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The IPE Insight. Volume 2014, No. 5. October, 2014.

The UNM HSC Inter-professional Education Team

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THE IPE INSIGHT

October, 2014

Volume 2014 – No. 5

HSC Education Day— Keynote Speakers from Thomas Jefferson University

Founded in 2007, the **Jefferson InterProfessional Education Center** (aka the Center) is one of the premier interprofessional education centers in the U.S. The Center is dedicated to improving interprofessional care (IPC) through implementing and evaluating patient-centered education throughout the Thomas Jefferson University curriculum. They offer robust trainings and educational opportunities, provide innovative teaching models and evidence-based practices to help support emerging priorities in healthcare. This includes preclinical/didactic education, clinical simulation, and clinical education within highly effective team-care settings working with our outpatient practices, Thomas Jefferson University Hospital, affiliates and community partners. The Center serves as a coordinating body to facilitate the development and expansion of interprofessional education, faculty development, and evaluation across Thomas Jefferson University.



Christine A. Arenson, MD

The Center's co-directors, Dr. Christine A. Arenson and Dr. Elizabeth Speakman,



Elizabeth Speakman, EdD, RN, CDE, ANEF

will be our keynote speakers at the **October 27th HSC Education Day** presentation and will speak on the *Emerging Trends In Interprofessional Education*, and *The Impact of Health Care Reform on Practice and Education*.

Cont.d next page

Overall Agenda

8:00 am
Domenici Auditorium Lobby

9:00 am
Domenici Auditorium

9:10 – 10:30 am
Domenici Auditorium

10:30 – 10:45 am
Domenici Auditorium Lobby

10:45 am – 12:00 pm
Domenici Auditorium

12:00 am – 1:00 pm
Outdoor Tent
Near Domenici Auditorium

1:00 – 3:00 pm
Domenici Northeast, Rm 2410

Domenici East, Room 3010

2:00-3:00 pm
Domenici Northeast, Rm 2410

Domenici East, Room 3010

3:00 – 4:30 pm
Domenici Auditorium Lobby

ANNUAL UNM HEALTH SCIENCES CENTER EDUCATION DAY

Learn and Teach Together: Interprofessional Education

October 27, 2014 • Domenici Center for Health Sciences Education

Continental Breakfast, Registration and Poster Session

Introductions and Welcome
TBA

Keynote Presentation

Emerging Trends in Interprofessional Education. Impact of Health Care Reform on Practice and Education

Elizabeth Speakman, EdD, RN, ANEF, FNAP (Co-Director, Jefferson Interprofessional Education Center, Thomas Jefferson University) and Christine Arenson, MD (Associate Professor, Co-Director, Senior Adult Oncology Center, Thomas Jefferson University)

Ongoing Refreshment Break and Poster Set Up

UNM's Exemplars in Interprofessional Education: A Panel Discussion

Moderator: Michel Disco (HSC Director of Interprofessional Education)
AOC/Healthcare Resource Center - Cindy Arndell (SOM) and Kara Rechard (SOM)
UNM HSC Project ECHO Interprofessional Chronic Disease Elective - Michelle Iandiorio (SOM), Van Roper (CON), and Paulina Deming (COP)
Geriatric Interprofessional Elective Course- Deborah Cohen (SOM) and Melanie Dodd (COP)
New Mexico Rural Health Interdisciplinary Program – Ben Daitz (SOM), Judith Harris (CON) and Matt Borrego (COP)

Networking Lunch

Concurrent Afternoon Sessions, Repeat at 2:00 pm

HSC Student Perspectives and Initiative's in IPE
Speakers TBA

IPE Immersion: Participatory Case Study

Betsy VanLeit (SOM), Cynthia Arndell (SOM), Loren Kelly (CON) Ami Levi (CON), Kristin Salazar (COP) Bronwyn Wilson ((SOM)

Concurrent Sessions (Repeat)

HSC Student Perspectives and Initiatives in IPE

IPE Immersion: Participatory Case Study

Poster Session Reception

As part of their IPE roles, Drs. Arenson and Speakman develop IPE goals; provide direction in planning, implementing and evaluating the IPE programs; and develop and administer the annual budget to promote growth in IPE.

One of the IPE goals is to facilitate an environment that both supports IPE by increasing participants and IPE programming, and recognizes the need for full involvement of all Jefferson health professionals in the activities and projects of the Center.

Biographies



Christine A. Arenson, MD is professor and interim chair of the Department of Family and Community Medicine at Sidney Kimmel Medical College (formerly Jefferson Medical College), Thomas Jefferson University in Philadelphia, Pennsylvania. She also co-directs the **Jefferson InterProfessional**

Education Center.

Dr. Arenson graduated from the University of Delaware in 1986 and Jefferson Medical College in 1990. She completed family medicine residency training at Thomas Jefferson University Hospital, serving as chief resident in 1993, followed by a fellowship in geriatric medicine.

Her interests are in geriatric medicine with a focus on enhancing care of older adults and persons with chronic conditions; interprofessional education, and collaborative practice models.

Research interests include improving systems of care, including self-management strategies, for older adults with chronic conditions and evaluation of novel interprofessional education activities.

Elizabeth Speakman, EdD, RN, ANEF, FNAP. is co-director of the Jefferson Interprofessional Education Center and an associate professor in the Jefferson School of Nursing at Thomas Jefferson University.

Prior to that, Dr. Speakman was associate dean of Student Affairs and assistant dean of the RN-BSN program in the Jefferson School of Nursing. Dr. Speakman is a Fellow in the Academy of Nursing Education and a Robert Wood Johnson Foundation Executive Nurse Fellow. She has been a nurse educator for 29 years and serves as a curriculum expert and consultant with over 80 national presentations. She served two 3-year terms on the Board of Governors for the National League for Nursing and most recently was elected to the NLN Strategic Planning Committee. In 2014, Dr. Speakman was elected as a Distinguished Practitioner and Fellow in the National Academies of Practice.

Dr. Speakman's research area is in adult higher education, specifically retention and intervention strategies and interprofessional education and collaborative practice. Dr. Speakman's practice settings include critical care, post anesthesia care unit, emergency room and community health nursing.

Dr. Speakman received a BS in Nursing from Wagner College, New York in 1980 and her Master Degree (1985) and Doctorate in Education (2000) from Columbia University and a Certificate in Healthcare Education from the Harvard-Macy Institute at Harvard University.



Street outreach and shelter care elective for senior health professional students: *An interprofessional educational model for addressing the needs of vulnerable populations*

Authors: [Cynthia Arndell](#)¹, [Brenda Proffitt](#)², [Michel Disco](#)³, [Amy Clithero](#)⁴

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² Writer, Healing Hands newsletter, National Health Care for the Homeless Council, Albuquerque, New Mexico, USA

³ University of New Mexico College of Pharmacy and Director of University of New Mexico Health Sciences Center Interprofessional Education, New Mexico, USA

⁴ Department of Family Medicine, University of New Mexico School of Medicine, New Mexico, USA

Background: University of New Mexico Health Sciences Center (UNMHSC), located in Albuquerque, New Mexico, USA, has an international reputation for developing and implementing curricular initiatives addressing health inequities. The Street Outreach and Shelter Care elective is designed to provide interprofessional service learning opportunities for senior pharmacy and medical students addressing the needs of our nation's most marginalized population—those experiencing homelessness.

Methods: Our institution collaborated with multiple community partners serving the homeless to develop, implement and teach a 4-week senior elective for health professions students. During this elective, senior pharmacy and medical student teams provide individualized health care to men in local homeless shelter facilities. Students also participate in street outreach programs across a continuum of homeless populations. Weekly interprofessional education (IPE) faculty-facilitated sessions allow students to reflect on their experiences and learn from other discipline perspectives.

Results: Student evaluations uniformly reflect the transformative nature of the rotation since its inception, April 2009. Our outcomes corroborated the findings of similar service learning models developed to sensitize health professions students to the complex challenges of homeless populations.

Discussion: Academic centers can play a central role in health education reform by instituting curricula focusing on the primacy of population welfare and just distribution of resources. Senior year is an opportune time to reinforce social accountability among health professions before graduation. This elective is based on adult principles of learning and can serve as an international educational model for developing interprofessional curricular innovations addressing the healthcare needs of vulnerable populations.

Acknowledgements: It took a community to develop and implement this elective. The authors would like to thank the following faculty and community partners for their commitment and immense contributions: Matias J. Vega, MD, Medical Director of Albuquerque Health Care for the Homeless, Dennis Plummer, CEO, Albuquerque Metropolitan Homeless Project and Jessica Casey, Program Manager of Albuquerque Opportunity Center Men's Shelter. We also would like to thank Mary Ellen Gonzalez, MSW, Eduardo Alas, MD, Adrian Lawyer, Director of Transgender Resource Center, Holly Nelson, MD, Debora Bear, NP, Linda Smoker, MD, Katie Brazier, Associate Director of Albuquerque Public Schools Title I Homeless Project, Brother Gerard Sullivan, CEO, Good Shepherd Men's Shelter and Whitney Conyers, Director, Barrett House Women's Shelter. And finally, the authors want to thank all of the community partner agencies' staff for providing our students with rich, transformative learning experiences.

Download here

<http://www.educationforhealth.net/article.asp?issn=1357-6283;year=2014;volume=27;issue=1;spage=99;epage=102;aulast=Arndell>

Education for Health, Year 2014, Volume 27, Issue 1 [p. 99-102].

DOI: 10.4103/1357-6283.134361 PMID: 24934958



HSC Leadership/IPEC Team Returns Home “IPE-Fortified”

Our IPEC team, *aka the Roadrunners*, had a stimulating and rewarding experience attending the 2014 IPEC Conference in Herndon, VA during October 1-3. The IPEC Institute requires a well-composed, 5-person team represented by different health professions as well as institutional leadership. Representing UNM HSC, the IPEC team included: **Leslie Morrison**, vice chancellor for Academic Affairs; **Michel Disco**, director of the Office of Interprofessional Education and associate professor for External Programs, College of Pharmacy; **Amy Levi**, interim executive associate dean, College of Nursing; **Lee Danielson**, director of the Medical Lab Sciences and assistant dean for the Health Professions and Public Health Programs, and **Kristina Wittstrom**, director of Professional Curriculum, College of Pharmacy.

The diverse group of speakers and panelists provided in-depth insight, as well as, actionable and practical tools to facilitate IPE. Over the 2-1/2 days, there were four focal points. These segments were introduced by dynamic presentations, followed by team working sessions, with available facilitators circulating to assist the teams. The first morning was focused on *planning* an IPE curriculum; that afternoon was on using the core competencies to *build* a program. The next day was *designing* effective IPE learning experiences and concluded with using best practices and lessons learned regarding *assessment*. The final morning was absorbed in identifying what actions to take.

Our IPEC team came away with four specific areas to advance IPE at UNM HSC, including: create an environment that encourages and supports faculty involvement in IPE; examine and update the IPE strategic plan to guide future objectives; identify a type of curriculum organization for optimum coordination; and stimulate ideas for marketing and promotion of IPE curriculum, programs and events.

Invariably, IPE events include an exercise, as demonstrated by the ‘towel exercise’ (see photo, right). The ‘towel exercise’ required each team to turn the towel over to the other side within 10 minutes. *Rules for the towel team*: You cannot touch the floor or walls or anyone *not* on the towel (or you start over); you must request permission to call for help from anyone on their team; and, the Team Leader gives the orders! In addition, team members were assigned supporting roles, including a Human Resources person to help everyone stay calm.

Besides demonstrating that effective team work requires working well together, it also reflected the IPE Competencies in a very tangible way (See *IPE Competencies*, right).

The IPEC team’s passion and positive spirit made their time together both productive and fun!



Left to right: Lee Danielson, Michel Disco, Kristina Wittstrom, Leslie Morrison. Photo by Amy Levi.



With her footing in the upper right corner of the towel, Dr. Amy Levi, interim executive associate dean at the UNM HSC College of Nursing, works with her ‘towel team’ to turn it over—within the 10 minute countdown.



IPE COMPETENCIES

Values/Ethics:

- maintain a climate of mutual respect and shared values

Roles/Responsibilities:

- work within roles and responsibilities for all team members to meet health care needs of those served.

Communication:

- Communicate all team members with respect to support a team approach in providing care.

Teamwork and Team-based Care:

- build team dynamics and relationships effectively deliver patient centered care that is safe, timely, efficient, effective, and equitable.



IPE Groups Hard at Work!!

Work Groups were identified from the IPE Curriculum Retreat held May 29, 2014

Community-Engaged Curriculum



On August 28, 2014, a group of enthusiastic faculty, representing College of Nursing, College of Pharmacy, Occupational Therapy, Health Professions and Public Health Programs and the School of Medicine, as well as medical students, met for the first time to begin planning an interprofessional community-engaged curriculum. In this meeting, we discussed what we hope our HSC students will learn as a result of participating in this curriculum—*how health professionals working in teams can build and sustain effective partnerships with communities*—which is critical for improving the health of individuals and populations.

In our second meeting on September 11, we discussed how to address IPE competencies for HSC students early in their training through a community-engaged curriculum: 1) who should be involved, i.e., community members, community health workers, HSC students, etc., in addition to faculty members; 2) how to build on existing relationships with community centers throughout the greater Albuquerque metropolitan area; 3) how to integrate principles of community engagement into teaching/learning activities and how to assess student performance; 4) logistics of varying students' schedules and resources; and finally, 5) how to create a sustainable presence and positive impact in Albuquerque communities.

We are excited about the prospect of developing and implementing an integrated IPE community-engaged longitudinal curriculum, required for **all** HSC students early in their training, that is aligned with our HSC Vision 20/20 mission statement: *"We will make more progress than any other state to improve the health of our New Mexico communities by 20/20 through education, service and research."* Contact:

carndell@salud.unm.edu.

Patient Safety and Quality Improvement



Faculty from across HSC professions had no problem agreeing with the fact that every health discipline contributes to effective delivery of patient safety and quality of care. This healthcare

taskforce meets religiously every second Monday of each month from 3:30-5 pm in Domenici West, Room 3010.

Their first project for implementing an IPE student curricular activity addressing patient safety and quality improvement involves expansion of Lobo Wings training to all students. Currently, only medical students are required to participate in this training. Lobo Wings is a hospital training program required of all hospital employees. It is modeled after Crew Resource Management techniques similar to those used in airline safety programs. The model is based on effective, efficient teamwork designed to decrease error. Implementation of this training for all hospital employees has resulted in a dramatic decrease in hospital related errors as well as improvement in employee satisfaction.

The patient safety and quality IPE taskforce has applied for a small grant through the School of Medicine to cover curricular, resource and administrative costs to expand the training to involve HSC students from other disciplines. One important focus of this endeavor is to assess student attitudes toward the importance of teamwork as critical in addressing patient safety and quality.

This team continues to meet on a regular basis to identify stakeholders and work with leadership on how to continue to move this important curriculum forward. Contact:

carndell@salud.unm.edu.

Ethics and Professionalism

On September 17, 2014, a planning meeting was attended by Donald Godwin, Amy Robinson, Elizabeth Greer, Mary Jacintha, Catherine Combs. Copies of the 2010 Ethics Certificate Module I & II were outlines were handed out.

Elizabeth Greer reported she has spoken with Debby Knotts of New Media and Extended Learning about doing this course online or as a hybrid (online and face to face combination) and was told that the project was "do able".

With each school/program curriculum having courses in ethics and/or professionalism, pulling all the curriculums together and incorporating them into the pending Ethics and Professionalism course would need to be done. The meshing of the respective courses into one that is already in place could allow for implementation sooner and without having to go through the standard multi-year curriculum development process.

It was asked if the presenters used in the Ethics Certificate Course were in the area and available. Cathy said that most were available. Cathy also stated that the presenters would need compensation; they had received that from the Certificate course since they were not UNM teaching staff. This will need further study.

In a discussion with me after the meeting, Dr. Anne Simpson said that key to this course development is the exposure of participants to the respective disciplines' Codes of Ethics and



Professionalism. This would be truly interprofessional education, demonstrating the ethical and professional similarities between disciplines as well as help develop better interprofessional collaboration during their education as well as in their future work environments.

Next Steps:

1. Dr. Robinson said that she would share our meeting notes with Dr. Anne Morrison (who oversees the "Doctoring Course") and Dr. Deb Dellmore (Chair of the SOM Curriculum Committee) to discuss the activities of this IPE work group and if there is an opportunity for collaboration.
2. Donald Godwin serves on the College of Pharmacy Curriculum Committee and will share with them what the work group is doing and likewise explore any opportunity for collaboration.
3. Elizabeth Greer will present the Ethics Certificate outlines to the directors of Health Professions and Public Health Programs to explore any opportunity for collaboration.
4. Cathy Combs will contact the Law School to see if they have any Ethics & Professionalism course(s) and if they would be interested in a possible IPE collaboration.
5. The next meeting will be on **October 22, 2014** from **12:00 Noon – 1:00 PM** at the **Institute for Ethics (917 Vassar Dr. NE)**.

Geriatrics



Attention Students from Medicine, Nursing & Pharmacy – We Really Want YOU!

Over the next two to three decades, the

number of Americans over 65 will double to over 70 million or 20% of the population. Because of improved health care, these people will be living longer with a wide range of social service and health needs. This sea of clients will be coming to you, if you are properly positioned to help. Interprofessional practice in healthcare is the wave of your future!

We hope you'll consider participating in the spring 2015 offering of the OnLine Interprofessional Geriatric Course. The course is a partnership between the University of New Mexico and Virginia Commonwealth University. All the work - with the exception of the initial onsite orientation - is conducted online. This course involves a complex geriatric case that unfolds over time and moves the patient through a variety of healthcare settings. The course is made up of on-line teams of students from medicine, nursing, pharmacy, and social work.

The course will run for 6 weeks. The exact start and end dates are still being finalized in order to accommodate the different school schedules.

This experience offers you a terrific opportunity to explore geriatrics in an environment that is dynamic and collaborative. To further discuss the course, please contact Shelley Modell at SModell@salud.unm.edu.

Senior Mentor Program

kicks off its 11th Year



Kaley Ortiz, PT and her mentor Zelda

September 29, 2014 marked the kick-off for this year's **Senior Mentor Program**. Approximately 50 students, from School of



Jacqueline Levinson, OT and her mentor Else

Medicine, PT, OT and PA met their senior mentors for the first time. Over the next year, these students and mentors will meet at least four times to explore healthcare and aging. They are also very likely to share lively discussions on life, love and the pursuit of happiness!

This is the 11th year of the **Senior Mentor Program**, which was created by the Division of

Geriatrics and is recognized as one of the country's most successful programs of its type, thanks to the dedication of its Director Lloryn Swan, and Chief of Geriatrics Dr. Carla

Herman. Each year, the students describe their time spent with their Senior Mentor as one of the most valuable and enjoyable learning experiences of their student career.



Nate Fox, Medicine and Justin Quintana, PT with their mentor Adolph



Erika Firebaugh, PT and Matt Solomon, Medicine with their mentor Joe



Kristin Caplan, PA with her mentor Irene

The Program has been supported by a grant from the Donald W. Reynolds Foundation, which will be completed at the end of this year. Dr. Herman and Lloryn Swan are exploring a variety of funding options to support, maintain, and even expand the program for future classes of HSC students.



Matt Murphy, PT and Kisa King, Medicine with their mentors Jim and Paula

Service Learning—Student-Led Community Service Work Group

The Health Sciences Student Council (HSSC) welcomed students to its first meeting of the year on September 10th in Domenici West 3010 at 5:00 pm. New students were informed about HSSC, the responsibilities of student representatives and committee introductions were made.

Representatives from the IPE team faculty were invited and made a brief presentation about IPE. The job of the IPE Team is to advance interprofessional education activities throughout the UNM Health Sciences Center. They explained why IPE is important and identified various the UNM IPE activities and events available on campus.

Upcoming IPE activities include: (see the following flyers)

- *Reaching our Potential: The Future of Interprofessionalism in Healthcare in New Mexico* (Oct. 17)
- *Fit for Fun 5k-Fun Run/Walk & Health Fair* (Oct 17-18th)
- *Drive-Thru Flu Shot Clinics* (Oct 18th and 25th)
- *HSC Education Day--Learn and Teach Together, IPE* (Oct 27th)

Fri. Oct. 17, 5:30-7:30 pm, Dom Auditorium



Join Us For an Exciting Expert Panel Discussion:
Reaching Our Potential: The Future of Interprofessionalism in Healthcare in New Mexico
Moderated by Winthrop Quigley of the Albuquerque Journal

With Panelists:

Mark Epstein, MD: CMO, New Mexico Health Connections

Suzanne Quillen, RN, CNP, MPA: Chair UNM HSC Board of Directors & CEO Advanced Care Hospital of Southern New Mexico

Diane Evans-Prior, MSN, RN: Academic Affairs Director of Nursing, Central New Mexico Community College

Senator Gerald Ortiz y Pino: State Senator & Vice Chair of Legislative Health and Human Services Committee

Michel Disco RPh, MBA: Assistant Dean of External Programs, UNM College of Pharmacy and HSC Director of Interprofessional Education

Friday, Oct 17th 5:30-7:30pm Domenici Auditorium

Free and Open to the Public!

Hosted by the UNM Health Sciences Student Council
Domenici Auditorium is located at Marble Ave. and Stanford Dr. NE, 87106
Light fare will be served

Sign up for the Fit for Fun 5k at www.newmexicosportsonline.com!
The fun run is on 10/18 at 8:00am and begins at the Domenici Auditorium.
All proceeds benefit the Healthy & Fit Children's Clinic

Spring 2015 IPE Geriatric Elective

Starting in January 2015, faculty from multiple disciplines will teach this course that is designed to provide the necessary tools for health care professionals to successfully assess and care for the older adult as a team. It involves the interprofessional study of the treatment of common geriatric conditions in multiple care settings and across the care continuum.

During this course students will:

- Learn from each other about the roles and responsibilities of different team members
- Explore community support services and health literacy issues
- Facilitate patient-centered, team-oriented care

Students must attend all four class sessions from **9 am-4 pm:**

1st weekend: Jan. 24 and 25 / 2nd weekend: Feb. 7 and 8

Teaching and learning methods include: Interprofessional case-based discussion, the use of team simulation, and development and presentation of team care plans for geriatric patients who experience a variety of important health conditions.

In addition, students will observe actual healthcare teams in action and engage in service learning addressing the needs of geriatric patients.

Students from programs including Medicine, Nursing, Nutrition, Pharmacy, Physician Assistant, Physical Therapy, Occupational Therapy and Social Work are all encouraged to participate.



Spring 2015-- IPE Geriatric Elective IPE Facilitators Needed


We are recruiting faculty to participate in this course as group facilitators. Do you seek a learning experience that puts interprofessional education into practice and provides a chance to work with outstanding faculty and students from across the campus, this is it! For more information, contact [Melanie Dodd, PharmD](mailto:Melanie.Dodd@unm.edu).

For information on the **2015 IPE Geriatric Elective**, please contact : Medicine: [Carla Herman, MD, MPH](mailto:Carla.Herman@unm.edu); Physician Assistant: [Kathy Johnson, PA-C](mailto:Kathy.Johnson@unm.edu); Nursing: [Judith Harris, DNP, FNP-BC](mailto:Judith.Harris@unm.edu); OT: [Betsy VanLeit, PhD, OTR/L](mailto:Betsy.VanLeit@unm.edu); PT: [Janet Popp](mailto:Janet.Popp@unm.edu); Pharmacy: [Melanie Dodd, PharmD](mailto:Melanie.Dodd@unm.edu) ; Nutrition: [Deborah Cohen, DCN, R.D.](mailto:Deborah.Cohen@unm.edu)

2 locations—2 dates—Oct. 18th/25th

Sat., Oct. 18th

DRIVE-THROUGH FLU CLINIC
UNM Academy Clinic Parking Lot



**NE Heights
Family Health Clinic
7801 Academy NE
Sat. October 18
9 am – 2 pm (*new time)**

Flu season is here! Stop by the UNM Academy Clinic Parking Lot for a quick and free flu shot! Bring your family- ages 9 and up!

7801 Academy NE, Albuquerque
October 18, 2014
8 am-1 pm

DRIVE-THROUGH FLU CLINIC
UNM Tucker Clinic Parking Lot



**Family Practice Ctr
North Campus
Parking lot
2400 Tucker NE
Sat. October 25
9 am – 2 pm**

Flu season is here! Stop by the UNM Family Practice Clinic Parking Lot for a quick and free flu shot! Bring your family- ages 9 and up!

2400 Tucker NE, Albuquerque
October 25, 2014
9 am-2 pm

UNM FIT FOR FUN 5K AND HEALTH FAIR!



TO BENEFIT THE
HEALTHY & FIT CHILDREN'S CLINIC
AT THE UNM CHILDREN'S HOSPITAL




October 18, 2014; 8:00AM
On the UNM Health
Sciences Center Campus/
UNM North Golf Course

5K Fee:
\$20/Individual
\$30/Couple

Go To
www.newmexicosportsonline.com
to register!

Health Fair is Free to Attend; No 5k Participation Required
On 10/17 come to the Expert Panel Discussion on Interprofessionalism in
Healthcare. 5:30pm in the Domenici Auditorium on the UNM HSC Campus!

Priya Shah
UNM SOM MSII

Katharine Caldwell
UNM SOM MSIII

Joan Henrikson
2nd Year UNM OT

Charlie Alvarenga
UNM EMS Academy

Elizabeth Dickson
2nd year PhD Student
UNM CON
Robert Wood Johnson
Foundation Nursing and
Health Policy Collaborative
Fellow

MEDtalks

American Medical Student Association
Motivate. Educate. Dream.

Come enjoy riveting talks from various interprofessional healthcare students and a dinner buffet
Date: Saturday, October 25th 2014 from 5pm-7pm
Location: UNM Student Union Building Ballroom A
Cost: \$5 students/\$20 general public
Purchase Tickets Online:
https://secure.touchnet.com/C21597_ustores/web/store_main.jsp?STOREID=172&SINGLESTORE=true
Event sponsored by the American Medical Student Association, UNM Alumni Office, and Office of Medical Student Affairs.

MEDtalks

On behalf of the American Medical Student Association (AMSA), we would like to invite you and your respective departments to attend AMSA MEDtalks. MEDtalks is about medical students inspiring other medical students.

This event will highlight brilliant students who have put forth inspiring ideas, engendered passionate initiatives, and provoked powerful change in all fields of medicine.

Last Spring, we held auditions for UNM HSC students and the finalists were chosen in April. Since then these speakers have been working with their assigned editors and we had our first rehearsal with someone who has had 20,000 views of his TEDtalk and he was so impressed with the talks. We are excited to announce our speakers to you:

Priyah Shah (UNM SOM MSII), Katherine Caldwell (UNM SOMMSIII), Elizabeth Dickson (UNM Nursing Doctoral Student/Robert Wood Johnson Foundation Executive Nurse Fellow), Charles Alvarenga (UNM EMS Academy), and Joan Henrikson (UNM OT).

Students, faculty, alumni, and friends and family of UNM HSC are all welcome to attend. Dinner will be served. Cost: \$5student/ \$20 general public.

[Click here for Tickets](https://secure.touchnet.com/C21597_ustores/web/product_detail.jsp?PRODUCTID=1204&SINGLESTORE=true)

https://secure.touchnet.com/C21597_ustores/web/product_detail.jsp?PRODUCTID=1204&SINGLESTORE=true



Interprofessional Education

EDITOR: DIANE BESSETTE, HSC-IPE-OFFICE@SALUD.UNM.EDU, 272-0716, DEADLINES: 1ST OF EACH MONTH

PAGE 7



2014 Lifetime Achievement Award



Michel Disco, BSPHarm, RPh, MBA UNM College of Pharmacy Assistant Dean for External Programs; Director, HSC Interprofessional Education

When deans at the University of New Mexico College of Pharmacy wanted to expand their experiential practice program, Michel Disco fulfilled all of their criteria—she has strong community connections, a proven track record, and a drive garnered from 31 years in community pharmacy.”

Congratulations to **Michel Disco** (1973 UNM alumna), director of

HSC Office of Interprofessional Education, and assistant dean for external programs and an associate clinical professor at the College of Pharmacy, who was named the recipient of the **2014 Next-Generation Pharmacist Lifetime Leadership Award presented by**

Pharmacy Times. She was presented with the award at their banquet on August 24, 2014 at the Fairmont Copley Plaza Hotel in Boston, Massachusetts. Michel was one of three finalists from across the country selected from an independent panel of judges chaired by Pharmacy Times' Editor in Chief, Fred Eckel.

As Michel's inspiring CV demonstrates, she has undertaken more than merely practicing pharmacy in her long and prolific career,” her nomination read. “Rather, Michel has been a pioneer in fostering a public health system that delivers free or affordable health care to those who are not in a position to seek it.”

Her involvement with the School Kids Influenza Immunization Program (SKIIP) since its 2008 inception allowed her students to administer vaccinations to children 17 years and younger, contributing to vaccination rates that exceed national standards for that age group.

“The 2012-2013 program immunized 51,000 students at 450 schools,” her nomination noted. “And because these healthy kids didn't pass the dodged flu to family members and their many contacts, SKIIP minimized the spread of illness. SKIIP has grown every year since 2009, vaccinating many kids who otherwise wouldn't be, and lessening flu in New Mexico.”

Recognizing public health problems unique to her state, Disco also participated in New Mexico Pharmacists' Association teams responsible for prescriptive authority legislation covering narcotic overdose treatment, contraception, immunizations, tobacco cessation, and tuberculosis testing.

Her 40-year career in pharmacy includes holding posts in health-system and retail pharmacies as a staff pharmacist,

assistant manager, pharmacy manager, and regional pharmacy manager.

Disco has received awards from the New Mexico Pharmacists Association, the University of New Mexico College of Pharmacy, the National Association of Retail Druggists, McKesson, the University of New Mexico Health Sciences Center, the New Mexico Pharmaceutical Association, Merck, and the new Mexico Public Health Association. -



Congratulations to **Melanie A. Dodd, Pharm.D., Ph.C., BCPS**, Interim Vice-Chair for Clinical Affairs and

Associate Professor of Pharmacy in Geriatrics at UNM College of Pharmacy, whose submission entitled ***IPE: Interprofessional Geriatric Assessment Elective for Health Professional Students: A Standardized Patient Case Study and Patient Script*** was accepted for publication in the MedEdPORTAL Publications. The publication should be available to view this October.

<https://www.mededportal.org>

Submission deadline: Fri., Oct. 31, 5 pm



Call for Abstracts

Armstrong State University, Savannah, Georgia

You are cordially invited to electronically submit an abstract for our 2015 Interprofessional Health Care Summit on **April 10, 2015** in historic downtown Savannah, Georgia. The theme of this year's Summit is "From Education to Practice."

Presentation content is focused on clinical practice, health professions education, and healthcare team science. Possible examples include: Patient and population outcomes; interprofessional methods to increase quality of care; informatics (data, EHR, etc.); innovative instructional delivery; development of IP faculty; curricular design; IP team development; Evaluation of IP care: costs, outcomes and policy; team leadership, etc. Our target audience is health care clinicians, educators, administrators, and students.

Abstract guidelines and submission forms are available at armstrong.edu/ip_health_summit. Deadline: Oct. 31, 5 pm.

IPE Team Brief

Interest in IPE is Spreading!

During the month of September, members of our team have had the opportunity to provide interprofessional educational sessions to students, faculty and UNM HSC and main campus staff members.

On September 10, Michel Disco, COP; Cindy Arndell, SOM; and Krista Salazar, COP, had the privilege to introduce ourselves as part of the IPE team, and share current HSC interprofessional educational initiatives to the **HSC Student Council** (HSSC) at their first meeting of the year. This was followed by an interactive group activity addressing the different roles of health professions. It was a great turnout and students were very engaged.

At the **HSC and UNM main campus Student Services retreat** on September 16, staff members participated in a team building activity and then brainstormed on strategies for creating greater collaboration among team members in the work environment.

With a common IPE activity interest, IPE team member Krista Salazar of College of Pharmacy, together with faculty Kathy Johnson and Yvonne Ellington from the Physician Assistant department, conducted an IPE activity with their students on September 18. The activity included all 2nd year PA students and all 1st year pharmacy students. The students worked on a case that highlighted the implementation of teamwork and communication to enhance safe prescribing practices and medication use with a compounded preparation.

The activity took place in the Simulation exam rooms in the IHSC from 2-2:30 and we debriefed with the entire group of students in Domenici Lecture hall from 2:40-3:00. There were 17 groups of students and each student group was pre-assigned a clinic

room to meet in. The directions for the activity were found in the rooms and all groups began working on the case promptly at 2:00.

The impetus for this activity was to develop IPE since both the PA and Pharmacy departments have IPE criteria that must be met in their curriculum. The faculty involved started by finding out from each other what our students could potentially learn from, with, and about each other. Through our discussion, we discovered that: 1) the PA students needed practice writing a prescription (Rx) for a compounded product and also presenting a patient, and 2) the PharmD students needed practice ensuring an Rx had no errors or

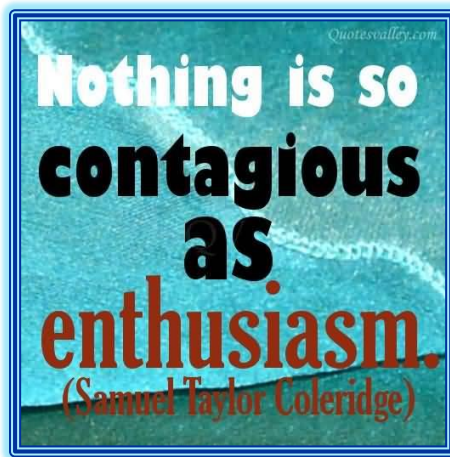
omissions, listening to a patient presentation and using their knowledge about brand/generic drug names and compounding magic mouthwash.

Recently, a large number of HSC students from across disciplines joined together to participate in an interactive session, "Resources for Homeless Populations", facilitated by members of our IPE team and a UNMH social worker. Multiple students commented on how much they learned about the

interdisciplinary models of service for individuals experiencing homelessness in Albuquerque.

Our team continues to actively participate in QuickStart orientation for new HSC faculty—the next one is in November.

We look forward to continued invitations to share. If you would like our team members to provide an interactive session on interprofessional education and collaborative practice, please feel free to contact us at hsc-ipe-office@salud.unm.edu.



ENTHUSIASM
turn it up!

The 'Music' of Coordinated Care

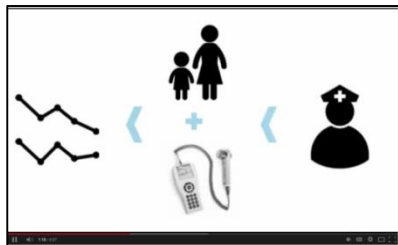


Donald Berwick, MD, MPP,
President Emeritus and
Senior Fellow, Institute for
Healthcare Improvement

Sometimes things go well and that's because the various influences come together in a kind of rhythm – music – that works. I'll tell you a story. On a different day in my clinical practice, I was called into a room to see a 4 year old boy that I'd never met. He had asthma and he was very tight, he was wheezing a lot. His mother was a very young mother; I'm sure she borne him as a young teenager. And I walked into the room and there was this young woman and her young son. I was worried because he was breathing so hard.

But then the process started. As I walked into the room, the mother handed me a chart that she'd kept at home. She had at home a spirometer, a breathing machine, which allowed her to measure her child's rate of wheezing, and she'd kept this chart and annotated it with various medications she'd given him at home.

She'd been taught to do that by a visiting nurse that had been assigned to visit her home, who also arranged to have the test



machine at home and had trained her to use it. She said that she had tried the medicine; she knew what each of them was, and she [the nurse] recommended a fourth medicine that she didn't

have at home. She'd said, I think maybe he'll respond to this. I was not saying very much cause she had the ball and seemed to know what she was doing. Before I could open my mouth to respond, there was a knock on the door, and I open the door and there standing in the door was the chief of allergy holding a bottle of the medicine that the mother had just mentioned.

How did he know to come? Because the mother had the cell phone number of the nurse who was responsible for coordinating the care; she had called the allergist and the allergist brought the medicine down. I was feeling pretty irrelevant.

We put the medicine into the nebulizer machine; he cleared immediately and within an hour he was on his way home instead of to the emergency room... But also, the nurse who had called the allergist and organized her trip to see me, was on the way to

In this video Berwick tells the story of seeing a 4-year-old boy with acute asthma. What followed was "music" to Berwick — coordinated care that resulted in the best outcome for the patient and less cost to the health system.

[Watch it on YouTube.](#)

the kid's house to check at home, as she would over the next few days.

That was a child who went home and well, instead of to an emergency room, frightened, and at very high cost.

What happened, music! A system that reached back into months before, a preparation of this young mother to have the **sense of mastery** to be able to know different things to try with her child.

Technology that she knew how to use to measure his breathing. **Technology about improvement**—she was doing PDSA cycles at home, as she tried each medicine and annotated the wren chart.

Communication—The communication system that linked the mother, and the nurse, and the allergist and me in a single system so that there was literally no delay at all between his arrival to see me and the arrival of the medicine that was the next one to try.

When the system works that's what it looks like, full of knowledge about the subject matter of the asthma treatment. Full of knowledge about how to try things, as she had tried the different medicines at home, and study their effect. Full of consciousness and interdependency—a team at work in communication with each other, with their egos set aside—all focused on the needs of the individual child. That's what systems that work look like, and it gets a kid home in bed and not in a hospital.

Learning Objectives: At the end of this activity, you will be able to:

- Summarize an example of a time when a health care system performed flawlessly for one patient
- Discuss how tracking data can help lead to better patient outcomes
- Explain why coordinated care should be the goal for every patient, every time.

Discussion Questions:

1. Which components of the system — more specifically, which actors and technologies — played a role in helping the patient get better?
2. Which care provider do you think played the most important role in the positive patient outcome? Did they all contribute equally? Why or why not?
3. How was the mother using improvement science to help control her son's asthma? Why was that important to the story?
4. According to Dr. Berwick, what would have happened to the boy if the care had been uncoordinated? Do you agree?
5. Have you ever witnessed a similar example of excellent coordinated care? What happened?

When Patients Read What Their Doctors Write

by Leana Wen

[Listen to the Story](#) 3 min 54 sec

Weekend Edition Sunday

The woman was sitting on a gurney in the emergency room, and I was facing her, typing. I had just written about her abdominal pain when she posed a question I'd never been asked before: "May I take a look at what you're writing?"

At the time, I was a fourth-year medical resident in Boston. In our ER, doctors routinely typed visit notes, placed orders and checked past records while we were in patients' rooms. To maintain at least some eye contact, we faced our patients, with the computer between us.

But there was no reason why we couldn't be on the same side of the computer screen. I sat down next to her and showed her what I was typing. She began pointing out changes. She'd said that her pain had started three weeks ago, not last week. Her chart mentioned alcohol abuse in the past; she admitted that she was under a lot of stress and had returned to heavy drinking a couple of months ago.

As we talked, her diagnosis — inflammation of the pancreas from alcohol use — became clear, and I wondered why I'd never shown patients their records before. In medical school, we learn that medical records exist so that doctors can communicate with other doctors. No one told us about the benefits they could bring when shared with patients.

In fact, before the [Health Insurance Portability and Accountability Act](#), a federal law enacted in 1996, patients generally had to sue to see their records. HIPAA, as that mouthful is abbreviated, affirmed that patients have a right to their medical information. But the process for obtaining records was often so cumbersome that few patients tried to access them.

In 2010, Tom Delbanco, an internist, and Jan Walker, a nurse and researcher, started an [experiment](#) called OpenNotes that let patients read what their primary care providers write about them. They hypothesized that giving patients access to notes would allow them to become more engaged in their care.

Many doctors resisted the idea. Wouldn't open medical records inhibit what they wrote about sensitive issues, such as substance abuse? What if patients misunderstood the notes?



Would that lead to more lawsuits? And what would patients do with all the information anyway?

After the first year, [the results were striking](#): 80 percent of patients who saw their records reported better understanding of their medical condition and said they were in better control of their health. Two-thirds reported that they were better at sticking with their prescriptions. Ninety-nine percent of the patients wanted OpenNotes to continue, and no doctor withdrew from the pilot. Instead, they shared anecdotes like mine. When patients see their records, there's more trust and more accuracy.

That day in the Boston ER was a turning point for me. Since I started sharing notes with my patients, they have made dozens of valuable corrections and changes, such as adding medication allergies and telling me when a previous medical problem has been resolved. We come up with treatment plans together. And when patients leave, they receive a copy of my detailed instructions. The medical record becomes a collaborative tool *for* patients, not just a record of what we doctors do *to* patients.

The OpenNotes experiment has become something of a movement, spreading to hospitals, health systems and doctors' offices across the country. The Mayo Clinic, Geisinger Health System and Veterans Affairs are among the adopters so far. (The OpenNotes project has received funding from the Robert Wood Johnson Foundation, which also provides financial support to NPR.)

But there are new controversies arising. Should patients receiving [mental health services](#) obtain full access to therapy records, or should there be limits to open records? What happens if patients want to share their records on social media? Will such "crowdsourcing" harm the doctor-patient relationship? What if patients want to develop their own record and [videotape their medical encounter](#)? Are doctors obligated to comply?

Delbanco tells me that he considers OpenNotes to be "like a new medication." Just like any new treatment, it will come with unexpected side effects. In the meantime, patients and doctors don't need to wait for the formal OpenNotes program to come to town. Patients can ask their doctors directly to look at their records. Doctors can try sharing them with patients, in real time, as I do now. It's changed my practice, and fundamentally transformed my understanding of whom the medical record ultimately belongs to: the patient.

Wen is an attending physician and director of patient-centered care research in the Department of Emergency Medicine at George Washington University. She is the author of "When Doctors Don't Listen: How to Avoid Misdiagnoses and Unnecessary Care," and founder of Who's My Doctor, a project to encourage transparency in medicine.

AMERICAN INTERPROFESSIONAL HEALTH COLLABORATIVE:
TRANSCENDING BOUNDARIES, TRANSFORMING LEARNING
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Creating a Culture of Interprofessionalism

Culture is one of the most important and often challenging elements in facilitating organizational change. Integration and collaboration among health professions requires all of us to find creative and innovative ways to promote interprofessionalism.

This webinar will focus on bridging both theory and practice in creating a culture of interprofessionalism. The webinar is designed to address the needs of educators, practitioners, leaders and policy makers and will be divided into the following three sections.

1. **Loosely Coupled Systems:** Academic and clinical organizations share the distinction of bringing together “professionals” with strong autonomous professional identities to do their work in what often results in a “loosely coupled organization.” Interprofessionalism challenges organizations to assume a more tightly coupled system where collaborative care and a shared, collaborative team identity may be necessary to facilitate cultural change.
2. **Contact Theory to develop IP groups:** Contact Theory, has its origins in the work of Allport (1979) on intergroup prejudice. Allport suggested that bringing groups together was insufficient to reduce negative intergroup attitudes and

stereotyping. Allport suggested several important conditions for contact which were articulated in the “Contact Hypothesis”. In this section, we will describe the “Contact Hypothesis” and provide an example of how the theory was applied to the inception and development of an interprofessional collaborative consisting of faculty and patient/caregiver advocates drawn from four universities.

3. **Self Defining Organization, Autopoiesis:** In the third section of the presentation, we will discuss the use of a structure of self-defining organization to develop and expand a culture of interprofessionalism at a Health Sciences University.

Gail Jensen, PhD, PT, FAPTA

Dean, Graduate School and University College,
Vice Provost for Learning and Assessment,
Professor of Physical Therapy, and Faculty
Associate, Center for Health Policy and Ethics,
Creighton University



Barbara Maxwell, PT, DPT, MSc, Cert THE,
FNAP, Professor & University Director of
Interprofessional Education & Collaboration
Academic Affairs Office
A.T. Still University



Susan Tappert, PT, MS

DPT, Founding Director Interprofessional
Institute, Rosalind Franklin
University of Medicine and Science



Register here!

<https://nexuспе.wufoo.com/forms/z1y9us4u0lxqqlb/>

**Tuesday,
October 14, 2014
4:30 - 6:30 PM**

View Presentations Online
(Real Time and Archived)

Find a link to the online
sessions on our homepage:
<http://som.unm.edu/ethics>

Future Dates:
Fall Dates to Be Announced

UNM SOM, Institute for Ethics Presents:

**A series on the
Social
Determinants of
Healthy Aging**

**UNM Domenici Center Auditorium
1001 Stanford, NE**

This event is FREE and open to the public

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**"I thought I felt a paradigm shift, but
it was just my undershorts riding up."**

Simulation Lab Notice

New Email Address for Simulation Lab: hsc-con-simulation@salud.unm.edu.

Please use the simulation request forms for all your Sim team needs (simulation, simulation tours, equipment requests, etc.). We are also beginning to enforce our 2-week notice policy for requests and related changes. The schedule is getting too busy to make last minute changes. Thank you for your cooperation!

Joe Poole