CONTENTS

UW CIPE Director Message ................................................................................................................................. 3

Section 1: UW CIPE-Led IPE Activities Delivered in 2018-2019 ................................................................. 5
  UW CIPE Introduction and Background ........................................................................................................ 6
  UW CIPE Competency Modules Background ............................................................................................... 6
  Philosophical Approach to Module Design .................................................................................................... 7
  Interprofessional Teamwork and Team-based Practice Module Pilot .................................................. 7
  Interprofessional Teamwork and Team-based Practice Module (Version 2) ........................................... 9
  Values and Ethics for Interprofessional Practice Module ........................................................................ 11
  Roles and Responsibilities for Collaborative Practice Module .............................................................. 13
  Interprofessional Communication Practices Module ............................................................................... 13
  UW CIPE/MD/PharmD Interprofessional Patient Safety Activity .......................................................... 16
  The Interprofessional Health Council (IPHC) ............................................................................................. 16
  UW CIPE Student Town Hall ....................................................................................................................... 17
  IPE Champions Retreat ............................................................................................................................... 18
  UW CIPE Certificate of Recognition Award ............................................................................................... 19
  UW CIPE Taskforce Committees ................................................................................................................. 22
  UW CIPE Visibility and Communication ...................................................................................................... 23
  UW CIPE National and International Engagement .................................................................................... 23
  UW CIPE 2019-2020 Planning and Events ................................................................................................. 25

Section 2: School/Program-Led IPE Activities Delivered in 2018-19 ....................................................... 27
  Part A – Student Required IPE Activities ..................................................................................................... 28
  Part B – A Snapshot of Elective (Potential) IPE Courses ........................................................................... 34
  Part C – Other Examples of (Potential) IPE Offerings ............................................................................... 35

Campus Affiliation
Office of the Provost, Health Sciences Schools (School of Medicine and Public Health, School of Nursing, School of Pharmacy and School of Veterinary Medicine)

Location
3149 Signe Skott Cooper Hall
University of Wisconsin
701 Highland Avenue
Madison, WI 53705

Contact Information
University of Wisconsin
Center for Interprofessional Practice and Education (UW CIPE)
Email: CIPE@wisc.edu
Phone: (608) 262-8017
Website: www.cipe.wisc.edu
WE ARE PLEASED TO REPORT HOW THE UW-MADISON CONTINUED TO PROVIDE AND EXPAND IPE OPPORTUNITIES FOR ITS STUDENTS AND FACULTY DURING THE PAST ACADEMIC YEAR. THE HEALTH SCIENCES SCHOOLS AND PROGRAMS, IN COLLABORATION WITH EACH OTHER AND WITH THE UW CIPE, HAVE OVERTAINED LOGISTICAL CHALLENGES TO OFFER THE FOUR IPE COMPETENCY MODULES, IPE SIMULATIONS, AND A NUMBER OF OTHER IPE ACTIVITIES AND OPPORTUNITIES AS REPORTED IN THIS DOCUMENT. THESE RESULTS WERE DUE TO THE EXCELLENT COLLABORATIVE EFFORTS OF UW DEDICATED FACULTY, STAFF, STUDENTS, AND THE UW CIPE TEAM, AND ALSO DUE TO THE GOOD FOUNDATION AND INFRASTRUCTURE BUILT BY THE FORMER UW CIPE DIRECTOR, DR. JEANETTE ROBERTS, AND THROUGH THE GREAT SUPPORT OF THE HEALTH SCIENCES LEADERSHIP TEAM (THE PROVOST AND THE DEANS OF THE SCHOOLS OF MEDICINE AND PUBLIC HEALTH, NURSING, PHARMACY AND VETERINARIAN MEDICINE). I WOULD LIKE TO THANK NOT ONLY THE HEALTH SCIENCES LEADERSHIP TEAM AND DR. ROBERTS, BUT ALSO THE UW CIPE ASSOCIATE DIRECTOR, ROBERTA RUSCH, WHO LED THE EXECUTION OF ALL FOUR MODULES THIS PAST YEAR, AS WELL AS OTHER UW CIPE ACTIVITIES. OUR THANKS ALSO GO TO THE SCHOOL IPE DIRECTORS, WHO HAVE ALSO BEEN INSTRUMENTAL IN THE DEVELOPMENT AND DELIVERY OF THE IPE COMPETENCY MODULES AND SCHOOLS IPE ACTIVITIES. I WOULD FINALLY LIKE TO THANK ALL OTHERS WHO CONTRIBUTED TO UW’S IPE ADVANCEMENT OVER THE YEARS, BY BUILDING ON EXISTING IPE PROGRAMS, CREATING NEW ONES, EVALUATING THE IMPACTS, AND SHARING THEIR EXPERTISE.

TO ACKNOWLEDGE, THERE ARE ADDITIONAL GREAT IPE OPPORTUNITIES THAT ARE HAPPENING AT THE UW AND IN THE COMMUNITY THAT MAY HAVE NOT BEEN INCLUDED IN THIS REPORT. WE ARE IN THE PROCESS OF CONDUCTING A UW IPE GAP ANALYSIS, A UW IPE INVENTORY LIST, AND AN IPE ENVIRONMENTAL SCAN DURING THIS SUMMER TO ENSURE WE CAPTURE ALL CURRENT AND POTENTIAL IPE OFFERINGS, AND TO IDENTIFY THE NEEDS FOR FUTURE UW IPE DEVELOPMENT. WHILE A BRIEF REPORT OF THESE INITIATIVES ARE INCLUDED IN THIS ANNUAL REPORT, THE OUTCOME OF THESE INITIATIVES WILL BE SHARED AND PUBLISHED ON OUR WEB SITE AT WWW.CIPE.WISC.EDU. PLEASE STAY TUNED.

IN THE UPCOMING ACADEMIC YEAR, WE ARE WORKING COLLABORATIVELY WITH OUR STAKEHOLDERS AND PARTNERS WITHIN, ACROSS AND BEYOND PROGRAMS/SCHOOLS/UW/COMMUNITY TO BUILD ON THE UW IPE FOUNDATIONS. OUR GOAL IS TO CREATE AND PROMOTE AN OPEN, INCLUSIVE, SUSTAINABLE AND FORWARD-THINKING CENTER FOR THE IPE AT THE UW AND BEYOND. WE BELIEVE THAT THE UNIVERSITY OF WISCONSIN HAS THE POTENTIAL TO BECOME A LOCAL, NATIONAL, AND EVEN GLOBAL LEADER IN IPE. TO ACHIEVE THIS, THE UW CIPE HAS RECENTLY PARTICIPATED IN ABOUT 40 MEETINGS WITH UW LEADERSHIP, FACULTY/STAFF, STUDENTS AND THE COMMUNITY; 10 NATIONAL AND INTERNATIONAL IPE MEETINGS, FOUR SIMULATION AND CLINIC VISITS; THREE ACADEMIC AND COMMUNITY-BASED CONFERENCES; AN IPE STUDENT TOWN HALL; AND A FACULTY/STAFF IPE CHAMPION RETREAT. THE MAIN PURPOSE OF MANY OF THESE MEETINGS AND EVENTS HAS BEEN TO CONTINUE BUILDING RELATIONSHIPS, AND TO ENGAGE, EXPLORE AND UNDERSTAND OUR COLLEAGUES’ STATUS AND NEEDS IN IPE, AS WELL AS TO GAIN INSIGHTS IN SHAPING THE UW CIPE’S STRATEGIC
Directions. We have recognized and appreciated the great contributions of more than 40 UW faculty/staff IPE Champions, along with the UW CIPE Student of the Year by providing Recognition Awards. As a next step, we are hosting a two-day UW CIPE Strategic Planning Workshop on June 25 and 26th to finalize the UW CIPE Strategic Directions and action plans. While moving toward the UW CIPE new Strategic Directions, we will continue offering the current the IPE Competency Modules and other planned IPE offerings for 2019-2020.

Finally, I am honored to be serving as the next UW CIPE Director. The UW CIPE strives to transform health education and practice through interprofessional collaboration and teamwork to improve the Quadruple Aim (Better Health, Better Care, Better Value, and Better Work Experience) in Wisconsin and beyond through interprofessional collaboration with all current and future stakeholders and partners.

Sincerely Yours,

Hossein Khalili, PhD, MScN, BScN
Director, UW Center for Interprofessional Practice and Education (UW CIPE)
University of Wisconsin-Madison

June 7th, 2019
SECTION 1

UW CIPE-LED IPE ACTIVITIES DELIVERED IN 2018-2019
UW CIPE INTRODUCTION AND BACKGROUND

The early conceptualization of creating a Center for Interprofessional Practice and Education at the University of Wisconsin-Madison happened in 2013. The UW CIPE, however, officially started in September 2016. The UW Schools of Medicine and Public Health (SMPH), Nursing, Pharmacy and Veterinary Medicine, as well as the Office of the Provost were the founding members of the UW CIPE. Dr. Jeanette Roberts, the former Dean of the School of Pharmacy, was appointed as the first Director of UW CIPE. She was joined by Associate Director, Roberta Rusch, MPH, who started in her full-time position in October of 2017. Dr. Roberts also established an Advisory Council made up of about 15 representatives from various schools and programs, as well as a Steering Committee, consisting of Associate Deans of Education from each of the four UW-Madison health sciences schools: School of Medicine and Public Health, School of Nursing, School of Pharmacy, and School of Veterinary Medicine.

In 2016-2017, the UW CIPE also established a Foundations in Teamwork (FIT) committee to develop a curriculum framework based on the Interprofessional Practice Collaborative (IPEC) Competency Domains: Interprofessional Teamwork and Team-based Practice, Interprofessional Communication Practices, Values and Ethics for Interprofessional Practice, and Roles and Responsibilities for Collaborative Practice. The curriculum was designed to be introduced to early learners. The FIT committee included individual faculty from Pharmacy, Nursing, Veterinary Medicine, Medicine, Physician Assistant, and the Center for Patient Partnerships.

The UW CIPE Modules laid the foundation for several schools to implement IPE in their curricula during the academic year of 2018-19. Descriptions of each Module are included below. With the recent addition of the new Director, Dr. Hossein Khalili, PhD, MScN, BScN, in April 2018, the UW CIPE strives to build on and broaden its partnerships across programs, schools, institutions and communities to assist in preparing the current and future generations of healthcare providers to be team-ready and effectively tackle the Quadruple Aim (Better Care, Better Health, Better Value, and Better Providers’ Experience).

UW CIPE COMPETENCY MODULES BACKGROUND

As noted above, the UW CIPE established a faculty workgroup (FIT Committee) in March 2017 to develop a Foundations in Interprofessional Teamwork course. UW CIPE recognized that the needs of each health program varies based on the magnitude of their respective accreditation requirements. An IPE 1 credit hour course was initially envisioned as multifaceted; it could serve the entire IPE needs of some health programs whereas others, with heavier accreditation mandates, could use it as a springboard for more advanced learning activities or coursework in this area. Representation within the group evolved over time to match the course design and objectives and included members from law (patient advocacy), medicine, nursing, pharmacy,
physician assistant, public health, and veterinary medicine. The workgroup identified logistical barriers to the development and implementation of a required 1 credit hour course.

As a result, the workgroup decided to create a series of short modules that interested health programs on campus could embed within their required curricula. The intent of this series of modules is to advance students’ acquisition of collaborative practice competencies as defined by the Interprofessional Education Collaborative (IPEC) in order to meet escalating accreditation standards for interprofessional education (IPEC, 2016).

**PHILOSOPHICAL APPROACH TO MODULE DESIGN**

Each UW CIPE Module targets one IPEC core competency. IPEC sub-competencies that are appropriate for early learners were chosen as secondary emphases. Learning objectives are developed in order to advance understanding and acquisition of chosen sub-competencies, and to measure learning outcomes. UW CIPE acknowledges that achieving competence in collaborative practice is a complex, developmental, life-long learning process. That said, the overarching goal of each module is to provide students with core knowledge, skills, and attitudes that will facilitate development towards competence in interprofessional collaborative practice.

**INTERPROFESSIONAL TEAMWORK AND TEAM-BASED PRACTICE MODULE PILOT**

The inaugural UW CIPE Module took place over the course of one week: April 2 – 9, 2018, and was approximately 8 hours in duration. This “pilot” Module focused on the Interprofessional Teams and Team-based Practice IPEC competency with the goal of introducing important concepts for collaborative practice in healthcare. The April 2 keynote speaker, Dr. Eduardo Salas, is an internationally renowned expert on the science of teamwork. Dr. Salas espoused the 7C’s model, where students learned about the tenets of a highly functioning team: cooperation, cognition, communication, coordination, capability, coaching, and conditions. This theme was carried throughout the entire Module.

The first in-person event, which took place on April 2, consisted of Dr. Salas’ keynote, an icebreaker, and a team activity. The event took place in the evening over a two-hour time period. At the conclusion of Dr. Salas’ keynote address, students adjourned to their assigned rooms in the Health Science Learning Center (HSLC) and the Active Learning Center (ALC) in the Signe Skott Cooper Hall. Students were preassigned to teams with attention to discipline to ensure an equitable distribution. The teams consisted of first-year nursing, medical and
pharmacy students. After the icebreaker, students completed a facilitated Question-Generating team activity. This activity consisted of developing group consensus through question creation for Dr. Salas.

The second part of the module consisted of both asynchronous and synchronous activities and took place over a 6-day period. For the asynchronous activity, students were assigned four readings and an online quiz to complete on their own time. For the synchronous activity, students were provided a question prompt to help guide them in an online discussion with their teams. Teams consisted of nursing and pharmacy students. Medical students did not participate in this event or the final in-person session.

For the Online Module, content was housed in the learning management system, Canvas.

The third part was a second in-person session, consisting of a moderated coaches panel discussion and a team activity. Four coaches from the University of Wisconsin were present, including the women’s head rowing coach, Bebe Bryans, the head football coach, Paul Chryst, the women’s head volleyball coach, Kelly Sheffield, and the women’s head basketball coach, Jonathan Tsipis. After the panel discussion, students were dismissed to the Active Learning Center (ALC) in Cooper Hall to complete a Lunar Landing team activity in their teams. This activity involved developing consensus through a nonmedical problem-solving scenario. Once the activity was complete, the facilitators provided a debrief. Teams consisted of first-year nursing and pharmacy students.

A thoughtful and detailed evaluation was given to the medical (only evaluated first in-person session), nursing and pharmacy students and results were analyzed by an evaluation expert. In summary, nearly half of all students reported the module effective as an introduction to IPE and over half reported its effectiveness at reinforcing interprofessional concepts. Almost ¾ of

"Fostering the team centered mentality early will facilitate effective teamwork in the future. I think no matter what types of activities are incorporated now the mental imprint will persist into the future." (student quote)

"Bridging the gaps between different professions is a great way to work and practice communicating on the same levels as our peers and removes the separation between our roles in healthcare." (student quote)
students reported that they now have an increased awareness of teams and teamwork and would pay attention to team dynamics in healthcare settings.

**INTERPROFESSIONAL TEAMWORK AND TEAM-BASED PRACTICE MODULE (VERSION 2)**

The remaining UW CIPE Modules took place during the 2018-19 academic year. The first to take place was a revised version of the Interprofessional Teamwork and Team-based Practice Module. This occurred as the “kickoff” interprofessional event for brand new students in Medicine, Nursing, and Pharmacy on September 10, 2018. Nursing and Pharmacy students continued with this Module with some online work and then a second in-person session on November 26, 2018. The second version of the Interprofessional Teamwork and Team-based Practice Module was approximately 4 hours in duration versus the original 8 hours.

The Interprofessional Teamwork and Team-based Practice Module final evaluation asked students about the module’s effectiveness as an introduction to interprofessional teamwork and team-based care. When responses were combined from both nursing and pharmacy programs (Medicine only participated in September 10 session), 86% of students found the module “effective” for introducing interprofessional teamwork in healthcare. These results are shown in Figure 1 (next page).
Figure 1 (A-C): Interprofessional Teamwork and Team-based Practice Module Pilot

A. Module Effectiveness for Introducing Interprofessional Teamwork By Combined Schools (n=260)

B. Module Effectiveness for Applying 7C’s By Combined Schools (n=259)

C. Satisfaction with Length of Module By Combined Schools (n=211)

Students were asked: A) if the module was effective for introducing interprofessional teams and teamwork in healthcare settings; B) if the module was effective for applying the 7 C’s; and C) if students were satisfied with the length of the module.
VALUES AND ETHICS FOR INTERPROFESSIONAL PRACTICE MODULE

The Values and Ethics for Interprofessional Practice Module took place in the Fall of 2018. Second-year Nursing and Pharmacy students participated. The module consisted of one online and two in-person sessions. The first in-person session was held on October 15, 2018. The online component spanned October 15, 2018 to November 19, 2018. The second in-person session took place November 19, 2018. The objectives of the module were to apply patient-centered and population-focused approaches to health and health care, explore cultural humility, recognize the power imbalances on interprofessional teams, including patients, and identify opportunities to promote population-based solutions informed by an interprofessional lens.

When combining responses by school (as shown in Figure 2), over half (58%) of students reported the module “effective” for exploring cultural humility. When asked about the module’s effectiveness for recognizing power imbalances on interprofessional teams, including patients, 53% of students reported the module “effective.” When asked about the module’s effectiveness for applying patient-centered and population-focused approaches to health and health care, 50% of students reported the module “effective”.

<table>
<thead>
<tr>
<th>2018-2019 UW CIPE Competency Modules Implementation at a Glance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interprofessional Teamwork and Team-based Practice (PILOT)</strong></td>
</tr>
<tr>
<td><strong>In-Person Session Dates</strong>: April 2 and April 9, 2018</td>
</tr>
<tr>
<td><strong>Participants</strong>: Y1 Medicine (first in-person session only);</td>
</tr>
<tr>
<td>Y1 Nursing; Y1 Pharmacy</td>
</tr>
<tr>
<td><strong>Interprofessional Teamwork and Team-based Practice (version 2)</strong></td>
</tr>
<tr>
<td><strong>In-Person Session Dates</strong>: September 10 and November 26, 2018</td>
</tr>
<tr>
<td><strong>Participants</strong>: Y1 Medicine (first in-person session only);</td>
</tr>
<tr>
<td>Y1 Nursing; Y1 Pharmacy</td>
</tr>
<tr>
<td><strong>Values and Ethics for Interprofessional Practice</strong></td>
</tr>
<tr>
<td><strong>In-Person Session Dates</strong>: October 15 and October 29, 2018</td>
</tr>
<tr>
<td><strong>Participants</strong>: Y2 Nursing; Y2 Pharmacy</td>
</tr>
<tr>
<td><strong>Roles and Responsibilities for Collaborative Practice</strong></td>
</tr>
<tr>
<td><strong>In-Person Session Dates</strong>: February 4 and March 4, 2019</td>
</tr>
<tr>
<td><strong>Participants</strong>: Y2 Nursing; 10 DNP students; Y2 Pharmacy</td>
</tr>
<tr>
<td><strong>Interprofessional Communication Practices</strong></td>
</tr>
<tr>
<td><strong>In-Person Session Dates</strong>: February 18 and March 11, 2019</td>
</tr>
<tr>
<td><strong>Participants</strong>: Y1 Nursing; Y1 Pharmacy</td>
</tr>
</tbody>
</table>

*Each Module also included online asynchronous work done by students in between the Module In-Person Sessions.*
Students were asked: **A)** if the module was effective for exploring cultural humility; **B)** if the module was effective for recognizing the challenges of power imbalances on interprofessional teams, including patients; and **C)** if the module was effective for applying patient-centered and population-focused approaches to health and health care.
ROLES AND RESPONSIBILITIES FOR COLLABORATIVE PRACTICE MODULE

The Roles and Responsibilities for Collaborative Practice Module took place in the Spring semester of 2019. Second-year Nursing and Pharmacy students participated. Approximately 10 DNP students also participated. The module consisted of one online and two in-person sessions. The first in-person session was held on February 4, 2019. The online component spanned February 4 to March 4, 2019. The second in-person session took place March 4, 2019. The objectives of the module were to describe the scope of practice and major roles that nurses, pharmacists, and advanced practice providers (APP’s) play on a patient care team; and to engage one another’s professional expertise to meet the healthcare needs of a specific patient population, through collaboration on a clinical case study.

When combining responses by school (as demonstrated in Figure 3), 76.4% of students reported the module “effective” for highlighting the scope of practice and major roles of nurses, pharmacists, and advance practice providers play on patient care teams. In addition, 75% of students reported the module’s execution as being “effective.”

INTERPROFESSIONAL COMMUNICATION PRACTICES MODULE

The Interprofessional Communication Practices Module took place in the Spring semester of 2019. First-year Nursing and Pharmacy students participated. The module consisted of two online and two in-person sessions. The first in-person session was held on February 18, 2019. The online component spanned February 18 to March 11, 2019. The second in-person session took place March 11, 2019. The Module included four units (two online and two in-person) that were tied to the following IPEC Sub-Competencies under the Communication Domain: Listen actively, and encourage ideas and opinions of other team members; Give timely, sensitive, instructive feedback to others about their performance on the team, responding respectfully as a team member to feedback from others; Use respectful language appropriate for a given difficult situation, crucial conversation, or conflict; Recognize how one’s uniqueness (experience level, expertise, culture, power, and hierarchy within the health team) contributes to effective communication, conflict resolution, and positive interprofessional working relationships; and Communicate the importance of teamwork in patient-centered care and population health programs and policies.

When combining responses by school (as shown in Figure 4), 72.3% of students reported that the module was “effective” for recognizing barriers to effective team communication that may adversely affect patient and population health. 74.7% of students reported that the module was effective for defining the concept of Relationship-Centered Care in the context of the interprofessional health care team. And, 85.5% of students reported the module’s execution as being “effective.”
Figure 3 (A & B): Roles and Responsibilities for Collaborative Practice Module

A. Effectiveness of Module for Highlighting Scope of Practice

By Combined Schools (n=161)

<table>
<thead>
<tr>
<th>Yes</th>
<th>Somewhat</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>80.0%</td>
<td>20.0%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

B. Effectiveness of Execution of Module

By Combined Schools (n=161)

<table>
<thead>
<tr>
<th>Effective</th>
<th>Moderately effective</th>
<th>Not effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>80.0%</td>
<td>20.0%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Students were asked: A) if the module was effective at highlighting the scope of practice and major roles of nurses, pharmacists, and advance practice providers play on patient care teams; and B) if the module was effectively executed.
Figure 4 (A-C): Interprofessional Communication Practices Module

A. Effectiveness of Module for Recognizing Barriers to Communication
   By Combined Schools (n=276)

B. Effectiveness of Module for Defining Relationship-Centered Care
   By Combined Schools (n=276)

Execution of Entire Module
   By Combined Schools (n=276)

Students were asked: A) if the module was effective for recognizing barriers to effective team communication that may adversely affect patient and population health, B) if the module was effective for defining the concept of Relationship-Centered Care in the context of the interprofessional health care team, and C) if the module was executed effectively.
UW CIPE/MD/PHARMD INTERPROFESSIONAL PATIENT SAFETY ACTIVITY

The Interprofessional Patient Safety Activity, in collaboration with the UW CIPE, the UW School of Medicine and Public Health (SMPH) and the UW School of Pharmacy (SoP), took place December 11, 2018. Participating students from each program were both third-year students. This activity was the SMPH’s Developmental Thread Activity (DTA) #4. It consisted of one in-person session. The objectives of the session were to: explain the roles and responsibilities of other care providers and how the team works together to provide care, identify strategies to improve communication within and across health care teams as well as between the healthcare team and the patient/family, recognize how culture, power and hierarchy within the healthcare system influences team communication, recommend strategies to prevent an error from recurring, and to listen actively and encourage ideas and opinions of other team members.

Prior to the Interprofessional Patient Safety Activity, students were required to review the Crucial Conversations and CUS (Concern, Uncomfortable, Safety) videos and review the Interprofessional Patient Safety Case-Based Scenario Online Module that was completed earlier in both programs’ curricula.

The Interprofessional Patient Safety Activity was 1 hour and 45 minutes in length, and took place in the late afternoon. Students were preassigned to tables and were encouraged to have at least one Pharmacy student and one Medical student on each side of their table. The module included three activities. Activity one included an introduction, icebreaker and the Online Module wrap-up; Activity two included a Crucial Conversations review, two videos with small group discussions, and a large group debrief; and the final activity included a small group case and discussion with a large group debrief. The session ended with a final overall debrief.

The Interprofessional Patient Safety Activity was executed well. The facilitator’s guide and PowerPoint were thorough and provided the requisite information to ensure event success. According to the narrative comments, the facilitators executed the event skillfully. Based on content only, both Pharmacy and Medical students commented on the tools they gained about language to use when having a difficult conversation and being more comfortable to engage with colleagues when concerns arise.

THE INTERPROFESSIONAL HEALTH COUNCIL (IPH C)

The Interprofessional Health Council (IPH C) is a student organization with representation from 13 health professional programs at UW-Madison. The mission of IPH C is to facilitate meaningful opportunities for students across each of the health professions on campus. One of IPH C’s overarching goals is to develop interprofessional knowledge and communication skills.
that will allow members to meaningfully contribute to healthcare teams in order to optimize patient safety and quality of care. The UW CIPE acts as faculty advisor to the IPHC, including helping them organize and market their annual Summit, which includes plenary speakers, roundtable discussions, case studies, and poster presentations.

**2018 IPHC Summit**

The 7th Annual IPHC Summit occurred on April 21, 2018. The title of the Summit was “Self Care in Healthcare: Recognizing and Preventing Clinical Burnout.” The keynote speaker was Julia Yates, MSSW, LCSW, a Psychotherapist and Faculty member of the UW Department of Family Medicine and Community Health. There were over 100 registrants that included students, faculty and staff across campus.

**2019 IPHC Summit**

The 8th Annual IPHC Summit occurred on April 27, 2019. The title of the Summit was “Interprofessional Teams and the Underserved: Models of Community Health Opportunities.” The learning objectives of the 2019 Summit were: Interact with faculty, staff and students across the UW health science programs; Explore the role of interprofessional teamwork in providing care to the underserved; and Discover how to create opportunities to provide care to the underserved in their communities. The Summit included a keynote, roundtable discussions on developing community health opportunities utilizing an interprofessional team, and poster presentations.

A unique component of the 2019 Summit was that there were two keynote speakers, Dr. Jonas Lee and Alissa Milonczyk, who paired up to provide both a faculty and student perspective of community programs serving the underserved populations of Madison and Dane County. Dr. Jonas Lee is a family physician in the Department of Family Medicine and Community Health. Alissa Milonczyk is a Class of 2020 Doctor of Veterinary Medicine (DVM) Candidate at the UW-Madison School of Veterinary Medicine, and a clinic administrator for WisCARES. The Welcome Remark was delivered by Dr. Hossein Khalili, the UW CIPE Director. Dr. Khalili also presented the 2019 UW CIPE Student Award to Erica Keenan, the IPHC President, in recognition of her significant contributions to the UW Student Interprofessional Health Council (IPHC) and for facilitating two of the UW CIPE Modules.

**UW CIPE STUDENT TOWN HALL**

On May 6, 2019 UW CIPE held a student town hall to gather input from students in the health and social science schools/programs on campus to learn how the UW CIPE can be a resource to students at UW, and what their expectations and vision is for the UW CIPE. Although we had a low turnout due to the time of year, we were able to gain some
important insights and perspectives from students about UW IPE. Students are eager to learn and engage more in learning with, from and about each other to improve their understanding of and be able to collaboratively provide care and services to our human and animal clients. Students believe that if there is a will there is a way to incorporate IPE within the curriculum in all programs, including the Veterinary Medicine, Accelerated Nursing and online programs. Students would like the UW CIPE to advocate for more experiential IPE learning opportunities and student-led IPE initiatives. UW CIPE will continue working and engaging with students through UW IPE activities and Taskforce Committees.

IPE CHAMPIONS RETREAT

On May 13, 2019 the UW CIPE hosted the IPE Champions Retreat at the School of Nursing’s Cooper Hall. Attendees included about 50 faculty and staff from 11 different schools and programs, including the School of Medicine and Public Health, School of Nursing, School of Pharmacy, School of Veterinary Medicine, Genetic Counseling Program, Physician Assistant Program, Physical Therapy Program, Public Health Program, Occupational Therapy Program, the Center for Patient Partnerships, and the Wisconsin Area Health Education Centers (AHEC). Participants were assigned to small group tables that included a mix of disciplines.

The purpose of the Retreat was to invite input from the many UW CIPE stakeholders across campus regarding what their expectations, hopes and goals were for the UW CIPE in moving IPE forward at UW and beyond. The format of the three-hour Retreat included an opening Virtual Keynote Presentation by Dr. John Gilbert, Professor Emeritus, University of British Columbia; Founding Chair, Canadian Interprofessional Health Collaborative (CIHC); Senior Scholar, WHO Collaborating Centre on Health Workforce Planning & Research. Participants then took part in two activities where they first individually reflected on their Expectations/Hopes/Goals/Commitment for the UW CIPE. They then discussed what they reflected upon with members of their table, generating the top 3-5 commonly-agreed upon Expectations/Hopes/Goals/Ideals/Commitment from Schools and Programs for the UW CIPE. Participants were next asked to choose from one of four focus areas to assist the UW CIPE in proposing strategies to promote UW CIPE’s growth under each area. Those areas included:

- CIPE Leadership & Partnership
- CIPE Awareness & Public Relations
- CIPE Teaching & Learning
- CIPE Research & Development
Table facilitators used guiding questions for each focus area and recorded highlights of the rich discussions. The second part of this activity asked each table to consider the following questions for their focus area: What do you envision as potential successful outcomes in this particular focus area? Who (Individuals/Organizations) should be involved to accomplish this? Potential Pushbacks & Breakthroughs? Proposed Strategies & Action Plans? Tables then identified 3 priorities under their assigned Focus Area for UW CIPE to focus on in 2019-20. The UW CIPE team are working to transcribe and analyze the collected data and develop a report which will be used towards the development of the UW CIPE Strategic Planning and Directions.

The remainder of the Retreat asked participants to 1. Nominate themselves, or another person, to one or more of the UW CIPE Taskforce Committees (more information under **UW CIPE Taskforce Committees**); and 2. Contribute to an initial UW Inventory list of IPE offerings (more information under **IPE Offerings Inventory**).

**UW CIPE Certificate of Recognition Award**

During the May 13th IPE Champions Retreat, UW-CIPE recognized the contribution of faculty and staff who helped to develop and advance IPE across the campus. We congratulate the following 2018-2019 UW CIPE Certificate of Recognition Awardees:

1. Barb Anderson, SMPH  
2. Julie Astrella, SON  
3. Susanne Barnett, SOP  
4. Gina Bryan, SON  
5. Ruthanne Chun, SVM  
6. Shobhina Chheda, SMPH  
7. Barbara Duerst, Public Health  
8. Christina Frank, SVM  
9. Mel Freitag, SON  
10. Aaron Friedman, SMPH  
11. Casey Gallimore, SOP  
12. Sharon Gartland, OT  
13. Wendy Halm, SON  
14. Jamie Hess, SMPH  
15. Kari Hirvela, SON  
16. Robert Holland, SMPH  
17. Jill Jacklitz, Center for Patient Partnership  
18. Paula Jarzemsky, SON  
19. Leah Kechele, SON  
20. Karen Kopacek, SOP  
21. Sarah Kruger, SON  
22. Diane Lauver, SON  
23. Jessica LeClair, SON  
24. Emily Lichte, SON/Engineering  
25. Corissa Lotta, SVM  
26. Lynn Maki, SVM  
27. Beth Martin, SOP  
28. Taylor Mathewson, SON  
29. Elaine Mischler, SMPH  
30. Jill Niemczyk, WI AHEC  
31. Elizabeth Petty, SMPH  
32. Barbara Pinekenstein, SON  
33. Kate Rotzenberg, SOP  
34. Tracy Schroepfer, Social Work  
35. Christine Seibert, SMPH
36. Virginia Snyder, PA
37. Melgardt de Villiers, SOP
38. Sue Wenker, PT
39. Daniel Willis, SON
40. Shelly Wissink-Waller, SVM
41. Kevin Wyne, PA
42. Amy Zelenski, SMPH
43. Joseph Zorek, SOP

- SMPH – School of Medicine and Public Health
- SON – School of Nursing
- SOP – School of Pharmacy
- SVM – School of Veterinary Medicine
- PA – Physician Assistant Program
- PT – Physical Therapy Program
- OT – Occupational Therapy Program
- WI AHEC – Wisconsin Area Health Education Centers
UW CIPE TASKFORCE COMMITTEES

In light of a commitment to engage and collaborate with all stakeholders, and to ensure inclusive and shared governance, the UW CIPE identified the following Taskforce Committees:

- IPE Curriculum Taskforce Committee
- IPE Integration Taskforce Committee
- CIPE Partnership, Sustainability & Public Relations Taskforce Committee
- CIPE Research & Development Taskforce Committee
- CIPE Student Taskforce Committee

To represent varied perspectives, UW CIPE is seeking faculty, academic staff, practitioners, administration, students, and patient/community representatives from different health/social service programs to join these committees. We are looking for individuals who have demonstrated interest in, and/or have knowledge and expertise in:

- Promoting engagement and collaboration of faculty, students, community/clinical partners and other stakeholders to strengthen initiatives and innovation for IPE;
- Strengthening initiatives for faculty/staff development in IPE;
- Developing and implementing IPE simulation;
- Developing partnership with stakeholders (community/clinical partners, Department of Health, private sectors, inter/national IPE community);
- Evaluating the impact of interprofessional practice and education (IPE), and advancing IPE research and scholarly activities.

The UW CIPE Taskforce Committees term of representation will be two (2) years at this time and renewable. Meetings will be held once a month (or as needed) in the first year and then bimonthly for one-two hours. Efforts will be made to accommodate members at a distance through tele- or video-conferencing. Biannual gathering of all Taskforce Members will happen in the fall and spring each year.

Members will be expected to participate in meetings, take initiative and lead one or more (assigned) tasks within the selected Taskforce Committee, and report back regarding the progress on a regular basis (as defined by the Taskforce) to the Taskforce Committee and to the UW CIPE. Members are also expected to advise and share their perspectives in discussions of new initiatives and innovations regarding IPE.

To join and/or nominate individuals for one or more UW CIPE Taskforce Committees, please visit our website at: https://cipe.wisc.edu/taskforcenomination/.
UW CIPE VISIBILITY AND COMMUNICATION

To promote and advance the UW CIPE visibility, a number of initiatives have recently taken place:

- **UW CIPE Web Website:** The UW CIPE Web site [www.cipe.wisc.edu](http://www.cipe.wisc.edu) was first developed in October, 2017. It has now gone through significant updates adding more information, including the UW CIPE Taskforce Committees Nomination page; updated News and Events page; a Welcome Message from the new Director; and additional photographs on the Home page. The UW CIPE Web site will continue to update by including the IPE Inventory searchable list, Environmental Scan Report, Annual Report, Strategic Directions information, a Research/Scholarship page and an updated Resource section to the Web site.

- **UW CIPE Online Presence:**
  - UW CIPE is now connected to Twitter. The UW CIPE Twitter handle is @cipe_uw. UW CIPE has tweeted more than 100 times, received more than 150 likes and followed by more than 50 people/organizations.
  - UW CIPE has also developed a Facebook page [https://www.facebook.com/groups/uwcipe/](https://www.facebook.com/groups/uwcipe/) and is starting to populate this social media page.
  - As the next step, the UW CIPE is looking to develop a YouTube channel to host its video productions as another way to communicate with our stakeholders.

- **UW CIPE Email Accounts:** With the assistance of DoIT, a UW CIPE service email account (cipe@wisc.edu) and a UW CIPE Director email account (director@cipe.wisc.edu) have been created and are functional. These accounts will further establish the UW CIPE presence, and will assist the UW CIPE team to better organize and coordinate the growing IPE activities and services at UW.

- **UW CIPE Communication Plan:** UW CIPE is working to develop its Communication Strategy to regularly communicate and interact with students, faculty/staff, and our community partners.

UW CIPE NATIONAL AND INTERNATIONAL ENGAGEMENT

**Big Ten IPE Academic Alliance**

The UW CIPE is an active member of the Big Ten IPE Academic Alliance. The Big Ten IPE Academic Alliance is a subgroup of the larger Big Ten Academic Alliance (previously known as the Committee on Institutional Cooperation). The Big Ten IPE Academic Alliance aims to facilitate sustainable interprofessional practice and education through multi-institutional collaboration, innovation, scholarship, and resource-sharing that leads to improved education, better care, added value and healthier communities.
Collaborating Across Borders (CAB) Conference

The Collaborating Across Borders (CAB) is North America’s premier interprofessional health care education and collaborative practice conference. The UW CIPE has an active presence at the CAB VII conference to be held on October 20-23, 2019 in Indianapolis, Indiana. Dr. Khalili, as the UW CIPE Director and the Co-Founder/Co-Lead of the InterprofessionalResearch.Global, in collaboration with American Interprofessional Health Collaborative (AIHC) and Canadian Interprofessional Health Collaborative (AIHC), is leading a Pre-Conference Workshop entitled: Global Leadership in IPECP Research – An Intro to Co-Creation of Best Practice Guidelines. He will also present two other Oral Presentations during the conference. Dr. Khalili is also part of the abstract reviewer team for the CAB conferences.


The UW CIPE is one of the sponsors of the IPR.Global, and Dr. Khalili is Co-Founder and Co-Lead of this international network. IPR.Global aims to provide global leadership in interprofessional education and collaborative practice (IPECP) research. IPR.G promotes and advocates for evidence-informed policies and practices through fostering and facilitating theory-driven, methodologically rigorous IPECP research. The IPR.Global has recently developed its two-year strategic plan and currently is working to publish a position paper to facilitate Global IPECP Research.

Interprofessional.Global (IP.G): Global Confederation for Interprofessional Practice & Education

Dr. Khalili is a Member of the Interprofessional.Global Leadership Team, representing the IPR.Global at the IP.G. He also serves as a Member of the Policy and Finance Working Groups and as the Co-Facilitator of the Global Situational Analysis Working Group, which is a joint initiative between IPR.Global & IP.G.

IP.G oversees the planning and delivery of the All Together Better Health (ATBH) conferences which is the primary global interprofessional conference that occurs every two years. The next ATBH conference (ATBH X) conference will be held in Qatar, Oct 24-27, 2020. IP.G also supports and sustains regional and inter/national networks of interprofessional education and collaborative practice (IPECP), and facilitates communication and exchange between the IPECP networks.
**UW CIPE 2019-2020 PLANNING AND EVENTS**

**Strategic Planning Workshop**

Currently, UW CIPE is planning a Strategic Planning Workshop to be held Tuesday, June 25 – Wednesday, June 26, 2019. The goals and objectives of the workshop include:

- Build relationships, team cohesion and commitment towards UW IPE.
- Articulate strengths and accomplishments of the UW IPE to date.
- Discover what is happening in the environment (e.g. national, international) that influences our work.
- Review and revise a strategy that includes a 5-year vision, priorities and initial goals and objectives.
- Develop an engagement strategy to involve stakeholders in fleshing out and bringing the strategy to life.
- Identify next steps for developing a strategic plan.

**UW IPE Gap Analysis**

*Environmental Scan*

Another important initiative that is happening at the UW CIPE includes an IPE Environmental Scan to analyze the milieu surrounding IPE within universities across the globe. During this project, 63 university Web sites across the United States (49), Canada (7), United Kingdom (3), Australia (2), and New Zealand (1) have been reviewed and analyzed for approaches to IPE. Universities are being reviewed for the following criteria: an IPE Center/Department/Division name; year it was established; affiliated healthcare related programs or schools; Center/Department/Division staffing structure; IPE programs/courses/resources; community engagement through IPE; significant IPE research; development of faculty that contribute to IPE; and other aspects considered unique to a university in terms of IPE. The outcome of this Environmental Scan, along with other collected information, will assist the UW CIPE with the development of its Strategic Planning and Directions.

**UW IPE Offerings Inventory**

In an effort to conduct a cross-campus IPE Gap Analysis, the UW CIPE has begun surveying different programs/departments/schools/centers to provide information about their current (and potential) IPE-related programs/courses/activities/workshops/seminars/conferences/opportunities to develop a cross-campus IPE Inventory list. The paper format of the inventory form was shared during the IPE Champions Retreat, and we are in the process to create an online version of the survey using the REDCap platform to be shared with all program/schools during the summer. The online survey will also be posted on the UW CIPE Web site (www.cipe.wisc.edu). The collected information will be analyzed to identify the strengths and gaps in UW IPE offerings, which will assist the UW CIPE with its future IPE development. As a resource for students, faculty and staff, the IPE Inventory list will be housed on the UW CIPE Web site, which will highlight the breadth of IPE offerings across the UW campus.
IPE Movie Night for Students

- Potential program participants: Genetic Counseling, Medicine, Nursing, Physical Therapy (PT), and Physician Assistant (PT).
- July (Date TBA)
- More information will be available in early summer.

2019-2020 Fall/Spring Planning for IPE Competency Modules Offerings

Planning has begun to identify the dates, structure, logistics and programs involved in the fall semester and spring semester offerings of the IPE Competency Modules. In addition to the Medical, Pharmacy and Nursing students, the Physician Assistant and Physical Therapy students, and possibly the Veterinary Medicine students will participate in the 2019-2020 IPE Competency Modules. The UW CIPE is willing to consider interest from other programs in joining the upcoming IPE Competency Modules IPE offerings.
SECTION 2
SCHOOL/PROGRAM-LED IPE ACTIVITIES DELIVERED IN 2018-19

School of Medicine and Public Health
UNIVERSITY OF WISCONSIN-MADISON

School of Nursing
UNIVERSITY OF WISCONSIN-MADISON

School of Pharmacy
UNIVERSITY OF WISCONSIN-MADISON

School of Veterinary Medicine
UNIVERSITY OF WISCONSIN-MADISON
PART A – STUDENT REQUIRED IPE ACTIVITIES

School of Medicine and Public Health

**MD Program**

*Phase 1: Upstream from the Emergency Department in Patients, Professionalism and Public Health Block (M1)*

a. **Goal:** Understand how interprofessional teams work together in the Emergency Department.

b. **Activity:** During the first month of medical school, students complete a shift in the Emergency Department and explore how interprofessional teams work together to provide patient care in relation to upstream determinants of health.

c. **Collaboration with various health professionals in the Emergency Department.**

*Phase 1: Body in Balance Block (M1)*

1. **Debrief of Early Clinical Experience**
   a. **Goal:** Explore roles/responsibilities of different team members, debrief early clinical exposure to interprofessional teams.
   b. **Activity Description:**
      i. Small group discussion exploring roles/responsibilities
      ii. Case-based problem solving (team approach)
   c. **Collaborated with School of Pharmacy.**

2. **Interprofessional Team Communication (Simulation)**
   a. **Goal:** Demonstrate collaborative efforts as an interprofessional team by communicating profession-specific perspectives and priorities, building from an authentic experience where the team approaches issues related to healthcare disparities.
   b. **Activity:** Simulation case involving a patient with medication access issues, requiring students to think about how they would address this as a team.
   c. **Collaborated with School of Pharmacy.**

*Phase 1: Preceptorship Experience in All Phase 1 Blocks (M1/M2)*

a. **Goal:** Provide early clinical experiences, exploring roles, responsibilities and importance of team-based care.

b. **Activity:** Students are paired with a physician and health care team for a total of 60 hours of clinical experience throughout Phase 1. Specific objectives and activities focus on getting to know team members, participating in patient care as part of a health care team, collaborative decision-making and conducting a QI project.

c. **Collaborated with Nurses, Pharmacists, Medical Assistants, Social Workers, etc within the clinical setting.**

*Phase 2: Chronic and Preventative Care Block (M2/M3)*

1. **Interprofessional clinical decision making related to medication**
   a. **Goal:** Understand how the perspectives of physicians and pharmacists influence clinical decision making about medications.
   b. **Activity:** Small group case-based session related to atrial fibrillation and anticoagulation decision-making, focusing on critical collaboration between pharmacists and physicians.
   c. **Collaborated with School of Pharmacy.**

3. **Health Advocacy Project**
   a. **Goal:** Promote and advocate for health improvement in the community.
b. Activity: Students identify a community health topic of importance and work with a community member/stakeholder to convey information to a target audience in order to help promote health in the community.

c. Collaboration with various community health professionals.

3. Community Health Engagement Project
   a. Goal: Participate in a community setting on a team-based health engagement project.
   b. Activity: Students work as part of a team to partner with statewide AHEC on a longitudinal community health engagement project.
   c. Collaboration with various community health professionals.

Phase 2: WARM Program Rural Disaster Drill Simulations (M2)
   a. Goal: Learn about the roles of the various first responders and how physicians should best partner in the transitions of care when these patients are brought to the emergency department.
   b. Activity: WARM students participate in a 6-hour activity with first responders from 4-La Crosse area Fire and Rescue Departments in a variety of outdoor disaster scenario simulations that include search and rescue of an elderly person, a child that has drowned in a lake, a hunter who has become disabled in a tree stand and a multi-vehicle crash on a country road.
   c. Collaborated with La Crosse Area Fire and Rescue EMS.

Phase 2: Inpatient and Outpatient Experiences in all Phase 2 Blocks (M2/M3)
   a. Goal: Identify members of the health care team, use skills that promote interprofessional and team-based care, and participate in appropriate team communication, collaboration and transitions of care.
   b. Activity: During all Phase 2 blocks, students participate in clinical rotations and patient care as members of a health care team. These interactions and skills are assessed via interprofessional health care items on the standard clinical assessment forms.
   c. Collaboration with Nurses, Pharmacists, Physician Assistant, Social Work, Genetic Counseling, Medical Assistants, etc in the clinical setting.

Phase 3: Inpatient Acting Internship (M3/M4)
   a. Goal: Collaborate as a member of a healthcare team.
   b. Activity: Online, case-based module that introduces students to interprofessional team members in a hospital setting followed by observed interactions with an interprofessional team member, written reflection and completion of an assessment tool.
   c. Collaboration with various health professionals in the inpatient setting.

Phase 3: Internship Preparatory Course (M4)
   1. Preventing and Addressing Medical Errors (Simulation)
      a. Goal: Synthesize and demonstrate the knowledge and skills related to patient errors, incorporating the concepts of teamwork in both preventing and responding to errors in the clinical setting.
      b. Activity: Simulation case involving a medication error, where the team needs to recognize an error occurred, work as a team to stabilize a patient, and address the unanticipated outcome with the family.
      c. Collaborated with School of Pharmacy and School of Nursing.
Master of Genetic Counselor Studies (MGCS) Program

1. Cases of Patients – Down Syndrome
   a. Goal: Identify interdisciplinary approaches to assist and manage the care of patients with Down syndrome.
   b. Activity Description:
      i. Family of a child with Down syndrome presented their experiences interacting with the health care system. Students participated in an IP dialogue via a small group discussion with guided questions related to IPEC competencies.
   c. Collaborate with School of Nursing, Physician Assistant Program, and Social Work.

2. Wisconsin Leadership Education in Neurodevelopmental and related Disabilities (LEND)
   a. Life Course Story Groups: interdisciplinary case-based activity that involves sharing expertise, evaluating current resources and teamwork to find solutions for provided scenario.
   b. Leadership workshops: Exploring leadership at the levels of “self”, “others” and “wider community” in interdisciplinary care.
   c. Program includes graduate students within the disciplines of audiology, genetic counseling, medicine, nursing, nutrition, occupational therapy, physical therapy, psychology, special education, social work, and speech and language therapy, as well as disability advocacy and family members.

3. Interdisciplinary Rotation
   a. Observe and actively participate in interdisciplinary clinics throughout UW Health that have a genetics presence, including craniofacial, neurocutaneous, bleeding disorders, and, when available, neuromuscular clinics.

Doctor of Physical Therapy (DPT) Program

1. Fall of the first year: Review cases and roles of other health profession students
   a. This is required and occurs in a classroom setting.
   b. Collaborate with Athletic Training, Physician Assistant, and Occupational Therapy programs.

2. Respiratory lectures on mechanical ventilation, airway clearance and pulmonary function testing
   a. These lectures include discussions on how different roles in patient care can complement each other to meet the patient goals.
   b. Second-year PT students interact with respiratory therapy providers at UW Hospital.

3. “Only Leaves Should Fall” (Fall semester)
   a. Collaborate with School of Nursing, School of Pharmacy, Occupational Therapy Program, and Certified Occupational Therapy Assistants from Madison College.

4. ‘No More Spring Breaks’ (Spring semester)
   a. Collaborate with School of Nursing, School of Pharmacy, and Occupational Therapy Program

5. Transfer Lab with Physical Therapy Assistant (PTA) Students
   a. PT and PTA students work in groups of 6-7 and are tasked with reviewing the different transfer scenarios and problem solve how they would complete the transfer working cooperatively.
Master of Physician Assistant Studies (MPAS) Program

1. IPE Cases of Patients Events
   a. Fall 2018: Down Syndrome
      i. Collaborate with School of Social Work, School of Nursing, and Genetic Counseling Program
   b. Spring 2019: Intimate Partner Violence
      i. Collaborate with School of Social Work, School of Nursing, and Public Health Program.

Master of Public Health (MPH) Program

1. IPE Cases of Patients Events
   a. Spring 2019: Intimate Partner Violence
      i. Collaborate with School of Social Work, School of Nursing, and Physician Assistant Program.

2. Public Health Principles and Practice Course
   a. This course is required of all MPH students during their first year. Students work in 17 interprofessional groups to assist community coalitions and organizations with their community health improvement planning and evaluation.

School of Nursing

First-year Traditional Nursing Students:

1. Cases of Patients (11/28)
   a. Goal: Identify interdisciplinary approaches to assist and manage the care of patients with Down syndrome.
   b. Activity Description:
      i. Family of a child with Down syndrome presented their experiences interacting with the health care system.
      ii. Students participated in an IP dialogue via a small group discussion with guided questions related to IPEC competencies.
   c. Collaborate with Physician Assistant Program, Social Work, Genetic Counseling.
   d. SoN Course Alignment: T-N314—Health Promotion Disease Prevention Across Lifespan.

Second-year Traditional Nursing Students:

1. Simulation (9/18-4/19): Each student participated in 1 of the following IP simulations
   a. Mock Code
      i. Goal: facilitate teamwork and communication in simulated clinical setting.
      ii. Collaborate with School of Pharmacy, UW Health Pharmacy Residency Program, and UW Health Internal Medicine Residency Program.
   b. Post-operative PE
      i. Goal: facilitate teamwork and communication in simulated clinical setting.
      ii. Collaborate with School of Pharmacy.
   c. Stroke
      i. Goal: facilitate teamwork and communication in simulated clinical setting.
      ii. Collaborate with School of Pharmacy.
   d. SoN Course Alignment: T-N436/T-N446—Experiential

2. Simulation and Secondary Debrief (April)
   a. Goal: Work as an IP team to respond to an adverse event and communicate with the patient’s family member.
b. Activities: Simulation and debrief as and IP team. Secondary debrief with nursing students in the context of IHI Module (PS 105).

c. Collaborate with School of Medicine and School of Pharmacy.

d. SoN Course Alignment: T-N446—Experiential; T-N442—Health Systems, Policy and Economics.

**Accelerated nursing students**

1. Cases of Patients (Spring semester)
   a. Title: Intimate Partner Violence
   b. Goal: Identify interdisciplinary methods to approach and assist victims of domestic/intimate partner violence.
   c. Activities: Survivors of D/IPV presented their experiences. Students participated in IP dialogue via a small group discussion centered on a case with guided questions.
   e. SoN Course Alignment: A-N437—Social Justice in Local and Global Settings.

**Additional Activities**

1. “Only Leaves Should Fall” (Fall semester)
   a. Goals:
      i. Learn fall prevention.
      ii. Gain skills on how to take a Blood Pressure (BP) correctly.
      iii. Educate clients on hypertension and its prevention.
      iv. Improve interprofessional skills and prepare students to work on an interdisciplinary team.
   b. Collaborate with School of Pharmacy, Occupational Therapy Program, and Physical Therapy Program.
   c. SON Course Alignment: specific clinical cohorts for N316 TBSN.

2. “No More Spring Breaks” (Spring semester)
   a. Goals:
      i. Learn fall prevention.
      ii. Gain skills on how to take a Blood Pressure (BP) correctly.
      iii. Educate clients on hypertension and its prevention.
      iv. Improve interprofessional skills and prepare students to work on an interdisciplinary team.
   b. Collaborate with School of Pharmacy, Occupational Therapy Program, and Physical Therapy Program.
   c. SON Course Alignment: specific clinical cohorts for N327 TBSN.

3. Interprofessional Education Skill Acquisition (Spring semester)
   a. Goals:
      i. For Nursing students to learn how to manage patient’s assistive devices correctly and effectively.
      ii. For Occupational Therapy students to learn about use of transfer equipment on patients with multiple other medical devices connected.
      iii. To facilitate exchange of knowledge between Nursing and Occupational Therapy students to improve interprofessional skills and prepare students to work on an interdisciplinary team.
   b. Collaborate with Occupational Therapy Program.
   c. SON Alignment: Within clinical cohorts of N327 TBSN.
School of Pharmacy

The School of Pharmacy IPE curriculum aims to prepare all students to provide entry-level, patient-centered care in a variety of practice settings as a contributing member of an interprofessional team. The IPE program is anchored in an interprofessional socialization framework to facilitate dual identity formation. It spans the entire length of the PharmD curriculum and includes required didactic, co-curricular, and experiential IPE activities.

The school’s IPE program is progressive, insofar as it is a true programmatic approach spanning the entire length of the curriculum that includes required didactic, co-curricular, and experiential activities. The pre-APPE component of the approved IPE program includes 100 hours of pre-IPE activities and 42 hours of IPE activities.

Additionally, the School of Pharmacy’s has created an IPE committee whose task it is to assemble, organize, build consensus amongst, and coordinate efforts of key stakeholders who will collectively ensure the successful implementation of the School’s IPE program, including continuous monitoring of its quality.

Pharmacy IPE Program

Nine pre-APPE IPE activities and 1 APPE IPE activity were launched in 2018-2019. To ensure that students in our other cohorts (Classes of 2019-2021) were also exposed to intentional IPE prior to graduation, we launched pilots of all IPE activities across all four years in the PharmD program during academic year 2018-2019. The careful planning and local infrastructure we developed for IPE within the school allowed for this to occur. The following IPE activities were completed in this timeframe:

1. Two IPE simulations focused on the IPEC core competencies of Teamwork and Communication
   - **Simulation #1**: 1 hour of instruction, 30 minutes simulation, 30 minutes debrief; first year medical and pharmacy students.
   - **Simulation #2**: 1 hour of instruction, 30 minutes simulation, 30 minutes debrief; second year nursing students, fourth year medical students, and third year pharmacy students.

2. One IPE Clinical Debrief Activity
   - 2 hours of instruction; first year medical students and second year pharmacy students.

3. Three IPE Co-Curricular Activities
   - Variable hours of instruction; first and second year pharmacy students working with students from variable health programs once during year one and twice during year two. Examples include volunteering at WisCARES and MEDiC.

4. Two IPE APPE Activities
   - Variable hours of instruction; structured activities involving student self-rating of teamwork behaviors and preceptor direct observation and rating of student teamwork behaviors.
School of Veterinary Medicine

Although Veterinary Medicine (SVM) students have yet to participate in the UW CIPE Modules, SVM faculty have been active in developing and facilitating the Interprofessional Communication Practices Module which took place February-March, 2019.

1. Wisconsin Companion Animal Resources, Education, and Social Services (WisCARES)
   a. WisCARES is an outreach partnership at the University of Wisconsin that provides basic veterinary medical care, housing support and advocacy, and other support services to Dane County pet owners who are low income, currently experiencing or are at risk of homelessness, as well as those who are unable to pay for veterinary medical services needed for access to housing. WisCARES clinical program is overseen by SVM.
   b. The program is run by two full-time staff members and utilizes volunteer veterinarians, veterinary techs, and veterinary, pharmacy, and social work students.

PART B – A SNAPSHOT OF ELECTIVE (POTENTIAL) IPE COURSES

1. Health Care in Diverse Communities (370-712)
2. Current Topics in Bioethics (452-730T)
3. Narrative Medicine and Public Health (452-740)
4. Advocating for Populations: Partnering to Improve Community Health (528-940a)
5. Advocating for Patients: Getting the Right Care at the Right Time (528-940b)
6. Rights and Responsibilities in Health Care Law (528-940)
7. Patient-Centered Care Providers (528-941)
8. Medical Spanish (622-735)
9. Effectively Conveying Health Information (622-747)
10. MEDIC Clinic: Marginalized Populations/Interprofessional Collaboration (622-910)
11. Improvisational Theater for Health Professionals (632-699a)
12. Improv for Scientists (632-710)
13. Intersection of Health Care and Incarceration (632-809)
15. Health and Disease in Uganda (810-650)
16. Public Health Principles and Practice (810-650a)
17. Leadership in Medicine and Public Health (810-650b)
18. Health Care Quality Improvement and Innovation (810-650c)
19. Field Course Seminar for Public Health and Medicine (810-650e)
20. Interprofessional Public Health Leadership (810-650f)
22. International Health Systems (810-718)
23. CPR Renewal Course for Health Care Providers (996-101)
PART C – OTHER EXAMPLES OF (POTENTIAL) IPE OFFERINGS

1. MEDiC
   a. A student-led organization that runs seven free health clinics throughout the Madison area.
   b. An opportunity for physical therapy, medical, physician assistant, nursing and pharmacy students to provide free services to underserved population.
   c. Some programs like DPT and PA require their students to participate in MEDiC clinic.

2. Path of Distinction (POD) in Public Health Program
   a. SMPH offers a Path of Distinction in Public Health educational program to provide additional public health didactics, experiential learning and mentorship that supplements the MD curriculum and serves as a foundation for the MD-MPH program. Medical students who participate in POD complete PHS 712 Integrating Medicine and Public Health, at least one additional public health elective and work with a public health mentor to complete a project related to their preferred area(s) of interest. The program also includes an interprofessional learning experience where a group of interprofessional students travel to the Oneida Nation to explore the historical context, community and primary health issues.

3. MD-MPH (Masters of Public Health) Program
   a. SMPH offers a 5-year MD-MPH dual degree, for those students interested in becoming fully trained in public health. During the year that the medical students step out of medical school to do their MPH, they complete approximately 30 credits of course work required for the degree with other MPH degree-seeking students from the disciplines of law, social work, and veterinarian medicine, to name a few.

4. UW Health Clinical Simulation Program (Interprofessional Learning Events)
   a. The UW Health Clinical Simulation Program provides robust and realistic learning opportunities to prepare health care professionals for actual patient care situations. The program offers interprofessional educational opportunities for students, faculty and staff from UW Health, the UW School of Medicine and Public Health, departments across UW-Madison, and the community.

5. GoBabyGo
   a. An outreach program that modifies toy ride-on cars for children with mobility impairments.
   b. The project is an innovative joint venture of UW Physical Therapy, Occupational Therapy and Engineering students along with American Family Children’s Hospital therapists.

6. UW DPT Pro Bono Clinic
   c. The goal is to fill a gap in pro-bono physical therapy services for the uninsured and undeserved patients in the Madison area by using student services with faculty oversight.
   d. All services are provided free of charge by current students who operate on a 100 percent volunteer basis.
   e. On average, two to three students are paired with a client on a weekly basis.
   f. Collaborate with Occupational Therapy and Speech-Language Pathology programs.

7. Juvenile Detention Center
a. The Juvenile Detention Center's mission is to provide a physically and emotionally safe and secure environment for juveniles placed temporarily by the court and to provide youth with the opportunity to learn new skills that will enable them to contribute to the community when they leave.

b. Physical Therapy students help lead weekly physical activities.

8. Body Donor Ceremony with Physical Therapy and Occupational Therapy
   a. The Anatomy Body Donor Ceremony recognizes and honors the good people and their families who donated their bodies to the university's cadaver lab, for the purpose of our learning.

9. Personal Health Partners
   a. Physical Therapy students work with Pharmacy and Dietetics students as “personal health partners” at a transitional home for homelessness.

10. Ethics Surrounding Interprofessional Care Course
    a. An online ethics course which includes a case of a young man with Down Syndrome who interacts with a variety of health care providers over his lifespan.
    b. This free course is designed to meet the needs of multiple health care providers in regards to making ethical decisions in the clinic. However, the primary audience is the physical therapy profession.

11. Interprofessional Ice Cream Social
    a. Annual event open to students, faculty and staff.

12. Conduct Research and QI Projects
    a. Work on improving care coordination between oncology and primary care providers/clinicians.
    b. Members of teams include: Nurse Practitioners, Nurses, Physician Assistants, informatics/analytics, health disparity experts, Physical Therapists, and Physicians.

13. Community Based Rehab Facility
    a. Physical Therapy students work with Occupational Therapy students on an assignment on fit for people with dementia.

14. Medical Students Offering Maternal Support (MOMS) Group
    a. A student organization that was established to create community connections between health professional students, expecting mothers, and the obstetric care teams. Previously, this had been an organization for Medical Students only, but is now be open to Physician Assistant students.

15. Belize Service Learning Trip
    a. Optional but 27 Physician Assistant students participated this year, along with Pharmacy and Nurse Practitioner students.

16. Interprofessional Preceptor Development Workshops
    a. Physician Assistant Clinical team host along with UW Health and the School of Nursing.

17. Health Sciences Equity & Diversity Lunch & Learn Series
    a. Free workshops and conversations focused on topics related to equity, diversity, and inclusion that deeply impact our work and practice. These sessions are open to all health science faculty, practicing professionals and others.
Report Developed by:
Roberta Rusch, MPH
Hossein Khalili, BScN, MScN, PhD
Nicholas Zacharias, MS

UW CIPE Leadership and Staff:
Hossein Khalili, BScN, MScN, PhD - Director
Roberta Rusch, MPH – Associate Director
Nina Berge, BA – Administrative Assistant
Nicholas Zacharias, MS – Summer Graduate Student
Administrative Support

Acknowledgements:
The UW CIPE would like to thank all University Administration, UW CIPE Committee members, school IPE directors, faculty, staff, and students for their support and leadership in IPE at UW.