Members Present:
Carla Myers  Sharon Decker
German Nunez  Lorenz Lutherer
Herb Janssen  Rial Rolfe
Bonna Benjamin  David Straus
Suzanne Escudier  German Nunez
Barbara Sawyer  Cindy Acton

Members Absent:
Rebecca Sleeper
Amy Blue

Guests:
David Howell

I. MUSC QEP Overview: Steps to Implementation and Early Lessons Learned:
At the Academic Health Center all six colleges are in one location, to include Dentistry, Graduates Studies, Health Professions, Medicine, Pharmacy, and Nursing. The focus of their QEP was interprofessional education (IPE).

- Have embraced initiatives under the Teaching Scholars Academy and Healthcare Simulation Resources.
- Have reviewed goals and conceptual framework from novice to contextual knowing.
- Four collaborative domains that occur in their academic programs are curricular, extracurricular, faculty development, and clinical effectiveness and patient safety (healthcare simulation).
- Interprofessional Education - definition guiding IPE work is “occasions when two or more professions learn with from and about each other to improve collaboration and the quality of care.”
- Acquiring Teamwork Competencies- as the first goal, competencies are framed around basic team skills development. Also, have continued existing co-curricular IPE activities to include interprofessional (IP) day, presidential scholars program, CLARION interprofessional case competition, and student-run “CARES” clinic. Some examples of work today are hospital labs experience for COP and CON students, nursing students learning drug information from pharmacy students, cholesterol screening, and interprofessional skills simulation workshops where students learned basic clinical skills together.
- Simulated Interprofessional Rounding Experience (SIRE) - activity where a team has to document their decision on a white board.
- Student Interprofessional Society SIPS.
- IP electives - have a process for approval. Some include Medical Spanish, Caring for the Community, Medicine and Humanities, and Addressing Childhood Obesity.
- Interprofessional Service Learning Project – is funded by APTR (association of prevention and teaching research). Involves students when they are in their clinical rotations. Didactic sessions (2 and a half hours) they have to attend basic team skills training and engage in project. A project conducted has been where junior doctors of health program work with high risk obesity elementary schools. Partners with AHEC has supported immensely. This program is very popular with the students and is only three weeks because of student schedules.
- IP Fellowship - builds upon existing IP activities. Students are required to complete an elective and engage in some self-directed team work. Approximately 30 students have been actively submitting assignments. A student mentioned this fellowship at an interview and it put her at a different level. Some job descriptions state they want someone at an institution that had IP experience. At graduation will have their name as being a fellow from the IPE Fellowship goes on their transcript as a notation. The core course is the only grade shown.
- IPE Faculty Institute – learn advance team skills and IP E concepts. It is held once a month on Friday afternoons, 6 three hour interactive sessions. The institute has had 19 participants from all colleges. This goes under goal three in process of developing a core course for first year students in spring 2010 online. Theme is around healthcare system, cultural competency, social determinants of health, ethics, and evidenced-based decision making.
• View QEP as an opportunity for a cultural shift, therefore have endorsement by deans. Also have incorporated discussions of funds flow for IPE (across college lines) and placed institutional outcome measures.
• Challenge - relationship to patient outcomes.
• MUSC facts stated:
  a. Student’s interest with IPE is high.
  b. Students state they would like to see more interprofessional teams in the learning environment. Faculty has many responsibilities and may perceive themselves as unprepared.
  c. The best effective first step to improve interprofessional collaboration is learning about each other’s roles. Contact is not sufficient, whether informal or in a work setting.
  d. Developing IP learning can occur through building upon experiences that provide effective learning opportunities.
• Issues to consider:
  a. Ensure institutional leadership is familiar and supportive of effort.
  b. Reference institutional goals during work
  c. Engage students in the plan
  d. Technology is a helpful resource, some professions more challenging to create IPE relevancy.
  e. Recognize the need for faculty development.
• Schedule Issues - need not to be addressed from the outset. Decided to just build around it. Also, think about assessment early on.
• Basic Team Skills Training: Trained approximately 200 students.
  a. Points covered – Group vs. Team –
     ▪ Hierarchy not important in a team
     ▪ Everyone is mutually accountable
     ▪ Knowledge competencies
     ▪ Being respectful
     ▪ Avoid technical jargon
     ▪ Engage people who are quiet in the beginning of the meeting
     ▪ Important to come to a consensus
     ▪ Problem-solving – make sure you understand the problem before you try to fix it.
     ▪ Recognizing dysfunctional behavior – disagreeing beyond reason, shoulders crossed, and aggressions are not conducive to a practical team environment.
     ▪ Conduct team exercise,
     ▪ Give characteristics of an effective team member.
     ▪ Provide information on stages of team development.

II. Team Moon Trip Exercise
One individual read the directions. Participants were given 10 minutes to determine answers. After everyone had their own answers, the team of participants was given a blank sheet to come to a consensus. Rial Rolfe and Sharon Decker reported observations at the end of the exercise.

• Observer #1: Rial Rolfe stated that because the group seemed unorganized, he would have hated to be a patient. The group switched list takers and a leader did not come out. Rial Rolfe suggested perhaps did not need a leader, however needed someone to guide the discussion. Lorenz Lutherer stated he felt this was an exceptional team working group. Rial Rolfe also did not see everyone working as a team, but rather groups of teams.

• Observer #2: Sharon Decker stated there was not a communication gatekeeper until the end. Leadership did change, but probably due to the dynamics of participants. One effective comment was stated, “We need to get back to…” which helped to pull everyone back together. There were questions stated that imposed critical thinking like “we need to think about…” Ultimately, the job was done.
Facilitator’s observations: Amy Blue and David Howell stated no one tried to engage Carla Myers as she was quiet. Amy Blue advised to make sure to involve everyone. Carla Myers explained her personality is to gather information, so she only spoke at the end. Also, humor was helpful. David Straus stated humor relieves tension. There was a lot of clarifying statements among participants. David Straus stated he wanted to ask what was important and then did not care after that. David Straus thinks it is important to have a leader. Cindy Acton asked who the leader was. Lutherer Lorenz felt a short term team did not need a leader. Cindy Acton also thought to say what was important to her and then stopped giving input. Cindy Acton stated this is what happens in teams where people give their input and then bailout the rest of the time.

The answer key from NASA was given to the participants.

III. Creating Collaborative Care Team Building booklet – Faculty Champions were given a copy. David Howell explained exercise used with booklet is to blind fold participating groups and ask them to get in a square then discuss basic team skill competencies. A modified Myers-Briggs is used to bring faculty champions as a team.

IV. Goal Development - Small Group work – Faculty Champions separated into two groups. Groups shared top priorities and received feedback.

- **Academic Group** – Herb Janssen reviewed the academic group’s collaborative ideas. Started with arranging notes and condensed to three categories.
  a. Pediatrics, PA’s cannot teach pediatric residents. All teaching needs to be done by accredited faculty. This is beyond our ability to change.
  b. Establishing things inside institute that would be important – Center for Interprofessional Education, Separate Deans for interprofessional education. Rial Rolfe reaffirmed that there has been discussion about a school of education.
  c. For people who do this, reward systems
    a. Faculty – tenured promo
    b. Students – certificate regardless of where graduate from
  d. Curriculum needs to be at institutional level. Broke curriculum into methods (cognitive online).
  e. Need measures to know if done appropriately which feeds back to the rewards.

- Sharon Decker stated the information above reaffirms the strands that are already being talked about, yet not thrown out.
  a. **Non-Academic Goals** - Attitude – we can do anything. Did not attach any rank order. Student Initiated Project – most important – student government already in place with eager hard working students. A lot of community projects. Faculty and administration can give some important support. Barbara Sawyer commented this was tried a while back but it died down. There was a student that put together a symposium and participation was not good. Questioned how one is suppose to boost that.
  b. Have a good time – social functions and parties get people talking. A question arose in relation to a plan for student centers in every campus and not dominated by every group. Rial Rolfe stated the F. Marie Hall Synergistic Center was used to bring students together yet might not be being used to interact.
  c. Fellowship student Idea - can be added to their diploma or transcript. Sharon Decker stated perhaps a group of educators need to come up with what the national standards for a fellowship. Amy Blue stated there is a committee of likeminded institutions exploring the idea of a national fellowship organization.
• Film festival – show a lot of movies that have a team around teamwork ex Ocean’s Eleven. People like to watch movies and this can be an extracurricular activity. The endeavor can be handed to students in QEP advisory committee to develop.
• Student-run symposium related to interprofessional teamwork. To include poster or short presentations.
• Community – extend from local to international. Mission trips could be fostered where a lot of teamwork is necessary for success. Also, assign first year students from each school to a family and address every need of the family, including social needs.
• Curriculum - understanding roles and professional responsibilities.
• Ethics program – a member called the Office of Curriculum to ask where ethics was incorporated in clinical curriculum. Do not know how many hours there are of this integrated in the institution.
• Simulation – Suzanne Escudier commented students will skip class to go practice simulation at Harvard. Sharon Decker stated currently there are medical students that comment “I want these skills,” so organizations have been brought together and are taught by other students who have those particular set of skills.
• Virtual Reality program – difficult but doable.
• On-line non-credit courses.

V. Develop Measures, Strategies, and Action Steps – Small Group Work: Participants were asked to build on each goal and spend time thinking about measures or how they are going to know that the goal has been accomplished within the next year. Identify strategies to accomplish the goal. See attachment. Sharon Decker stated we have been charge to write a proposal for an institute. Student Fellows – President Scholars can be presented to President Baldwin.

VI. Research Opportunities – Large Group Discussion:
• Student perceptions/attitudes – qualitative and quantitative – demographics (rural vs. urban roles)
• Faculty perceptions - qualitative and quantitative - demographics
• Institute Fellowship?
• El Paso hospital
• Modeling (HSC)
• Disruptive Behavior – Bonna Benjamin stated to be very careful and clear with accusations because can be a huge black mark on their records and might in reality be petty.
• Patient Outcomes, etc. (baseline)
• Setting up the institute.
• Simulation
• Osces
• Involve students in evaluation (observers)
• Peer assessment
• Student to faculty assessment
• Team behaviors (identified vs. unidentified)

Rial Rolfe stated we need to have a research plan along with these projects. Lorenz Lutherer stated looking at many proposals and choosing between one we can assess and are important. Also, should address what others could learn from carrying this through.
I. SIPS – Student Interprofessional Society

- Began in 2007 by a student after participating in CLARION. Campus wide organization, open to all students, currently 100+ members. Have a website and Face book page. Are able to see who looks at website and send e-mail with more information.
- Social activities.
  - Wine & Cheese Social
  - Teddy Bear Clinic – reunion from the children’s hospital. Each child grabbed a teddy bear and took to different booths where students explained what they would do to the teddy bear as a professional to make it feel better.
  - Welcome Back Celebration – interprofessional team of faculty and staff served pizza and drinks and answered questions from students as to why we do IPE.
- Promotes IPE activities on-campus - IPE orientation for all first year students, will get all colleges to meet from the beginning, will show a video as to what a bad healthcare looks like.
- Officers are elected. Students are elected into the following positions: President, VP, marketing, treasurer, and secretary. Facilitator attends meetings for support and stresses policies if needed. Meet depending on the current activities.
- Liaisons from college – Students go to their classes and market SIPS in class.
- IPE asks students for their idea and volunteer time for IP Day.
- SGA and IPE collaborate with each other.
- Collaborating with National Health Sciences Students Association in Canada –
- See attached copy of SIPS constitution. Contact David Howell or Organization President – Lisa Murphy (pharmacy) for more questions.
- Brainstorming
  - Guidelines
    - The students do the work
  - Financial Support
    - Provide food
- Healthcare reform discussions
  - Interprofessional relationships
- CLARION – had students participate last year and received award.
- Student government chose interprofessional team
- Scholarly Component
  - For diploma recognition, universal guidelines across campuses
    - All campuses able to participate
    - Presidential scholarship program

Faculty recruiting – Started by sending out an e-mail, gave background information, and asked who was interested. Had a student panel share why they thought it was important.

II. Instrument for Graduate Students –
• MUSC received a grant through Clinical Translation Science Award (CTSA) through NIH.
• Collaboration –
• Continue to use Faculty Champions
• Interprofessional Day is required, no academic credit, but required. Examples of what has been done are:
  a. Have had clinician speakers.
  b. 2nd year student-small case discussion, One year included clinical trials.
  c. Ask students group themselves in their professions (approx 20) will make a report to include their
     perquisites, year structure, and stereotypes.
     ▪ What do we never want people to say, think, or do about our profession?
  d. Make sure you involve all professions in publications, mission, case scenarios, etc.

III. Scholarship & Faculty Champion Model (see handout)
Faculty Champion reviewed attachment as requested by Sharon Decker. Sharon Decker requested for feedback
make description to where Faculty Champions do not feel overloaded and in reality act as a liaison.
Modifications suggested:
• Bonna Benjamin stated it is important for deans to understand what we are doing, will need to be doing,
and to carve out time to do that work with people. The term “liaison” does not show the actual time
frame needed. Sharon Decker stated that liaison is not the only job for Faculty Champions. Sharon
Decker stated Faculty Champions will not change curriculum, but will take proposals to committees.
Adding to salary is not the only answer.
• Rial Rolfe stated Faculty Champion negotiate time with Deans according to what you need. Dean’s
retreat helped to open up the lines with the Faculty Champion’s. The Dean will work through the Chairs.
If meeting with Dean is not helpful, Faculty Champion will go with Rial Rolfe or Sharon Decker and
they will speak with Deans. Deans have asked for a retreat every six months. Some Deans felt there
could potentially be a salary supplementation was in line, however not all Deans wanted to be locked
into this. Advised Faculty Champions to inform Deans of their concerns and ask for suggestions as to
how to handle hierarchy. We cannot see the same number of patients and keep adding roles. Faculty
Champions are a critical role.
• Suzanne Escudier colleagues do not know what QEP or SACS is when explaining commitment. Would
help if someone explains it as well.
• Lorenz Lutherer stated the real reward is that you have contributed to the benefit of healthcare. It is not
benefit to have to explain what she is doing with the QEP. Benefits need to be better defined. Salary
might actually make colleagues mad because you are getting paid for taking away time from department.
Stated the perception of faculty is that they do not see importance of QEP. If they see the importance
faculty would see the importance and not question. Rial Rolfe will work with Deans and President to
mention QEP and the importance in meetings and presentations.
• Rial Rolfe is working with marketing to show Faculty Champion’s.
• Amy Blue stated observation that we are at the beginning and if in two years you still feel this way, then
you can say it is a problem. Interprofessional day, though seen as a hassle at first, it became a way to get
topic across campus and now evolved for people to plan for it and is part of culture.
• Sharon Decker asked Faculty Champions for wordsmith of the “job description.” Deans want to review
the re-modified description again. Sharon Decker will send electronic copies to the Faculty Champions
to make suggestions.
• Lorenz Luther suggested discussing the title “champions” because he feels it does not relay their job.

IV. Second Pilot Project – Brainstorm & Small Group:
Viewed video. Actor volunteers have agreed to participate throughout the whole process. The freshman nursing
students have viewed the video. Faculty Champions critiqued the video and stated the following comments.
• Bonna Benjamin stated to go in the direction as to stating where do the (dietician, physical therapy, or
nurse practitioner) professional fits in and why they are the responsible person for that.
• Lorenz Lutherer stated graduates should be able to interpret certain functions, and build on observational skills. Students need to understand research trials, IRB, identification, etc. Also, there were too many people in the room. Also, observed that no one washed their hands.
• David Straus stated that when interview prospective students he shows them a lot of books and states someone had to do the research for these books to be developed, therefore should respect researchers.
• Should consider another scenario of adequate way of informing the patient; the initial admittance of a patient requires a consent form.
• All came to a consensus that it was very confusing as to who was who.
• Bonna Benjamin suggested shortening the video.
• Sharon Decker stated the conflict of resolution will be in about two years. Also, an example of conflict resolution may be simulated scenarios like two healthcare providers that disagree on something and questions how to solve that problem.
• Physicians seemed to have a small role in vignette.
• Sharon Decker stated we now need to start modifying film to fit all disciplines.
• Bonna Benjamin suggested having multiple single-disciplines go through vignettes as well.
• Sharon Decker clarified the goal is to start a discussion about other professions roles and responsibilities.
• Suzanne Escudier stated we need to look at the comments from students who did pilot one.
• Sharon Decker stated as we start moving, before we do simulation students need to know how to use SBAR and remediation, then show video clip and question the students.
• Timeline: (Deadline is May 2010)
  2009 September–December - Have other schools look at vignette and critique it.
  2010 January –March: Write developed scenario and conduct video.

V. Next 12 months: Activities to Explore in the next 2 years:
• Student Research Day Award
• President’s Student Scholar Program (year long, medallion) – Lorenz Lutherer & David Straus
• Student Interprofessional Organization- Suzanne Escudier
• INSPIRE (interprofessional institute) – Sharon Decker
• Faculty Development Program (QEP Advisory Committee)
• Film Festival (QEP Advisory Committee-students)
  a. Links to the videos will be added to the Faculty Tool-kit
  b. A recruiting tool
  c. Business school – (Teamwork) as way to start off, can see classic examples of a team at the business school.
• Interdisciplinary Grand Rounds
• Annual Faculty Symposia
• Brown Bag Groups - discussions related to interprofessional teamwork – honor school faculty member do a brown bag lunch
• Sporting Events (Donor interaction) - Idea was for Faculty Champions to sit in box with donors at sporting events periodically to promote interprofessional teamwork initiatives. - Rial Rolfe & German Nunez
• National/International Organization
• Reward system for faculty/students
• Train-the-trainer for Faculty Champions on interprofessional teamwork
• Qualitative Workshop - Related to how to and how to write it for publishing.

• German Nunez stated we need to remember to meet SACS requirements. Rial Rolfe stated we also need to consider making this initiative live beyond the five year SACS requirement.
• Reviewed current TTUHSC Simulation Centers and their relation with multi-disciplines/relations:
  Lubbock – Institutional
  El Paso – School of Medicine
  Amarillo – Owned by School of Medicine, Amarillo College, and West Texas A&M.
  Abilene – no simulation center
  Dallas- no simulation center
  Midland/Odessa – Exam room only

• Sharon Decker reminded Faculty Champions there is money set aside for pilot projects for dissemination.

• September 2009- Rial Rolfe suggested QEP marketing kick off with tents, balloons, etc. for the new first year students. Discussed re-doing skit for students and/or Student Government Association. Rial Rolfe suggested to give a short introduction before skit.