



# INTERPROFESSIONAL EDUCATION DIGEST

Nova Southeastern University College of Osteopathic Medicine  
CENTER FOR INTERPROFESSIONAL EDUCATION AND PRACTICE (CIPEP)

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## MULTIDISCIPLINARY APPROACH OFFERS EFFECTIVE TREATMENT FOR COLLEGE STUDENTS WITH EATING DISORDERS

Although the treatment for eating disorders has long called for a multidisciplinary approach, there is a lack of evidence to support this standard of care. Eating disorders are a serious and complex concern that not only involve nutrition and diet, but also have a tremendous impact on one's physical, psychological, emotional, and social well-being.

In a recent study, researchers compared the efficacy of interprofessional treatment teams versus psychotherapy alone when working with college students living with various eating disorders. The eating disorder treatment team (EDTT)—consisting of a mental health professional, dietitian, and medical provider—worked with individuals with anorexia nervosa, bulimia nervosa, and eating disorder not otherwise specified (EDNOS). The study showed that an interprofessional treatment team was indeed more effective than treating with psychotherapy alone.

College students with eating disorders were more likely to remain in therapy longer and more inclined to participate in both individual and group therapy interventions when being treated by a multidisciplinary EDTT. They were also more likely to utilize psychotropic medications for their comorbid diagnoses. Additionally, the study found that the patients terminated their treatment in a more planned manner compared to those who only received psychotherapy.

Finally, the researchers found that female counselors only referred 37 percent of their clients with eating disorders to an EDTT, while male counselors referred only 4 percent, demonstrating that only about one third of eating disorder patients received referrals to be seen by a multidisciplinary treatment team. Of the EDTT referrals, there were no significant demographic or diagnostic differences between the clients, suggesting that more education and training may be needed to specify the referral criteria, while also stressing the need for a multidisciplinary treatment approach when working with college students with eating disorders.



*(Mitchell S.L., Klein J., and Maduramente A. (2015). Assessing the impact of an eating disorders treatment team approach with college students. Eating Disorders, 23(1), 45-59. doi:10.1080/10640266.2014.959847).*

## MENTAL HEALTH TRAINING INITIATIVE AUGMENTS RURAL PRIMARY CARE



There are very few mental health professionals who practice in or consult to rural communities, and those that do report struggles with health care barriers (e.g., professional isolation, lack of resources) that often result in burnout. Collaborative practice in mental health care may increase accessibility of care in rural settings, reduce the burden of care from rural professionals, and contribute to positive patient outcomes.

Researchers from Canada aimed to describe the impact of a rural mental health interprofessional training program (RMHITP)—a continuing education initiative on interprofessional knowledge, attitudes, perceptions, and practice. The RMHITP included

- teaching the characteristics of interprofessional teams and the development of collaborative relationships
- didactic presentations focused on mental health in relation to interprofessional teams
- interprofessional small-group skill-building

To accomplish this, 125 professionals in six rural communities completed pre- and post-intervention measures, interviews, and focus groups to assess the RMHITP impact. Quantitative results revealed a significant increase in positive attitudes toward interprofessional mental health care teams and self-reported increases in knowledge and understanding about collaborative mental health care delivery.

Qualitative results revealed that the participants believed they were already strong proponents of interprofessional care before they began the program and viewed it as a way to develop new knowledge, insights, and referral networks for interprofessional mental health practice. The authors suggested the results showed mental health continuing education within an interprofessional environment is valuable to not only patients, but also the community and health care professionals.

*(Heath O., Church E., Curran V., Hollett A., Cornish P., Callanan T., and Youngusband L. (2015). Interprofessional mental health training in rural primary care: Findings from a mixed methods study. Journal of Interprofessional Care, 29(3), 195-201).*

## ENHANCING INTERPROFESSIONAL EDUCATION: INTEGRATING PUBLIC HEALTH AND SOCIAL WORK

Clinical and population health faculty members at the University of South Carolina redesigned and expanded an introductory interprofessional course to include more than 500 students from public health, social work, medicine, pharmacy, and nursing. The students participated in live class meetings and completed required online coursework both individually or in assigned small groups. The course modifications and expanded student enrollment improved understanding of both key health concepts and interprofessional collaboration.

At the University of South Carolina, central administration created an interprofessional committee. The committee began as 5 members representing 5 schools and colleges in 2011 and then later expanded to 20 in 2014. The committee was responsible for facilitating and delivering IPE learning and service opportunities to students from these colleges. It was successful in creating and implementing a foundation IPE course entitled “Transforming Health Care for the Future.”

The initial course began in 2012 with 201 medical and pharmacy students. In 2013, the class of 432 included nursing students as well. By 2014, the course included 500 students in

the physical therapy program and the Department of Communication Sciences and Disorders. Public health and social work students, both graduate and undergraduate, could take the course as an elective.

The course included three live meetings and a series of six web-based modules that students completed individually or in their assigned groups. All of the groups included representatives from as many of the various professions as possible. Each group had its own discussion board in the campus learning management system. Live meetings became more interactive with student-centered facilitation.

Students were able to gain foundational knowledge on collaborative care, teamwork, and enhanced communication in complex health systems. The curriculum was delivered and overseen by the IPE course directors. Both student and faculty facilitators reported that the new structure was more “organized, easier to deliver, and enjoyable for participants.”

*(Addy C.L., Browne T., Blake E.W., and Bailey J. Enhancing interprofessional education: Integrating public health and social work perspectives. American Journal of Public Health, 105: S106–S108. doi:10.2105/AJPH.2014.302502).*



# LINK BETWEEN STRONG PROFESSIONAL IDENTIFICATION AND INTERPROFESSIONAL EDUCATION FOR UNDERGRADUATE STUDENTS

Unlike some other health professions where clinical experience is built into the undergraduate curriculum (e.g., pharmacy, nursing), psychology undergraduates must pursue further education in order to practice as psychologists. Interprofessional education (IPE) may be of particular relevance to psychology undergraduates because they often work outside the field of psychology (e.g., legal, social, health) or pursue different psychology specialties (e.g., clinical, counselling, community) where collaboration with other health care professionals is likely to occur.

Researchers from Curtin University in Australia aimed to address whether psychology students' attitudes towards IPE varied according to their intended career directions and whether the perceived relevance of IPE mediated the relationship between intended career directions and attitudes toward IPE. In the context of this article, career directions referred to professional identification as a psychologist and practitioner orientation.

The results from 188 psychology undergraduates showed that the perceived relevance of IPE to future careers fully explained the relationship between student career directions and IPE attitudes—with stronger professional identification and practitioner orientation associated with greater perceived relevance and more positive and less negative attitudes toward IPE.

The authors suggested that if attitudes toward IPE are largely driven by the perceived relevance of IPE to their careers, faculty members should emphasize the importance of interprofessional collaboration in all workplace settings so students see a purpose in IPE regardless of their future goals.



(Roberts L., Dawn F. (2015). *Interprofessional education for first year psychology students: career plans, perceived relevance and attitudes. Journal of Interprofessional Care, 29(3), 188-194.*

## COLLABORATIVE PRE-SERVICE PROJECT IMPROVES COMPETENCY MASTERY FOR SCHOOL MENTAL HEALTH TRAINEES



Researchers at the University of South Carolina examined the effectiveness, feasibility, and acceptability of an interprofessional (IP), pre-service school mental health (SMH) educational intervention implemented at a university in the southeastern United States. The IP intervention consisted of the following two components:

- 10 monthly 2-hour meetings for SMH trainees focused on IP collaboration and related competences for SMH practice
- a school-based component where trainees worked in IP teams to implement a SMH intervention and met monthly to discuss cases

Eight SMH trainees provided information pre- and post-intervention via a survey, focus group, and reflection journals on their perceptions of competence, the challenges and successes related to IP collaboration, and the feasibility and acceptability of the IP approach. Results showed that in regard to effectiveness, there were improvements to all post-competency scores, with significant improvements to “key policies/laws,” “provision of learning supports,” and “provision of supports for mood disorders.”

In regard to feasibility, some of the issues raised related to the difficulty in scheduling time to meet with other team members and challenges in project coordination resulting from time spent on administrative issues. In regard to acceptability, some of the issues raised included the skills being taught not being relevant and how the increased role flexibility created an imbalance in effort for team members.

The authors recommend the following for developing pre-service SMH strategies:

- mapping discipline-specific requirements and placement options so administrators can identify potential challenges and maximize IP collaboration
- assessing the goals and skills of the trainees so more individualized SMH content can be developed

(Lachini A.L., Warren M.E., Splett J.W., George M.W., Taylor L.K., Weist M.D. (2015). *Exploring the impact of a pre-service interprofessional educational intervention for school mental health trainees. Journal of Interprofessional Care, 29(2), 162-164. <http://dx.doi.org/10.3109/13561820.2014.934957>.*

# AN INTERPROFESSIONAL TREATMENT APPROACH IMPROVES DIABETES OUTCOMES IN UNDERSERVED POPULATIONS



Diabetes is a major health concern as it is the leading cause of blindness, non-traumatic lower-limb amputations, and kidney failure, as well as a main contributor to heart disease and stroke. Patients with diabetes require medication management as well as counseling and education in order to manage the symptoms and progression of the disease. In an effort to improve diabetes outcomes in underserved populations, an interprofessional approach was utilized at a not-for-profit community health clinic.

There are many challenges community clinics face when working with underserved populations. These barriers include serving a less-educated patient population and having access to fewer resources, while also requiring more time in regard to assessing and addressing specific individual patient needs. When an interprofessional team consisting of a physician, pharmacist, nurse practitioner, and pre-health professional students worked together, patients with diabetes saw improvements in their HgA1c levels, blood pressure, and triglycerides. The study also revealed that there were significant medical cost savings.

These findings show that despite the obstacles free community clinics face, a team-based, interprofessional approach when working with underserved patients with diabetes can result in positive outcomes such as improved health measures and decreased medical costs.

*(W. Hutchison R. (2014). Treating diabetes in underserved populations using an interprofessional care team. Journal of Interprofessional Care, 28(6), 568-569. doi:10.3109/13561820.2014.917408).*

In Nigeria, cultural acknowledgement of the existence of pain may be the primary barrier to full implementation of pain management for HIV. Although new HIV infections have declined by 25 percent worldwide, millions of people living in Sub-Saharan Africa remain infected. A comprehensive team of health professionals implemented interprofessional training to improve pain management (PM) treatment for people living with HIV.

Using the palliative approach, local program managers appointed a central focal team to be mentored as leaders for future activities. In the Nigerian program, following a five-day general introduction to the palliative approach to care, the IP program managers selected to introduce three specific topics regionally. The external education team consisted of two physicians, one nurse, and one social worker, all of who were experienced in PM for patients with HIV in the African cultural context. In addition, the team provided comprehensive training to participants in a five-day capacity-building workshop.

Presentations were utilized to identify cultural beliefs regarding the experience of pain in Nigeria. The workshop's goals included

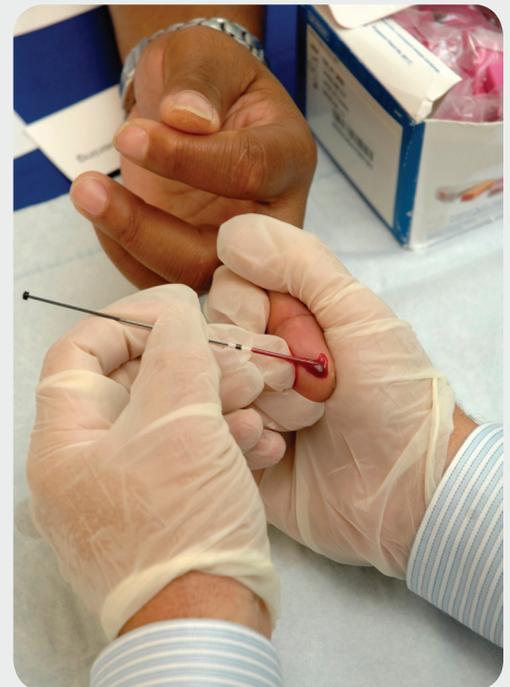
- reviewing the HIV care and support continuum of illness as a framework for understanding patient needs throughout illness

- observing current PM approaches through the eyes of the selected professional learners using case discussion, chart reviews, and home, clinic, or hospital visits with patients experiencing pain
- conducting small-group discussions regarding PM by discipline and as multidisciplinary groups
- reviewing with the focal team daily proceedings to improve and target next-day activities
- integrating care for care providers
- clarifying next steps for the focal team

The workshop introduced new concepts to participants not routinely considered in HIV care delivery. For members of the training team, the workshop was their first experience of working as an interprofessional team. All participants were able to identify challenges and engaged in group problem-solving. As a result, HIV trainers were able to identify barriers to introducing PM from the views of patients, providers, culture, and the health environment.

*(Alexander C.S., Pappas G., Henley Y., Kangalawe A.K., Oyebola F.O., Obiefune M., Redfield, R.R. (2014). Pain management for persons living with HIV disease experience with interprofessional education in Nigeria. American Journal of Hospice and Palliative Medicine, 1049909114527153).*

## IPE TO IMPROVE PAIN MANAGEMENT FOR PERSONS LIVING WITH HIV IN NIGERIA



# UNIVERSITY OF IOWA COLLEGE OF PUBLIC HEALTH SERVES AS CATALYST FOR IPE ON HEALTH SCIENCES' CAMPUS

Public health has a critical role to play within IPE; however, schools of public health are often underrepresented in IPE initiatives. With the implementation of the Patient Protection and Affordable Care Act in 2010, there has been more emphasis placed on improving outcomes in primary care. Therefore, interprofessional and team-based care in the health care setting has become more important than ever. Research shows that patients receive overall better quality care when health professionals communicate and work as a team.

The University of Iowa's College of Public Health is serving as a catalyst for IPE initiatives within its health sciences' campus, which comprises colleges of dentistry, medicine, nursing, pharmacy, and public health. The college formed an IPE steering committee with representatives from each of the health sciences' colleges, the hospital nurse residency program, and the physical therapy program. The College of Public Health volunteered to chair the IPE Steering Committee and take the lead role on activities and initiatives. Financial support for the IPE initiatives was provided by the Office of the Vice President for Medical Affairs and the Office of the Provost.

The steering committee used several methods to evaluate the current status, opportunities, and challenges of establishing an IPE program, including outside consultation to other universities with strong IPE programs, a multi-college survey, and a curriculum inventory. As a result of research and initial work done by the steering committee, a comprehensive strategic plan was developed that describes activities, resources, and inputs that are necessary for IPE to grow at The University of Iowa.

The strategic plan consists of the following four goal areas:

- Logistics and Sustainability
- Faculty Development
- Curricula and Learning Opportunities
- Student Engagement

Additionally, a pilot offering of an IPE course titled "Interprofessional Skills and Team-Based Health Care" was implemented in the fall of 2013 as a required course for all pre-licensure students (in dentistry, medicine, pharmacy, and nursing) and Master of Health Administration students (in public health). In the future, the committee plans to expand IPE to other students on the campus in speech pathology and audiology, as well as social work.

*(Uden-Holman T., Curry S.J., Benz L., Aquilino M.L. (2015). Public health as a catalyst for interprofessional education on a health sciences campus. American Journal of Public Health, 105, S104-S105. Retrieved from <http://search.proquest.com.ezproxylocal.library.nova.edu/docview/1660149658?accountid=6579>).*



## VIRTUAL PATIENT CARE PROVIDES INTERPROFESSIONAL OPPORTUNITIES FOR PA, PT, AND OT STUDENTS

The implementation of simulation-based interprofessional education (IPE) learning activities is often faced with obstacles due to cost, resources, facilities, and faculty time, as well as difficulties in coordinating student schedules and curricula. However, the use of computer-based programs such as VirtualPT and DxR Clinician provides an opportunity for interprofessional learning, as small groups of students are able to work together to diagnose and treat virtual patients. Virtual interprofessional learning opportunities can overcome the barriers posed by the more traditional, large-scale methods of IPE by allowing smaller groups to coordinate their own schedules with or without a faculty adviser.

A study showed that when physician assistant, physical therapy, and occupational therapy students utilized computer-based programs to treat a virtual patient through an interprofessional approach, they were able to experience the benefits of collaborative care, clear the roles of other profes-

sions, and relate the importance of IPE to their future practice. They found that an interprofessional approach was more holistic, leading to a more accurate and complete diagnosis and treatment plan. They also reported role clarification of the other professions, which allowed students to identify their unique scope of practice, as well as shared areas of overlap.

Lastly, students reported that the interprofessional experience was relevant to their future practice, as they felt more comfortable and confident in collaborating in the future, as well as being more likely to make referrals to the other professions. This study showed that virtual IPE opportunities not only overcome the barriers of traditional simulation-based IPE activities, but are also effective in facilitating IPE learning objectives.

*(Shoemaker M.J., Platko C.M., Cleghorn S.M., Booth A. (2014). Virtual patient care: an interprofessional education approach for physician assistant, physical therapy, and occupational therapy students. Journal of Interprofessional Care, 28(4), 365-367. doi:10.3109/13561820.2014.891978).*

Rendering of the NSU Center for Collaborative Research, which is expected to be completed in early 2016.



## College of Osteopathic Medicine

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Located within the NSU-COM Office of Research and Innovation, the Center for Interprofessional Education and Practice was established to support inter-professional learning and collaborative practice at NSU's Health Professions Division, with the goal of enhancing patient-centered and community-oriented care through providing our students, as well as our faculty and staff members, with opportunities to purposefully learn and work together. The center was established through support from the Health Resources and Services Administration. The *Interprofessional Education Digest* is published quarterly through the Center for Interprofessional Education and Practice that is housed within the NSU-COM Office of Research and Innovation.

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