

# School of Health Professions Department of Communication Sciences & Disorders Interprofessional Education Plan Academic Year 2024-2025

# Background

UT Health San Antonio's Strategic Plan for fiscal years 2023-2027 continues to emphasize Teamwork & Collaboration as a core value. The Quality Enhancement Plan (QEP), *Linking Interprofessional Networks for Collaboration (LINC)*, is an institution-wide effort to advance our Strategic Plan 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 2023 Speech-language Pathology Certification Standards, ASHA has added the new language to promote IPE/IPP. The 2023 ASHA standards specifically incorporate Interprofessional Education (IPE) and Interprofessional Practice (IPP) competencies within several key areas:

**Standard 3.1:** This standard, under the curriculum requirements for both audiology (3.1A) and speech-language pathology (3.1B), includes "Professional Practice Competencies." It requires programs to provide opportunities for students to develop skills necessary for collaborative practice, accountability, and effective communication in interprofessional teams. This component emphasizes the integration of IPE/IPP across coursework to prepare students for team-based care environments

**Standard 3.4:** This standard addresses diversity within the curriculum and supports the inclusion of IPE/IPP by ensuring that students are prepared to work with diverse teams and populations. It highlights the importance of understanding the roles of various professionals and engaging with other disciplines effectively

**Clinical Education Standards (3.8)**: Within clinical education, this standard underscores client welfare and emphasizes interprofessional collaboration. Programs must ensure that students gain experience working alongside other healthcare professionals to maximize patient outcomes through collaborative, team-based approaches

These standards demonstrate ASHA's commitment to integrating IPE/IPP into professional training, reflecting the growing need for collaborative care models in healthcare and educational settings.

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# **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 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 program has been strategic and purposeful to best align with the student educational and clinical skill development throughout the duration of the program. 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 new 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. Since 2017, the department continues to integrate one activity per year and now offers opportunities for co-curricular and clinical IPE in partnerships with other SHP programs and the Schools of Medicine, Nursing, and Dentistry.

The timely and intentional progression of IPE/IPP activities allows the faculty to align activities with the overall vision and goals of the department, the research and clinical pursuits of the faculty members, ASHA standards, and the university's QEP. The SLP program seeks to focus on continuing to build intentionally designed and collaborative interprofessional experiences with current partners 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 healthcare 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		
Demonstrate knowledge of the	IPEC Competency 2 –Roles and	RR1: Include the full scope of knowledge,	Level 2a / 2b		
principles of interprofessional team	Responsibilities	skills, and attitudes of team members to			
dynamics to perform effectively in		provide care that is person-centered, safe,			
different team roles		cost effective, timely, efficient, effective,			
		and equitable.			
		RR2: Collaborate with others within and			
		outside of the health system to improve			
		health outcomes.			
	IPEC Competency 1 – Values and Ethics	VE5: Value the expertise of health			
	, ,	professionals and its impacts on team			
		functions and health outcomes.			
		VE9: Maintain competence in one's own			
		profession in order to contribute to			
		interprofessional care.			
Demonstrate collaboration through	IPEC Competency 4 - Teams and	TT3: Practice team reasoning, problem-	Level 2a / 2b		
communication and patient care within	Teamwork	solving, and decision-making	Level 3		
	- Carrivork	<b>TT6:</b> Reflect on self and team performance			
an interprofessional team		to inform and improve team effectiveness.			
		TT5: Apply interprofessional conflict			
		management methods, including identifying			
		conflict cause and addressing divergent			
		perspectives.			

IPEC	Competencies 3 - Communication	CC1: Communicate one's roles and	
	r	responsibilities clearly.	
		CC6: Use constructive feedback to connect,	
	ā	align, and accomplish team goals.	
		CC7: Examine one's position, power,	
	ŀ	nierarchical role, unique experience,	
	$\epsilon$	expertise, and culture towards improving	
	C	communication and managing conflicts.	

# **Deliberate Design**

# Table 2. IPE Activities within the Master of Science in Speech-Language Pathology IPE Plan

Program Year &	Name of	Learners from Other	Associated Course/Place	Faculty Leader(s) from	Faculty Leader(s) from Other	Timeframe to be
Semester	IPE Activity (Type of	Programs Involved	in Curriculum	Program	Programs	Completed (Month)
	IPE Activity)	(Abbreviation & Year)	(If Applicable)			
	LINC Common IPE Experience (IPE Type: Curricular IPE Sub-type: Classroom- Collaborative Online Learning)	Learners from all programs at UT Health San Antonio are placed in interprofessional groups of 3-4 and group composition varies as a result.	Program Requirement		LINC Didactic IPE Initiative Members: Moshtagh Farokhi (SOD), Bobby Belarmino (SHP-PT), Aesha Aboueisha (LSOM), Daniel Saenz (GSBS), and Cynthia L. Wall (SON), with support from the LINC Faculty Council Members: Cathy Torrington Eaton (SHP), Rekha Kar (GSBS), Temple Ratcliffe (LSOM), Representative TBD (SON), and Doseph Zorek (LINC	
Year 1- Fall & Spring	Faculty and student grand rounds (throughout the 3	PT, SLP, MLS, RC, PA, Year 1	Optional	Fang-Ling Lu	Executive Director) David Henzi (SHP) and faculty from other programs	Fall & Spring

	years) (IPE Type: Co-Curricular IPE Sub-type: Classroom)					
Year 1 Spring	IPE Sub-type: Blended –	Learners from all programs at UT Health San Antonio are placed in interprofessional groups of 3-4, and group composition varies as a result.	Program Requirement		LINC Simulation IPE Initiative Members: Sadie Trammell Velasquez (LSOM), James Cleveland (SON), Diane Ferguson (LSOM), Rebecca Moote (LSOM), David Ojeda Diaz (SOD), Representative TBD (SHP), and Kathryn Parke (SON) with support from the LINC Faculty Council Members: Moshtagh Farokhi (SOD), Rekha Kar (GSBS), Cathy Torrington Eaton (SHP), Temple Ratcliffe (LSOM), Representative TBD (SON), and Joseph Zorek (LINC Executive Director)	
Year 1 Spring	An Interprofessional Objective Structured Clinical Exam (iOSCE) for Health Literacy	Dental Assistant; Nursing	Program Requirement – MSLP 5002	Angela Kennedy	Melanie Stone (LSOM); Carol Nguyen (SOD)	Spring (Feb to Mar)
Year 2 Fall	Creating a Clinical Interprofessional Collaborative on Oral Care for Patients with Swallowing Disorders: Crossroads of Dental and SLP Service Delivery  (IPE Type: Co-curricular IPE Sub-type: classroom/clinical) (IPE Type: Co-curricular IPE Sub-type: classroom/clinical)		Program Requirement	Angela Kennedy Fang-Ling Lu	Noorpreet Kaur (SOD) Annetty Soto (SOD)	Fall /Spring
Year 2 Fall	AAC Vendor Fair (IPE Type: Curricular)		Program Requirement – MSLP 6000	Michelle Parish	Ana Allegretti (SHP)	Fall (October)
Year 2 Spring	LINC Clinical IPE Experience (IPE Type: Curricular IPE Sub-type: Blended –	Learners from all programs at UT Health San Antonio will be	Program Requirement	Angela Kennedy	LINC Clinical IPE Initiative Members: Temple Ratcliffe (LSOM) Rebecca Moote (LSOM), Angela Kennedy	Spring (Jan to Mar)

Classroom-Collaborative	placed in	(5	SHP), Elena Riccio Leach (SOD) and	
Online Learning & Clinical)	interprofessional groups	N	Marta Vives (SON) with support from	
	of 3-4 and group	tl	he LINC Faculty Council Members:	
	composition will vary as	N	Noshtagh Farokhi (SOD), Rekha Kar	
	a result.	(0	GSBS), Cathy Torrington Eaton (SHP),	
		R	epresentative TBD (SON), and	
		Jo	oseph Zorek (LINC Executive	
		D	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.

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

<u>IPE Types</u> = Curricular: IPE activities within formal curricula (e.g., credit-bearing courses, clerkships); Co-Curricular: IPE activities outside formal curricula (i.e., volunteer experiences that augment learning/professional development).

<u>IPE Sub-types</u> = Classroom: IPE activities in a classroom setting, including in-person and online; Simulation: IPE activities in a simulation setting, including in-person and online; Clinical: IPE activities in a clinical setting allowing for practical experiences involving direct patient care; Community: IPE activities in a community-based setting allowing for practical experiences that do not involve direct patient care; Blended: Any combination of IPE Sub-types.

### FOOTNOTE

See Assessment & Evaluation section for more details on how learning outcomes from this IPE Plan are measured.

# Table 3. IPE Activities Currently Under Development with Implementation Planned for Academic Year 2025-2026.

Program Year & Semester	IDE Activity /Type of	Learners from Other Programs Involved (Abbreviation & Year)	Course/Place in	Faculty Leader(s) from Program	Faculty Leader(s) from Other Programs	Timeframe to be Completed (Month)
	Childhood Development Lab	ОТ, РТ		Michelle Parish; Angela Kennedy	TBD	Sept-Oct.

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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 Learning Activity (Type of Learning Activity)	Associated Course/Place in Curriculum (If Applicable)	Faculty Leader(s) from Program	Interprofessional Partners Included	Timeframe to be Completed (Month)
	Guest Lecture: Assessment and Treatment of Swallowing Disorders	OCCT 6037: O.T. Process: Adult Neuromuscular Dysfunction	Fang-Ling Lu	Michael Bermudez (OT)	Fall (Sep)
n/a	Guest Lecture: AAC	GEND 8078	Angela Kennedy	Traci Cowan	Spring (January)

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

<u>IPE Types</u> = Curricular: IPE activities within formal curricula (e.g., credit-bearing courses, clerkships); Co-Curricular: IPE activities outside formal curricula (i.e., volunteer experiences that augment learning/professional development).

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IPE activities in a clinical setting allowing for practical experiences involving direct patient care; Community: IPE activities in a community-based setting allowing for practical experiences that do not involve direct patient care; Blended: Any combination of IPE Sub-types.

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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.

Table 5. Tools and Targeted Learning Outcomes of the LINC Core IPE Measurement Plan

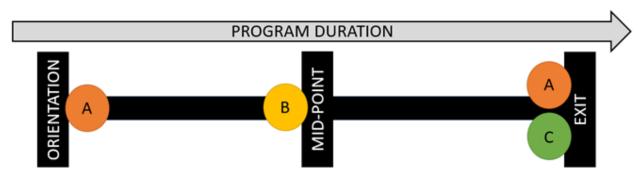
Level*	Measurement Tool**	Constructs	Items
Level 1 Reaction	Interprofessional Reactions Tool (IPRT)	<ul><li>Preparation</li><li>Relevance</li><li>Importance</li><li>Satisfaction</li></ul>	<ul> <li>13 self-reported items:</li> <li>9 quantitative items using a 5-point Likert-type response scale; and,</li> <li>4 qualitative items soliciting written responses to openended prompts</li> </ul>
Level 2a Attitudes/ Perceptions	Student Perceptions of Interprofessional Clinical Education— Revised, Version 2 (SPICE-R2)	<ul> <li>Interprofessional         Teamwork and Teambased Practice</li> <li>Roles &amp; Responsibilities for Collaborative Practice</li> <li>Patient Outcomes from Collaborative Practice</li> </ul>	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)	<ul> <li>Interprofessional Interactions</li> <li>Interprofessional Values</li> </ul>	16 self-reported, quantitative items using a 5-point Likert-type response scale
	Interprofessional Collaborative Competency Attainment Scale– Revised (ICCAS-R)	<ul> <li>Communication</li> <li>Collaboration</li> <li>Roles &amp; Responsibilities</li> <li>Collaborative patient-family centered approach</li> <li>Conflict management/resolution</li> <li>Team functioning</li> </ul>	21 self-reported, quantitative items using a 5-point Likert-type response scale

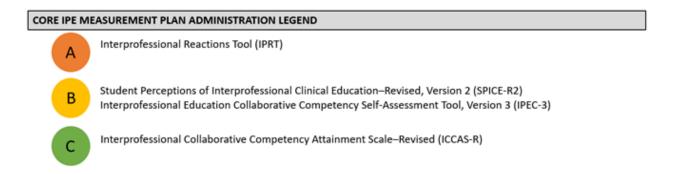
<sup>\*</sup> Modified Kirkpatrick levels 2b (skills) and 3 (behaviors) are combined in this table because IPEC-3 and ICCAS-R report to measure both levels

<sup>\*\*</sup> See Appendices I-IV for complete versions of selected measurement tools

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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 31, 2024.

The approved AY2024-2025SLP IPE Plan was submitted to LINC on January 9, 2025.