

Learning Together: Strategies for Effective Interdisciplinary Education

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Disclosures

I have no relevant financial disclosures

I'd rather use a chalkboard than powerpoint

I am going to have opportunities for you to interact

Gratitude

Plan for Today



Discuss why interprofessional education makes sense

Strategize about incorporating interprofessional teaching

Examine the impact of interprofessional continuing education

Who Is In the Room?

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What do you do?

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Who do you teach?

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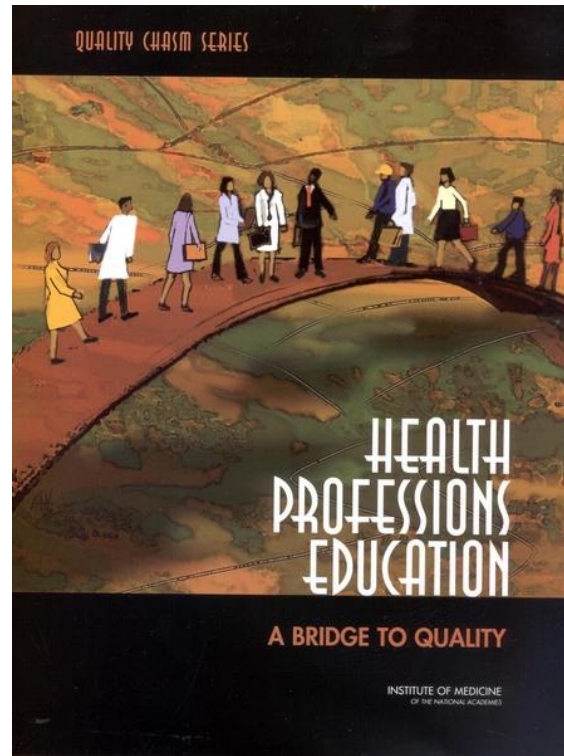
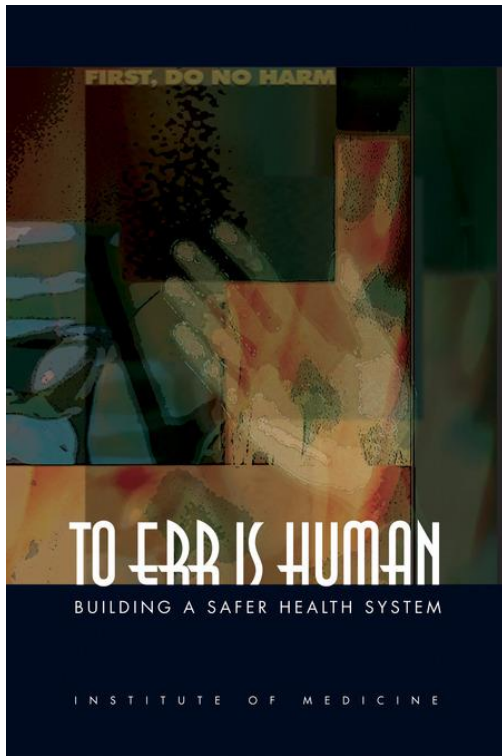
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With whom do you teach or learn?

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Why Interprofessional Education?



Siloes

Hierarchy

Socialization

Individual responsibility

Interprofessional education



Collaborative practice



High-quality patient care

Interprofessional Collaboration Improves Outcomes

ORIGINAL INVESTIGATION

HEALTH CARE REFORM

The Effect of Multidisciplinary Care Teams on Intensive Care Unit Mortality

Michelle M. Kim, MSc; Amber E. Barnato, MD, MPH; Derek C. Angus, MD, MPH;
Lee F. Fleisher, MD; Jeremy M. Kahn, MD, MSc

Table 3. Association Between Intensivist Physician Staffing and 30-Day Mortality for All Patients^a

Variable	OR (95% CI)	P Value
Model 1: multidisciplinary care staffing alone		
No multidisciplinary care	1 [Reference]	
Multidisciplinary care	0.84 (0.76-0.93)	.001

Interprofessional Education (IPE)

A way to improve collaboration, facilitate communication, dismantle training silos and counteract stereotypes

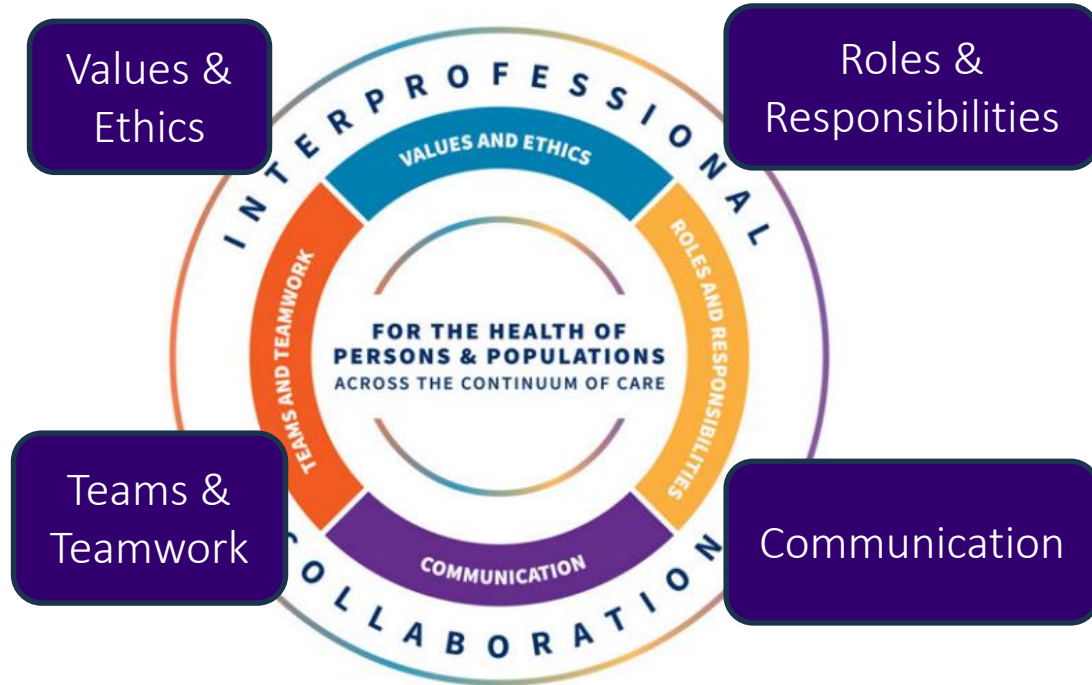
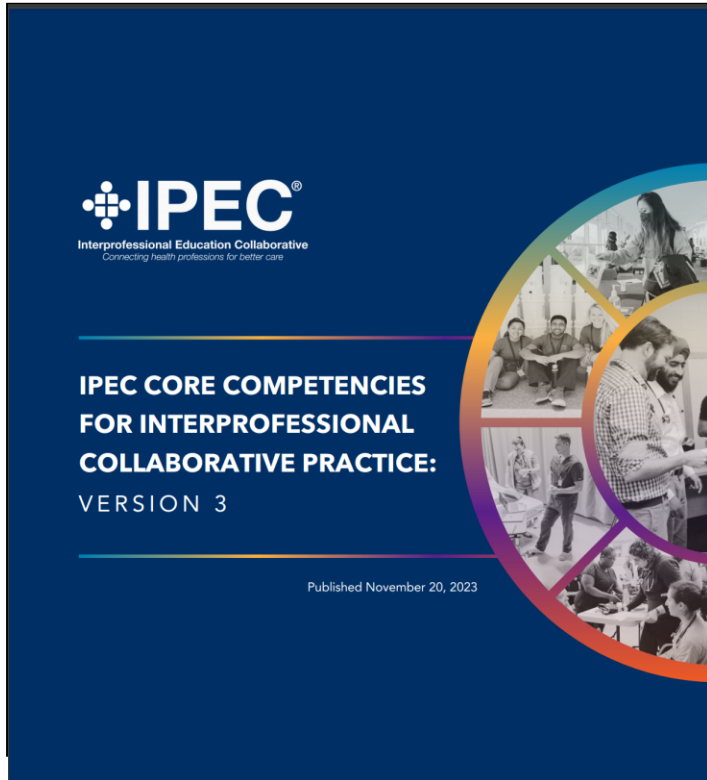




Core Competencies for Interprofessional Collaborative Practice

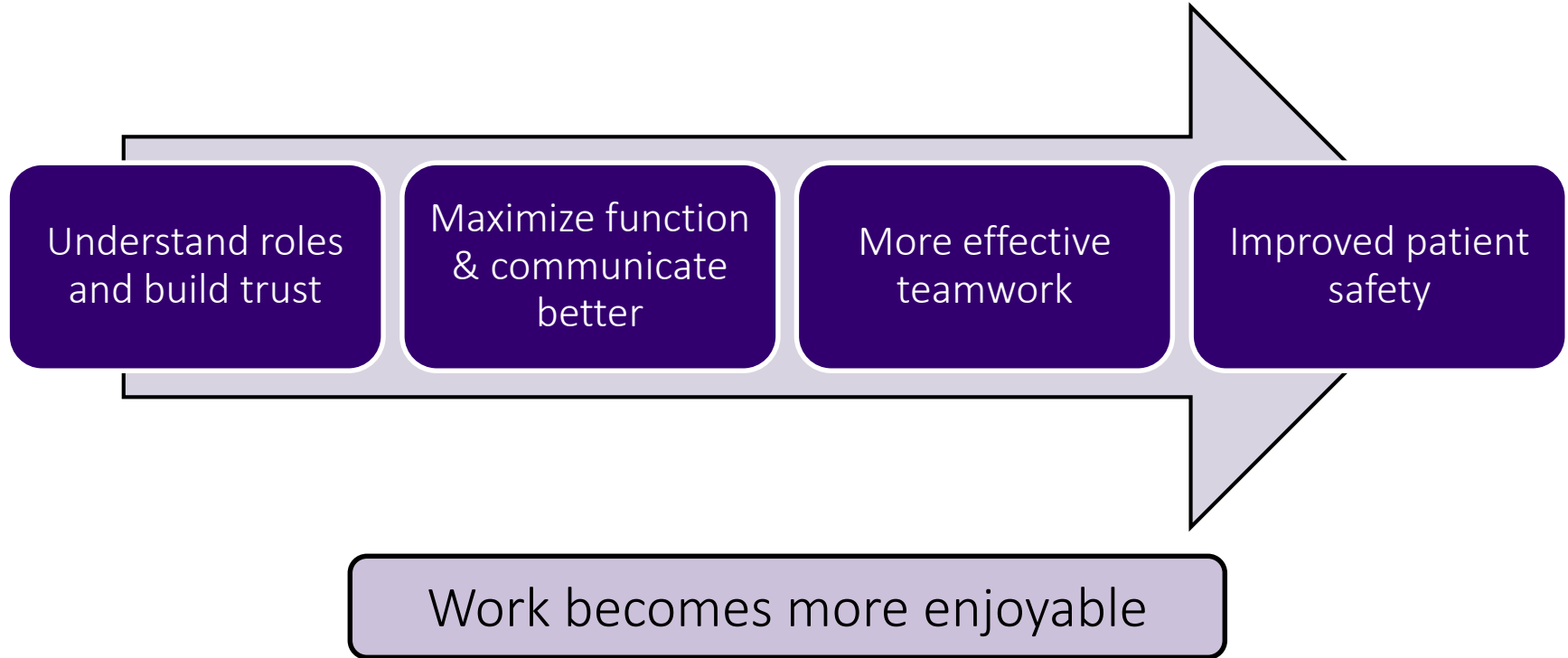
Sponsored by the Interprofessional Education Collaborative*

Core Competencies of IPE

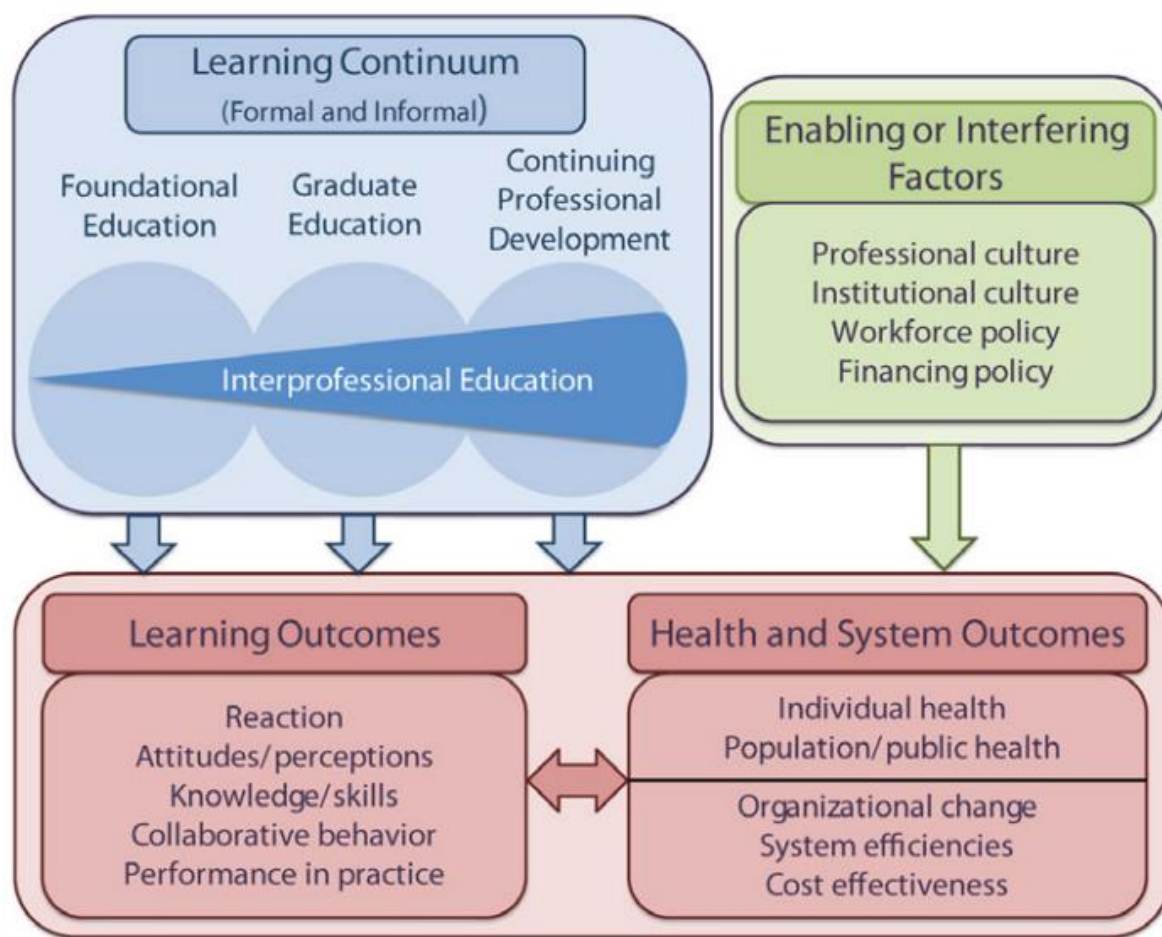


[link to report](#)

What Is Achieved

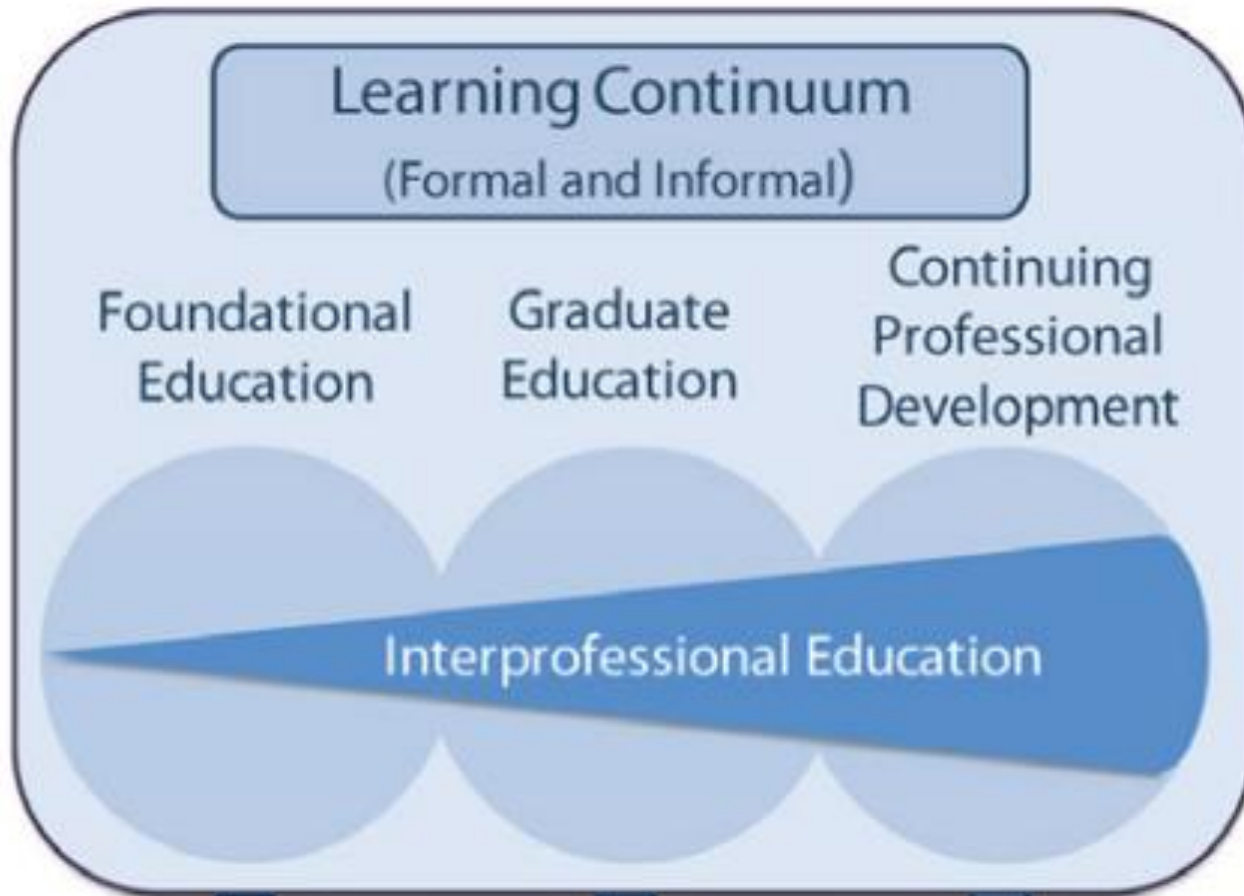


When Should We Consider IPE?



[link to report](#)

Reprinted with permission from Institute of Medicine. Measuring the impact of interprofessional education on collaborative practice and patient outcomes. Washington, DC: National Academies Press; 2015.



[link to report](#)

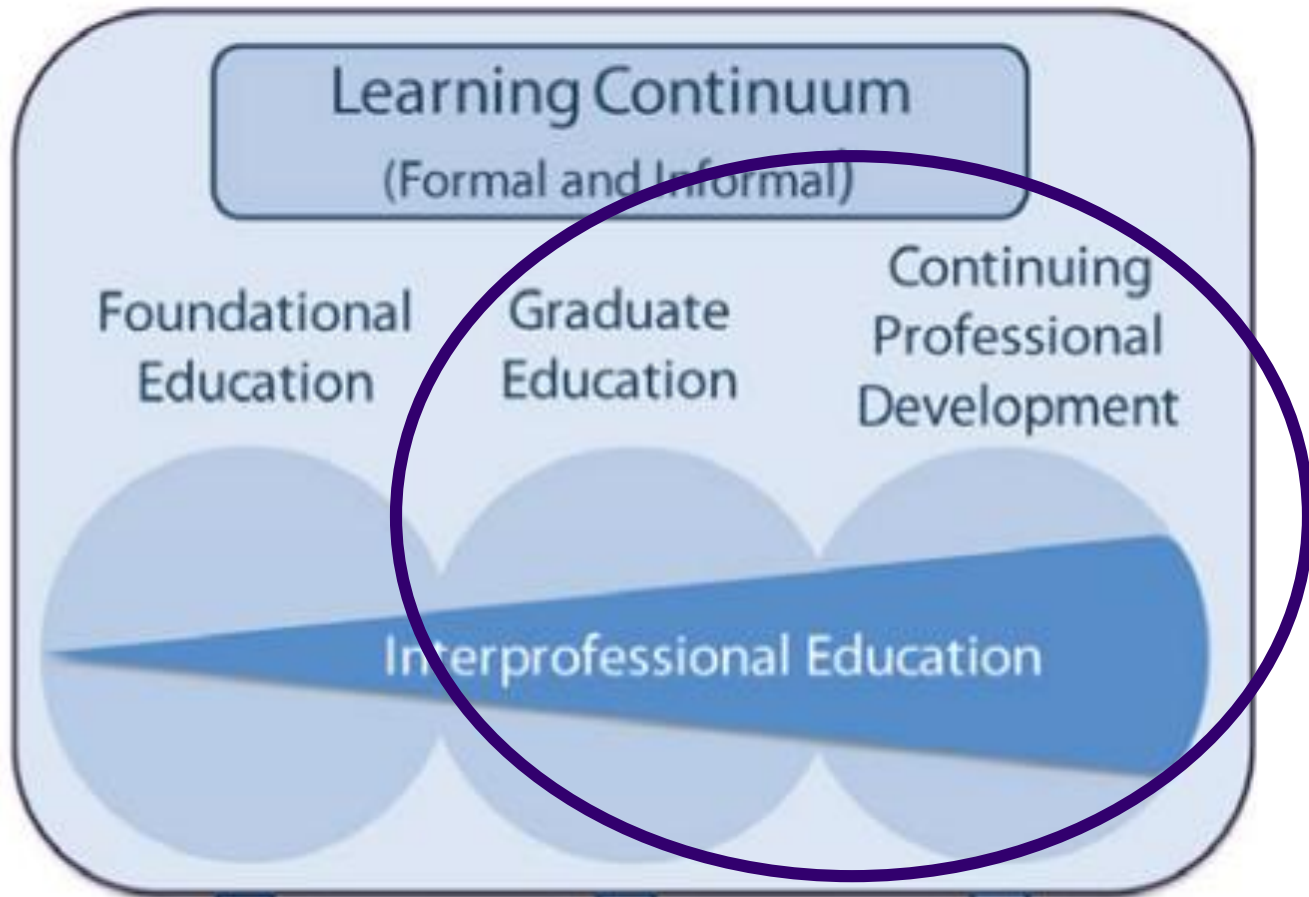
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I have been involved in IPE with..

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[link to report](#)

Recommendations from recent graduates in medicine, nursing and pharmacy on improving interprofessional education in university programs: a qualitative study

Conor Gilligan^{1*}, Sue Outram¹ and Tracy Levett-Jones²

Results: Sixty-eight recent graduates working in New South Wales, Western Australia, and Tasmania participated in 12 focus group sessions. In this paper, we report on new graduates' reflections on their experiences of IPE as part of their university degree, as well as their recommendations to improve interprofessional education before graduation. The new graduates were unanimous in valuing IPE from their current perspective of being in the

Clinical placement was a missed opportunity with few structured meaningful interprofessional learning experiences.

Contributions on Rounds

Table 1. Definition and examples of four types of rounds contributions included on survey

Contribution	Definition	Example
Reporting	Providing routine data or information	Reading vital signs
Observing	Highlighting events or data judged to be clinically relevant	Notifying the team that the patient has become hypotensive as propofol has been increased
Recommending	Providing opinion or suggestions about patient care	Suggesting the patient should have a central line placed
Teaching	Providing generalizable knowledge or explaining thinking	Explaining the risks associated with the use of vasopressors in patients without central venous access

What Happened on ICU Rounds?

221 ICU team members surveyed, 3 ICUs, on institution

Regular contributions from RN, RT, PharmD, but rare teaching

Attendings reported low rates of inviting other voices to teach

What Are the Keys to Successful IPE?

What Contributes to Success



Center the patient and family



Institutional support and local champions



Breaking down hierarchies and stereotypes



Support and develop facilitators



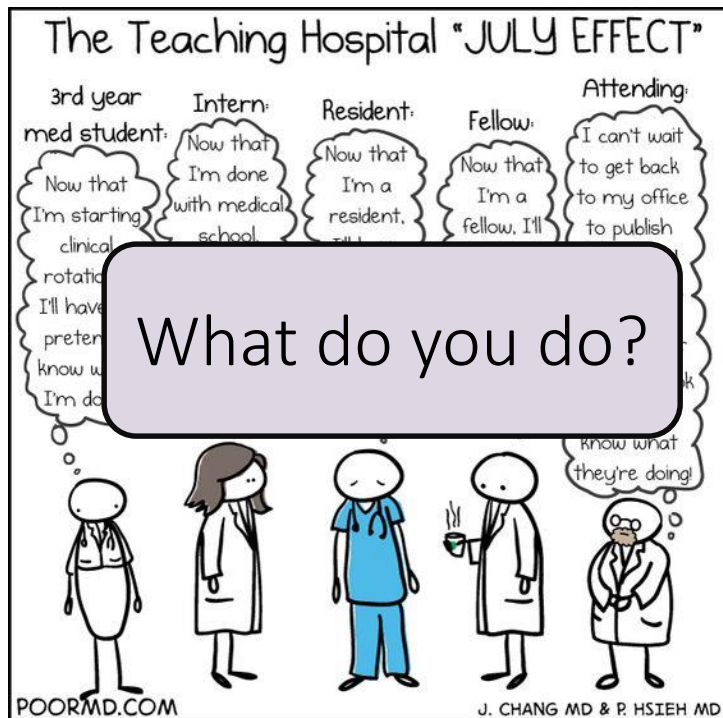
Work to create psychological safety

What Is Psychological Safety?

Psychological safety is the belief that the environment is safe for risk taking without fear of negative consequences of self-image, status or career.

You can't just say "this is a safe space"

Set the Stage



Provide clear expectations

Define success for every learner

Express your shared purpose

Make yourself human

Invite Participation



Show interest in
your learners



Elicit their
learning goals



Model not
knowing

Respond Productively



Compassion for
learner life

Listen and check-in

Express gratitude

Make failure normal

Facilitators of IPE

Cultural

- Getting acquainted

Individual

- Availability (physical proximity)

- Sense of urgency

- Role clarity

Process

- Immersion in collaboration

- Exposure to interprofessional teams

- Teacher facilitated reflection

- Learning in authentic context

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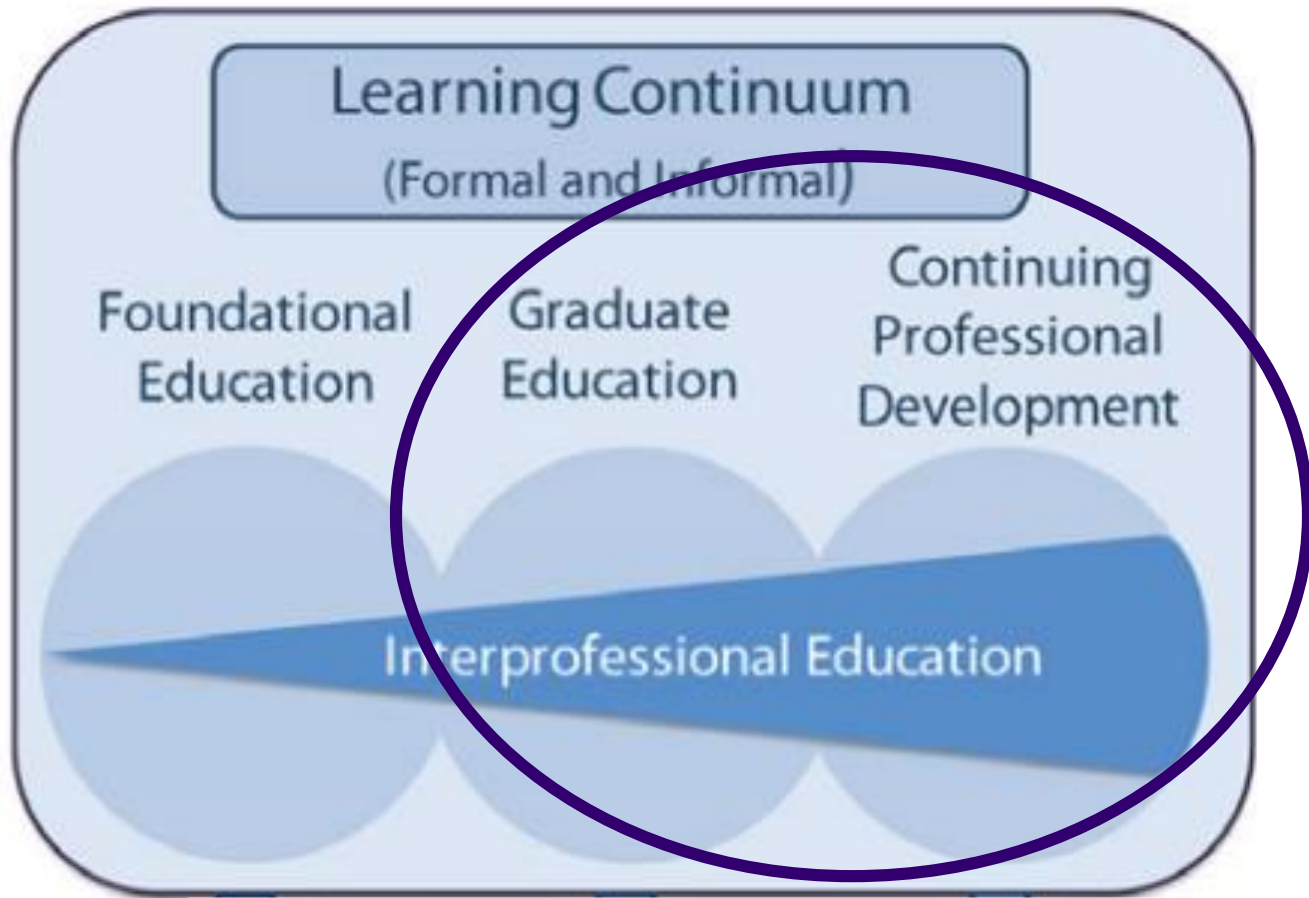
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What else do you think promotes successful IPE?

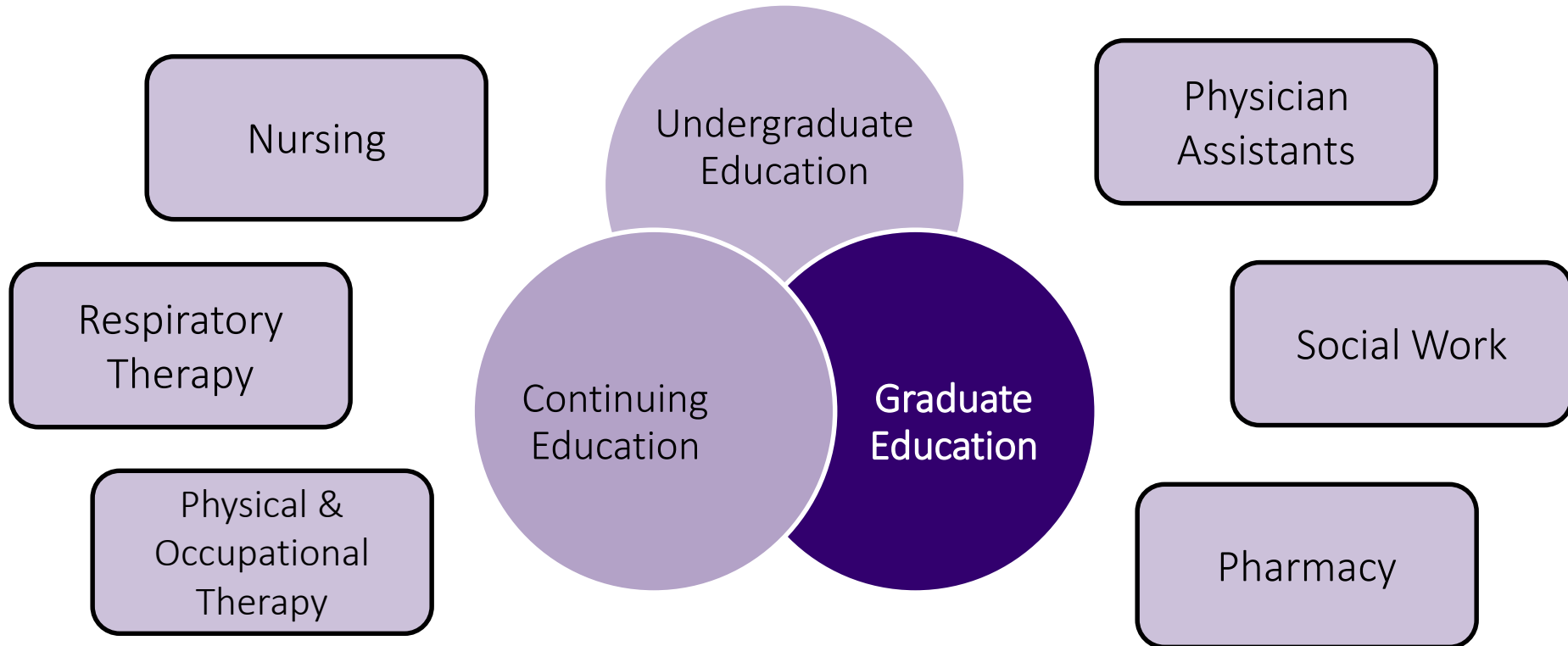
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When Does IPE Make Sense?



[link to report](#)

Where Could IPE Happen?

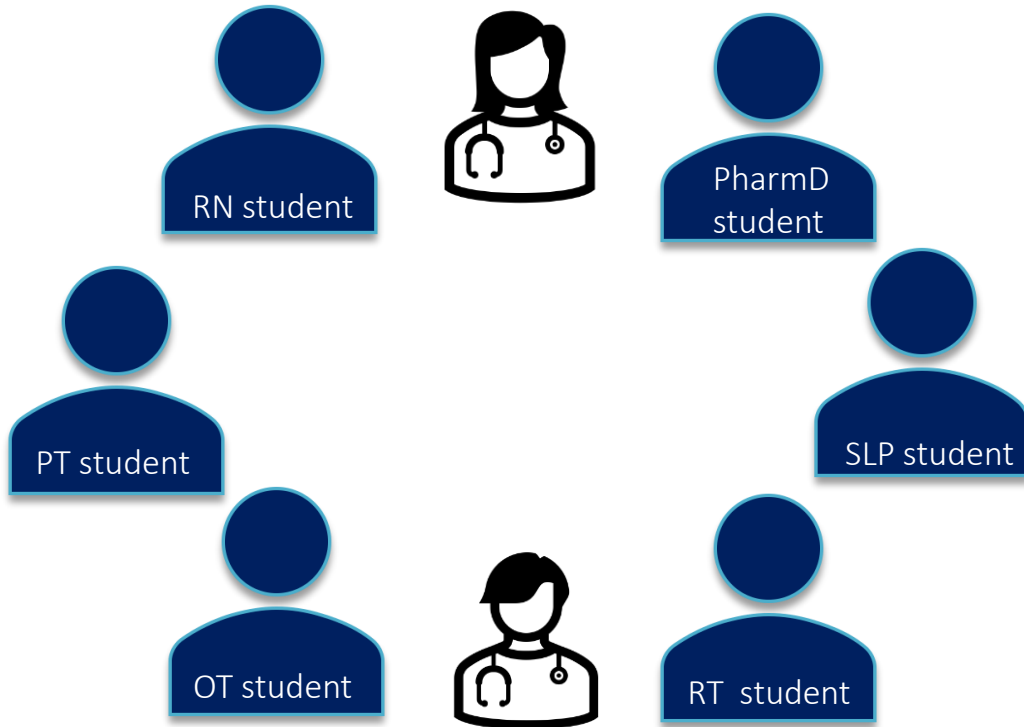


Build in Interprofessional Teaching

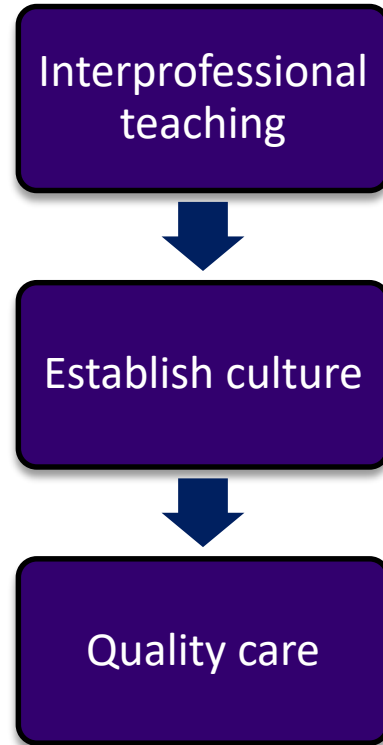
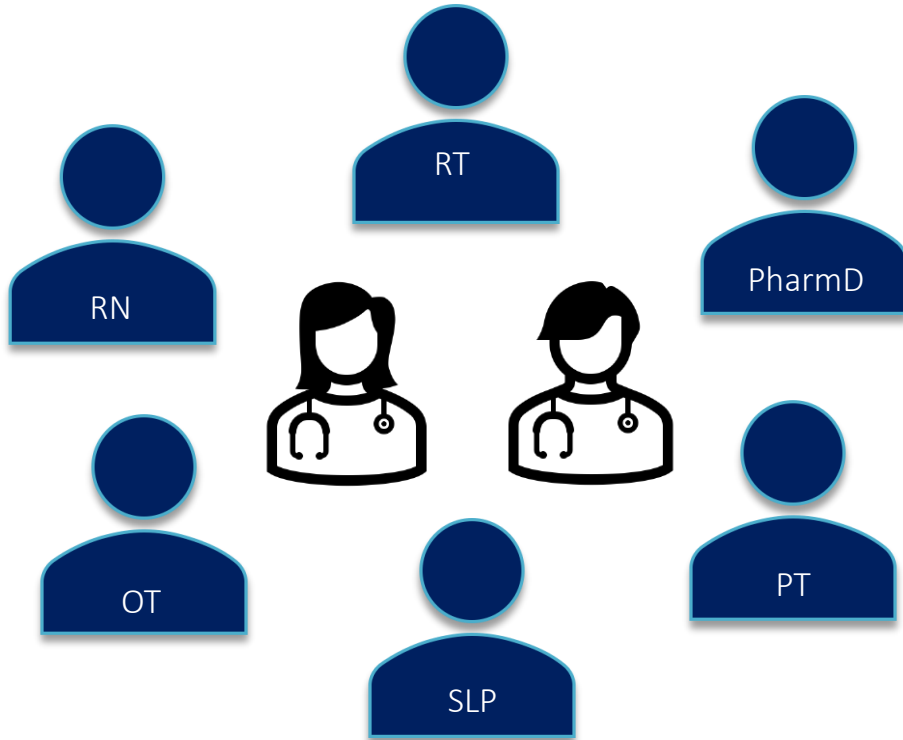
- Interprofessional education (IPE)
- Interdisciplinary teaching (IDT)

“When professionals act as teachers for learners from a different discipline to improve collaboration and the quality of care”

Interprofessional Education

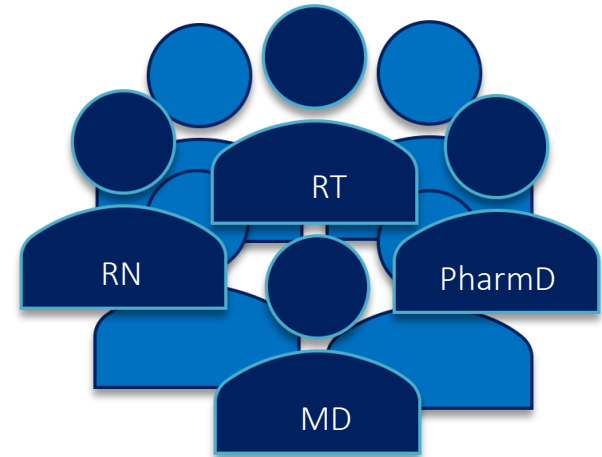


Interprofessional Teaching



The ICU is Primed for IPT

- Multitude of interprofessional providers
- Closed unit
- Daily team rounds
- Emphasis on teamwork, collaborative care



Alexandraki et al. *JGIM*. 2017; 32: 871-876.

Visser et al. *BMC Med Ed*. 2017; 17:77

Kim et al. *Arch Int Med* 2010; 170 (4):369

Create the Environment



Every role is valued



Shared goal of collaborative teaching

No one team member has all the answers or all the knowledge

Create Focused Teaching Opportunities



Ask a focused question

Identify important teaching points

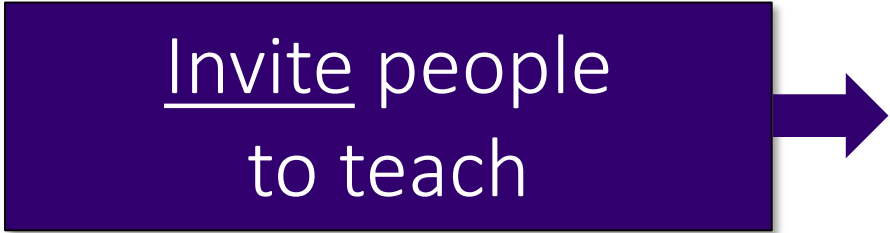
Invite Input

Invite a
recommendation



“What would you suggest
we use to treat her
delirium?”

Invite people
to teach



“Would you like to teach
us about...?”

Attending facilitation is key!

Actively Manage the Team

“Thank you for that great explanation...”

“Those are great points. Let’s finish out the plan and after rounds maybe you can elaborate further/point us to an article to learn more...”

Politely shift focus once a point has been made

Incorporate into Didactics & Bedside Teaching

Sedation &
Analgesia -
PharmD

Caloric Impact
of Critical Illness
- Nutritionist

Measurement
of compliance
- RT

PA catheter
tracings - RN

Create the Environment

CULTURE

Institutional

Division

Unit

- Name tags
- Photo boards
- Introductions

- Huddle
- Socializing
- Rounds

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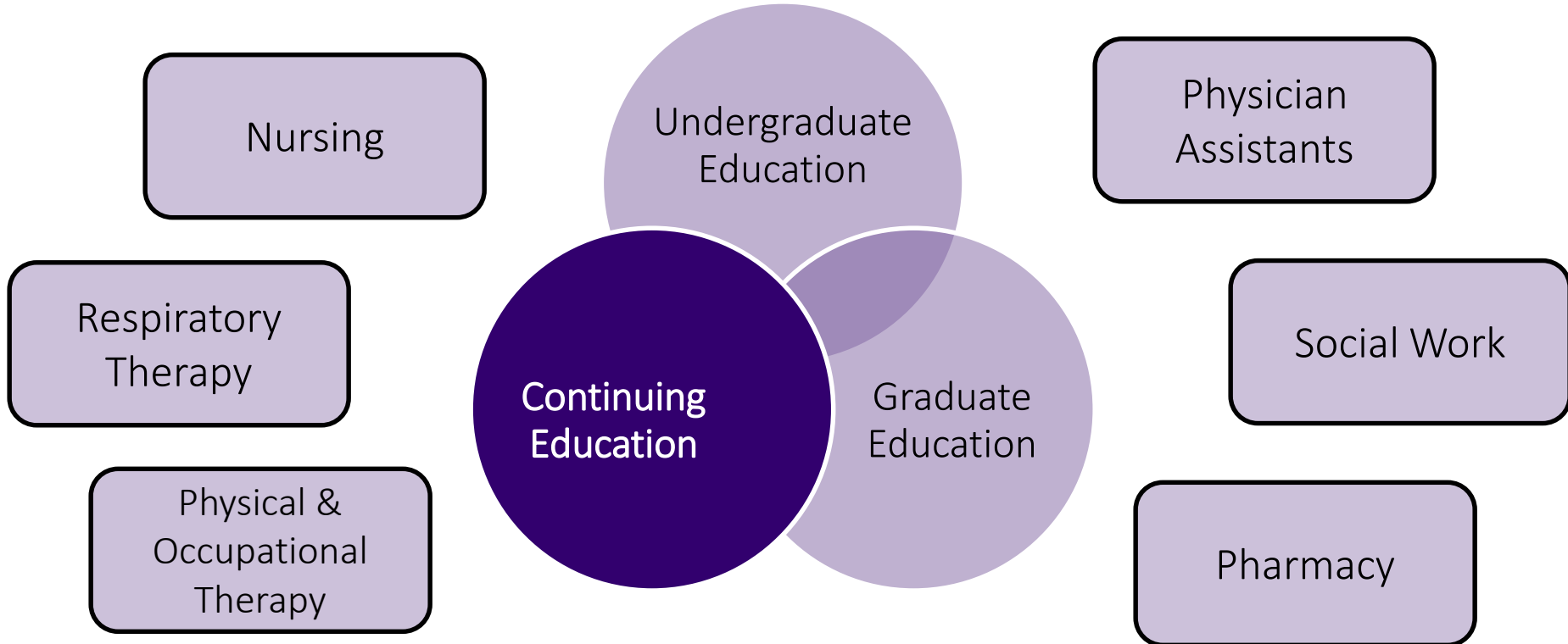
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How else can/do you incorporate interprofessional teaching?

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Where Could IPE Happen?



Continue to Learn Together



Streamline Accreditation Process



Promote IPCE Opportunities



Improve Patient Outcomes



Welcome to MMC CME/CE
MMC is a Joint Accreditation Provider for continuing education (CME, CE) programming.

MMC is committed to improving healthcare delivery and better patient outcomes by supporting high quality educational activities. As a nationally recognized [Joint Accreditation](#) (JA) Provider, MMC promotes interprofessional continuing education (IPCE) activities specifically designed to improve interprofessional collaborative practice. Activities are planned by the healthcare team for the healthcare team.



My CME

Credits & Transcripts

Applications

Disclosures

Download Our App



Welcome to MMC CME/CE

MMC is a Joint Accreditation Provider for continuing education (CME, CE) programming.

For continuing medical education
learn well

Grand Rounds -
Recorded Sessions

Texting Attendance

Administrative
Support/Planners



Planning
Interprofessional
Education Webinars

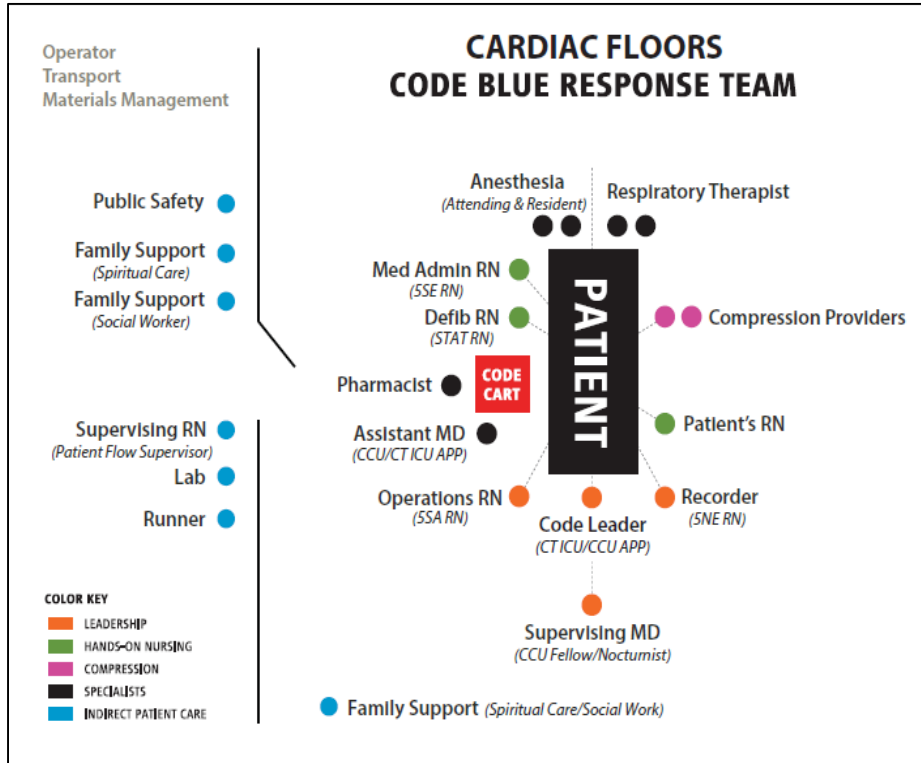


External Claim
Credit



Licensure
Board

Code Team Trainings



Family presence at codes
→ Interprofessional Teaching

Cardiac Surgery & MCS response
→ Interprofessional Education

Interdisciplinary ICU Simulations

Themes Identified

Simulations reflect real-life

Promotes camaraderie and understanding of roles

Need leadership & good communication

Lack of fidelity

Clinical commitments

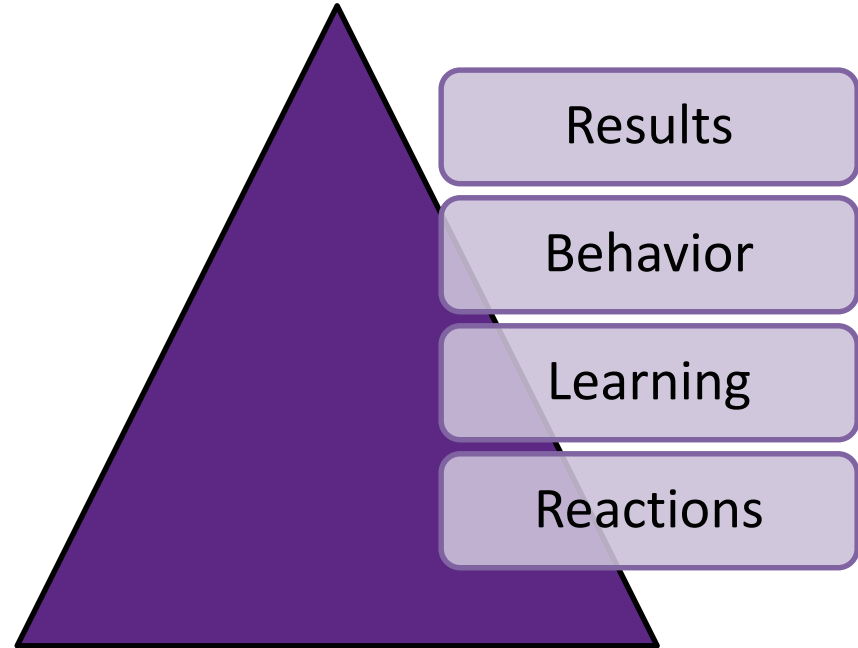
Weekly, hour-long MICU team simulations:
Residents, Nurses, RTs, pharmacists, med students

TeamSTEPPS



Qualitative review of 11 studies (2010-2016)

Didactic TeamSTEPPS + simulation + debrief



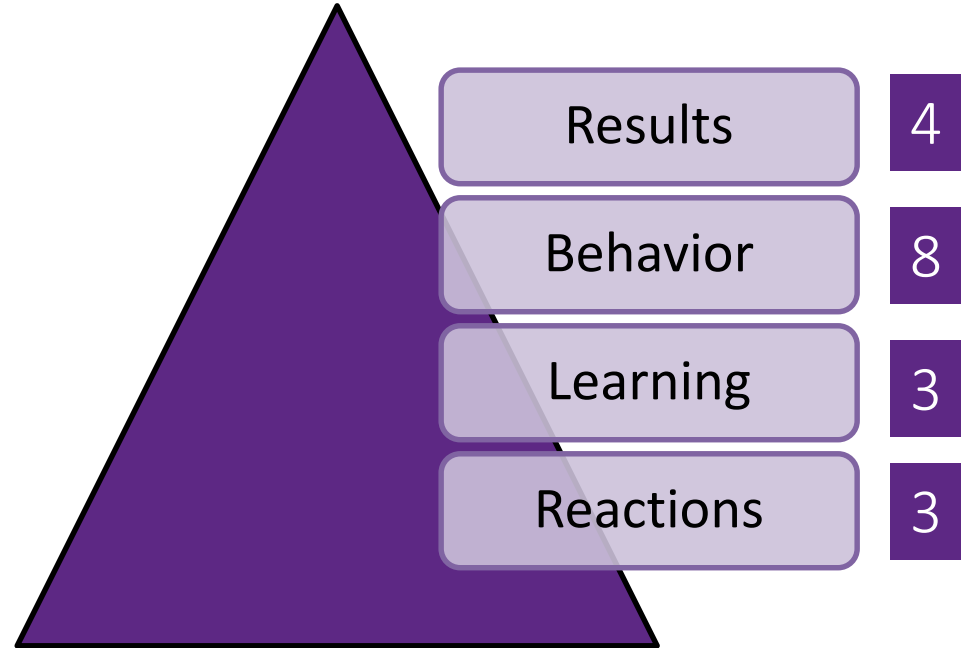
Kirkpatrick Levels of Assessment

TeamSTEPPS



Qualitative review of 11 studies (2010-2016)

Didactic TeamSTEPPS + simulation + debrief



Kirkpatrick Levels of Assessment

TeamSTEPPS

Individual

- Owners and champions
- Faculty development

Structural

- Time in curriculum/clinical work
- Effective space
- Financial support

Cultural

- Equal status among disciplines
- Cooperation among teachers
- Modeled in “real world”

Hammick et al. *Med Teach*. 2007; 29:8: 735-751.

Thistlethwaite. *Med Ed*. 2012; 46: 58–70.

Lawlis et al. *J of Interprof Care*. 2014; 28:4, 305-310.

It's About Quality of Care



We need to learn together to change together

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What's one take home for you from today?

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Take Homes



- IPE is essential to strong teams, better communication and safer care
- Essential to the success are culture and psychological safety
- Efforts should extend beyond undergraduate education
- Interprofessional teaching may be a next step in graduate education
- Continuing education can be woven into our QI efforts

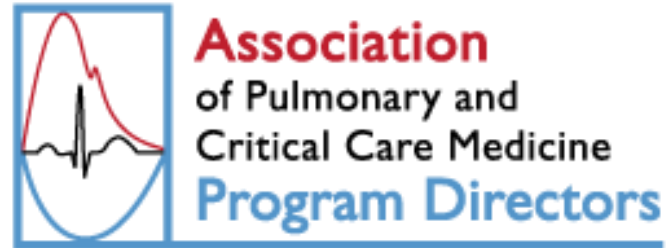
Many Thanks

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Teaching Team

Jean Madsen

Heajin Chang, RT

Robin Collier, RN

Susan Cho, PharmD

Lisa Golden, RN

Laura Spece, MD

Jon Keller, MD

Ryan Murphy, MD

Thank you for the invitation!

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