**Interprofessional Education (IPE)**

**What is it:**  Interprofessional Education (IPE) is “when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes” (World Health Organization, 2010).

**Why is it important:** IPE is designed to enable professional students and faculty to:

* Work with individuals of other professions to maintain a climate of mutual respect and shared values.
* Use the knowledge of one’s own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations.
* Communicate with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease.
* Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan, deliver, and evaluate patient/population centered care and population health programs and policies that are safe, timely, efficient, effective, and equitable.

(Excerpted from Interprofessional Education Collaborative, Expert Panel, 2016.)

**2025 IPE Day Student Activity Overview**

During the upcoming IPE Day student activity, you will engage in a simulation activity, through use of a Standardized Patient (SP), as an introduction to the four domains of the Interprofessional Education Collaborative (IPEC) Core Competencies for Interprofessional Collaborative Practice.  By the end of the student activity, it is anticipated that you will begin to understand:

1. Values and Ethics for Interprofessional Practice;
2. Professional Roles and Responsibilities, specifically:
3. Communicate one’s roles and responsibilities clearly to patients, families, community members, and other professionals.;
4. Interprofessional Communication, specifically:
5. Respect the unique cultures, values, roles/responsibilities, and expertise of other health professions and the impact these factors can have on health outcomes.;
6. Listen actively and encourage ideas and opinions of other team members;
7. . Engage health and other professionals in shared patient-centered and population-focused problem-solving; and
8. Teams and Teamwork, specifically:
9. Act with honesty and integrity in relationships with patients, families, communities, and other team members.; and
10. Reflect on individual and team performance for individual, as well as team, performance improvement.

**Roles of Other Professions**

To facilitate this collaboration, we are providing you with a document that provides an extremely abbreviated format of the roles of other professions.  We hope that this will help you better understand the perspectives the other team members contribute to patient care and population health.  Remember, these are brief overviews and do not fully encompass the roles of each profession.  You will have an opportunity to explore these roles further as you gather with colleagues during this activity.

|  |  |
| --- | --- |
| **Audiology:**  | 1. Use technology, creative problem solving, and social skills to identify and treat hearing, balance, tinnitus, and other auditory disorders.
2. Help people with these disorders better communicate and connect with the world around them.

  |
| **Clinical Laboratory Scientists or Medical Technologists:**  | 1. Performs the testing necessary for patient diagnosis and monitoring of treatment regimens; playing a vital role in the delivery of quality patient care.
2. Consults with physicians and other healthcare professionals to select the most appropriate laboratory assays to rule in or rule out potential diagnoses and to ensure treatment efficacy.

  |
| **Dentistry:**  | 1. The general dentist is the primary oral health care provider-the dentist collects data on a patient’s medical, social, and oral condition to assess the inter-relationship of these components with the oral health needs of the patient.
2. The dentist is supported by a team of dental specialists, allied dental professionals and other medical professionals to provide oral health diagnosis and care.
3. The general dentist must be able to independently and collaboratively practice evidence-based comprehensive dentistry with the ultimate goal of improving the health of society.
4. The dentist uses biomedical knowledge, clinical skills, communication, and other skills to address current and future issues in health care, with emphasis on oral health care.

  |
| **Dental Hygiene:**  | 1. Do full health histories
2. Identify drug interactions
3. Take blood pressures
4. Educate patients regarding oral health, systemic health, nutrition – primarily related to oral health – and counsel on tobacco cessation.
5. Do risk assessments for periodontal and caries diseases.
6. Triage with dentists to determine ways to best treat the patient.
7. In Maryland, dental hygienists can treat patients in public health facilities without dental presence, but cannot in for-profit LTC facilities

  |
| **Law:**  | Addresses policy relating to: 1. Access to care;
2. Insurance coverage;
3. Difficult ethical choices (particularly at the beginning and end of life);
4. Providers of care (and how these providers are organized and paid);
5. Safety of our drugs and food supply;
6. Disease prevention and treatment.

  |
| **Medicine:**  | 1.  Consider the role of the patient’s medical condition on patient health and functional status;  2.  Consider home-based primary care services or assign a medical liaison to monitor patient’s health; 3.  Consider other medical specialists needed for consultative purposes; and 4.  Assess medication regimen contribution to worsening medical/functional status    polypharmacy.   |
| **Nurse Practitioner:**  | 1. Licensed, independent practitioners who practice in ambulatory, acute and long-term care as primary and/or specialty care providers;

2.  Focus on disease prevention and health promotion; 3.  Assess, diagnose, treat and manage acute episodic and chronic illnesses;  4.  Order, conduct, supervise, and interpret diagnostic and laboratory tests, prescribe pharmacological agents and non-pharmacologic therapies, and teach and counsel patients.   |
| **Nursing:**   | 1. Assess patient & family from a holistic standpoint (physical and psychosocial).  Specifics might include the impact of the illness on patient and family daily functions;
2. Provide patient education regarding medication/disease process;
3. Identify opportunities to facilitate clarification and advocacy for the patient and family perspective during the interprofessional team planning

  |
| **Pharmacy:**       | 1. Provide comprehensive medication reviews for regimen optimization;
2. Simplify complex medication regimens to enhance adherence;
3. Recommend medication switches/substitutions to enhance access to medications for those that cannot afford or do not have medication insurance;
4. Comprehensive medication and chronic disease education.

  |
| **Physician Assistant:**  | 1.  Consider the role of the patient’s medical condition on patient health and functional status;  2.  Consider home-based primary care services or assign a medical liaison to monitor patient’s health; 3.  Consider other medical specialists needed for consultative purposes; and 4.  Assess medication regimen contribution to worsening medical/functional status    polypharmacy.  |
| **Physical Therapy:**  | 1. Comprehensive examination with emphasis on movement and functional mobility including motor control, strength, ROM, postural control/balance, sensation, cognition, and pain.  A systems approach includes examination of the neurologic, cardiopulmonary, integumentary, and musculoskeletal systems as well as health/wellness and prevention
2. Interventions focused on improving movement and functional mobility for independent function, pain management, and individual needs.
3. Discharge recommendations for patient and caregivers regarding home exercise program, discharge location, equipment needs, and/or other medical follow-up
4. Educate patients and caregivers relative to interventions and recommendations
5. Work with patients across the lifespan and in any setting with a variety of diagnoses.

  |
| **Public Health:**  | 1. Assess and monitor population health using qualitative and quantitative research methods.
2. Investigate, diagnose and address health hazards and root causes of disease and injury.
3. Strengthen, support and mobilize communities and partnerships.
4. Create, champion and implement health policies, plans and laws.
5. Enable equitable access to healthcare.
6. Improve and innovate through evaluation, research and quality improvement.
7. Build and maintain a strong organizational infrastructure for public health.

  |
| **Social Work:**  | 1. Plays an instrumental role in proactively identifying and/ or responding to patient and family psycho-social needs that emerge during a healthcare encounter. Psycho-social needs are “non-medical” needs such as:
2. resource gaps;
3. concerns related to the presence/ absence of social support;
4. legal and financial concerns; and
5. individual *ability* to comply with treatment recommendations.
6. May provide emotional support to patients and families in crisis and aid in facilitating communications between providers and patients and family members.
7. Monitor for potential ethical dilemmas within the care coordination process to ensure that patients and families are being provided with appropriate standards of care.
8. Responsible for discharge planning (e.g. referral to home health, skilled nursing facility), linking patients and families with appropriate resources, and with the overall facilitation of the plan of care.

  |
| **Speech-Language Pathology:**  | 1. Work on communication, cognition and swallowing in many different settings, with

patients across the lifespan.  1. Assess, educate, and provide therapy for disorders of language, speech, voice, stuttering, cognition, social communication and swallowing, and some therapists specialize in other areas like accent modification or transgender voice therapy.
2. Serve clients with stroke, degenerative conditions like Parkinson’s and Alzheimer’s disease, autism, traumatic brain injury, head/neck cancer and pediatric developmental differences to promote overall communication, cognition and swallowing.
 |