessional education on collaborative practice and eventually on Triple Aim derived health outcomes.

- Also possible and essential to the proof of concept for the NCDR is the thematic analysis of qualitative data collected from open text questions.
### Bivariate Analysis with Team Care Provided as Outcome or Dependent Variable

<table>
<thead>
<tr>
<th>Predictor Variables or Covariates</th>
<th>Team Care Provided</th>
<th>2-Sided Chi-Square P Values (alpha=.05)</th>
</tr>
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<tbody>
<tr>
<td>IPECP Essential In Process Of Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never</td>
<td>59.1</td>
<td>30.2</td>
</tr>
<tr>
<td>Occasionally</td>
<td>13.6</td>
<td>17.5</td>
</tr>
<tr>
<td>Often/Routinely</td>
<td>27.3</td>
<td>52.4</td>
</tr>
<tr>
<td>Instructed on Team Competencies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>59.1</td>
<td>32.3</td>
</tr>
<tr>
<td>Yes</td>
<td>40.9</td>
<td>67.7</td>
</tr>
<tr>
<td>Exposed to IPE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>72.7</td>
<td>43.4</td>
</tr>
<tr>
<td>Yes</td>
<td>27.3</td>
<td>56.6</td>
</tr>
</tbody>
</table>
Nexus Principles: Champion Teaching Practices

Sharing a vision

The patient-centered curriculum

Innovation for culture change

Spontaneous team leaders

Benefits of the Nexus to the PCMH / Practice

Benefits of the Nexus to students and residents
The concept of teams is taking hold throughout the United States and will be increasingly incentivized in new models of care and payment systems.

“Health care” is shifting to ambulatory and community settings – new and important roles in nursing.

Retraining and retooling the current workforce to be competent in interprofessional collaborative practice is an imperative and how the health care transformation will get done.

Many faculty do not understand the profound and fundamental change in the U.S. health care delivery system and the implications for their students and graduates. There is a great need to partner for workforce development.

Great need for new models of learning to drive new models of care.

It is about culture change and leadership at all levels.
Objective 3

National Center Resources and Services
The Resource Center (nexsusipe.org)

- Open access
- National Center news
- Community-generated resources
- National Center resources and toolkits
- Public and private discussions
- IPE Measurement Curation
- National Center publications
- Ambassador training
### Amina in the Nexus

[https://nexusipe.org/engaging/learning-system/amina-nexus-0](https://nexusipe.org/engaging/learning-system/amina-nexus-0)

Amina is striving to manage her diabetes and maintain her health.

### Preceptors in the Nexus

[https://nexusipe.org/engaging/learning-system/preceptors-nexus-toolkit](https://nexusipe.org/engaging/learning-system/preceptors-nexus-toolkit)

<table>
<thead>
<tr>
<th>Preceptor as Learner</th>
<th>Group Learning Materials</th>
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<tbody>
<tr>
<td>Online Modules</td>
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<tr>
<td>An Introduction to Interprofessional Collaboration</td>
<td>Mindset to Methods</td>
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<tr>
<td>Facilitating Interprofessional Discussions: Best Practices</td>
<td>Role Play Cards</td>
</tr>
<tr>
<td>Interprofessional Precepting: Best Practices</td>
<td>Objective Structured Teaching Experience (OSTE)</td>
</tr>
<tr>
<td>Enhancing Interprofessional Practice and Education at Your Site</td>
<td>Mindset to Methods</td>
</tr>
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</table>

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<tr>
<th>Preceptor as Interprofessional Educator</th>
<th>Preceptor as Interprofessional Champion</th>
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<tr>
<td>Educational Tools</td>
<td>Practice Transformation Tools</td>
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<tr>
<td>Interprofessional Crucial Conversations/Conflict Resolution</td>
<td>Interprofessional Group Visit and Home Visit Guides</td>
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<tr>
<td>Interprofessional Agents of Change</td>
<td>National Models and Resources for Interprofessional Practice Transformation</td>
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<tr>
<td>Interprofessional Team Evaluation</td>
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<tr>
<td>Interprofessional Journal/Book Club</td>
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<tr>
<td>Interprofessional Pandora’s Box</td>
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<td>Interprofessional Standardized Patient Simulation</td>
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<td>Interprofessional Quality Improvement</td>
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<tr>
<td>Interprofessional Debriefing Guides</td>
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T3 TRAIN-THE-TRAINER FACULTY DEVELOPMENT PROGRAM: Interprofessional Education Faculty Development for Educators

The National Center for Interprofessional Practice and Education is pleased to present the T3 Faculty Development Training Program, supported by funds from the Josiah Macy Jr. Foundation and led by Brenda Zierler, PhD, RN, FAAN & Les Hall, MD (Co-principal Investigators).

The National Center is pleased to present the T3 Faculty Development Training Program, a comprehensive series of workshops with a focus on interprofessional practice and education. The workshops are hosted at three sites around the country.
A selection of customized services designed to meet organizational goals in support of interprofessional practice and education:

- Curriculum design and implementation
- Evaluation consultation
- Nexus leadership coaching and convening
- Data analysis with existing data for peer-review publications
- National Center customized workshops
- Joint sponsorship, marketing, development of programming
Examples of Current Fee-based Contracts for Services

- Interprofessional curriculum design and implementation for two existing national programs
- Program design for regional health care meeting
- Analysis of existing data for peer review publications
- Program design around interprofessional practice for clinical environment
- Marketing, registration and tracking for a national faculty development program
Have something specific in mind?

To explore collaboration on a specific effort, please contact Jeny Kertz, National Center deputy director, at jkertz@umn.edu or 612.624.1923.
Ignite the IPE Movement!
What You Can Do Now...

Join the IPE movement at nexusipe.org

Create a profile and join the discussion
asknexus@umn.edu for inquiries

Many tools and resources available – webinars, online modules, publications, tools, presentations and more…

Meet Meghan
Ignite the IPE Movement!

- Showcase your members work in interprofessional practice and education
- Integrate interprofessional collaborative practice in your current programming
- Highlight various teams utilized in new models of care for your publications
- Create an organization profile on the Resource Center – nexusipe.org -- and encourage your teams to participate
- Contribute a presentation, tool, publication or other resource to the growing collection
- Submit a story or blog about your IPE journey to share with the National Center community
- Share your experience with an existing resource by making a comment or posing a question
- Become an ambassador of the National Center to share the latest evidence, resources and services with the growing community
Questions and Take-Aways...
Help the National Center Learn...

What worked well?

What could we improve?

Any other feedback is welcomed.