

Case Studies in IPE and the Case for Women's Health Integration

Shareen Y. El-Ibiary, Pharm.D., BCPS, FCCP
Professor of Pharmacy Practice
Midwestern University College of Pharmacy
Glendale, Arizona

Objectives

1. Outline example collaborations involving IPE at basic and moderate levels of institutional readiness
2. Identify barriers to IPE and gender-specific women's health and discuss ways to mediate them
3. Provide action items to foster IPE collaboration in gender-specific women's health
4. Describe teaching recommendations and educational resources for IPE in gender-specific women's health

Interprofessional Education— Where are we going?



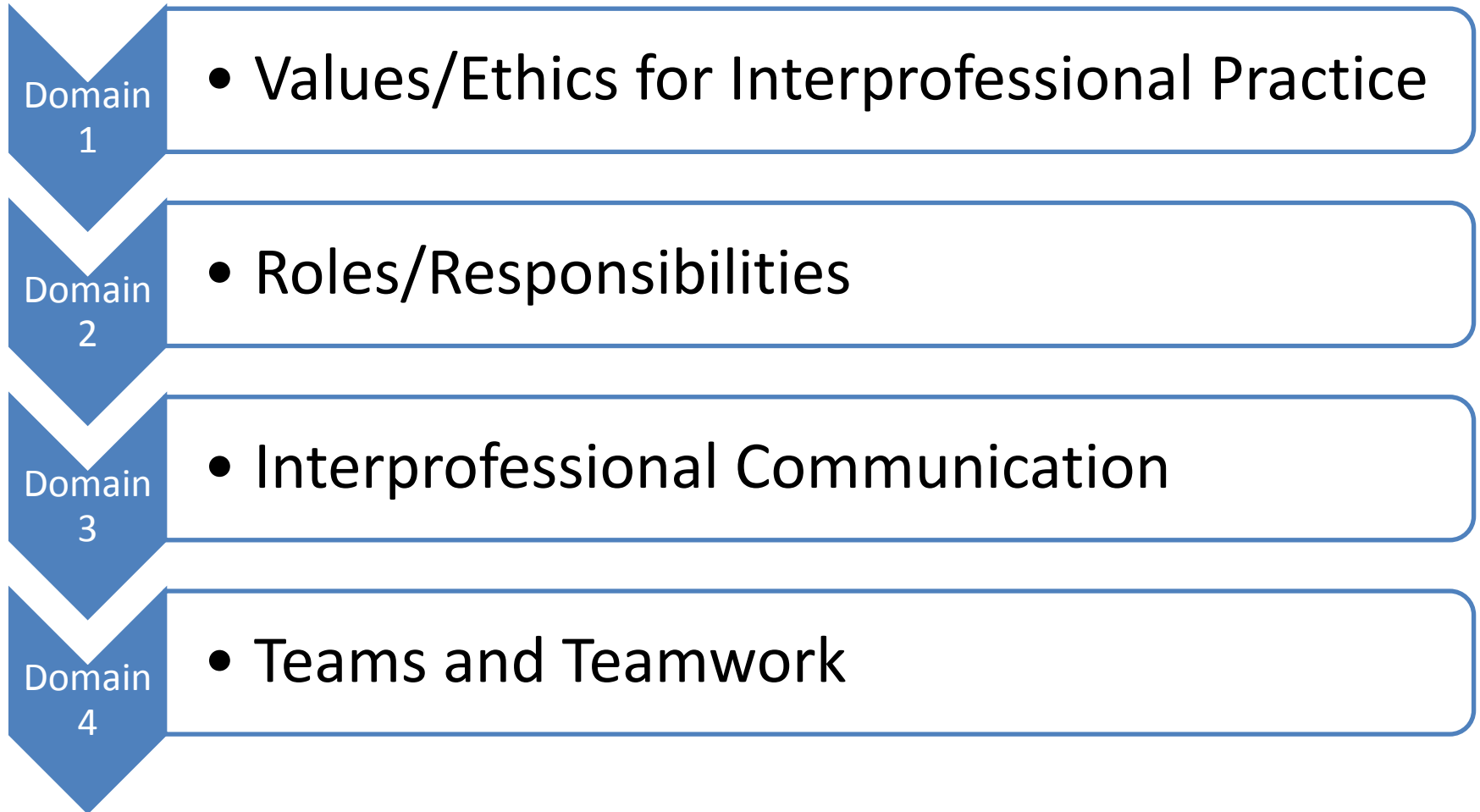
Educator and
Institution
Readiness

Interprofessional
Education

Interprofessional
collaborative
practice

Interprofessional Education Collaborative Expert Panel. (2011). Core competencies for interprofessional collaborative practice: Report of an expert panel. Washington, DC: Interprofessional Education Collaborative

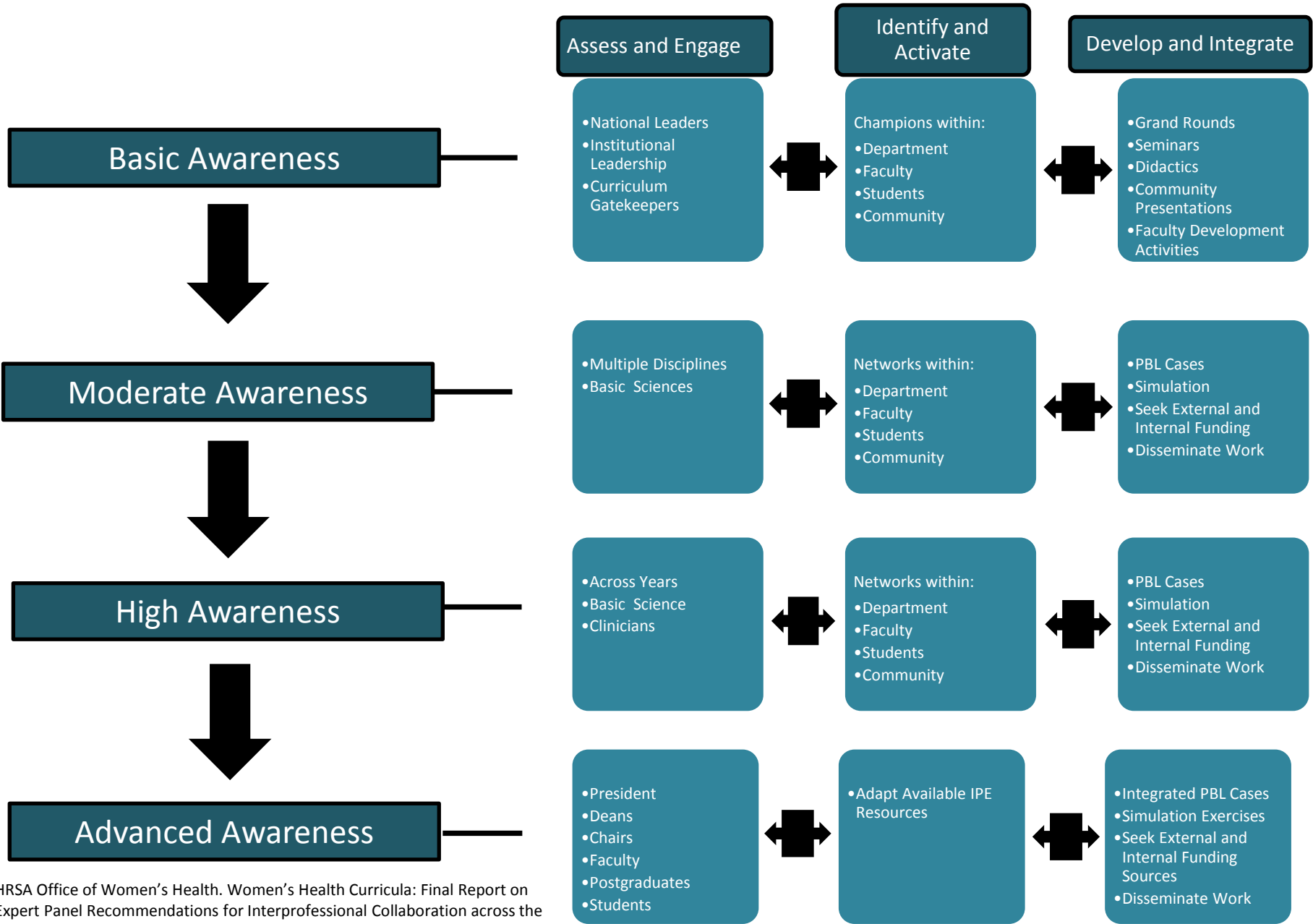
Core Competency Domains for Interprofessional Collaborative Practice



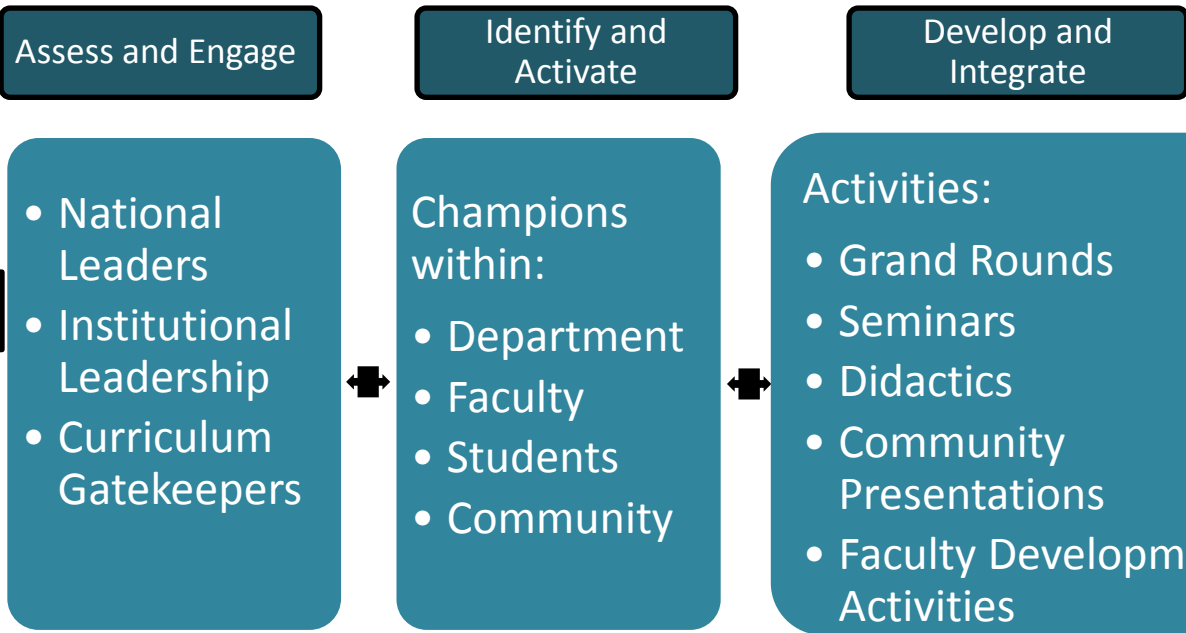
Interprofessional Education Collaborative Expert Panel. (2011). Core competencies for interprofessional collaborative practice: Report of an expert panel. Washington, DC: Interprofessional Education Collaborative

Revisiting Levels of Readiness— Institutions and Educators





Level of Readiness: Basic Awareness Level



- Assessing your institution's level of readiness
- Basic Level:
 - Start to identify those interested, "Champions"
 - Activities may be very broad, may only hit two disciplines at start

Case Scenario 1

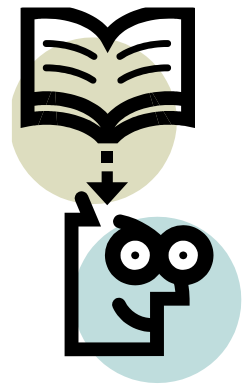
Institution	College of Pharmacy
Level of Readiness	Basic
Description of Activity	<p>Faculty Development Activities— Evening dinner of networking between practitioners</p> <ul style="list-style-type: none">• Educational topic on one of the disciplines <p>Specific example: Community pharmacists invited to a talk by dental faculty regarding oral health products and the importance of oral health</p>
Key players	Champion faculty within colleges, community practitioners
Resources needed	Space, time, cost
Barriers	Engaging fellow practitioners, connections
Ways to overcome barriers	Highlighting benefits
Reasons of importance	Improve patient care, continuous professional development, educate on health care roles/responsibilities, possible collaborations

Case Scenario 2

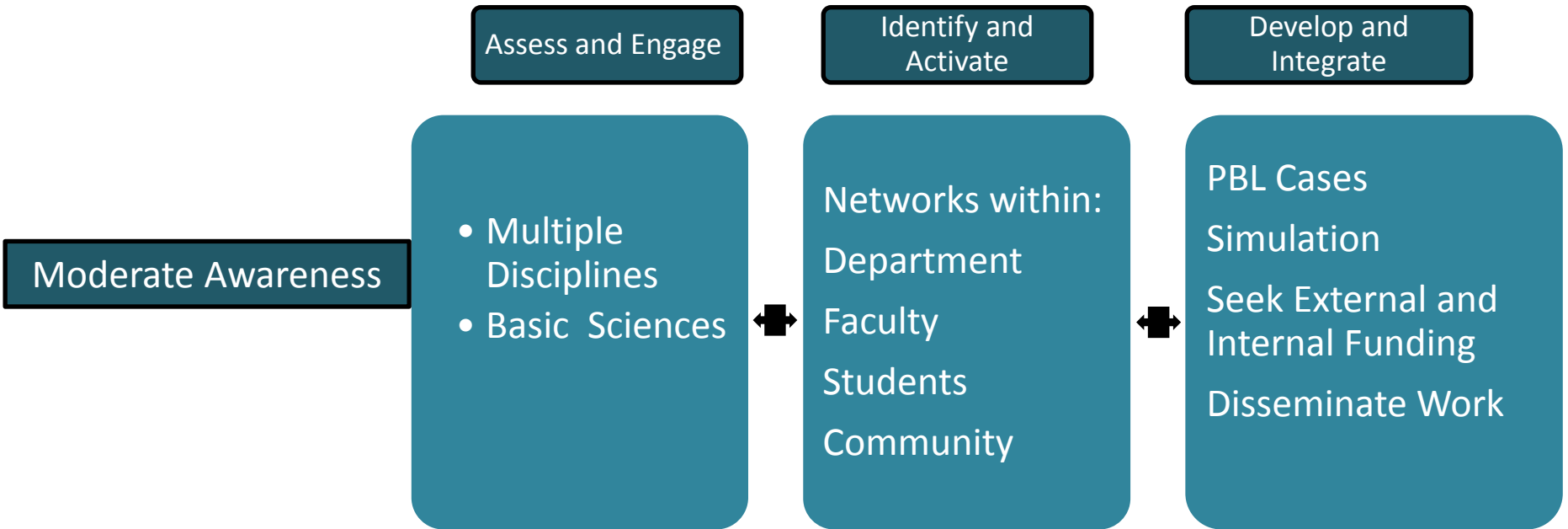
Institution	Health Professions Campus, Large Undergrad/grad Public University
Level of Readiness	Basic
Description of Activity	Faculty from other health professions deliver electives
Key players	<ul style="list-style-type: none">• Faculty champion within one or more disciplines• Associate Deans
Resources needed	<ul style="list-style-type: none">• Faculty course coordinator/lecturer• Space• Scheduling/ time
Barriers	Interest from students, faculty champion, scheduling
Ways to overcome barriers	<ul style="list-style-type: none">• Recognize and encourage faculty champions• Meet with other colleges to plan scheduling times• Discuss importance of course with students/highlight benefits
Reasons of importance	Roles/responsibilities, improve patient care, some interprofessional communication, increase awareness for collaboration

Case 2 – Specific Examples

- Dental faculty providing electives to pharmacy students:
 - Oral health products
 - Importance of oral health on other conditions
- Pharmacists providing electives to dental students:
 - Medication use pregnancy and lactation
 - Pain medication use and current laws
 - Drug-drug/disease interactions



Level of Readiness: **Moderate** Awareness Level



Assessing your institutions level of readiness:

- Moderate level
 - Next level, more discipline integration
 - Includes networks rather than just champions



Case Scenario 3

Institution	Health Professions Campus
Level of Readiness	Moderate
Description of Activity	Class for all interdisciplinary students
Key players	Dean of Students, Deans and Associates Deans of Participating Colleges/Disciplines
Resources required	Space for large group of students, faculty to coordinate course
Barriers	<ul style="list-style-type: none">• Time for scheduling all students at the same time• Handling assignments for >900 students• Integrating students to talk with other disciplines• Creating interest in and value of course
Ways to overcome barriers	<ul style="list-style-type: none">• Associate Deans communicate regarding class schedules• Creating small interdisciplinary groups• Recruiting faculty to help aid in grading• Working with IT to develop some online assignments• Seek possible grants to help cover faculty time
Reasons of importance	Role/responsibilities of each health care professional, Interprofessional communication

Case Scenario 4

Institution	Health Professions Campus
Level of Readiness	Moderate
Description of Activity	Interdisciplinary case groups
Key players	Deans, Faculty from each college
Resources required	Time, multiple faculty to develop and lead cases, scheduling, space
Barriers	Student recruitment, scheduling, limited space for students
Ways to overcome barriers	<ul style="list-style-type: none">• Create a task force• Deans appoint interested faculty• Offer credit or volunteer hours to students for participation• Recognize faculty roles• Communication regarding scheduling
Reasons of importance	Improve patient care, increases interprofessional communication, identifies professional roles, teams and teamwork, may introduce values/ethics

Case 4 - Logistics

- Created an IPE task force
 - Members from each college
 - Provided students with volunteer hours
 - Meets weekly
 - Chair of Task Force created teams of students
 - Created cases for each team based on disciplines involved



Case Scenario 5

Institution	Health Professions Campus
Level of Readiness	Moderate
Description of Activity	Interdisciplinary service learning
Key players	Deans, faculty from each college, student leaders
Resources required	Time, faculty to precept students, scheduling, interested students
Barriers	Faculty recruitment, scheduling, limited space for students
Ways to overcome barriers	<ul style="list-style-type: none">• Create committee of student leaders, or student organization• Offer credit or volunteer hours to students for participation• Recognize faculty roles• Communication regarding scheduling• Apply for external funding
Reasons of importance	Improve patient care, increases interprofessional communication, identifies professional roles, teams and teamwork, values/ethics



Opportunities for Women's Health Integration

Final Report:

HRSA Office of Women's Health. Women's Health Curricula: Final Report on Expert Panel Recommendations for Interprofessional Collaboration across the Health Professions. May 2013.

<http://www.hrsa.gov/about/organization/bureaus/owh/report111413.pdf>



Opportunities for Women's Health Integration

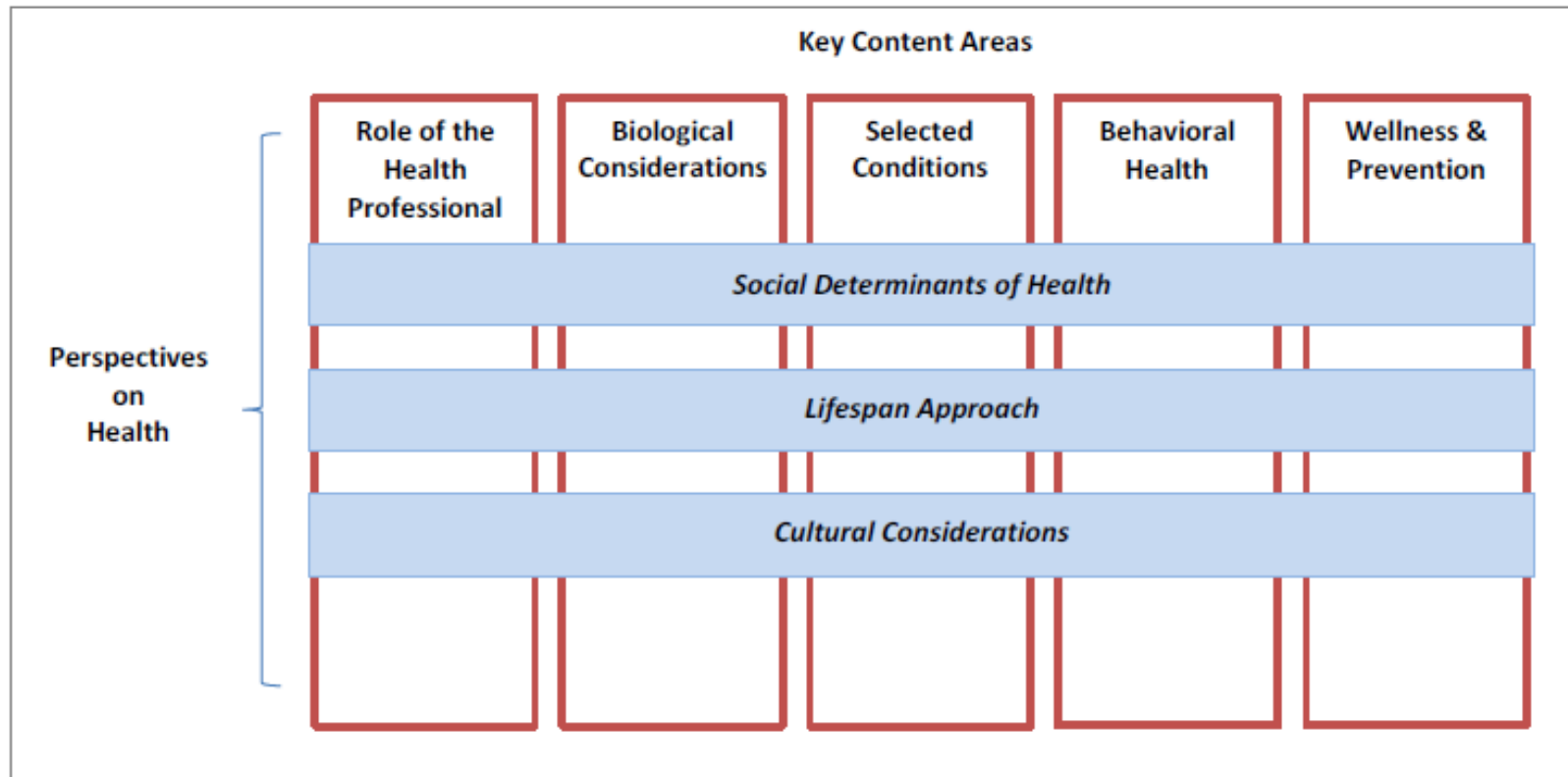
- Winter 2012 – Panel of 15 health care professionals from five disciplines were part of three panel discussions
 - Medicine
 - Dentistry/Oral Health
 - Pharmacy
 - Nursing
 - Public Health



Opportunities for Women's Health Integration

Figure IV.1

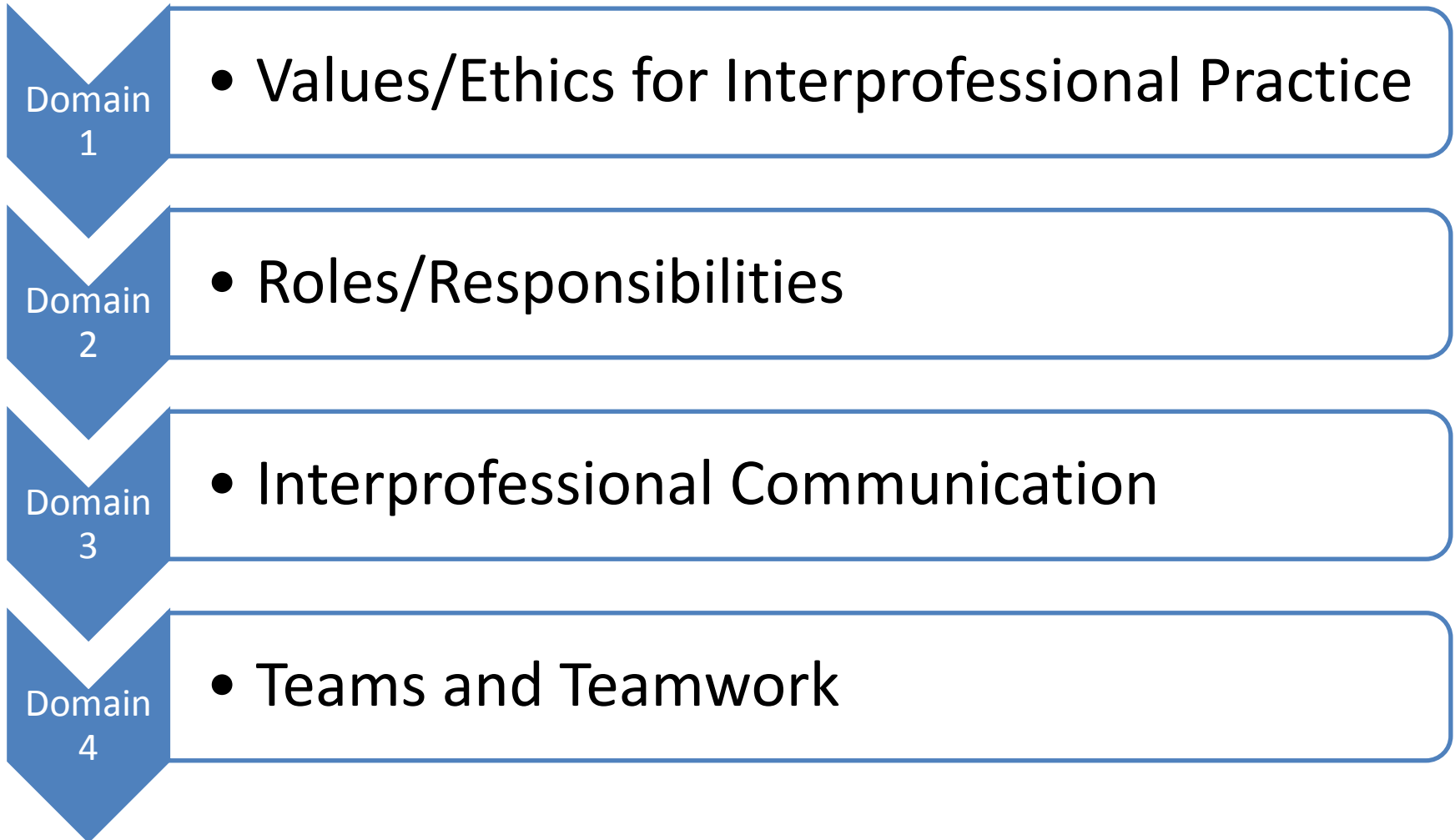
Conceptual Approach to Interprofessional Women's Health Content



Common Content Areas in Women's Health Across Health Professions

Area	Sample Topics
Role of the Health Professional	<ul style="list-style-type: none">• Ethics• Interprofessional Education• Knowledge of Other Health Professions• Patient-centered Decision-making• Gender in Provider/Patient communication

Core Competency Domains for Interprofessional Collaborative Practice



Barriers for Women's Health Integration

- HRSA report found barriers to be lack of :
 - Adequate number of faculty in women's health
 - Funding for women's health initiatives
 - Core competencies focusing on women's health
 - Clinical experience with women's health issues



Using the levels of readiness

- Use the levels of readiness
 - Assess where your institution is at related to:
 - Gender-specific women's health issues
 - IPE activities
- May combine both IPE and gender-specific women's health education integration together



Recommended Action Items

Outlined Items — HRSA Office of Women's Health. Women's Health Curricula: Final Report on Expert Panel Recommendations for Interprofessional Collaboration across the Health Professions. May 2013.

Create common, Content-Related Women's Health Initiatives Across Health Professions

Create core competencies in Women's Health

Establish Additional Women's Health Clerkships and Fellowships

Establish a Service-Learning with a Women's Health Focus

Provide Interprofessional Simulation Exercises

Outline General and Specialty Women's Health Curricula Across Disciplines

Secure Additional Funding

Structure Interdepartmental or Interschool Programs in Women's Health

Teaching Recommendations

HRSA Office of Women's Health. Women's Health Curricula: Final Report on Expert Panel Recommendations for Interprofessional Collaboration across the Health Professions. May 2013.

Recommendation	Examples
Audit Current Gender-Specific Women's Health Curricula	Devoting time to curriculum mapping and auditing of current curricula across colleges
Compile Teaching Resources	<ul style="list-style-type: none">• Association of Reproductive Health Professionals• Sex and Gender Women's Health Collaborative
Employ Constructivist Learning Theory	<ul style="list-style-type: none">• Small group, interactive, PBL approaches• Elective course over period of time (e.g. quarter/semester) or shorter course (e.g. 2 days)• Clarion competition• Case example 4
Establish a Progressive Complexity of Learning Tasks	Simple to complex cases
Incorporate Additional Clinical Experience	Simulation, service learning, talking to volunteer patients Case 5
Integrate Expertise from External Departments	Collaboration across departments, colleges Case examples 2,3,4
Provide a Core or Elective Course on Interprofessional Education	Create courses that involves multidisciplinary students Case example 3,4

Resources

- Interprofessional Education Collaborative (<https://ipecollaborative.org/>)
- Center for Health Sciences Education, Research and Practice (<http://collaborate.uw.edu/>)
- American Society of Reproductive Professionals (<http://core.arhp.org/>)
- Sex and Gender Based Medicine – Texas Tech University (<http://www.texastechsgbm.org/>)



Pharmacy and Dentistry: Areas for Partnership and Collaboration

- Elective/Core courses
- Women's health issues
 - Drug-drug/disease interactions
 - Hormonal contraceptives and antibiotics
 - Bisphosphonates and bone health
 - Medications in pregnancy and lactation
 - Pain management
 - Substance abuse
 - Current laws
 - Effect and importance of oral health in conditions affecting women
 - Pregnancy
 - Cardiovascular Health
 - Diabetes
 - Depression/Anxiety
 - Oral health products



Take Away Points

- Ultimate reason for IPE: Improve patient care!
 - Reduce medication errors
 - Improve communication between providers
 - Understand roles
 - Shared knowledge among experts
 - Shared responsibility
 - Ensure optimal treatment for patient
- Gender-specific women's health crosses all disciplines
 - [Serves as an excellent conduit for IPE opportunities](#)



Getting to the Finish Line

