Why Interprofessional Education (IPE)?
- Significant national and international focus on IPE (WHO, 2010; IOM, 2003)
- Patient safety, quality of care, cost effective use of resources
- Evidence emerging that interprofessional team care can improve patient outcomes and control costs
  - e.g. Rochester model for hip fracture care (Kates, Osteporos Int , 2010)
- IPE competencies developed (IPEC, 2011)
- ADEA team study report on IPE (Formicola, JDE, 2012)
- New accreditation standards implemented (CODA, 2013)
- Existing interest incolloboration between dentistry and nursing
  - e.g. NYU’s Oral Health Nursing Education Program (OHNEP)

Development of IPE at CWRU
- IPE grant from The Josiah Macy, Jr. Foundation
  - Schools of Medicine and Nursing
- IPE Four School Initiative (IPE 4)
  - IPE workshops for first year medical, dental, and social work students and third year nursing students
  - 450 students working in 40 small groups with faculty facilitators
- HRSA grant (fall 2012-fall 2015)
  - Aim to provide students with authentic patient care experiences in which they can learn and practice the attitudes, knowledge and skills necessary to attain selected IPE competencies

Implementation Process
Acceptability: Early results indicate that students, faculty and patients were accepting of the IP collaboration in this setting. Faculty were enthusiastic about working together.
Feasibility: Early results indicate that pairing DMD and NP students in this setting is feasible. Barriers overcome include scheduling conflicts, space issues, and concerns related to visit length.
Sustainability: To be determined. Will analyze data related to financial sustainability of this model.
Fidelity: Generally acceptable.

Preliminary Student Baseline Evaluation:
- DMD (n=73) and NP (n=10) students completed two survey instruments prior to their IP patient care experience.
- The Self-Efficacy for Interprofessional Learning Scale (Mann et al, 2012) is a 16-item, 2-factor survey measuring self-reported teamwork and shared learning.
- The Readiness for Interprofessional Learning Scale (Parsell and Bligh, 1999) is a 19-item instrument measuring attitudes regarding teamwork and shared learning.

CHOMP Project
- Three year clinical demonstration project
  - Pairs nurse practitioner (NP) students and dental (DMD) students, along with their respective supervising faculty, in the dental clinic setting with a focus on the new patient admission process

Project Aims
1. To promote shared decision making
2. To increase access to care for an underserved dental clinic population
3. To provide health promotion, disease prevention, and chronic illness education
4. To evaluate the financial sustainability of this model

Results

Conclusions and Next Steps
- Preliminary results indicate that the project is well-accepted and feasible. Ongoing assessment of acceptability, feasibility, sustainability and fidelity is needed.

Limitations
- Small student baseline sample to date, and imbalance between numbers of DMD and NP students. This will improve as the project continues.

Next Steps
- On-line orientation materials
- On-line educational modules
- Competency assessment for each student
  - Observation rubric, peer assessment, reflection
- Patient data
  - Patient experience
  - Outputs (e.g. number of services)
  - Patient outcomes?