

School of Health Professions Medical Laboratory Sciences Interprofessional Education Plan Academic Year 2022-2023

Background

UT Health San Antonio's Strategic Vision for fiscal years 2018-2022 identifies Teamwork & Collaboration as a core value, and it also highlights strengthening interprofessional team-based learning opportunities across the organization as a key strategy. The Quality Enhancement Plan (QEP), Linking Interprofessional Networks for Collaboration (LINC), is an institution-wide effort to advance our Strategic Vision by enhancing interprofessional education (IPE) at UT Health San Antonio. Key measures of success include increasing student knowledge and skills related to IPE, demonstrating schools' and programs' adoption of IPE as a strategic priority through increased activities integrated into programs' curricula and increasing opportunities for student IPE experiences across the institution. To contribute to the coordinated implementation of the QEP and to demonstrate compliance with program-specific IPE accreditation standards, the Associate Dean for Academic and Student Affairs within the School of Health Profession (SHP) and the Chair of the SHP IPE Committee are leading the development and implementation of program-specific IPE plans through the contributions and efforts of SHP IPE Committee members and program leaders within each SHP department.

Profession-Specific Accreditation Mandate

The National Accrediting Agency for Clinical Laboratory Sciences Programs suggests the integration of IPE into the Medical Laboratory Science curriculum, as evidenced by the following standards/expectations:

National Accrediting Agency for Clinical Laboratory Sciences Programs: <u>http://www.naacls.org/</u>

- See Program Directors page for accreditation resources: <u>http://www.naacls.org/Program-Directors.aspx</u>
 - <u>2012 standards</u> (updated 11/2020). "NAACLS Standards for Accredited and Approved programs." Adopted 2012, Revised through 11/2020. Includes MLS, DCLS, and other programs under NAACLS.
 - "Principles of interpersonal and interdisciplinary communication and team-building skills" mentioned throughout, including pp 57, 61, 73, 80 of .pdf document. These pages are specific to programs other than MLS or DCLS.

Medical Laboratory Science IPE PLAN

In accordance with HPAC recommendations, this IPE plan consists of four components: rationale, outcomebased goals, deliberate design, and assessment & evaluation. Details for each component are included below:

Rationale

Medical Laboratory Sciences (MLS) is known as the "hidden profession" and does not interact directly with patients. However, medical laboratory scientists are responsible for resulting out diagnostic tests of which physicians base over 70% of their clinical decisions. Alignment with campus partners through the University's QEP provides a framework by which the MLS can interact with other healthcare professions, including clinicians, physicians, nurse practitioners, physical and occupational therapists, speech language pathologists, and respiratory therapists who treat patients. These patients often have comorbidities diagnosed by lab results which were produced by medical laboratory scientists. Interprofessional education allows all professionals to

learn from each other and it reduces professional hierarchy while helping to promote equality and respect. MLS helping other medical health professionals to understand the processes involved once a laboratory requisition has been initiated. The laboratory role begins with the preanalytical component (everything involving correct specimen collection), through the analytical component (actual testing of the specimen) ending with the post-analytical component of reporting a result. This aids in explaining and clarifying the role, expertise and responsibilities that each profession contributes to the total care of the patient. Through these IPE activities we not only enhance the student's education but address and correct the inefficiencies and ineffectiveness of a disjointed healthcare team that does not communicate, and which can negatively impact the health of the patient. Through various IPE activities our profession strives to improve both the laboratory testing process and patient safety.

Outcome-based Goals

Table 1. Division of Medical Laboratory Sciences IPE Plan – Goals Identified through Crosswalk of Interprofessional Practice-Relevant Competency Frameworks

Expected Behavior for	Domains of Competence	IPEC sub-competencies	Division of MLS sub-
MLS Student			competency
Demonstrates the ability to	Communicate with	CC4: Listen actively and	Communicate opinions
communicate effectively	patients, families,	encourage ideas and	based on unique expertise
with patients, families, and	communities, and	opinions of other team	with confidence, clarity and
	professionals in health and	members.	respect to the healthcare
individuals and in teams	other fields in a responsive		team providing patient
	and responsible manner		care, including constructive
	that supports a team	instructive feedback to	feedback to team members
	approach to the promotion		to enhance patient care
	and maintenance of health	-	and outcomes.
	and the prevention and	responding respectfully as a	
	treatment of disease.	team member to feedback	
		from others.	
		CC6: Use respectful	
		language appropriate for a	
		given difficult situation,	
		crucial conversation, or conflict.	
		TT3: Engage health and	
		other professionals in	
		shared patient-centered	
		and population-focused	
		problem-solving	
		TT4: Integrate the	
		knowledge and experience	
		of health and other	
		professions to inform	
		health and care decisions,	

while respecting patient
and community values and
priorities/preferences for
care
TT6: Engage self and others
to constructively manage
disagreements about
values, roles, goals, and
actions that arise among
health and other
professionals and with
patients, families and
community members

Deliberate Design

Table 2. IPE Activities within the B.S. & M.S. Medical Laboratory Sciences IPE Plan

Program Year & Semester	Name of IPE Activity (Type of IPE Activity)	Learners from Other Programs Involved (Abbreviation & Year)	Associated Course/Place in Curriculum (If Applicable)	Faculty Leader(s) from Program	Faculty Leader(s) from Other Programs	Timeframe to be Completed (Month)
Year 1 Fall	<u>LINC Common IPE</u> <u>Experience</u> (Didactic IPE – Collaborative Online Learning)	Learners from all programs at UT Health San Antonio are placed in interprofessional groups of 4 and group composition varies as a result.	INTD 5031		LINC Didactic IPE Initiative Members: Meredith Quinene (SHP-PAS), Bobby Belarmino (SHP-PT), Noorpreet Kaur (SOD), Daniel Saenz (GSBS), Sadie Trammell Velasquez (LSOM) and Cynthia L. Wall (SON), with support from the LINC Faculty Council Members: Moshtagh Farokhi (SOD), Rekha Kar (GSBS), Temple Ratcliffe (LSOM), Kathleen Stevens (SON), and Joseph Zorek (LINC Director)	Fall (Sept to Oct)
Year 1 Spring	TeamSTEPPS (Didactic IPE – Collaborative Online Learning)	PT, SLP, MLS, RC, PA Year 1	INTD 5032	Cordelia Kudika	Dr. David Henzi (SHP)	Spring (May)
Year 2 Fall	MLS2/MS1 (Didactic IPE)	MLS Year 2	MLSC 6002	Cordelia Kudika Terri Murphy- Sanchez		Fall (Nov)
Year 2 Fall	Student Grand Rounds (Co- Curricular IPE)	MLS Year 2				Fall (Nov)
Year 2 Spring	<u>Student Grand Rounds</u> (Co- Curricular IPE)	MLS Year 2		Terri Murphy- Sanchez		Spring (Apr)
Year 2 Spring	Professional Issues in Healthcare (Didactic IPE)	MLS Year 2 OT Year 2 PT Year 1	MLSC 4006/6008 OCCT 7019 PHYT 8122	George Kudolo	Dr. Ricky Joseph (SHP-OT) Dr. Michael Geelhoed (SHP-PT)	Spring (Mar)
TBD	LINC Simulation IPE Experience (Didactic IPE – Simulation)	Learners from all programs at UT Health San Antonio will be placed in interprofessional groups of 4 and group composition will vary as a result.	TBD		LINC Simulation IPE Initiative Members: Sadie Trammell Velasquez (LSOM), James Cleveland (SON), Diane Ferguson (LSOM), Rebecca Moote (LSOM), David Ojeda Diaz (SOD), Kathryn Parke (SON), and Bridgett Piernik-Yoder (SHP-OT) with support from the LINC Faculty Council Members: Moshtagh Farokhi (SOD), Rekha Kar (GSBS), Meredith Quinene (SHP), Temple Ratcliffe (LSOM), Kathleen Stevens (SON), and Joseph	TBD

				Zorek (LINC Director)	
TBD	LINC Clinical IPE	Learners from all	TBD	LINC Clinical IPE Initiative Members:	TBD
	Experience (Didactic IPE	programs at UT Health		Temple Ratcliffe (LSOM), Angela	
	 Collaborative Online 	San Antonio are placed ir		Kennedy (SHP), Rebecca Moote	
	Learning & Clinical IPE)	interprofessional groups		(LSOM), Elena Riccio Leach (SOD) and	
		of 4 and group		Marta Vives (SON) with support from	
		composition will vary as		the LINC Faculty Council Members:	
		a result.		Moshtagh Farokhi (SOD), Rekha Kar	
				(GSBS), Meredith Quinene (SHP),	
				Kathleen Stevens (SON), and Joseph	
				Zorek (LINC Director)	

DEFINITIONS

Interprofessional Education (IPE) = Proposed by the World Health Organization and endorsed by IPEC, takes place "when students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes" (WHO, 2010; IPEC, 2016). This emphasis on students aligns well with UT Health San Antonio's QEP, and the expectation is that student-to-student interprofessional learning will constitute the majority of IPE activities on campus. This table is reserved for student-to-student IPE activities.

Didactic IPE = IPE activities that take place in classroom and simulation settings as part of formal curricula (i.e., credit-bearing coursework)

Co-Curricular IPE = IPE activities that take place outside of formal curricula (volunteer experiences that augment learning/professional development)

Clinical IPE = IPE activities that take place in clinical settings as part of formal curricula (i.e., credit-bearing coursework).

IPE Partners = Students from other professions/programs involved including their year(s) of study

Table 3. IPE Activities Currently Under Development with Implementation Planned for Academic Year 2023-2024.

Program Year & Semester	IPE Activity (Type of	Learners from Other Programs Involved (Abbreviation & Year)	Associated Course/Place in Curriculum (If Applicable)	Faculty Leader(s) from Program	Faculty Leader(s) from Other Programs	Timeframe to be Completed (Month)
	Health Fair	PA; SON (unknown year)	N/A	Terri Murphy-Sanchez	unknown	unknown

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Assessment and Evaluation

The LINC Core IPE Measurement Plan at UT Health San Antonio forms the backbone of IPE assessment/evaluation for all UT Health San Antonio program-specific IPE plans. Valid and reliable tools to measure change in reactions, attitudes/perceptions, skills, and behaviors are included. Table 5 and Figure 1 below provide additional information on tools and administration schedules for the LINC Core IPE Measurement Plan.

Level*	Measurement Tool ^{**}	Constructs	Items		
Level 1 Reaction	Interprofessional Reactions Tool (IPRT)	 Preparation Relevance Importance Satisfaction 	 13 self-reported items: 9 quantitative items using a 5-point Likert-type response scale; and, 4 qualitative items soliciting written responses to openended prompts 		
Level 2a Attitudes/ Perceptions	Student Perceptions of Interprofessional Clinical Education– Revised, Version 2 (SPICE-R2)	 Interprofessional Teamwork and Team-based Practice Roles & Responsibilities for Collaborative Practice Patient Outcomes from Collaborative Practice 	10 self-reported, quantitative items using a 5-point Likert-type response scale		
Level 2b Skills Level 3 Behaviors	Interprofessional Education Collaborative Competency Self- Assessment Tool, Version 3 (IPEC-3)	 Interprofessional Interactions Interprofessional Values 	16 self-reported, quantitative items using a 5-point Likert-type response scale		
	Interprofessional Collaborative Competency Attainment Scale– Revised (ICCAS-R)	 Communication Collaboration Roles & Responsibilities Collaborative patient-family centered approach Conflict management/ resolution Team functioning 	21 self-reported, quantitative items using a 5-point Likert-type response scale		
* Modified Kirkpatrick levels 2b (skills) and 3 (behaviors) are combined in this table because IPEC-3 and ICCAS-R report to measure both levels ** See Appendices I-IV for complete versions of selected measurement tools					

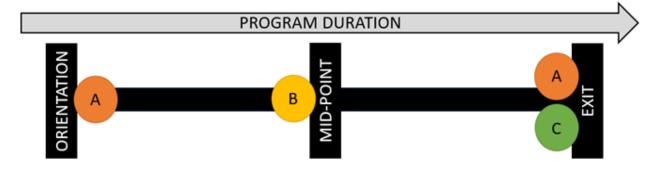
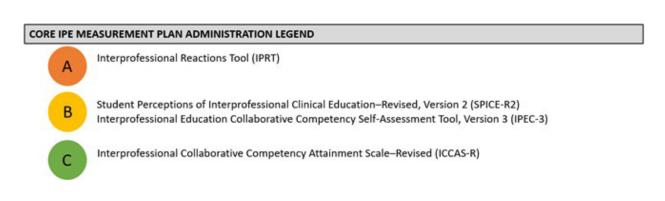


Figure 1. Administration Schedule of the LINC Core IPE Measurement Plan



LINC Core IPE Measure A1 (pre) is administered in August, LINC Core IPE Measure B is administered in September, and LINC Core IPE Measure A2 (post) & C are administered in April.

The MLS IPE Plan was initially approved by the SHP IPE Committee and SHP Curriculum Committee on November 12, 2020.

The initial MLS IPE Plan was then updated and approved by the MLS Division within the Department of Health Sciences on October 21, 2022.

The approved AY2022-2023 MLS IPE Plan was submitted to LINC on October 26, 2022.