

# Spring 2016 Recipient Abstract

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*Presentation title:* Interprofessional Education that Impacts Patient Care

*Brief abstract:* Interprofessional education (IPE) is gaining momentum as an important method to improve education to health care professions students, with the end goal of improving patient safety (Institute of Medicine, 2003). In 2010, the Canadian Interprofessional Health Collaborative developed a national interprofessional competency framework, while in the United States, the Interprofessional Education Collaborative (IPEC), published core competencies for interprofessional collaborative practice in 2011. However, IPE is not an end unto itself; that is, interprofessional teams of students are capable of learning skills key to interprofessional team development, but, they may also contribute to improving health outcomes at the same time. Our university has been engaged in a long-term, progressive program of interprofessional education and practice, commencing with team preparation, simulations, and standardized patients, and ending with interprofessional student teams providing direct patient care in the community. This presentation will focus on both the educational and patient outcomes demonstrated from the collaborative. The purpose of the program is to develop a scalable model for interprofessional education and practice. The program involves designating nursing and medical student teams, who continue in their teams for two years, and providing training on team communication skills (Reising, Carr, Shea, & King, 2011). As the teams develop, they undergo further training in the concepts of patient-centered care as they provide direct care to patients in the community. Students may involve pharmacist, social work, and speech and language pathology students as appropriate. Key student outcomes include: improved interprofessional collaboration skills, and team function. Key patient outcomes include: reduced 30 day readmissions to acute care, improved medication safety, and increased compliance with discharge follow up visits. The practice outcomes address all three dimensions of the Institute of Healthcare Improvement's (IHI) Triple Aim, to improve quality of care, the patient experience, and cost of care.