

The Accreditation Council for Pharmacy Education (ACPE)

The American Nurses Credentialing Center (ANCC)

# 2021 Joint Accreditation Leadership Summit The Future of Education: Connecting & Collaborating





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### Introduction

On September 30-October 1, 2021, more than 190 interprofessional continuing education (IPCE) professionals, representing over 80 organizations, joined together during the seventh annual Joint Accreditation Leadership Summit. As in 2020, this year's Summit was held virtually.

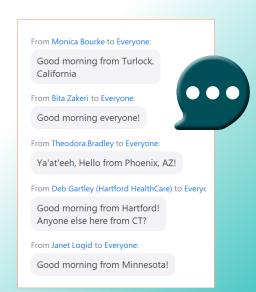
The Summit was convened by the three accreditors that cofounded Joint Accreditation: the Accreditation Council for Continuing Medical Education (ACCME®), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC).

Although we were unable to meet in person due to travel and gathering restrictions related to the pandemic, the Joint Accreditation Leadership Summit continued to support and strengthen the community of practice of jointly accredited providers through a virtual forum. Bringing together leaders of interprofessional education, the Summit explored the evolution of IPCE and fostered discussions on new innovative education approaches for the future. Throughout the conference, participants joined conversations on strategies to incorporate diversity, equity, and inclusion principles in IPCE programming, ways to boost learner engagement, exciting features of the new, improved Joint Accreditation Program and Activity Reporting System (JA-PARS), and case studies on achieving Joint Accreditation with Commendation.

## **Fostering Connections Despite Our Distance**

For the second consecutive year, the Summit was held in a virtual format, allowing participants to join from their home offices.

Our IPCE community continues to expand! We were joined by continuing education (CE) professionals from across the country and world, reminding us of the value of virtual meetings in bringing together colleagues from different regions and backgrounds.





Over the course of two days, our community of jointly accredited providers gathered via Zoom for enriching discussion on the future of IPCE and the power of collaboration. After almost two years of social distancing and working remotely, we created even more opportunities throughout the conference for participants to unwind and reconnect with their colleagues.

Based on feedback from participants of previous summits, we understood that some of the most memorable connections and rewarding conversations stemmed from casual lunch or break-time conversations. In an effort to recreate these impromptu chats in a virtual setting, we offered several topic-focused breakout rooms during the lunch hour, where participants were able to suggest conversation topics and join a breakout room based on their interests.

## Strength in Numbers

The first session was led by Kate Regnier, MA, MBA, Executive Vice President, Accreditation Council for Continuing Medical Education, Co-founder, Joint Accreditation. This session shared key data demonstrating the growth and impact of the IPCE community and featured a panel discussion with Joint Accreditation's associate member colleagues, including:

- Sierra Powell, Manager of Accreditation Services, Association of Regulatory Boards of Optometry's Council on Optometric Practitioner Education (ARBO/COPE)
- Lisa Casler Haun, Continuing Competence and Continuing Education Services Program Manager, Association of Social Work Boards (ASWB)
- Chris Kralik, Senior Manager, Monitoring and Compliance, Commission on Dietetic Registration (CDR)

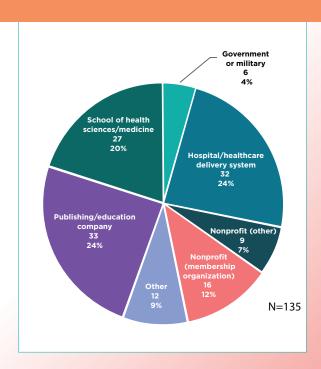
Since its inception in 2010, Joint Accreditation for Interprofessional Continuing Education has seen tremendous growth and expansion across health professions. This session shared data to illustrate the growth in the number of providers achieving Joint Accreditation, activities and learners during a pandemic, inclusion of other professions in CE, and compliance with Joint Accreditation criteria.

#### **KEY TAKEAWAYS INCLUDE:**

- Our community of jointly accredited providers represents a wide variety of organizations, currently including hospital/healthcare delivery systems (24%), publishing/education companies (24%), schools of health sciences/ medicine (20%), nonprofit member organizations (12%), other organizations such as patient safety and quality organizations (9%), other nonprofit organizations (7%), and government or military organizations (4%).
- Joint Accreditation is attracting a consistent stream of interested organizations, receiving 15-20 initial applicants yearly.
- A majority of jointly accredited providers have elected to add physician associates (PAs), social workers, and psychologists as part of their target audience portfolio, in addition to physicians, nurses, and pharmacists.
- The pandemic has prompted a necessary innovation in the development and delivery of CE; providers are redefining what learning environments and activities can and will look like based on the evolving needs of health professionals and teams.
- · Virtual longitudinal activities, like regularly scheduled series (RSS), were extremely valuable throughout the pandemic.

- Virtual learning environments engaged a greater number and diversity of faculty and learners from remote locations. introducing an even broader variety of perspectives and backgrounds.
- Seven jointly accredited providers have achieved Joint Accreditation with Commendation under the recently implemented Menu of Criteria for Joint Accreditation with Commendation, representing 50% of the organizations that submitted for this voluntary status.

#### JOINTLY ACCREDITED PROVIDERS **BY ORGANIZATION TYPE IN 2021**



## **Diversity and Collaboration: Addressing DEI Awareness through IPCE**

How can the IPCE community work to champion diversity, equity, and inclusion (DEI) principles in continuing education? This session featured a panel discussion of continuing education professionals who shared their perspectives and experiences in addressing DEI in their work. The goal of this session was to offer strategies and lessons learned on incorporating DEI values in accredited education, such as instructor selection and content development. This session was moderated by Kathy Chappell, PhD, RN, FNAP, FAAN, Senior Vice President, American Nurses Credentialing Center, Co-founder, Joint Accreditation.

#### Panelists included:

- Ernest Grant, PhD, RN, FAAN, President, American Nurses Association
- Kendra McMillan, MPH, RN, Senior Policy Advisor, Department. of Nursing Practice and Work Environment, American Nurses Association
- Barbara Jolly, RPh, MPA, LDE, Former Director, Office of Lifelong Professional Development, Sullivan University College of Pharmacy
- Tejal Gandhi, MD, MPH, CPPS, Chief Safety and Transformation Officer, Press Ganey
- Susan Simonian, PhD, ABPP, Professor Department of Psychology, College of Charleston
- Gary Y. Chu, OD, MPH, FAAO, Vice President, Professional Affairs, New England College of Optometry

The session began by offering an alternate lens to think about diversity, equity, and inclusion:

- Diversity is where everyone is invited to the party.
- **Inclusion** means that everyone gets to contribute to the playlist.
- Equity means that everyone has the opportunity to have fun.

Panelist presentations were followed by a Q&A discussion with participants. Key takeaways include:

- Applying DEI principles in accredited CE means creating learning environments where each learner's input is heard and valued.
- It's critical to recognize and reduce actual or perceived barriers to healthcare team performance, such as preexisting hierarchal structures. Consider icebreaker activities to get to know colleagues on a personal level or use first names rather than professional titles to establish connections.



Inequity is a system-based problem that requires a systembased approach."

- Tejal Gandhi, MD, MPH, CPPS, Chief Safety and Transformation Officer, Press Ganey



- When discussing a new policy or topic related to DEI, consider who is not in the room or not participating in the discussion. It's important to remember the phrase, "Nothing about us without us," meaning we can't assume we know what's best for others without consulting them.
- There are deeply rooted systemic issues in healthcare that we have to acknowledge and address in order to dismantle racism—these issues affect not only healthcare professionals and teams, but patient outcomes.
- All new learning results in some discomfort—it's expected for learners to feel discomfort when discussing historical harms like discrimination, racism, and structural inequities.
- We can't build inclusion and accessibility without equity, which is critical in healthcare.
- Approaches to DEI and accessibility need to be intentional and engage the entire team.
- Diversity is not one-dimensional. Beyond visible differences, diversity can relate to age, socioeconomic background, physical ability, cultural background, and religion.
- · Perceptions of diversity and inclusion are strongly correlated with safety culture.
- Ask colleagues about existing blind spots and together the team can provide education to help providers.

## Strategies for Incorporating DEI **Principles in Your IPCE Program**

Building on the lessons learned and experiences shared during the diversity and collaboration keynote panel, this session explored specific strategies for incorporating DEI principles in IPCE programming. This session was facilitated by Jennifer Graebe, MSN, RN, NEA-BC, Director, Nursing Continuing Professional Development and Joint Accreditation Program, American Nurses Credentialing Center.

The session began with a guided self-reflection exercise, where participants were encouraged to write down responses to the following prompts:



**DIVERSITY** is where everyone is invited to the party.

- How do you make sure everyone is invited?
- What do you do when you see someone was left out?
- Do you intentionally leave people off the guest list?
- Does everyone look like you? Does everyone think like you?



**INCLUSION** means that everyone gets to contribute to the playlist:

- How do you give opportunities to choose and provide ideas for the playlist?
- How do we learn from others' music choices?



**EQUITY** means that everyone has the opportunity to have fun:

- What measures or steps do you take to make sure everyone has a chance to have fun?
- How do you embrace their contributions (such as knowledge, experience, etc.)?



Summit participants were offered the opportunity to join concurrent discussion sessions on a variety of topics related to IPCE. Participants were able to choose one session or drop into other discussions over the course of an hour:

- Leveraging Technology to Reach Your Learners -Virtual & Hybrid Education
- Keeping Team Wellbeing in View
- JA-PARS Upgrade: First Look
- Faculty Development for IPCE
- Measuring Changes in the Team

Following the self-reflection exercise, participants congregated in breakout rooms to discuss their responses, feelings, and thoughts during the exercise. Strategies discussed included:

- Consider adding a question in the CE application process that asks the applicant how they will implement DEI principles in the planning committee or education they're seeking credit for.
- Weave DEI principles into the fabric of the educational planning, which can have a longer-lasting impact than one-off courses on DEI.
- Incorporate diverse patient perspectives and involve faculty from a wide variety of backgrounds, when possible.
- Authentic communication is key—engage people intentionally and thoughtfully.
- Consider ways to incorporate language surrounding health equity into your organization's mission statements and CE application.
- Applying DEI practices is not just inviting new people to the conversation, but also making them feel welcome and valued once they get there.
- Offer creative ways to allow people to have their voice heard—tailor your conversation to the needs and backgrounds of the participants.
- Remember that diversity of access to planning committees and conversations are vital—some participants may be more comfortable writing their thoughts down versus sharing verbally on the spot.

## Dare to F.A.I.L.: Lessons Learned From Trying New Things

Many of our greatest lessons come from our greatest failures. This panel discussion aimed to redefine what it means to fail and grow in our work and highlighted key learning experiences from jointly accredited providers. This session was moderated by Dimitra Travlos, PharmD, Assistant Executive Director & Director, Continuing Pharmacy Education Provider Accreditation, Accreditation Council for Pharmacy Education (ACPE), Co-founder, Joint Accreditation.

#### Panelists included:

- · Karen Kanefeld, CE Accreditation & Program Operations, National Comprehensive Cancer Network®
- Jan Wong, Associate Director for Accreditation, Veterans Health Administration, US Department of Veterans Affairs
- · Monica Bourke, MSN, BA, RN, Director, Continuing Professional Education, Dignity Health
- Anna Herbert, CPE Education Consultant, Cincinnati Children's Hospital Medical Center

#### **KEY TAKEAWAYS:**

 There was a steep learning curve for suddenly converting in-person conferences to virtual meetings during the COVID-19 pandemic; live and pre-recorded virtual presentations ran over the allotted times, creating additional editing burdens for staff. As a solution, the team at the National Comprehensive Cancer Network utilized BlueSky Meeting Timer, a digital extension that displays a countdown window within the Zoom application. This allowed faculty to see how much time they had remaining in their presentation and kept them on target to present their information within the allotted timeframe.

**F**irst **A**ttempt In Learning

- Recording live conferences was a labor-intensive process for the Veterans Health Administration (VHA) team, and few people ended up viewing these recordings after the event. The VHA team guickly learned that there are elements of a live conference that do not directly translate for online audiences, and educators should consider how to best engage online audiences during the process of planning enduring materials. Educators were encouraged to review the evaluation results for their live presentation and consider these results when translating the content into a virtual enduring material.
- Patients and their family members are a critical and underused resource in CE. The continuing professional development (CPD) department at Dignity Health assumed that clinicians understood the value in engaging patients in CE and would be willing to identify patients for educational activities. The team was surprised to learn that most clinicians engaged in CE planning were unfamiliar with or unwilling to involve patients in CE. As a result, the CPD team identified several patient engagement success stories and refined their elevator pitch to better approach clinicians with this idea. They also created an online portal for recruiting patients in CE activities, which included a list of different projects and subject matters for patients to participate in.

#### **TRANSITIONING** TO THE STANDARDS FOR INTEGRITY AND **INDEPENDENCE**

This workshop reviewed the Standards for Integrity and Independence in Accredited Continuing Education, and provided an overview of what's new and helpful resources for implementation. Jointly accredited providers were expected to implement the Standards by January 1, 2022. For more information on the Standards, including resources, case scenarios, and frequently asked questions, please visit https://jointaccreditation.org/ standards-resources.

 The CPD team at Cincinnati Children's quickly learned that new infrastructure brings new training challenges. With more than 600,000 square feet of new clinical space for critical care, the CPD team had to train approximately 6,000 staff members and explain workflows, processes, and skills in the new practice space. Training sessions were not specific to departments and clinical teams, which created unintentional learning gaps as different departments needed different information and education during the training. Consequently, the CPD team identified the departments present during training sessions and tailored the information and education to each group.

## Making a Case for Commendation: **Provider Success Stories**

This session highlighted key learnings and best practices in achieving Joint Accreditation with Commendation. The discussion was led by some of the first jointly accredited providers to achieve Joint Accreditation with Commendation in 2021, including:

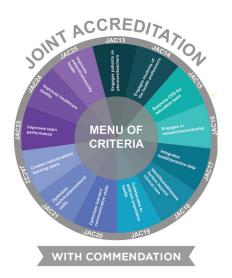
- Bina George-Figueroa, MS, CHCP, Director of Accreditation, Medical Learning Institute, Inc.
- Kristin Gusack, RD, CHCP, Executive Director, Medical Learning Institute, Inc.
- Steven Kawczak, PhD, CHCP, Director of Professional Development, Center for Continuing Education, Cleveland Clinic
- · Molly Mooney, Administrative Director, Center for Continuing Education, Cleveland Clinic
- Susan Yarbrough, CHCP, Director, Accreditation & Compliance, PRIME Education
- Lea Mabry, MEd, Director, Academic Affairs Office of Continuing Education, University of Arkansas for Medical Sciences

To achieve Joint Accreditation with Commendation, jointly accredited providers must demonstrate compliance with Joint Accreditation Criteria 1-12 and 7 of the 13 Commendation Criteria. This menu approach creates flexibility, reflects the diversity of the IPCE community, and offers a pathway for all provider types to achieve commendation.

#### Here are key questions to ask when thinking about achieving commendation:

- Are you focusing on the strengths of your program? What are you already doing that might meet the expectations of the Joint Accreditation Commendation Criteria?
- Where would you like your program to grow? What are your organization's priorities? What is your IPCE mission?
- Can you identify any opportunities to meet multiple criteria with the same activities or efforts?
- Have you reviewed the Critical Elements and Standards for Compliance to ensure you meet the expectations?

For more information about Joint Accreditation with Commendation, please visit www.jointaccreditation.org/commendation.



#### Tips from jointly accredited providers who achieved Joint Accreditation with **Commendation:**

- Ensure you are succinct yet explicit in how you plan to utilize learners in both the planning process and presentation of your CE activities.
- Consider including video content in educational activities, allowing enough time for presenters to practice their content and feel comfortable, as well as enough time to edit the videos.
- · While you only need to meet seven out of the 20 available Joint Accreditation with Commendation Criteria, it is helpful to aim to achieve more than seven to allow yourself extra leeway for achieving Commendation. Note: providers are only able to submit evidence for seven criteria.
- Pay close attention to detail—most criteria have several critical elements that must be met to achieve commendation.
- Meeting these additional criteria are not just about checking a box, but making intentional, structural enhancements that improve the overall integrity of your program.
- Be deliberate about your project selections and identify activities that play to your program's strengths.
- Prepare for your commendation interview; consider printing out your self-study for reference during your interview and practice mock interviews in advance.

#### CONGRATULATIONS TO PROVIDERS THAT RECEIVED JOINT ACCREDITATION WITH COMMENDATION

We are delighted to acknowledge seven jointly accredited providers that became the first to achieve commendation in 2021, including:

- Cleveland Clinic Center for Continuing Education
- Dignity Health
- Medical Learning Institute, Inc.
- National Center for Interprofessional Practice and Education
- North American Center for Continuing Medical Education
- PRIME Education
- University of Arkansas for Medical Sciences Office of Continuing Education



## **Conclusion: The Future of Team-Based Education is Bright**

The closing session of the Summit featured an overview of the National Collaborative for Improving the Clinical Learning Environment (NCICLE) Pathways to Excellence, and a discussion on how this tool can help advance IPCE. The conversation was led by:

- Robin Wagner, RN, MHSA, Senior Vice President, Clinical Learning Environment Review, Accreditation Council for Continuing Graduate Medical Education (ACGME)
- Lya Cartwright-Stroupe, DNP, APRN, CPNP, NEA-BC, NPD-BC, Commissioner, Commission for Accreditation, American Nurses Credentialing Center (ANCC)

The NCICLE aims to provide a forum for organizations dedicated to improving educational activities and patient outcomes with clinical learning environments (CLEs). NCICLE also seeks to simultaneously improve the quality of learning and patient care within CLEs through shared learning and collaborative practice among its member organizations.

Clinical Learning Environments (CLEs) are the medical centers, ambulatory sites, and other healthcare settings across the continuum of care where learning takes place in the context of providing patient care. (National Collaborative for Improving the Clinical Learning Environment, 2021)

The NCICLE Pathways to Excellence: Expectations for an Optimal Interprofessional Clinical Learning Environment to Achieve Safe and High-Quality Patient Care is a helpful tool for promoting discussions and actions to optimize interprofessional CLEs. This publication is intended to assist the healthcare professionals as they engage in dialogue with the executive leaders of CLEs to design infrastructure and processes that optimize learning and patient care across key areas including:

- Patient Safety
- Teaming
- Well-being

- Healthcare Quality
- Supervision
- Professionalism

NCICLE POR BEPROMISE THE CLEMENT. NCICLE Pathways to Excellence: CLINICAL LEARNING ENVIRONMENT TO ACHIEVE SAFE AND HIGH-QUALITY PATIENT CARE 2021

The NCICLE Pathways to Excellence is not a list of requirements, but rather guiding principles developed with input from experts across the focus areas and health professions. Learn more about the interprofessional clinical learning environment at https://ncicle.org/interprofessional-cle.



## Mark your calendar for the 2022 Joint Accreditation Leadership Summit!

Save the date for the next Joint Accreditation Leadership Summit on September 29-30, 2022. If you're a jointly accredited provider or an organization with an approved Intent to Apply and in the process of applying for Joint Accreditation, you will receive an invitation via email in the fall. Explore previous leadership summit reports on the Joint Accreditation website at https://jointaccreditation.org/reports.

We are delighted to see the IPCE community's continued growth and success. To date, our IPCE community has expanded to include:

- 10 professions
- 130+ accredited organizations
- 57,000+ educational activities each year
- 23 million interactions with healthcare professionals each year

#### What is the definition of IPCE?

IPCE is when members from two or more professions learn with, from, and about each other to enable effective collaboration and improve health outcomes. (ACCME, ACPE, ANCC, 2015)

# About Joint Accreditation for Interprofessional Continuing Education

Joint Accreditation for Interprofessional
Continuing Education™ offers organizations
the opportunity to be simultaneously accredited
to provide continuing education for athletic
trainers, dentists, dietitians, nurses, optometrists,
PAs (physician associates), pharmacists, physicians,
psychologists, and social workers through a
single, unified application process, fee structure,
and set of accreditation standards. Jointly
accredited providers may award single profession
or IPCE credit to participating professions without
needing to obtain separate accreditations.
Joint Accreditation for Interprofessional
Continuing Education is the first and only
process in the world offering this benefit.

Joint Accreditation for Interprofessional Continuing Education is a collaboration of the following organizations:

- Accreditation Council for Continuing
   Medical Education (ACCME) Co-founder
- Accreditation Council for Pharmacy Education (ACPE) - Co-founder
- American Nurses Credentialing Center (ANCC) - Co-founder
- American Academy of Physician Associates (AAPA)
- American Dental Association's Continuing Education Recognition Program (ADA CERP)
- American Psychological Association (APA)
- Association of Regulatory Boards of Optometry's Council on Optometric Practitioner Education (ARBO/COPE)
- Association of Social Work Boards (ASWB)
- Board of Certification for the Athletic Trainer (BOC)
- Commission on Dietetic Registration (CDR)

For more information, visit www.jointaccreditation.org.





Joint Accreditation for Interprofessional Continuing Education  $^{\text{\tiny TM}}$  Advancing Healthcare Education by the Team for the Team

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