Designing for an Interprofessional Clinical Learning Environment



Kristen K. Will, PhD(c), MHPE, PA-C Director, Clinical Programs and Accreditation Clinical Associate Professor Arizona State University, College of Health Solutions



Morgan Passiment, MS
Director of Institutional Outreach and Collaboration
Accreditation Council for Graduate Medical Education (ACGME)





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GuestPresenters

Morgan Passiment

Director, Outreach and Collaboration

Accreditation Council for Graduate Medical Education

Kristen K. Will, PhD(c), MHPE, PA-C

Director, Clinical Programs and Accreditation Clinical Associate Professor Arizona State University I College of Health Solutions



Disclosures

Neither presenter has any disclosures



The National Collaborative for Improving the Clinical Learning Environment (NCICLE) provides a forum for organizations committed to improving the educational experience and patient care outcomes within clinical learning environments. NCICLE seeks to simultaneously improve the quality of learning and patient care within CLEs through shared learning and collaborative practice among its member organizations.

NCICLE.org





37 Member Organizations

Accreditation Council for Continuing Medical Education (ACCME) Association for Nursing Professional Development (ANPD)

Accreditation Council for Graduate Medical Education (ACGME)

Accreditation Council for Pharmacy Education (ACPE)

Alliance of Independent Academic Medical Centers (AIAMC)

American Association for Physician Leadership (AAPL)

American Association of Colleges of Nursing (AACN)

American Association of Colleges of Osteopathic Medicine

(AACOM)

American Association of Colleges of Pharmacy (AACP)

American Board of Medical Specialties (ABMS)

American Dental Education Association (ADEA)

American Hospital Association (AHA)

American Medical Association (AMA)

American Nurses Credentialing Center (ANCC)

American Organization for Nursing Leadership (AONL)

American Osteopathic Association (AOA)

American Society of Health-System Pharmacists (ASHP)

Assembly of Osteopathic Graduate Medical Educators (AOGME)

Association for Hospital Medical Education (AHME)

Association of American Medical Colleges (AAMC)

Association of Post Graduate APRN Programs (APGAP)

Association of Post Graduate PA Programs (APPAP)

Council of Medical Specialty Societies (CMSS)

Council on Social Work Education (CSWE)

Health Professions Accreditors Collaborative (HPAC)

Health Resources and Services Administration (HRSA)

Institute for Healthcare Improvement (IHI)/National Patient Safety

Foundation (NPSF)

Institute for Safe Medication Practices (ISMP)

Liaison Committee on Medical Education (LCME)

National Board of Medical Examiners (NBME)

National Center for Interprofessional Practice and Education

Organization of Program Director Associations (OPDA)

Quality and Safety Education for Nurses (QSEN) Initiative

The American Red Cross

The Joint Commission

Veterans Health Administration (VA)

Vizient, Inc.



Definition:

Clinical Learning Environment

Hospitals, medical centers, ambulatory care centers and other clinical settings in which clinicians train and practice.

Weiss K, Passiment M, Riordan L, Wagner R. Achieving the Optimal Interprofessional Clinical Learning Environment: Proceedings From an NCICLE Symposium.; 2019. 221 doi:10.33385/NCICLE.0002



Definition:

Interprofessional

Interprofessional education. "[W]hen two or more professions learn with, about, and from each other to enable effective collaboration and improve health outcomes." *Takes place in preprofessional and undergraduate health professions training programs.*

Interprofessional collaboration. "[A] type of interprofessional work involving various health and social care professionals who come together regularly to solve problems, provide services and enhance health outcomes."

Interprofessional learning. "[L]earning arising from interaction involving members or students of two or more professions." *Takes place in clinical learning environments* and other care settings as part of the continuum of learning.

Interprofessional teamwork. "[A] type of work involving different health or social care professionals who share a team identity and work together closely in an integrated and interdependent manner to solve problems, deliver services, and enhance health outcomes."

World Health Organization. Framework for Action on Interprofessional Education and Collaborative Practice. Geneva, Switzerland: Author; 2010.

Institute of Medicine. Measuring the Impact of Interprofessional Education on Collaborative Practice and Patient Outcomes. Washington, DC: National Academies Press; 2015.



IP-CLE Symposium 2017







Symposium Goal

A series of discussions that would lead to a shared understanding of:

- The value of optimizing IP-CLEs
- The characteristics of optimal IP-CLEs
- The role of leadership in various environments of health care systems (i.e., macro, meso, micro)
- The role of other stakeholders in promoting IP-CLEs
- Potential timeline and next steps



PATIENT CENTERDNESS

Health care is viewed as cocreated, with the patient, as well as his or her family and community, as an integral part of the health care team.

CONTINUUM OF LEARNING

Learning is fostered throughout
one's career, with interprofessional
values integrated and reinforced
in the clinical workflow as
well as in terprofessional/
undergraduate and graduate
education

KEY CHARACTERISTICS OF AN OPTIMAL IP-CLE

RELIABLE COMMUNICATIONS

Care plans are rich, collaborative, continuous, and truly focused on the patient by carving out physical and mental space for teams to effectively and actively communicate.

SHARED ACCOUNTABILITY

EVIDENCE-BASED

PRACTICE CENTERED ON

INTERPROFESSIONAL CARE

Care is based on key characteristics

of high-functioning collaborative

care exemplars, research, and

evidencebased IP-CLE models.

Structures and processes are in place to ensure accountability in interprofessionalism, such as measurable outcomes and clear competencies that inform desired behaviors.

TEAM-BASED CARE

The culture rewards risk
taking and innovation and
fosters leadership skills at all
levels, all while embracing team
interdependence, shared decision
making, and collective competence.

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FIGURE 4:

Optimal IP-CLE Characteristics for Leadership in the Macro, Meso, and Micro Health Care Environments^a

Macro

- Modeling a Team-Oriented Approach
- Allocating Resources
- Advocating for Interprofessional Learning and Collaborative Practice

Meso

- Ensuring Ongoing
 Interprofessional Input
- Integrating
 Interprofessional
 Learning and
 Collaborative Care into
 the Strategic Plan
- Building Team-Oriented Infrastructures

Micro

- Practicing Optimal
 Team Behaviors
- Promoting Shared Decision Making
- Fostering
 Distributed Team

 Leadership

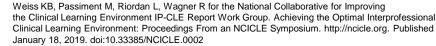




FIGURE 4:

Optimal IP-CLE Characteristics for Leadership in the Macro, Meso, an Micro Health Care Environments^a

Micro

Practicing Optimal

Team Behaviors

Pror

Macro

- Modeling a Team-Oriented Approach
- · Allocating Resources
- Advocating for Interprofessional Learning and Collaborative Practice

Meso

- Ensuring Ongoing
 Interprofessional Input
- Integrating
 Interprofessional
 Learning and
 Collaborative Care into
 the Strategic Plan
- Building Team-Oriented
 Infrastructures

Meso Environment

Hospitals & Clinics

Ensuring Ongoing Interprofessional Input

Integrating Interprofessional Learning and Collaborative Care Into the Strategic Plan

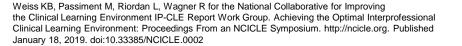
Building Team-Oriented Infrastructures

Leadersnip

Symposium

IP-CLE Workshop







Workshop Goal

- Convene multiple health and health care professional organizations and their constituents to collaboratively clarify interprofessional, systems-based approaches to optimizing clinical learning environments (CLEs) for health care's future.
- Through structure, process, and outcome guidance, inform how leaders may best serve learners, educators, care teams, and patients to achieve an optimal IP-CLE through organizational strategy and operational structures.

Activities

Integrating into the Strategic Plan

• TRIZ

Ensuring Ongoing Interprofessional Input

Fishbowl

Building Team-Oriented Structures

Moving from What to How



Objectives

Integrating into the Strategic Plan

- Describe ways that current practices (behaviors, structures, incentives, etc.) preclude or diminish the likelihood that interprofessional practice and collaborative care will be realized within our institutions.
- Discredit several myths related to strategic planning at local healthcare organizations.
- Design steps for ways to increase the likelihood IP and CP will be reflected on the strategic plan of the local healthcare organization.



Outcomes

Integrating into the Strategic Plan

Emerging Themes from Activity One

- 1. Buy in from leadership on the benefits of interprofessional learning and collaborative care.
- 2. Identify interprofessional learning and collaboration champions on the leadership team.
- 3. Create innovative ways to track team member attribution and incentivize team-based care.
- 4. Leverage the work of accreditors and regulatory bodies to promote further interprofessional learning and collaboration.



Objectives

Ensuring Ongoing Interprofessional Input

- Discuss the actual experiences, both successes and failures, of interprofessional input into the governance, oversight and planning of the organizations represented at the workshop.
- Identify patterns that emerge from discussions that characterize the successful and failed experiences.
- Create new ideas and strategies for ensuring ongoing interprofessional input into the governance, oversight and planning at their own institution.



Outcomes

Ensuring Ongoing Interprofessional Input

Exploratory Questions:

- How to differentiate structural challenges from cultural differences of professions?
- What can be done to mitigate cultural dissonance when merging disparate organizations to streamline operations?
- What skills are needed to facilitate effective collaborative engagement of individuals across multiple teams and organizational structures?
- What could move interprofessional structures from being ad hoc and lacking in effective communication?



Outcomes

Ensuring Ongoing Interprofessional Input

Recommended Strategies:

- Develop a formal structure that provides oversight for interprofessional education and collaborative practice throughout the institution (practice, education, and research).
- Continue to leverage outcome data to reinforce the importance of interprofessional education and collaborative practice across the institution by creating common goals and embedding into current metrics.
- Promote equitable methods of representation for all health professions in the co-creation of the interprofessional clinical learning environment.



Objectives

Building Team-Oriented Structures

- Identify actionable strategies for building and supporting team-oriented structures
- All org levels: Enabled from above, built from below
- Time Frame: Today, near term and long term



Outcomes

Building Team- Oriented Structures

Team-Oriented Structures	Recommendations				
	Today	Near Term	Long Term		
Flattened Organizational Structure	 Develop leadership capacity through awareness and capacity building 	 At every leadership level, draw together an interprofessional coalition to discuss ways to improve the CLE allowing everyone to have a voice 	Co-design shared structuresFormalize new structure		
Shared Accountability	Identify and convene stakeholders to inform and design	 Establish common language Define and implement a plan for shared accountability 	Establish shared accountably with aligned interprofessional incentives		
Protected Time	Support individuals time for teamwork and education	 Create time for cultivating relationships and developing collaborative behaviors as part of business and educational practices Develop evaluation criteria and outcomes based on expected interprofessional behaviors 	Trend and report outcome analysis		
Shared Decision Making	 Develop a process to engage a diverse group with an organization-wide focus to inform the process Provide training on listening & educating 	Co-create guidance for shared decision making	Build accountability into organizational goals and processes		
Physical Space	In consultation with staff reorganize existing space to encourage collaboration Create common spaces	 Conduct workflow analysis to identify opportunities to enhance collaboration and interprofessional learning Train preceptors on how to use space with learners 	Incorporate interprofessional education and practice into renovation and new space design (i.e. eye to eye contact, documentation efficiency, interprofessional team access, spaces that accommodate tea uses)		
Tools and Technology	Meet with CIO/CMIO to discuss technology collaboration opportunities in clinical and educational tools	 Conduct a needs assessment for team and collaboration Working with stakeholders, identify strategies and resources to integrate tools and technology that support team and collaborative practice (including patients) Develop an implementation plan 	 Orient, educate and implement on tools and technology in support of organizational collaboration expectations Implement in accordance with 		

Outcomes

Building Team-Oriented **Structures**

Team-Oriented Structures	Recommendations		
	Today	Near Term	Long Term
Flattened Organizational Structure	Develop leadership capacity through awareness and capacity building	 At every leadership level, draw together an interprofessional coalition to discuss ways to improve the CLE allowing everyone to have a voice 	Co-design shared structure Formalize new structure
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	to encourage collaboration	Today	
	Create common spaces	I rain precepto	ership capacity
		capacity build	
Tools and Technology	Meet with CIO/CMIO to discuss technology collaboration opportunities in clinical and educational tools	support team a patients) interprofessio	ership level, dra mal coalition to everyone to ha

Team-Oriented Structures...

Establish shared accountably with aligned interprofessional

· Co-design shared structures

Flatten Organizational Structure

Today

Develop leadership capacity through awareness and capacity building

Near Term

At every leadership level, draw together an interprofessional coalition to discuss ways to improve the CLE allowing everyone to have a voice

Long Term

Co-design shared structures Formalize new structures



Take-aways

Integrating into the Strategic Plan

Leadership at all levels can apply a collaborative, interprofessional lens to goals while recognizing crosscutting opportunities.

Ensuring Ongoing Interprofessional Input

Knowing you are creating structures and measurement that will support strategic goals.

Building Team-Oriented Structures

There are many structures that can support creating a collaborative interprofessional environment we envision. Recognize culture change take purposeful effort and time to build.





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6 Characteristics of an Optimal CLE	Integrating into the Strategic Plan	Ensuring Ongoing Interprofessional Input	Building Team- Oriented Structures
Patient Centeredness		X	X
Continuum of Learning	X		X
Reliable Communications		X	X
Team-Based Care	X		
Shared Accountability	X	X	
Evidence-Based Practice Centered on IP Care	X	X	



Thank you

Learn more at NCICLE.org
Contact: info@ncicle.org

