

School of Health Professions Department of Communication Sciences & Disorders 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 American Speech-Language-Hearing Association (ASHA) joined the Interprofessional Education Collaborative (IPEC) in 2017 and included IPE/IPP language in speech-language pathology scope of practice in 2018. In the newly implemented 2020 Speech-language Pathology Certification Standards, ASHA has added the new language to promote IPE/IPP. ASHA recommends the integration of IPE/IPP into the scope of practice in Speech-language Pathology, as evidenced by the following standards:

Standard V-B: Supervised clinical experiences should include interprofessional education and interprofessional collaborative practice and should include experiences with related professionals that enhance the student's knowledge and skills in an interdisciplinary, team-based, comprehensive service delivery model.

Speech-Language Pathology IPE Plan

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

Rationale

The American Speech-Language-Hearing Association (ASHA) joined the Interprofessional Education Collaborative (IPEC) in 2017 and included Interprofessional Education (IPE)/Interprofessional Practice (IPP) language in Speech-language Pathology Scope of Practice in 2018. In the newly implemented 2020 Speech-language Pathology Certification Standards, ASHA has added the new language to promote IPE/IPP. ASHA recommends the integration of IPE/IPP into the scope of practice in Speech-language Pathology, as evidenced by the Standard V-B (see above).

The speech-language pathology program, under the Department of Communication Sciences and Disorders (CSD), at UT Health San Antonio launched in the spring of 2017. The integration of IPE/IPP in the curricular design and clinical education has been strategic to date. In order to match the growth of the program in both graduate students and faculty, the CSD faculty have set the goal to plan and introduce one IPE/IPP experience per year.

Initially, the speech-language pathology program integrated co-curricular activities sponsored by the School of Health Professions. These activities focused on knowledge of other professions and their respective scopes of practice. In fall 2019, a partnership with the School of Nursing allowed for the beginnings of an IPP experience between nursing and SLP students. This partnership and associated clinical activity were chosen as clinical experience in screening and prevention as those skills are also clinical certification skills and experiences required for SLP students.

The timely and intentional progression of IPE/IPP activities allows the faculty to directly align activities with the overall vision and goals of the department, the research and clinical pursuits of the faculty members, ASHA's standards, and the university's QEP. The SLP program seeks to focus on collaborative interprofessional supervised clinical experiences with current partners within the School of Nursing while also pursuing partnerships with additional schools, departments and/or professions. This will allow SLP graduate students to develop experiences with related professionals that enhance the student's knowledge and skills in an interdisciplinary, team-based, comprehensive service delivery model.

Outcome-based Goals

Table 1. Department of Communication Sciences & Disorders IPE Plan – Goals Identified through Crosswalk of Interprofessional Practice-Relevant Competency Frameworks

The Communication Sciences & Disorders Department uses the Interprofessional Education Collaborative (IPEC) core competency framework to guide curricular development to enable graduates to work effectively with other health care providers for optimal patient outcomes. We use the four Core Competencies for Interprofessional Collaborative Practice to assess student objectives for collaborative practice.

Expected Behaviors for SLP Student	Domains of Competence	IPEC Sub-Competencies	Kirkpatrick's Learning Outcome Level
1. Demonstrate knowledge of the principles of interprofessional team dynamics to perform effectively in different team roles	IPEC Competency 2 – Roles/Responsibilities	 RR1: Communicate one's roles and responsibilities clearly to patients, families, community members, and other professionals RR10: Describe how professionals in health and other fields can collaborate and integrate clinical care and public health interventions to optimize population health 	Level 2a / 2b
2. Demonstrate collaboration through communication and patient care within an interprofessional team	IPEC Competency 4 - Teams and Teamwork	TT8: Reflect on individual and team performance for individual, as well as team, performance improvement TT11: Perform effectively on teams and in different team roles in a variety of settings	Level 2a / 2b Level 3
3. Completion of LINC Simulation IPE Experience	IPEC Competencies 3 & 4: Interprofessional Communication and Teams/Teamwork	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 CC1: Choose effective communication tools and techniques, including information systems and communication technologies, to facilitate discussions and interactions that enhance team function. CC2: Communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible. CC6: Use respectful language appropriate for a given difficult situation, crucial conversation or conflict 	
4. Completion of LINC Clinical IPE Experience	IPEC Competencies 2, 3 & 4: Interprofessional Communication, Roles/Responsibilities and Teams/Teamwork	 CC7: 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 (University of Toronto, 2008). TT2: Develop consensus on the ethical principles to guide all aspects of teamwork. TT8: Reflect on individual and team performance for individual, as well as team, performance improvement. RR9: Use unique and complementary abilities of all members of the team to optimize health and patient care. 	

Deliberate Design

Table 2. IPE Activities within the Master of Speech-Language Pathology 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)	programs at UT Health	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	<u>TeamSTEPPS (</u> Didactic IPE)	OT, PT, MLS, SLP, RT Year 1	INTD 5032	David Henzi	Bridget Piernik-Yoder (SHP-OT) George Kudolo (SHP-MLS) Tammy Harris (SHP-PA) Bobby Belarmino (SHP-PT)	Spring (Jan to Feb)
Year 1- Fall & Spring	Faculty and <u>student</u> grand rounds (throughout the 3 years) (Co-Curricular IPE)	PT, SLP, MLS, RC, PA, Year 1		Fang-Ling Lu	David Henzi (SHP) and faculty from other programs	Fall & Spring
Year 1 Summer		SLP Year 1 OT Year 1 PA Year 1 Pharm Year 2	MSLP 5015	Angela Kennedy Cathy Torrington Eaton	Rebecca Moote (PharmD) Leticia Bland (PA) OT Faculty TBD	Summer (Jun to Jul)
Year 2 Fall	Crossroads of Dental and SLP Service Delivery (Co- curricular)	SLP Year 2 Dental Year 2 &3	n/a	Angela Kennedy Casey Taliancich-Klinger	Noorpreet Kaur (SOD)	Fall (October to November)
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),	TBD

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

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-tostudent interprofessional learning will constitute the majority of IPE activities on campus. That said, HPAC provided guidance that offers an expanded interpretation of "from" and "with" highlighting the importance of student learning that takes place from and/or with practitioners or professionals (HPAC, 2019). Student-to-practitioner and/or student-toshould be included in this table if it exists in the program.

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

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 2 - Fall	AAC Vendor Fair	OT PT	MSLP 6000	Angela Kennedy Nicole Barnes	Ana Allegretti (SHP-OT)	TBD
DEFINITIONS						

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

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 4. Learning Activities Relevant to Preparation for Interprofessional Practice that DO NOT Meet the Formal Definition of Interprofessional Education

Program Year & Semester	Name of IPE Activity (Type of IPE Activity)	Associated Course/Place in Curriculum (If Applicable)	Faculty Leader(s) from Program	Interprofessional Partners Included	Timeframe to be Completed (Month)
		n/a	Fang-Ling Lu	от	September
	Dysphaqgia				
Fall Year 1	Guest Lecture – OT - AAC	n/a	Angela Kennedy	от	October

DEFINITION

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. That said, HPAC provided guidance that offers an expanded interpretation of "from" and "with" highlighting the importance of student learning that takes place from and/or with post-graduate trainees (e.g., residents) or practitioners/professionals (HPAC, 2019). *Student-to-trainee and/or student-to-practitioner/professional IPE should be included in this table if it exists in the program.*

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

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

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

Interprofessional Partners = Post-graduate trainees (e.g., residents) or practitioners/professionals from other professions.

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
and ICCAS-R I	report to measure both l) and 3 (behaviors) are combined evels ersions of selected measuremen	

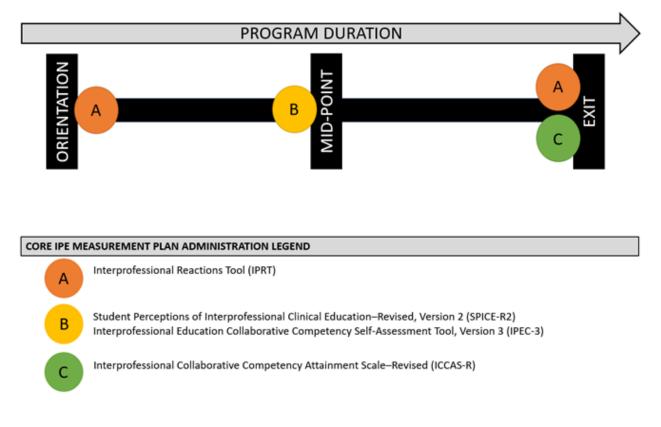


Figure 1. Administration Schedule of the LINC Core IPE Measurement Plan

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

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

The initial SLP IPE Plan was then updated and approved by the SLP Division within the Department of Communication Sciences & Disorders on October 26, 2022.

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