CNU

INTERPROFESSIONAL EDUCATION

NEWSLETTER







SACRAMENTO STATE







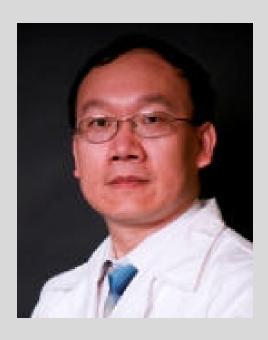




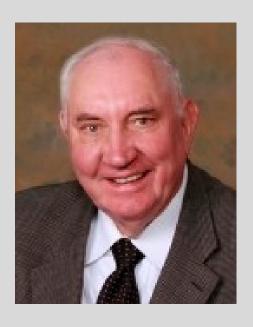


CNU IPE NEWSLETTER

Message from the Deans, College of Pharmacy & College of Medicine



Xiaodong Feng, PharmD, PhD Dean and Professor CNU College of Pharmacy



JOSEPH SILVA, MD
Dean and Professor
CNU College of Medicine

It gives us great pleasure to introduce our interprofessional education (IPE) effort at the California Northstate University (CNU). As you leaf through these pages, we hope that you agree that we have successfully developed and implemented a comprehensive and integrated IPE curriculum at CNU. For this we are delighted to partner with the California State University's School of Nursing at Sacramento and the Samuel Merritt University School of Nursing. Our menu of IPE events offers didactic, simulation and interprofessional case conferences as a required part of our curriculum. Additionally, we offer complex care advanced elective in IPE to teach students sustainability of care. In the future, we will expand our curriculum by including the CNU College of Psychology and the upcoming College of Dental Medicine. We take this opportunity to thank all the faculty, staff, and students, the CNU IPE Committee, and Dr. Ashim Malhotra who helped make our dream of providing this significant learning opportunity to CNU students a reality.

WELCOME TO CNU IPE



ASHIM MALHOTRA, B.PHARM, MS, PH.D., FAPE
Assistant Dean of Curriculum and Program Development
Director, CNU Institute of Teaching and Learning Excellence
Associate Professor
CNU College of Pharmacy

THE STATE OF IPE AT CNU

In 2010, the World Health Organization defined interprofessional education (IPE) as occurring when students from two or more professions learn about, from and with each other. Since then, the philosophy underlining an interprofessional approach in healthcare education has been widely accepted and expanded. In 2011, the Interprofessional Education Collaborative (IPEC) was formed, which defined IPE and articulated for the first time four IPE competencies desired in the healthcare graduate. Since then, IPEC has updated and further elaborated IPE Core Competencies, most recently in 2016. Additionally, healthcare accreditors responded to the need for consensus IPE definitions. For example, in February of this year, the Health Professions Accreditor's Collaborative (HPAC) adopted IPEC definitions and Core Competencies. It is interesting to note that the planning, development and implementation of an IPE curriculum at the California Northstate University (CNU) occurred in this backdrop, during the birth and incipient evolution of IPE, making CNU an early adopter of the IPE national movement.

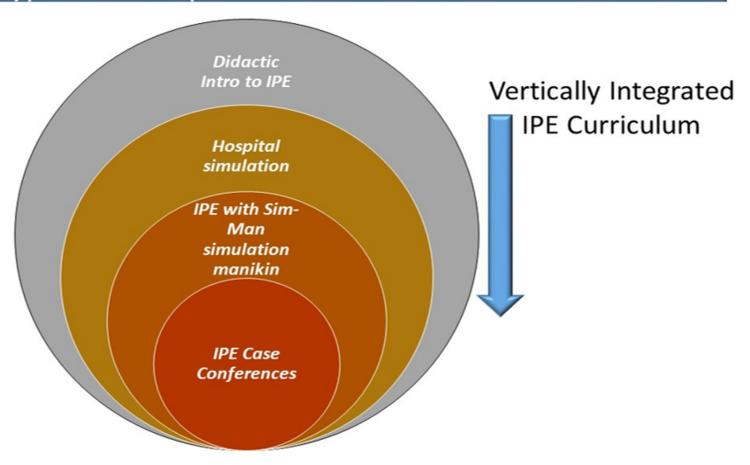
Hieu T. Tran, Dean of the CNU College of Pharmacy, and Joseph Silva, Dean of the CNU College of Medicine, with foresight and innovation, developed and implemented IPE at CNU starting in 2015. Since then, we have built a comprehensive, integrated, multi-modal (CIM) IPE program that is vertically and horizontally aligned. For the CNU College of Pharmacy, the CIM-IPE curriculum commences in the first-professional year with a didactic introduction to the principles of IPE and the IPEC Core Competencies. As Pharm.D. students progress to the second professional year, pharmacy and nursing students from the California State University at Sacramento School of Nursing are assigned to teams and develop interprofessional communication strategies as the teams undergo forming, storming, norming, and performing stages in team development. Over the next two years, our students will participate in a series of longitudinal IPE events that will increase in content and process complexity. The various teaching models employed in our curriculum include didactic IPE, high fidelity simulation with content emphasis, high fidelity simulation with process emphasis, interprofessional case conferences, and an innovative, national IPE-Hotspotting offered as an advanced elective to our third-professional year students. Thus, at CNU we strive to offer a diverse IPE curriculum taught through a variety of approaches to include meaningful, real-life simulations that have a positive impact on learners' growth and skills development.

Building and implementing an ambitious and multi-layered IPE program that operationalizes IPE for close to 300 students in each event has only been possible due to the dedication, support, and constant help from faculty, students, staff, and administrators at CNU and our partner institutions. We remain indebted to them for their dedication and incessant support of student learning. Finally, I would like to express sincere gratitude to the faculty, students, staff, and administrators of the CNU IPE Committee who have guided and helped the institutionalization of IPE at CNU.

We feel immense pride in bringing to you this first edition of a university wide IPE Newsletter. Please feel free to share your thoughts and suggestions via email to ashim.malhotra@cnsu.edu

THE COLLEGE OF PHARMACY IPE CURRICULUM AT A GLANCE

Types of Interprofessional Education Events at CNU





Mission of IPE at CNU

Our mission is to prepare students to be practice ready who can seamlessly integrate with interprofessions healthcare teams for the provision of patient-centered care.

CNU IPE Vision

Our vision is to educate students in the appropriate choice of pharmacotherapy thereby improving patient outcomes by engaging interdisciplinary expertise and working as an integrated member of the healthcare team

CNU IPE Values

Working as a team

Embracing diversity and workplace excellence

Caring about our students, our staff, our faculty, and our profession

Advancing our university, our goals, and our discipline

Responding to challenges that may impede Mission

Enhancing communication and partnership



IPE Case Conference, Pharmacy and Nursing, Spring 2019

FACULTY



NASSRINE NOUREDDINE ED.D., MSN, RN
Co-Director, CHHS IPE Center for Innovative Teaching and Learning
Sacramento State School of Nursing
California State University
Director of Saha Health Center

Breaking Silos Through Interprofessional Education

Students in health professions are educated and trained in silos. After graduation, students are expected to collaborate successfully on a team that represents many disciplines and perspectives. It is not surprising that communication problems among healthcare personnel have been implicated as a cause of most patient errors (IOM, 2001, 2003; American Association of Critical Care Nurses [AACN], 2005; Joint Commission, 2005, 2007, 2008). The National Academy of Medicine previously known as the Institute of Medicine (IOM) strongly advocates that "health professionals should be educated to deliver patient-centered care as members of an interdisciplinary team" (IOM, 2003, p. 20). Interprofessional Education (IPE) exists when students from two or more healthcare disciplines have the opportunity to "learn about, from and with each other to enable effective collaboration and improve health outcomes" (WHO, 2010, pg. 7). The overall purpose of providing IPE for healthcare students is to create a collaborative ready workforce (WHO, 2010).

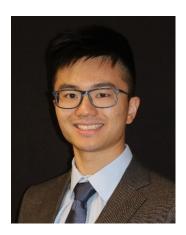
Faculty from Sacramento State University (CSUS) and California Northstate University (CNU) were proactive in breaking the silos between Nursing and Pharmacy students through their collaboration that started in 2010 and which later incorporated Medical students. Faculty from both campuses succeeded in developing a well-planned and rigorous IPE curriculum that is permanently infused as a thread in their curriculum. This involved teaching nursing students collaboratively with students from pharmacy and medicine to learn about, from, and with each other with the goal of preparing a collaborative practice-ready health care workforce. These IPE experiences are well received by students as it is evident in the feedback of nursing students who participated in one of the IPE Simulation events at CNU.

"I really liked the way they incorporated the nurses into their sim lab. The instructor really emphasized the closed-loop communication among the care team... He even asked our opinion a few times. Also, during the debrief he gives some interesting little facts" P.E. Nursing student

"There were multiple roles assigned during the SIM including all aspects of the healthcare team. There were multiple year medical students involved in the event. We had a good walk through of what we were going to be doing prior to beginning. We had a professor give us feedback in parts of the SIM to be able to focus on the take home points of the topic. The best part was the post-simulation debriefing. It was very thorough and really put the whole simulation event together by addressing high yield information." S.S. Nursing Student

Furthermore, in Collaboration with the CNU School of Pharmacy Student organization we were able to move IPE from the class room and simulation lab to a community focused multidisciplinary setting at Saha health Center, a free community clinic serving the underserved public, which I established and managed since 2013. At Saha Health Center, Nursing and Pharmacy students collaborate on providing flu shots, medication reconciliation and health education to a highly diverse patient population. This has been an extremely valuable service to the people in the community and a great experience for the students! Collaboration with the faculty and students at CNU was very rewarding!

FACULTY



VICTOR PHAN, PharmD
Assistant Professor
Clinical and Administrative Sciences
CNU College of Pharmacy

On October 11th, 2018, third year pharmacy students from CNUCOP and first year nursing students from Sacramento State University School of Nursing came together in a joint effort to collaboratively learn about acute pancreatitis in an interprofessional education simulation and case conference style. I had the good fortune to serve as a facilitator for the case study and my experience with this event was that it was a wonderful success!

To begin with, we implemented a formal and comprehensive onboarding process to allow pharmacy and nursing students to come well prepared with an understanding of interprofessional education and the process outlined for them that day. This allowed us to effectively focus on maximizing learning content while shortening the overall amount of time necessary per session. For each session, Dr. Malhotra took the lead with an informative burst lecture on acute pancreatitis. Following this, students moved to a 30 minute simulation where pharmacy and nursing students worked together in a mock clinical setting on acute pancreatitis. This allowed them to collaborate in a clinical setting and identify their strengths, weaknesses, roles, and contributions with a formal debriefing. Finally, they moved from this to an interprofessional case conference, allowing them to discuss a patient case outside of the clinical setting.

Facilitating this discussion was exciting and rewarding, balancing pharmacy and nursing responses and perspectives to highlight that there are many ways to take care of a patient and that each profession focuses on a different aspect of patient care.

Pharmacists and nurses are frequently cited as two of the most trusted healthcare professionals from a patient perspective. We must continue to do our due diligence to our patients and maintain this trust, but also to one other as healthcare professionals to develop and maintain trust as patient advocates. One way to start is to continue doing interprofessional education events such as this help to develop collegiality during the formative professional years. This day would not have been possible without the amazing hard work put it not just by the faculty, but also the nursing and pharmacy students participating in the event itself. We appreciate the nursing faculty and staff support in the simulation rooms and the enthusiasm and positive energy they brought. It was a successful event and we look forward to future collaborations!

FACULTY



DEBRA BRADY DNP, RN, CNS, CHSE
Professor of Nursing
Sacramento State Interprofessional Simulation Learning Center Coordinator
School of Nursing, California State University Sacramento

There is a major difference between a team of experts, and an expert team. Until recently in healthcare we have focused on teams of experts, educated in their "specialty silos" to address increasingly complex patient care needs. Our outcome data clearly indicates we have not been a successful as we would have liked as evidenced by the report To Err is Human (1999). Subsequently the Institute of Medicine (2003) challenged faculty in healthcare education to create learning experiences for students that focused on interprofessional education and developing expert teams of healthcare providers. Teams of practice ready students accustom to collaborating, who respected and sought out the unique and valuable contributions other disciplines brought to treating patient/family health problems. Teams that communicated openly together to focus on the best possible outcome for the patient and addressed increasingly challenging ethical issues in patient care.

To attain this goal Northstate University School of Pharmacy and Sacramento State School of Nursing codesigned IPE events to help their students learn to work together on complex patient care situations. Since 2013, over 200 pharmacy and nursing students have participated annually in IPE teams to provide care for simulation and case study patients with issues such as heart failure, diabetes, and acute pancreatitis. Evaluation statements from nursing student regarding these IPE events reflect a deep appreciation for the resource pharmacy students bring to understanding side effects of medications they should assess for, details on medication discharge teaching to prevent readmissions, and monitoring required for potential medication interactions. As one nursing student wrote "The area we have the highest risk of making an error is around medications, so it is great to understand how the pharmacist on the team is the expert resource to help address all kinds of questions. I love this, we should do more IPE." IPE events can be challenging to schedule, and have required both student groups to travel to another campus, but the benefits of learning early how to part of an expert team is already evident to our students and will be highly valuable to patients they serve.

FACULTY



THURA AL-KHAYAT, MBChB Assistant Professor Director of Medical Skill Year II CNU College of Medicine



CLAIRE BARANOV, MD Assistant Professor Director of Medical Skill Year II CNU College of Medicine

The 2018-2019 academic year has seen the 2nd year medical students participate in three Interprofessional Events. These events have given them the opportunity to interact with and learn from students from CNSU College of Pharmacy and Sacramento State School of Nursing. The cases have varied and have involved the renal, gastrointestinal, and endocrine systems.

Acute Kidney Injury was the first case of the year. This took place in September, during the renal block. The 2nd year medical students were joined by students from the COP and the Sacramento State University School of Nursing. CNU's own Dr. Murali Golconda let the case discussion and debriefing.

In October, the second IPE was held. Students from the College of Pharmacy and the College of Medicine participated. This was during the GI block and the case was a GI bleed. Dr. Nazir Habib, an intensivist and one of our community faculty members, led the case discussion and debriefing.

During their endocrine block, the students were presented with their third IPE, which centered around Diabetic Ketoacidosis. Pharmacy and nursing students also were involved with this event. Again, Dr. Habib, led the case discussion and debriefing.

The 2nd year medical students still have one IPE left this academic year. They will be joined by students from the Sacramento State University School of Nursing and the College of Pharmacy. This final IPE will take place in April. We look forward to seeing everyone then!

STUDENTS



ANHAO SAM
CNU College of Pharmacy, P3 Year
President, Student Body Council
President, Phi Lambda Sigma - Epsilon Epsilon Chapter
CAPSLEAD Researcher and Presenter

IPE-Hotspotting – A Student Perspective

I am currently enrolled in the third professional year of the Pharm.D. program at the California Northstate University College of Pharmacy (CNUCOP). In the fall of 2018, I had the unique opportunity to participate in a nation-wide complex care IPE Hotspotting learning experience. This was offered as a longitudinal elective course at the CNUCOP, which provided me with an uncommon learning experience in IPE.

As a non-traditional student, I have been gifted with the advantage of life experience. Coming to pharmacy school after over a decade as a working professional has allowed me a perspective that the traditional, and much younger pharmacy student may not have. Upon entry into the Doctor of Pharmacy program at the CNUCOP, we as students are acutely aware that in 4 short years [and often much sooner than this] we will be engaging directly with the patient population. We are expected to learn about the pathophysiology of various diseases and their respective pharmacotherapeutic treatments. We are groomed to be the medication experts on the healthcare team. Across the spectrum of healthcare education, the focus is on medical intervention. As such, we as health professionals (pharmacists, physicians, nurses, among others) are extensively trained in medical intervention, yet we are rarely provided with training on the non-medical aspects of treatment for the patient. It would seem intuitive that a patient's psychosocial state would play a very big part in course of their treatment and recovery. When we are not burdened by social and psychological stresses, we are happier; and when we are happier, we tend to function better in all aspects of life. This applies to our physical recovery and overall well-being. Then why is there so little attention to this part of patient care? In my view, this is clearly and unmet need in our current healthcare education systems.

Recently, the opportunity to participate in a course that allows direct patient engagement along with nursing students, physicians, and social workers was presented to us. This was an amazing opportunity that was unlike any other that had been offered previously. The IPE-Hotspotting program is the only IPE initiative I have taken part in that allows us [as students] to engage the various barriers to patient care, particularly those that pertain to the underserved populations. With the guidance of the Hotspotting team at the Camden Coalition we explored the various non-medical barriers to access of healthcare using real patient cases. We discussed ways to give these patients the tools to help themselves. Most importantly, we discussed each patient's current social and psychological state and how this was impacting their overall treatment.

From this experience, I have been given an additional perspective on patient care. I have come to appreciate that medical intervention alone is not enough for the long-term success in treatment of these patients. I am glad IPE-programs such as this exist which offer innovative and cutting edge opportunities in IPE.

STUDENTS



SHAWNA EVANS
CNU College of Pharmacy, P3 year
Class Co-President
Student Body Council
Vice President of American Society of Consultant Pharmacists

IPE: The New Frontier for Training Multidisciplinary Healthcare Professionals

The Interprofessional Education (IPE) Program is a unique program that offers future healthcare professionals the opportunity to extensively collaborate during a simulated situation that teaches them how to work effectively, efficiently and professional while being in a multidisciplinary environment. It presents the students a chance to engage and prepare for their roles in a team-based setting, this is an indispensable skill to acquire throughout the didactic years because it allows the students to apply what they have learned from their courses in an actual situation; thus, reinforcing their course material. The IPE program also offers the students the prospect of being prepared for their internships as well as their desired professions. The program teaches the students how to collectively work with other healthcare professionals who are not within their field. The main component of the program is that it simulates and reproduce a realistic situation that the students may encounter in the real-world; thus, this early preparation could be a vital component that allows the students to understand their roles and duties when working in a team in a hospital setting. Programs such as these could be the missing link that is necessary for students to thrive in a working environment that replies heavily on collaborative efforts because the continual exposure to these simulated situations allow the students to improve on their skillset of both knowledge and communication. During the IPE events the students are able to jointly weave their ideas together in an efficacious manner that ultimately serves in the best interest of their patients. Personally, I think that the IPE program is essential because it gives the students firsthand experiences of what they could experience on their rotations. Consequently, repeated exposure of these events might successfully prepare the students to be better forthcoming healthcare professionals who are able to amalgamate vastly to produce the best care for their patients.

INTERPROFESSIONAL TEAMS AT WORK!





