

# Preparing a Collaborative Practice Ready Workforce: Report on IPE/IPP in Academic Programs

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**CAPCSD Annual Conference, April 9, 2021**



# Carolyn Higdon

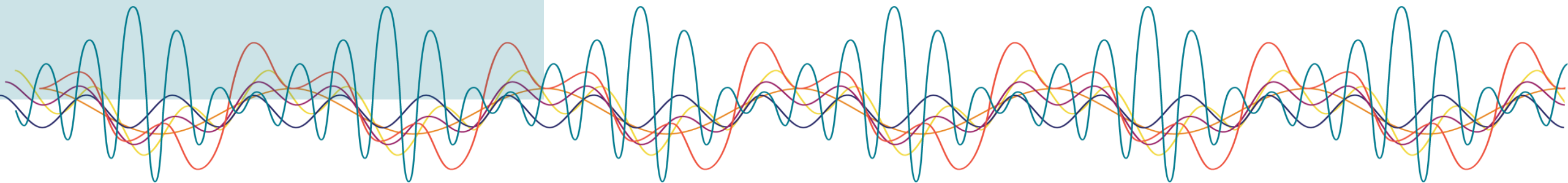
## Disclosures

### Financial Disclosures

Faculty member at the University of Mississippi  
No financial support from CAPCSD or Ole Miss

### Non-Financial Disclosures

Chair of CAPCSD IPP IPE Committee  
Member of CAPCSD and ASHA





# Loretta Nunez

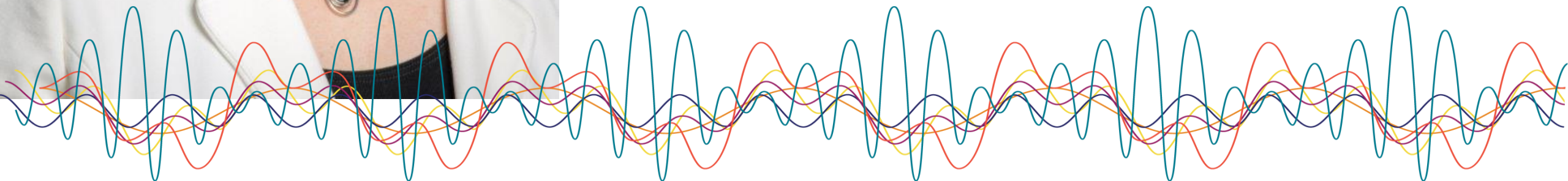
## Disclosures

### Financial Disclosure

- ASHA staff member
- Receives a salary from ASHA
- Leads ASHA's strategic objective on IPE/IPP

### Non-financial Disclosure

- ASHA member
- ASHA staff liaison to IPEC



# Learner Objectives

1. Identify data collected through the CAPCSD IPE/IPP Member Survey and the CSD Education Survey on interprofessional education in CSD academic programs.
2. Apply the data to further academic programs' IPE/IPP offerings and opportunities for IPE research.
3. Describe ways to bridge interprofessional education to practice and research within IPE curricula.

# Why IPE/IPP?

- ✓ Prepare for real world, evolving service delivery and payment models
- ✓ Actualize a “collaborative practice-ready workforce”
- ✓ Deliver services as part of a continuum of care with others
- ✓ Responsive to demand for accountability, outcomes, and efficiencies





# IPE/IPP Drivers In Professional Contexts



## Schools

- ✓ Demand for increased accountability
  - ✓ Every Student Succeeds Act (ESSA)
  - ✓ Individuals with Disabilities Education Act (IDEA)
  - ✓ Multi-tiered Systems of Support (MTSS), including Response to Intervention (RTI)
  - ✓ State educational standards (includes Common Core State Standards)
- 



## Health Care

- ✓ Institute for Health Improvement (IHI) Triple or Quadruple Aim
- ✓ Transition from fee for service to value-based service payment models
- ✓ Demands for more affordable and more convenient care
- ✓ Focus on “population health,” not just health care
- ✓ Innovation in care delivery (e.g., telehealth, continuum of care)

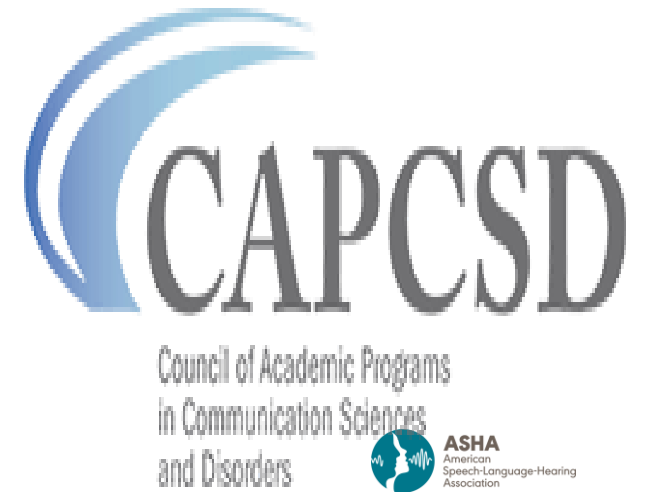
# **CAPCSD Member IPE/IPP Survey**



Council of Academic Programs  
in Communication Sciences  
and Disorders

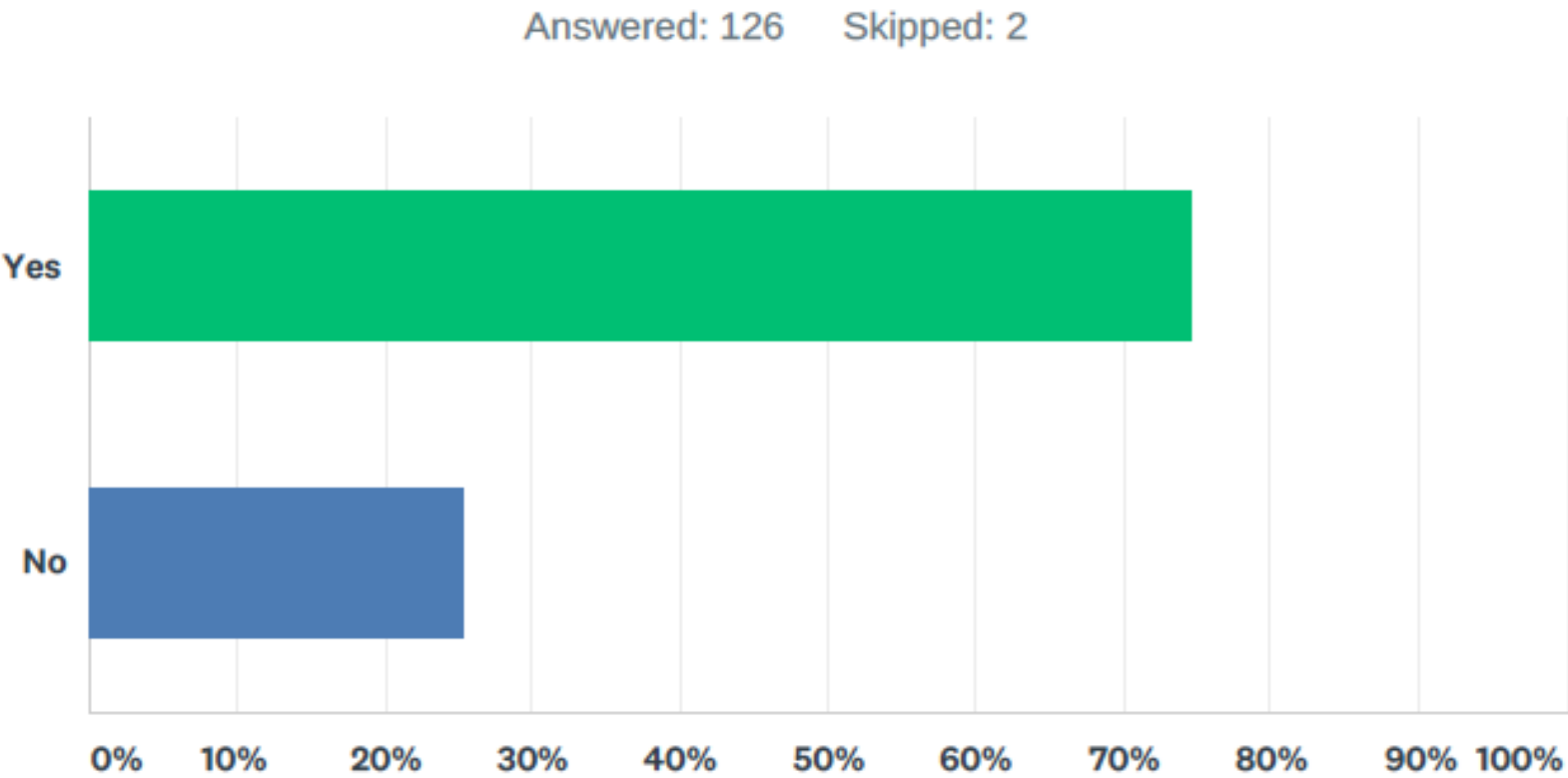
# Question 1: 124 programs

**What is the name of your institution?**



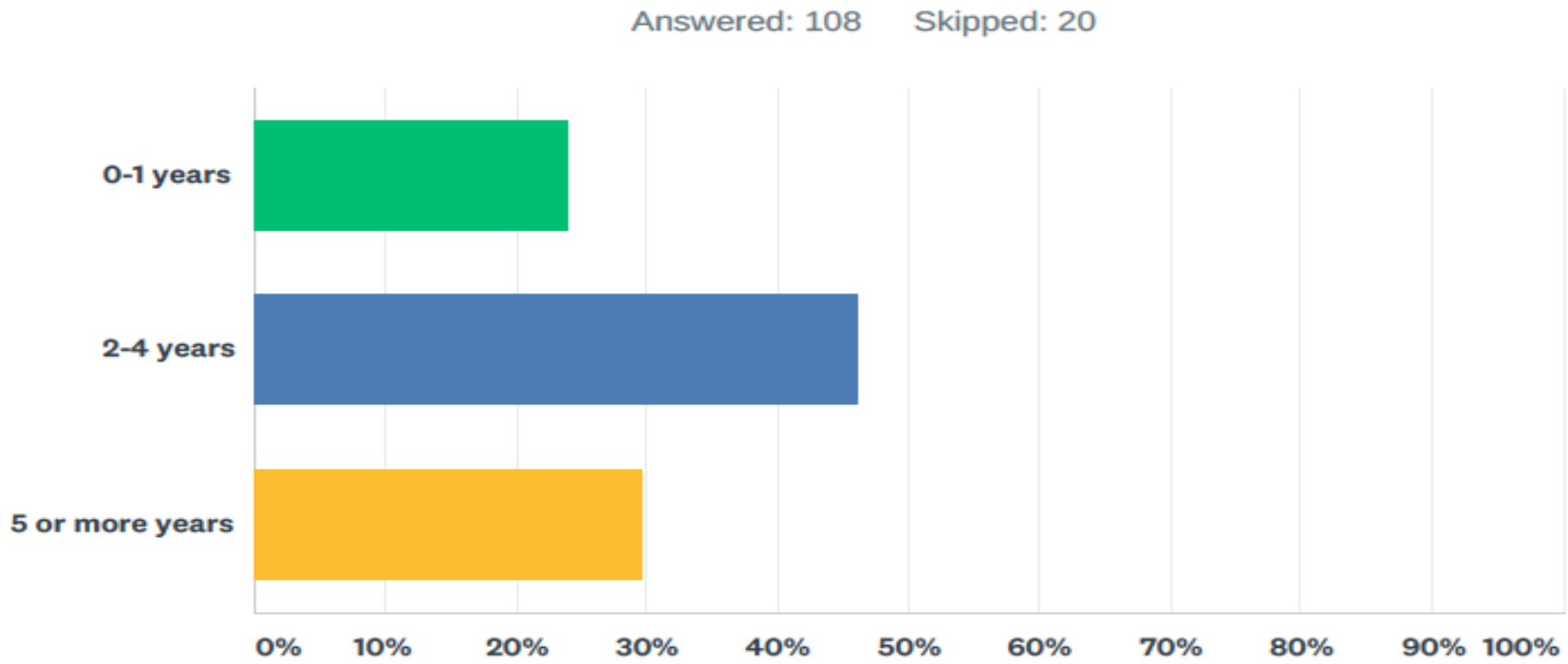


# Question 2: Do you have a formal IPE/IPP program(s) for students in CSD?



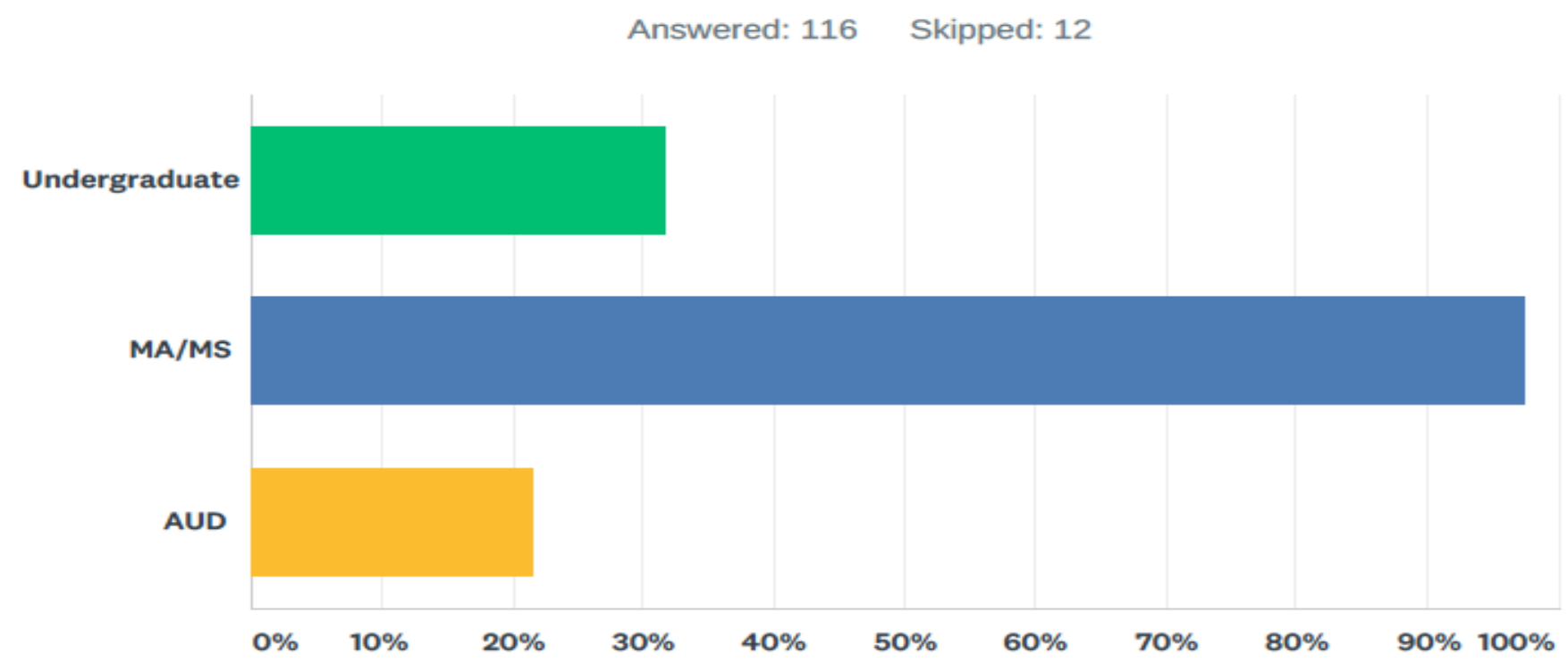
ANSWER CHOICES	RESPONSES	
Yes	74.60%	94
No	25.40%	32
TOTAL		126

# Question 3: How long have you had a formal IPE/IPP program?



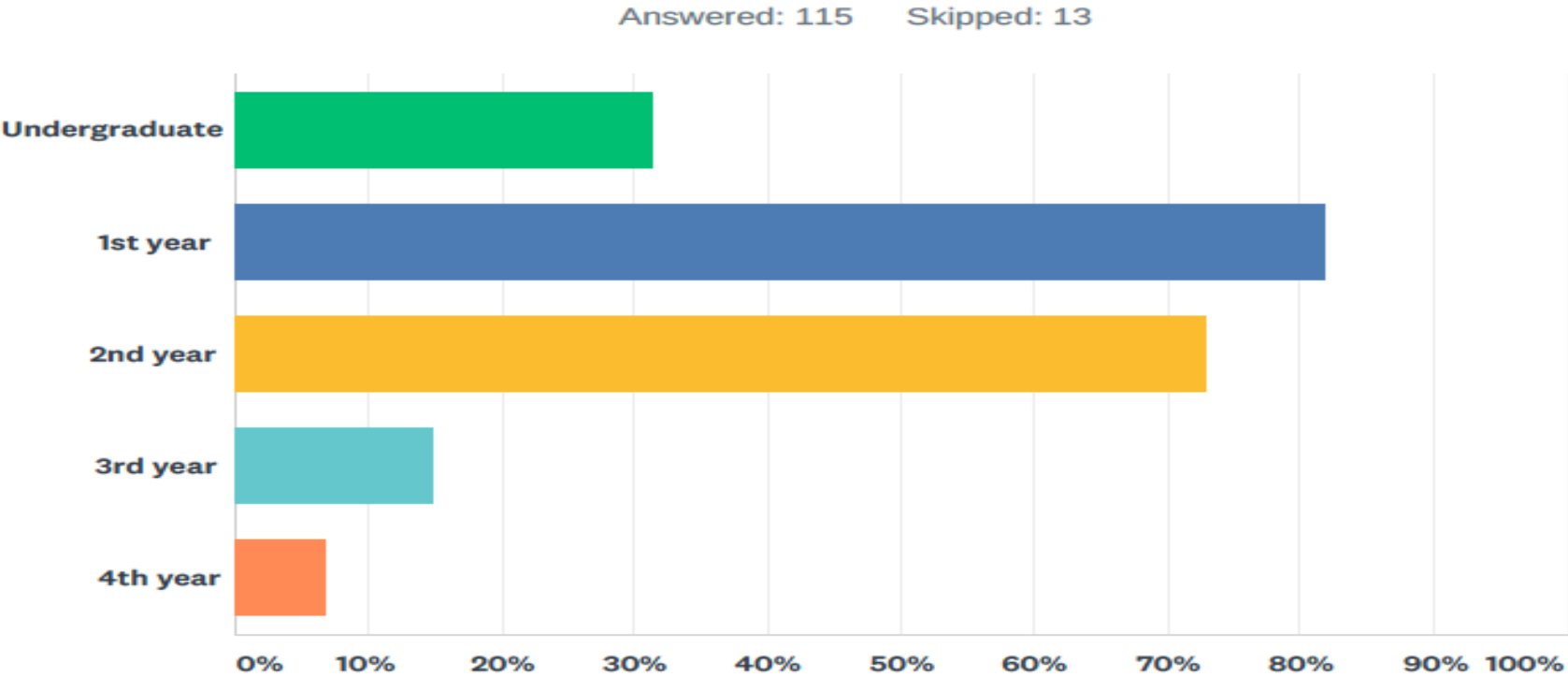
ANSWER CHOICES	RESPONSES	
0-1 years	24.07%	26
2-4 years	46.30%	50
5 or more years	29.63%	32
TOTAL		108

# Question 4: Describe the students engaged in IPE/IPP (select all that apply)



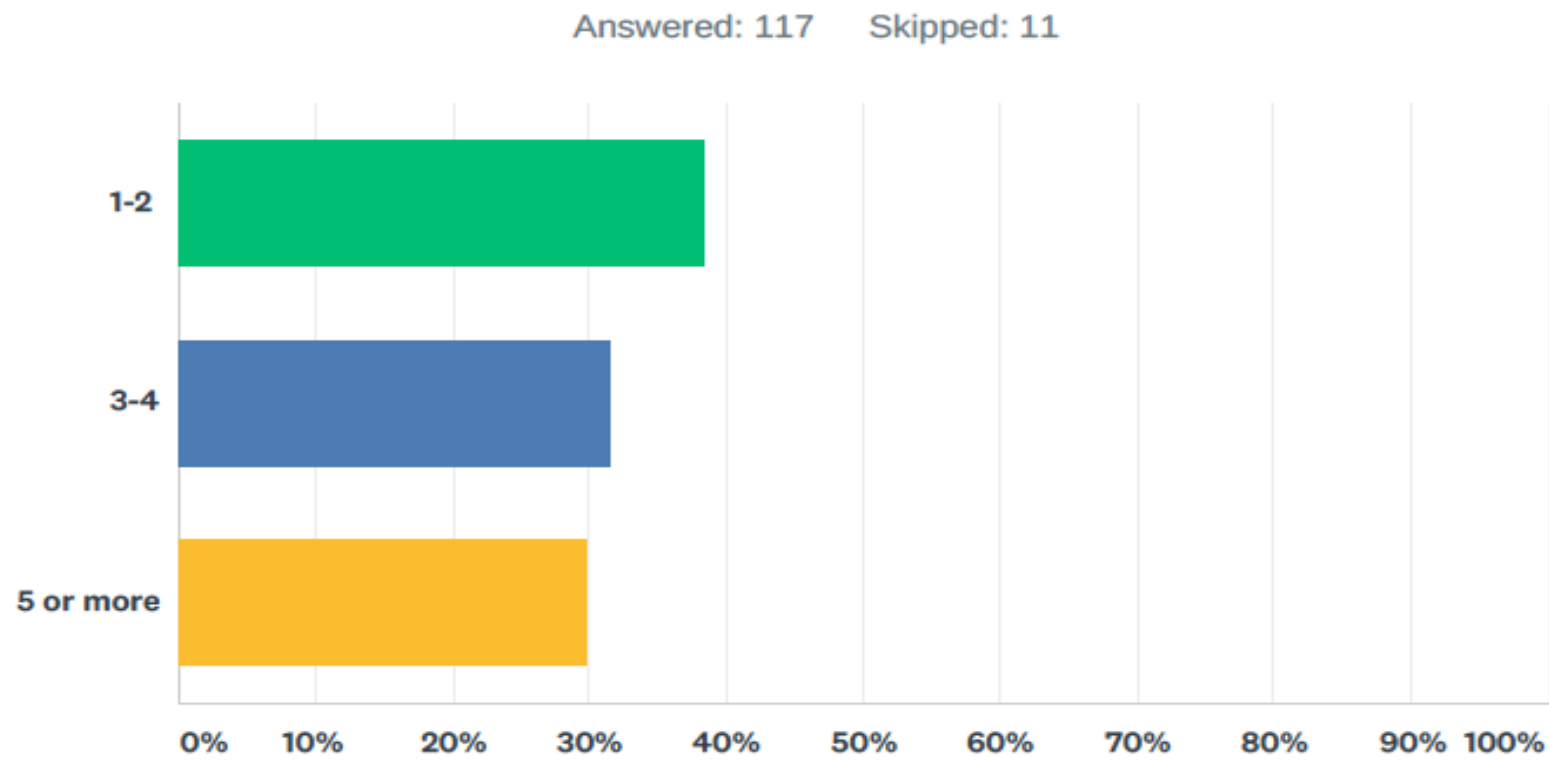
ANSWER CHOICES	RESPONSES	
Undergraduate	31.90%	37
MA/MS	97.41%	113
AUD	21.55%	25
Total Respondents: 116		

# Question 5: At what point in the student’s curriculum do they participate in IPE/IPP? (select all that apply)



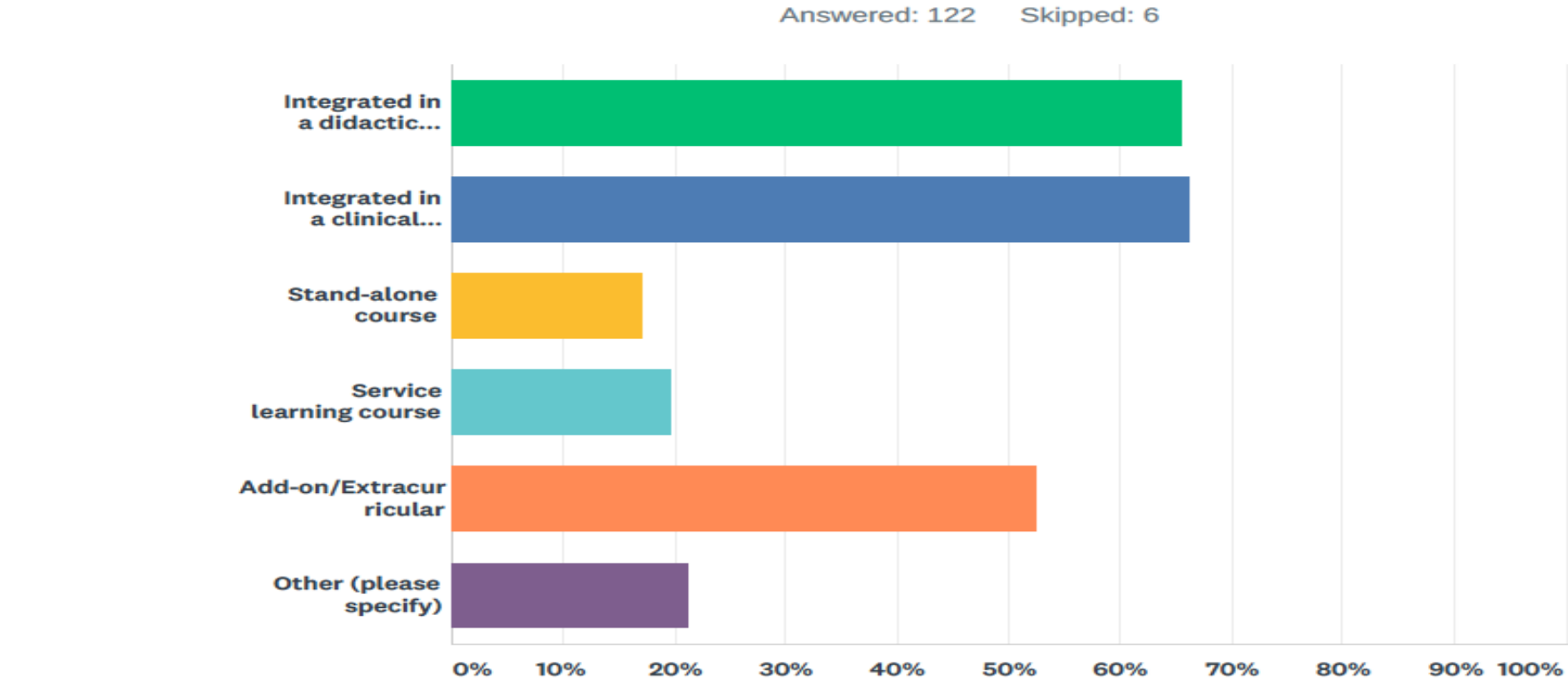
ANSWER CHOICES	RESPONSES	
Undergraduate	31.30%	36
1st year	81.74%	94
2nd year	73.04%	84
3rd year	14.78%	17
4th year	6.96%	8
Total Respondents: 115		

# Question 6: How many IPE/IPP events do students participate in during their program?



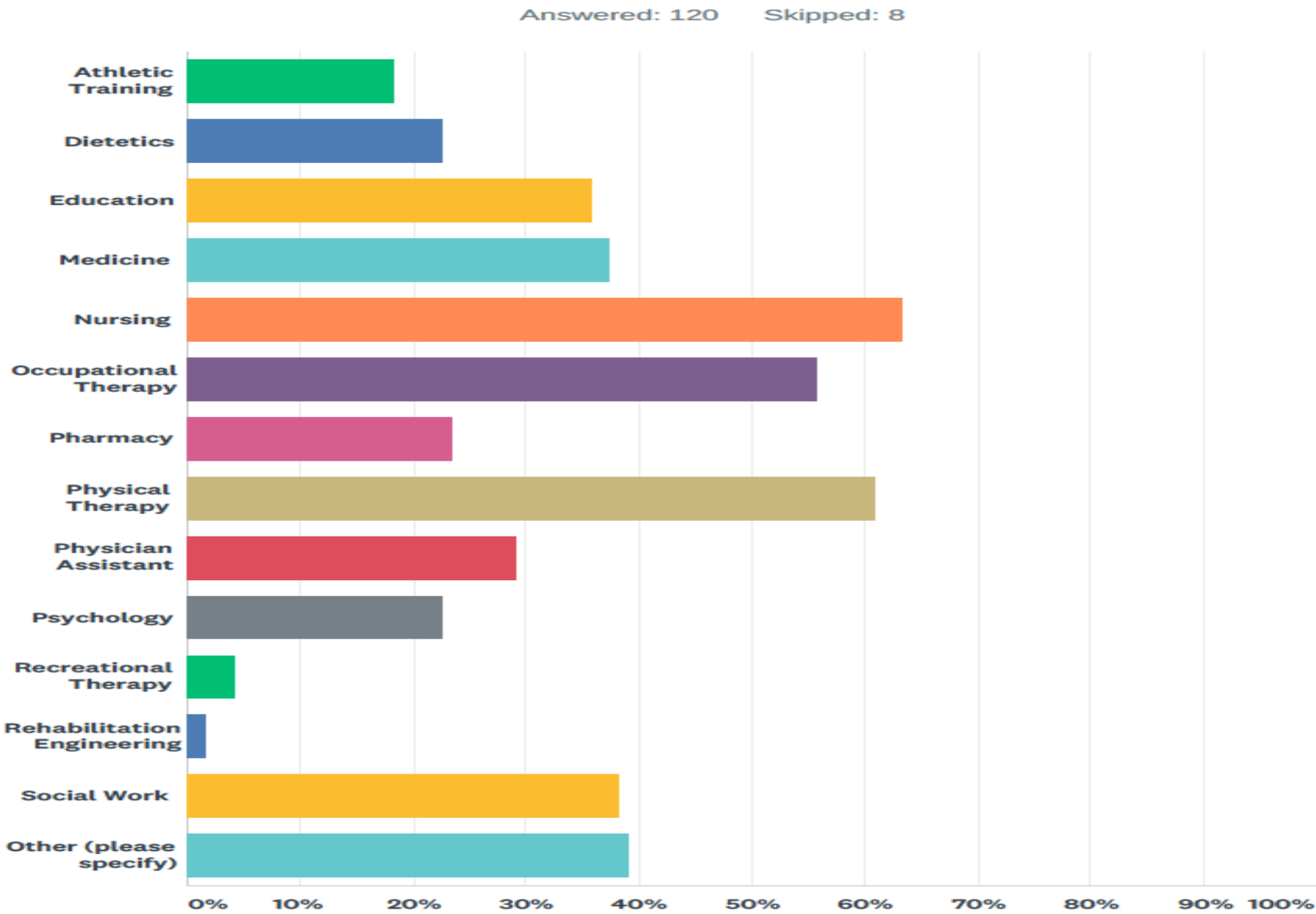
ANSWER CHOICES	RESPONSES	
1-2	38.46%	45
3-4	31.62%	37
5 or more	29.91%	35
TOTAL		117

# Question 7: Where are IPP/IPE concepts integrated into your program? (select all that apply)



ANSWER CHOICES	RESPONSES	
Integrated in a didactic course	65.57%	80
Integrated in a clinical course	66.39%	81
Stand-alone course	17.21%	21
Service learning course	19.67%	24
Add-on/Extracurricular	52.46%	64
Other (please specify)	21.31%	26
Total Respondents: 122		

# Question 8: What disciplines are involved in IPE/IPP sessions? (select all that apply?)



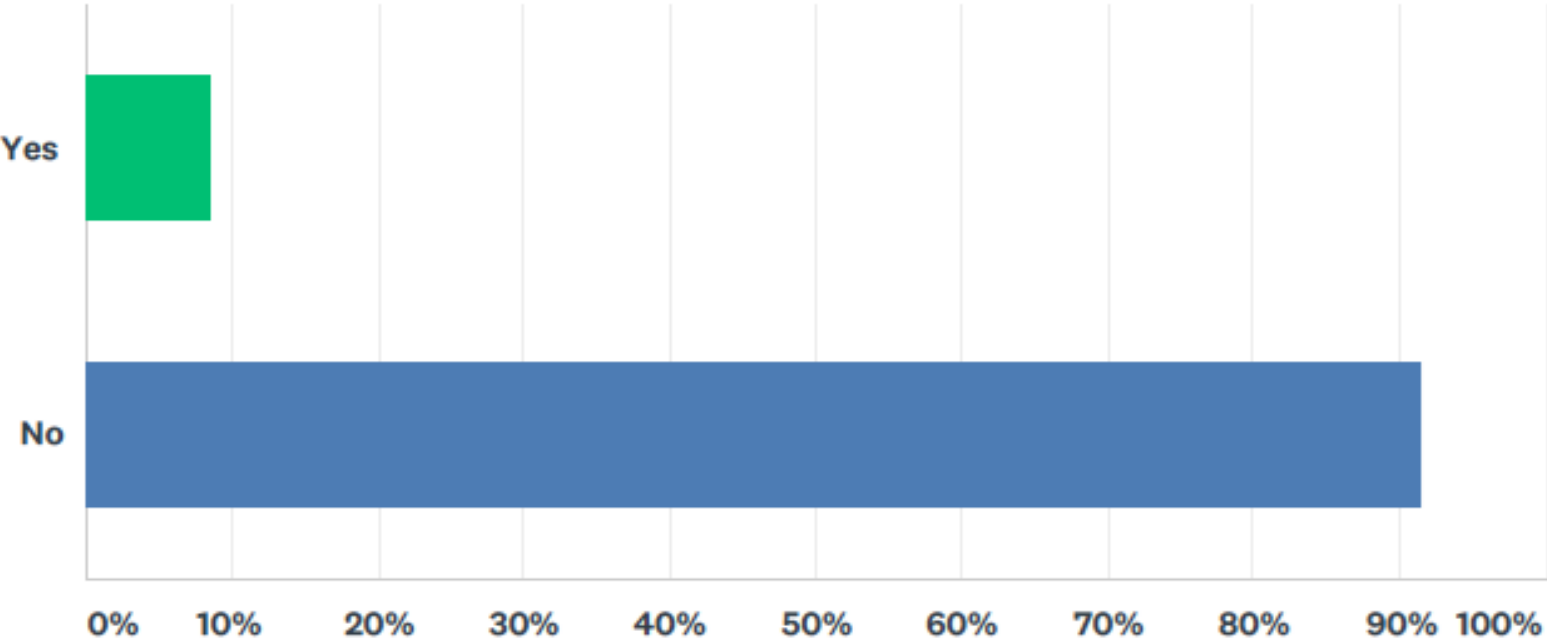


Question 8: What disciplines are involved in IPE/IPP sessions? (select all that apply?)

ANSWER CHOICES	RESPONSES	
Athletic Training	18.33%	22
Dietetics	22.50%	27
Education	35.83%	43
Medicine	37.50%	45
Nursing	63.33%	76
Occupational Therapy	55.83%	67
Pharmacy	23.33%	28
Physical Therapy	60.83%	73
Physician Assistant	29.17%	35
Psychology	22.50%	27
Recreational Therapy	4.17%	5
Rehabilitation Engineering	1.67%	2
Social Work	38.33%	46
Other (please specify)	39.17%	47
Total Respondents: 120		

# Question 9: Do you have a formal IPE/IPP Student Organization?

Answered: 128    Skipped: 0



ANSWER CHOICES		RESPONSES	
Yes		8.59%	11
No		91.41%	117
TOTAL			128

# What did we learn from this survey?

- Formal and informal IPP IPE/variation in interpretation
- About 50% response rate from member programs
- Revised IPEC core competencies
- IPE is included on university websites
- The need to develop pathways/avenues to support the transition of knowledge, skills and competencies about IPE to IPP
- The need for more research in the IPP and the transition to IPP domains
- The need for more work in the IPE and IPP aspects in the educational settings.



# ASHA

*SO2: IPE/IPP*

*Performance Measure data collected via  
the CSD Education Survey*



**CSD Education Survey**

# Strategic Objective 2



**Strategic Objective 2:** Advance Interprofessional Education and Interprofessional Collaborative Practice (IPE/IPP)



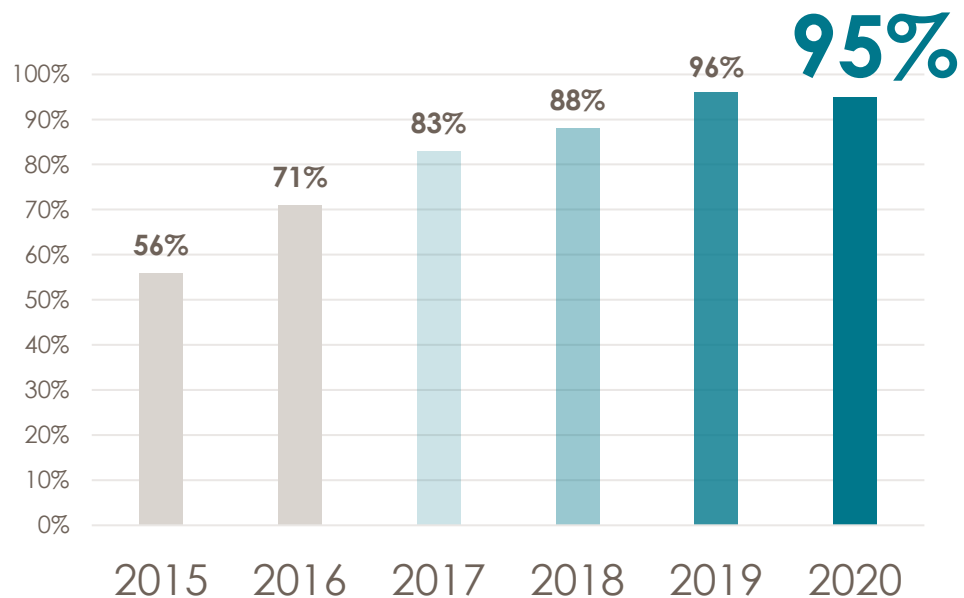
**Outcome:** Academic programs employ IPE models of personnel preparation and both students and ASHA members are engaging in interprofessional collaborative practice



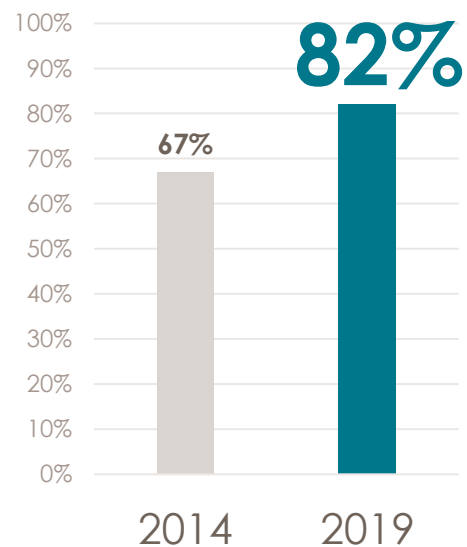
**Performance measures: 80% by 2025**

1. % of CSD academic programs that have IPE models in place
2. % of ASHA members participating in interprofessional collaborative practice
3. % of NSSLHA students engaged in interprofessional clinical practicum experiences

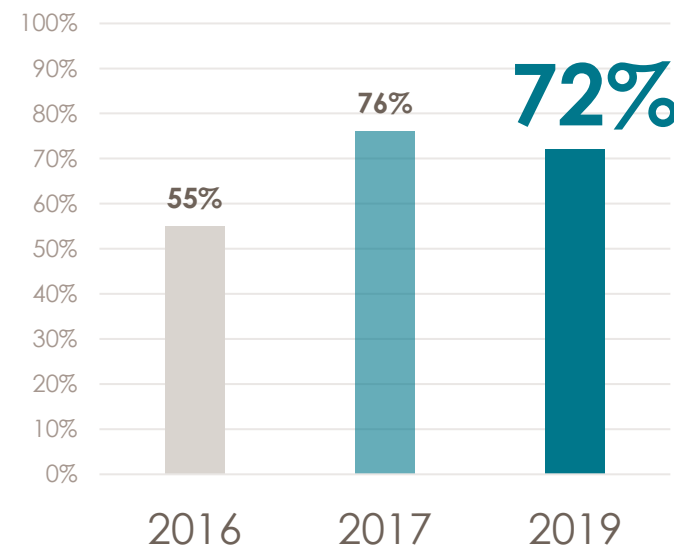
# Progress Made to Date



% of Academic Programs  
Incorporating IPE Approaches

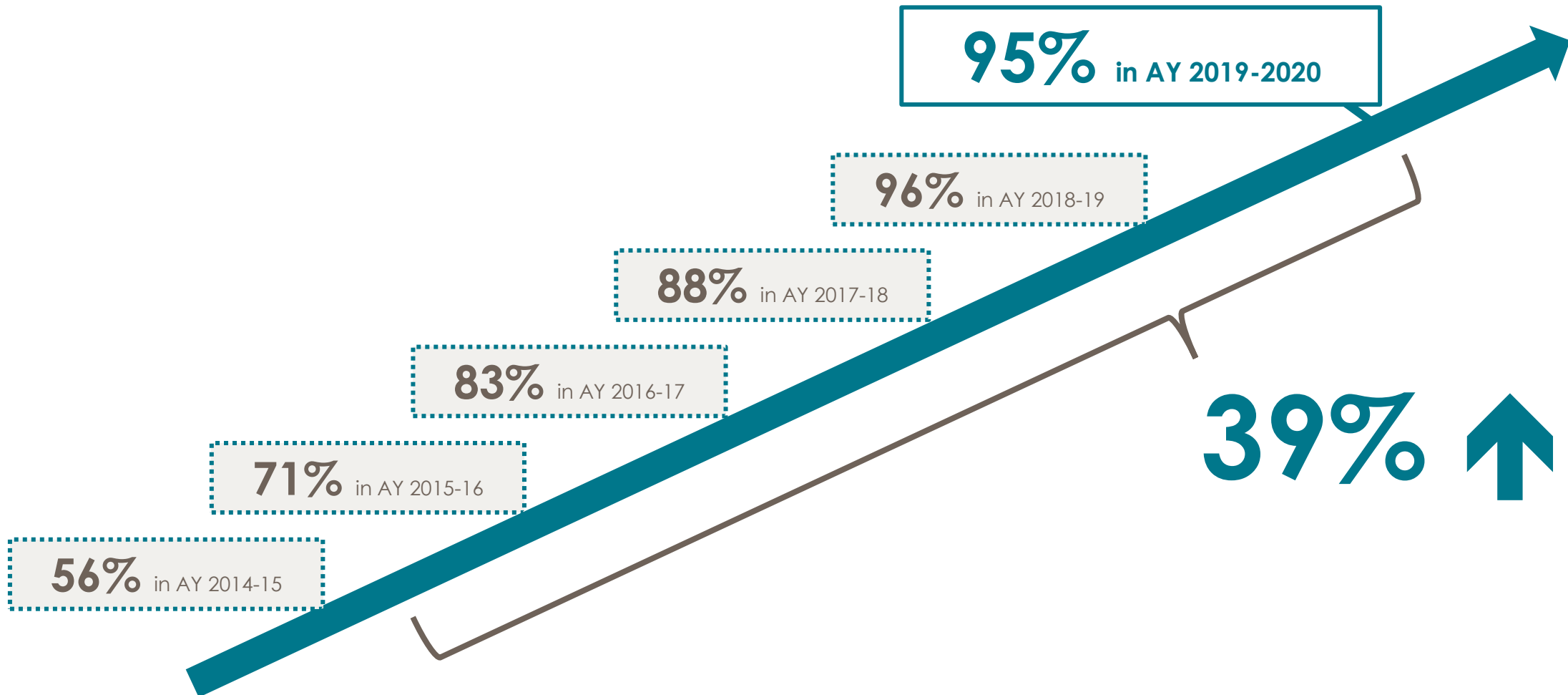


% of NSSLHA Students  
Engaged in IPE



% of Members  
Engaged in IPP

# IPE in CSD Programs





# Number of Programs Implementing IPE/IPP Approaches (2019-2020)

AREA OF STUDY AND DEGREE TYPE	NUMBER OF		
	EXISTING PROGRAMS	PROGRAMS RESPONDING	PROGRAMS THAT IMPLEMENT IPE/IPP
<b>Audiology</b>			
Clinical Doctorate: Entry Level	80	74 (93%)	66 (89%)
Clinical Doctorate: Post Entry Level	4	2 (50%)	0 (0%)
<b>Speech-Language Pathology</b>			
Master's	290	275 (95%)	266 (97%)
Clinical Doctorate: Post Entry Level	8	7 (88%)	7 (100%)
<b>Total</b>	382	358 (94%)	339 (95%)

# IPE Survey Questions

*Does the degree program employ interprofessional education or interprofessional practice (IPE/IPP) approaches in the academic and/or clinical curriculum? (help text provides the WHO definition of IPE/IPP)*

If “Yes” the program is prompted to respond to a follow up question:

*Please indicate the IPE/IPP approaches that are employed. (Select all that apply)*

# Survey Response Options – Core IPE Framework

1. **Explicit IPE learning constructs**, competencies, and outcomes are targeted in IPE learning activities such as Interprofessional Education Collaborative [IPEC] Core Competencies
2. **Two or more professions** are part of the IPE/IPP approach
3. **IPE/IPP outcomes target a continuum of learning** (e.g., attitudes/perceptions, knowledge/skills, performance in practice)
4. **Connecting IPE/IPP academic learning to clinical practice** ensures application and performance in practice

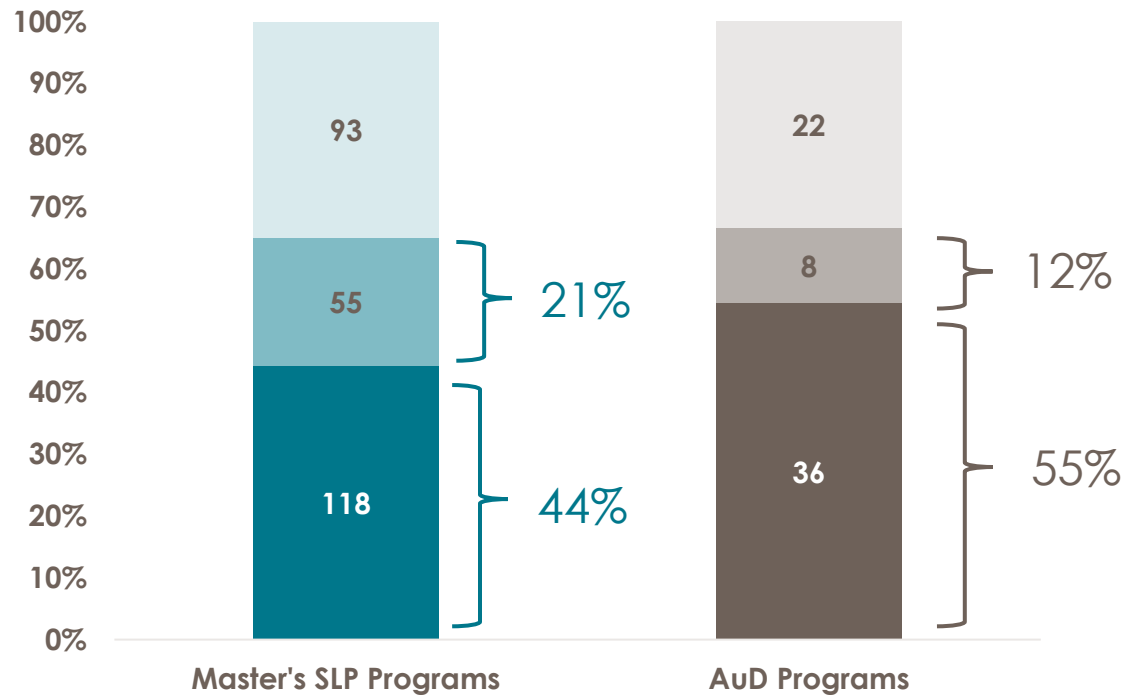
# Survey Response Options – Implementation Mechanisms

- **Combining faculty** across disciplines to teach courses
- **Integrating students** from two or more professions in IPE courses
- **Case-based learning** using an IP team approach
- **Problem-based learning** using an IP team approach
- **Clinical practica** using IP teams or cases
- **Simulations** using an IP team approach
- **Grand rounds** with two or more professions participating
- **Debriefing** with students and facilitators after IPE learning

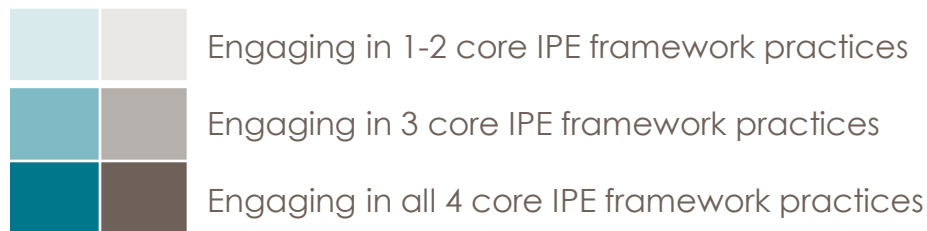
# Survey Response Options – Implementation Mechanisms

- **Interprofessional research projects**
- **Journal groups** that include two or more professions
- **IP service-learning projects**
- **IPE events** (1-day IPE events or workshops)
- **Other** (e.g., “interdisciplinary aphasia camp,” “full course”)

# Percent of CSD Programs Implementing Core IPE Framework

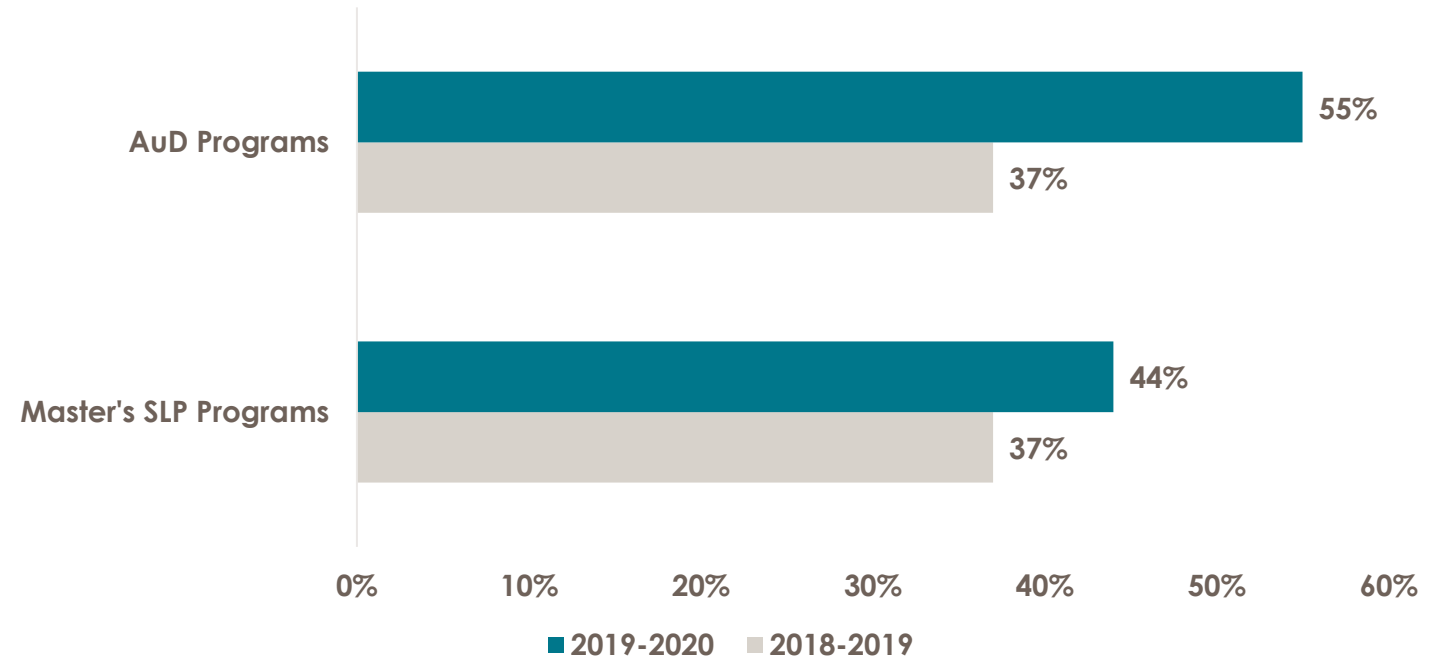


More than half the programs that reported engaging in IPE/IPP practices reported that they incorporated three to four core IPE framework items into practice



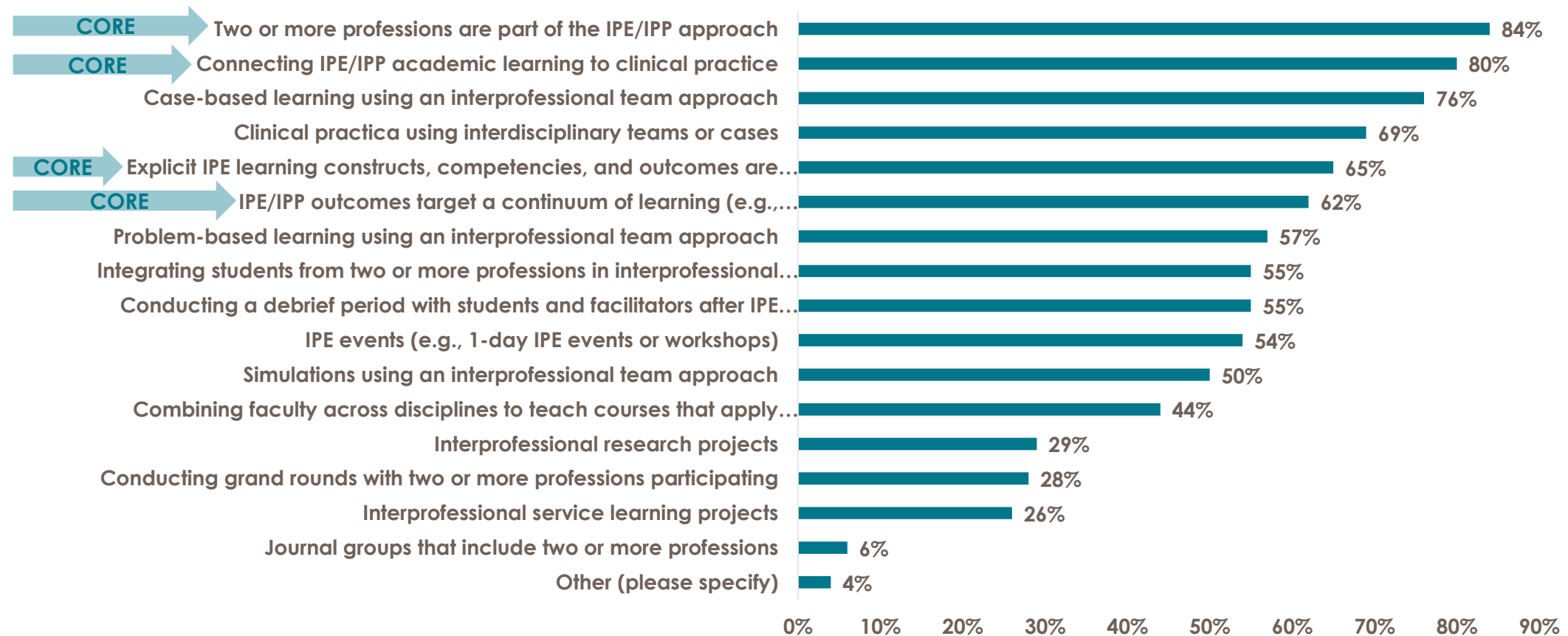
# Core IPE Framework implemented over the past two academic years

The percent of programs that reported incorporating the four core IPE framework items into practice increased between the 2018-2019 and 2019-2020 academic years

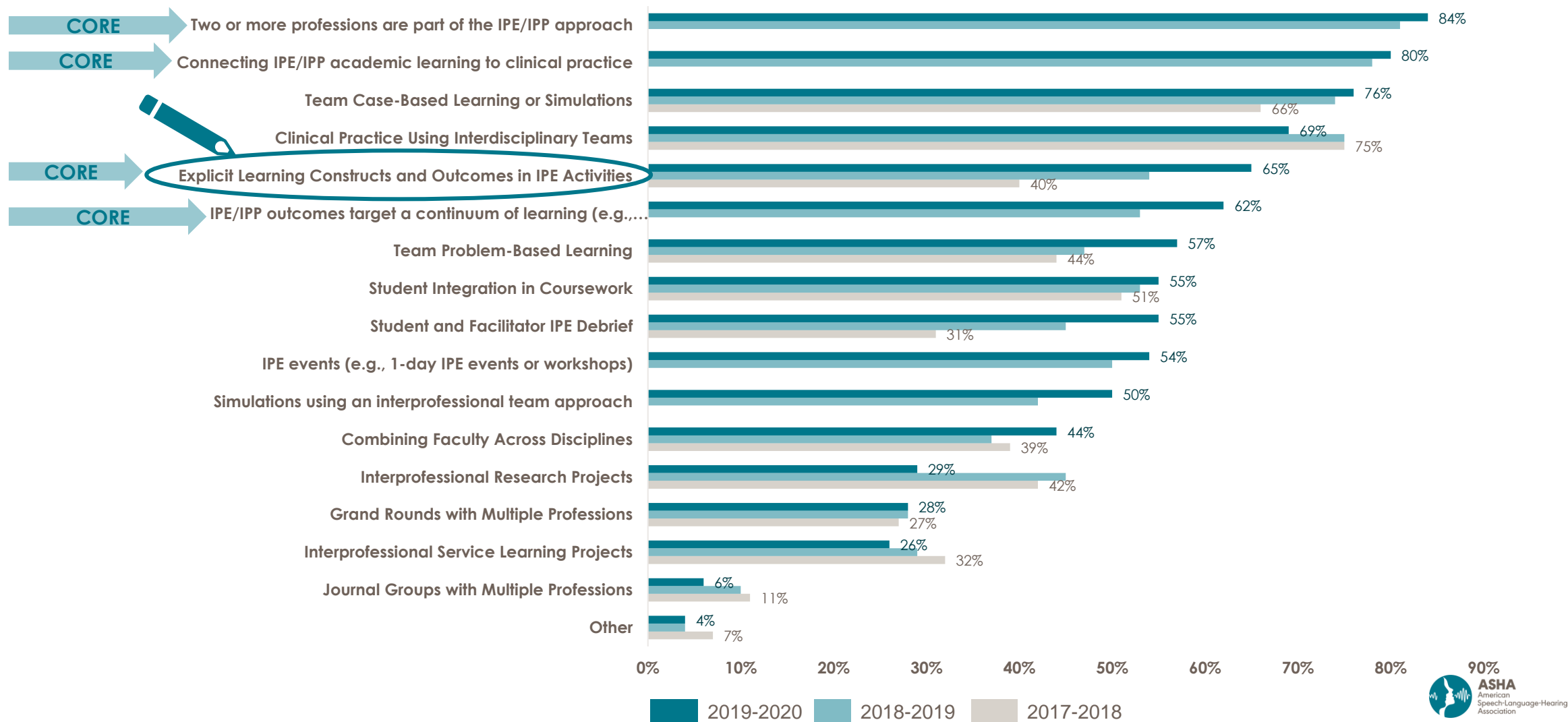




# Percent of Programs Implementing Each IPE/IPP Approach (2019-2020)



# Use of IPE/IPP Approaches Over Time



# 75% or More of Programs Implement

IPE/IPP APPROACH	NUMBER	PERCENT
Two or more professions are part of the IPE/IPP approach	285	84%
Connecting IPE/IPP academic learning to clinical practice	271	80%
Case-based learning using an interprofessional team approach	259	76%

# 50-74% of Programs Implement

IPE/IPP APPROACH	NUMBER	PERCENT
Clinical practica using interdisciplinary teams or cases	234	69%
Explicit IPE learning constructs, competencies, and outcomes are targeted in IPE learning activities	222	65%
IPE/IPP outcomes target a continuum of learning (e.g., attitudes/perceptions, knowledge/skills, performance in practice)	210	62%
Problem-based learning using an interprofessional team approach	192	57%
Conducting a debrief period with students and facilitators after IPE learning activity	186	55%
Integrating students from two or more professions in interprofessional coursework	185	55%
IPE events (e.g., 1-day IPE events or workshops)	183	54%
Simulations using an interprofessional team approach	169	50%

# 25-49% of Programs Implementing

IPE/IPP APPROACH	NUMBER	PERCENT
Combining faculty across disciplines to teach courses that apply across multiple disciplines	149	44%
Interprofessional research projects	100	29%
Conducting grand rounds with two or more professions participating	95	28%
Interprofessional service learning projects	88	26%

# < 25% of Programs Implementing

IPE/IPP APPROACH	NUMBER	PERCENT
Journal groups that include two or more professions	20	6%
Other (please specify)	14	4%

# Key Take-Aways

## 95% of CSD academic programs are implementing IPE approaches

- Approx. half of CSD programs implement all 4 core IPE framework items typical of exemplary IPE Centers/Programs
- An additional 20% implement at least 3 of the 4 core IPE framework items typical of exemplary IPE Centers/Programs

## Need to increase

- The percent of programs implementing all 4 core IPE framework components
- The use of explicit learning constructs such as the IPEC Core Competencies in designing IPE
- The continuum of IPE activities beyond attitudes/perceptions to acquisition of knowledge/skills and performance of IPP in practice settings
- Opportunities for IPE/IPP research as part of IPE
- Instruction about the role of IPP teams in changing systems-level policy that addresses the social determinants of health and improves population health

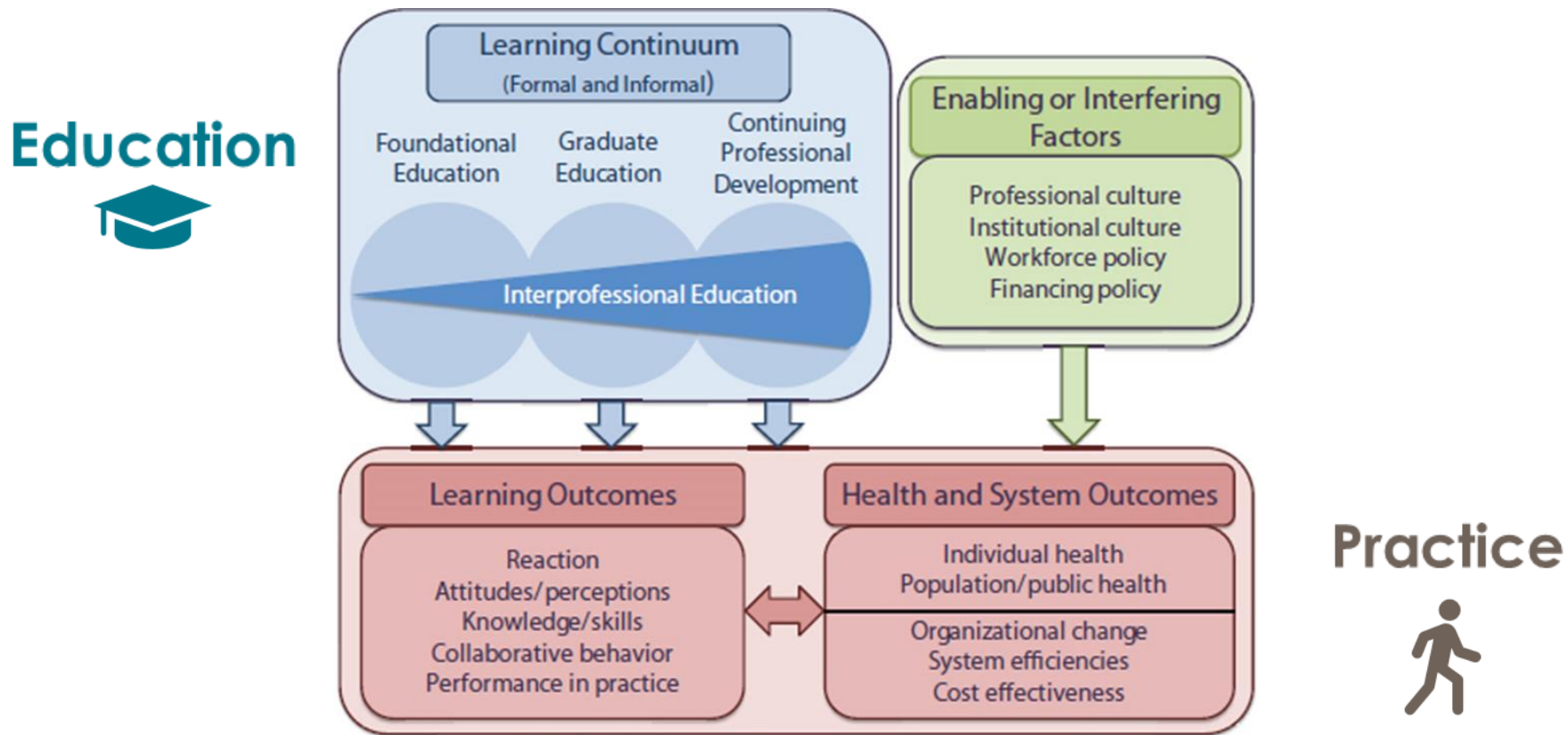


# Resources



## Bridging IPE, IPP and Research

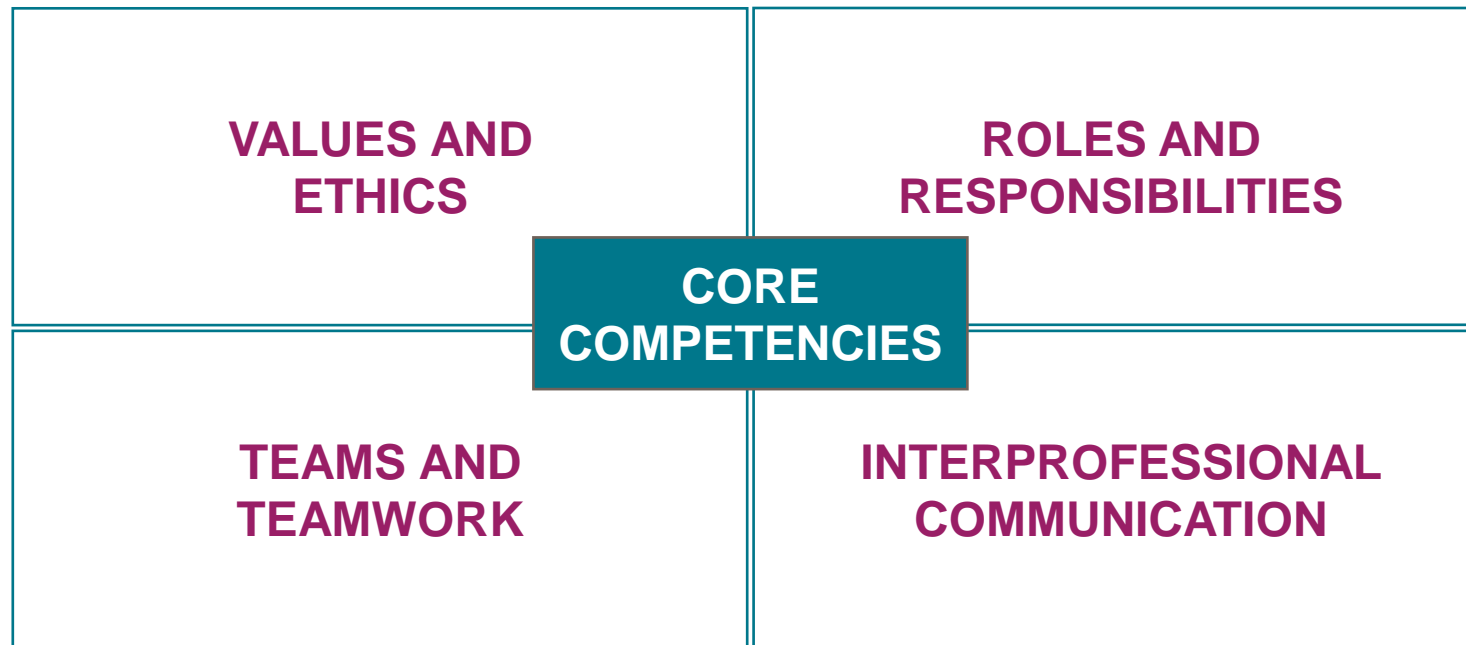
# IOM Interprofessional Learning Continuum Model



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# IPEC Core Competencies

**(Competencies guide IPE instruction and evaluation of learners)**



Interprofessional Education Collaborative (2016) *Core competencies for interprofessional collaborative practice: 2016 update*. Washington D.C.: Interprofessional Education Collaborative  
[https://ipecollaborative.org/uploads/IPEC-2016-Updated-Core-Competencies-Report\\_final\\_release\\_.PDF](https://ipecollaborative.org/uploads/IPEC-2016-Updated-Core-Competencies-Report_final_release_.PDF).

# Kirkpatrick's Expanded Outcomes Typology

## (A framework for learner evaluation)

<b>Level 1: Learner's Reaction</b>	Learners' views on the learning experience and its interprofessional nature
<b>Level 2A: Modification of Attitudes/ Perceptions</b>	Changes in reciprocal attitudes or perceptions between participant groups; changes in attitudes or perceptions regarding the value and/or use of team approaches to caring for a specific client group
<b>Level 2B: Acquisition of Knowledge/Skills</b>	Including knowledge and skills linked to interprofessional collaboration
<b>Level 3: Behavioral Change</b>	Individuals' transfer of interprofessional learning to their practice setting and their changed professional practice
<b>Level 4A: Change in Organizational Practice</b>	Wider changes in the organization and delivery of care
<b>Level 4B: Benefits to Patients, Families, and Communities</b>	Improvements in health or well-being of patients, families, and communities

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# Common Components of IPE Curricula

## HEALTH PROFESSIONS

*2 or more*

## LEARNER OUTCOMES

*Grounded in IP competencies (e.g.,  
IPEC Core Competencies)*

## CURRICULUM FRAMEWORK

*Exposure (novice), immersion  
(intermediate), competence (advanced)*

## TYPES OF ACTIVITIES & EXPERIENCES

*IP courses, workshops, observations, high fidelity  
simulations, case scenarios, service-learning  
experiences, team projects, IPE Events, IP  
practicum experiences*

## SETTINGS

*Multiple and varied experiences; classroom and  
clinical environments; research*

# References

- Council of Academic Programs in Communication Sciences and Disorders and American Speech-Language-Hearing Association. (2020). *CSD Education Survey National Aggregate Data Report: 2019–2020 Academic Year*. Retrieved from [www.asha.org](http://www.asha.org) and [www.capcsd.org](http://www.capcsd.org).
- Interprofessional Education Collaborative (IPEC) (2016). Core competencies for interprofessional collaborative practice: 2016 update. Washington D.C.: Interprofessional Education Collaborative [https://ipecollaborative.org/uploads/IPEC-2016-Updated-Core-Competencies-Report\\_final\\_release\\_.PDF](https://ipecollaborative.org/uploads/IPEC-2016-Updated-Core-Competencies-Report_final_release_.PDF).
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- National Academy of Sciences (2015). in *Measuring the impact of interprofessional education on collaborative practice and patient outcomes*, (2015) National Academies Press, Washington, D.C. IOM (Institute of Medicine). Retrieved from <https://www.nap.edu/catalog/21726/measuring-the-impact-of-interprofessional-education-on-collaborative-practice-and-patient-outcomes>
  - IOM Interprofessional Learning Continuum Model (Figure 3-2, page 29)
  - Kirkpatrick's Expanded Outcomes Typology (Table 3-1, page 33)
- Cahn, Peter S. (2020). How interprofessional collaborative practice can help dismantle systemic racism. *Journal of Interprofessional Care*, 34:4, 431-434, DOI: 10.1080/13561820.2020.1790224. Retrieved from <https://doi.org/10.1080/13561820.2020.1790224>

**Contact [AcademicAffairs@asha.org](mailto:AcademicAffairs@asha.org)**

## **ASHA Resources and Opportunities in 2021**

**New IPE/IPP webpages will be published later this year**

<https://www.asha.org/practice/interprofessional-education-practice/>

**ASHA Stipend Program to attend IPEC Institutes (Spring/Fall)**

<https://www.asha.org/practice/ipe-ipp-stipend-program/>

**ASHA Faculty Development Institute (AFDI) with IPE track**

**Virtual event on Oct. 1-3, 2021**

<https://www.asha.org/academic/faculty-development-institute/>