



JOINT ACCREDITATION™
INTERPROFESSIONAL CONTINUING EDUCATION

IPCE Works! Identifying Measures of Success and Evaluating Our Impact

*Report from the 2018
Joint Accreditation Leadership Summit*



The Accreditation Council for
Continuing Medical Education
(ACCME®)

The Accreditation Council for
Pharmacy Education (ACPE)

The American Nurses
Credentialing Center (ANCC)



Dedication

This report is dedicated to Scott Reeves, PhD, MSc, PGCE, BSc (1967-2018).




A leader in interprofessional education (IPE), he served as Professor in Interprofessional Research at Kingston University and St. George's, University of London; and as Editor in Chief, *Journal of Interprofessional Care*. At the 2017 Joint Accreditation Leadership Summit, we were privileged to welcome Prof. Reeves as our keynote speaker. During his presentation he offered insight about how to reach beyond our own institutions and learners to offer insight to the wider IPE community—he exemplified this collaborative spirit through his generous sharing of his expertise with all of us who knew him and

benefited from his wisdom and passion. His contributions to the field of IPE will continue to shape our field for many years to come.

One of Professor Reeves's last works of co-authored research, entitled ["Interprofessional Collaboration for a Health System in Crisis,"](#) has been published in his memory by *NEJM Catalyst*.

The Leadership Summit and this report were supported (in part) by the Josiah Macy Jr. Foundation.

This publication is the third in a series. The first report, *By the Team for the Team: Evolving Interprofessional Continuing Education™ for Optimal Patient Care*, and the second report, *Promoting Research across the Continuum of Health Professions Education: Making Patient Care Better*, are available at www.jointaccreditation.org.



Sharrie Cranford, LMSW, MS, CME Director,
University of South Alabama, discusses the
role of the patient in the healthcare team.

Introduction

On July 29, 2018, 61 interprofessional continuing education (IPCE) professionals, representing 38 organizations, participated in the fourth annual Joint Accreditation Leadership Summit.

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).

Jointly accredited providers identified the need to improve strategies for evaluating change in the interprofessional team as well as assessing the impact of IPCE on healthcare delivery and patient outcomes.

“Over the years, as accreditors, we’ve looked at what we can do to more

effectively support jointly accredited providers in the work that they do. We look at data from our joint accreditation decisions and we also reviewed the discussion at last year’s meeting, where we talked about research, publishing, evaluation, and assessment and said, ‘What can we bring to this summit that would be practical and provide hands-on tools?’” said Kate Regnier, MA, MBA, ACCME Executive Vice President.

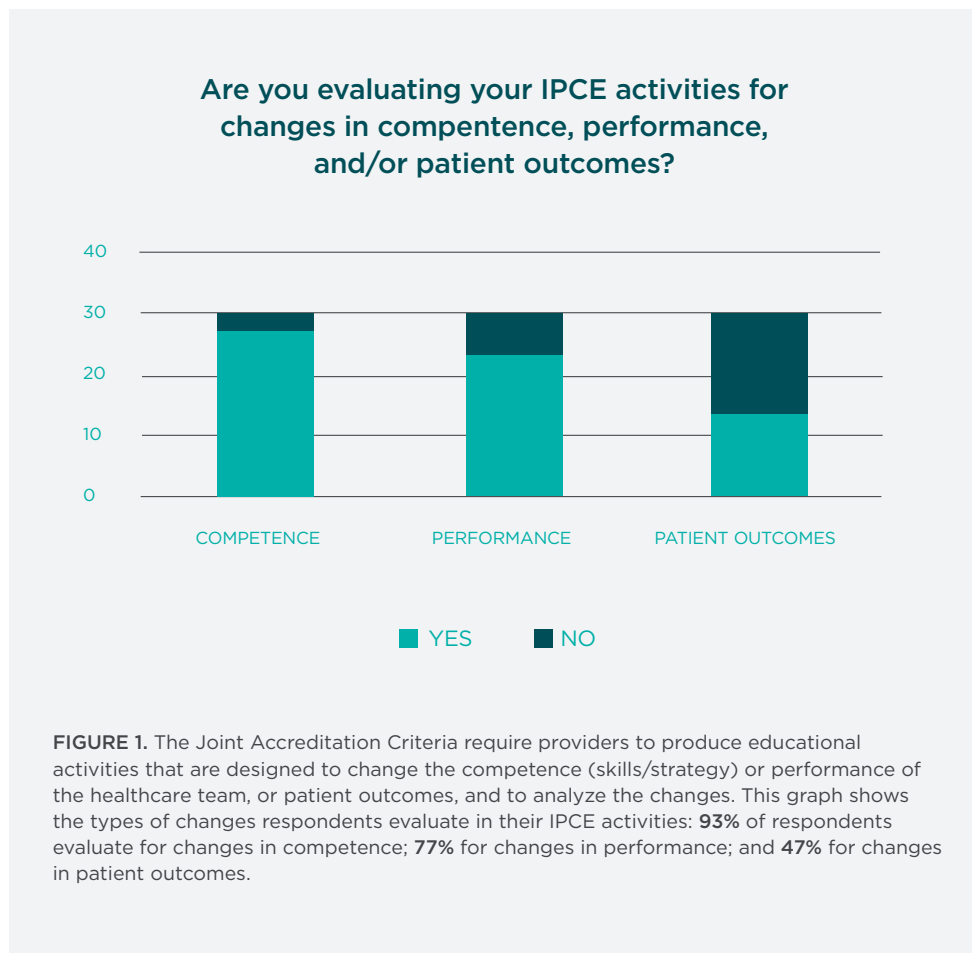
In response, this year’s Summit brought together leaders in IPCE and team assessment with organizations that are focused on IPCE to explore

opportunities to better evaluate and communicate the impact of IPCE on healthcare.

Prior to the Summit, participants completed a survey about their experiences with assessment and evaluation. The results of this survey further emphasized the value of focusing this year's Summit on assessment and evaluation. Data showed that the majority of respondents are evaluating for changes in competence (skills/strategy) and performance, but that

evaluation of patient outcomes is perceived to be much more challenging (see figure 1).

Conducted in three parts, the Summit incorporated discussion about assessment of interprofessional teams, breakout sessions about hot topics in IPCE, and a concluding session with a deeper exploration of tools and resources to evaluate the interprofessional team.



Carole Orchard, BSN, MEd, EdD, speaks about how to effectively assess IPE teams.



- Take a copy of a the Table Talk #1 package on your table.
- Choose a role card on the table, and be prepared to enact
- Enact being representatives of the total Diabetes Program hospital
- As a team discuss the issues, sources for them, gaps in competence/performance/practice and consider how to change to the rest of the team.
- A worksheet to prepare notes on is provided in your Table below the case scenario.

Assessment of Interprofessional Teams

In the morning session, participants explored how to assess the transfer of learning into practice as it relates to interprofessional teams, interprofessional collaborative practice, and patient outcomes.

The session was led by Carole Orchard, BSN, MEd, EdD, Professor in the Arthur Labatt Family School of Nursing at the University of Western Ontario and former Coordinator for Interprofessional Health Education & Research for the University.

Dr. Orchard explained that assessment of interprofessional teams should evaluate the effectiveness of collaborative teamwork and its consistency in supporting patients as drivers of their own care. To do so, clinicians must understand

that patients need to know how to manage their care. Clinicians should act as facilitators of change for patients and/or family members to improve patients' health outcomes. This involves:

- Listening to patients and/or family members to understand what goals they are seeking to achieve
- Sharing potential interventions that can help them achieve these goals

- Allowing patients and/or family members to select interventions in the sequence that will work best for them
- Helping patients and/or family members identify key indicators of goal achievement

With this in mind, patients should play a key role in creating education for interprofessional teams.

To explore this concept further, participants broke into groups to role-play a scenario in which they were to act as representatives from various health professions in a diabetes program, including the patient. Each group was then asked to evaluate its team's partnership, cooperation, and coordination using a validated instrument. This group activity demonstrated the complexity of evaluating professional practice gaps for healthcare teams, and how the individual roles can contribute or detract from collaborative practice. In the group discussion, participants expressed the value of this holistic approach to planning and evaluation.

In her presentation, Dr. Orchard shared some of the theoretical bases for IPCE including intergroup contact theory¹ that underlies the importance of learning from, with, and about each other. Dr. Orchard also highlighted

areas that should be a focus of IPCE activities including: team-based skills, attitudes, performance leading to patient outcomes; relational abilities to work with others; and an individual's contribution to team-based work.

In developing IPCE education, planners must understand what areas of the interprofessional team need improvement. Dr. Orchard and her colleagues developed a diagnostic instrument to evaluate the level of interprofessional collaboration among a variety of healthcare teams. This tool, Assessment of Interprofessional Team Collaboration Scale (AITCS-II), measures partnership, cooperation, and coordination in a 23-item self-report instrument. The results are meant to provide insight into the strengths and weakness of interprofessional teams in a variety of settings. The AITCS tool can be used to structure learning and assess outcomes when applied to interprofessional teamwork. It allows the evaluator to gain insight into the team's practice performance, and identify areas of weakness to target through intervention.

¹ Allport, G. W. (1954). *The Nature of Prejudice*. Cambridge, Mass: Addison-Wesley Pub. Co.; Pettigrew, T. F. (1998). Intergroup Contact Theory. *Annual Review of Psychology*, 49(1), 65-85.

— Evaluation Challenges and Strategies —

The pre-summit survey asked providers to identify some of the challenges they are facing in evaluating team-based outcomes and strategies they have put into place to address these challenges.

CHALLENGE	STRATEGY
Learners participate in the activity as individuals, so team-based outcomes data is gathered from individuals only.	<ul style="list-style-type: none"> • We updated the language in our learning objectives and our evaluation questions to underscore the expectation that individual gains in knowledge or competence should translate to changes that will impact the performance of the team.
Team-based outcomes are assessed based on an individual's intention to change as a proxy for team change.	<ul style="list-style-type: none"> • We are in the process of developing a longitudinal team-based outcomes study to measure the actual impact of the educational activity. • We are developing an exercise to conduct after the activity using a case study to illustrate how the educational principles can be applied in a team setting and how their application might facilitate change in team-based outcomes.
Low response rate to surveys; poor quality feedback.	<ul style="list-style-type: none"> • We offer small incentives to increase survey participation. • We are considering having focus groups with participants three and six months after the activity. • We try to keep evaluations short (three to four questions) and limit the frequency when possible by grouping similar programs into one evaluation. • Immediately following the activity, we ask participants to indicate the impact of the education on their professional practice and thirty days later, a one-question follow-up survey is sent asking if the impact has been realized. • We are investing in a CE documentation program that makes electronic evaluations more accessible (available immediately via smart phone) and automates outcomes studies.
Connecting outcomes directly to the IPCE.	<ul style="list-style-type: none"> • We are working with the measurement and evaluation department to develop more focused, higher-level evaluations. • We utilize a specific software program that reports healthcare outcomes to connect the dots between IPCE activities and patient care outcomes.
Evaluating for team-based outcomes when participants do not see themselves as working in a team-centered setting or were educated in an era prior to IPCE and do not think IPCE core competencies apply to them.	<ul style="list-style-type: none"> • We have incorporated more team-based care information into our programming. • We encourage our speakers to emphasize the importance of communications and other team skills. • We highlight the need for a team-based environment by addressing transitions of care.
Non-physicians do not see themselves as peers or equals in the learning. They often see themselves in support roles and not as team members with full accountability.	<ul style="list-style-type: none"> • We are continuing to express the value of all members of the planning committee and learner audience for each interprofessional activity.

Kathy Chappell, PhD, RN, FNAP, FAAN, Senior Vice President of Accreditation, Certification, Measurement, Quality, and the Institute for Credentialing Research, ANCC, leads a discussion on the progress that the IPCE community has made regarding research.



Hot Topics in IPCE

Later in the morning, Summit participants rotated through three topic-based breakout sessions, facilitated by Joint Accreditation leadership.

During these sessions, IPCE professionals had opportunities to discuss topics in-depth, to further learn from each other's experiences in managing IPCE programs, and to share their summative reports back with the larger group.

Measure Our Progress: What We've Done Related to Research on IPCE

The focus of last year's Joint Accreditation Leadership Summit was strategies for conducting and disseminating research. In this session, Kathy Chappell, PhD, RN, FNAP, FAAN, Senior Vice President of Accreditation, Certification, Measurement, Quality, and the

Institute for Credentialing Research, ANCC, led a discussion on the progress that the IPCE community has made regarding research. Themes that emerged during the discussions included:

- Developing communities of practice and collaborating to conduct research, develop and disseminate surveys, and share best practices
- Validating principles for success in IPCE including executive leadership support, staff-driven leadership, and external drivers as an impetus for IPCE

“The leadership summits give us the opportunity to work together with our community of jointly accredited providers to share successes and challenges. By listening to each other and learning about, with, and from each other, we create strategies for solving problems and advancing the field of IPCE. We’re excited about the progress we’ve made and look forward to advancing our field by building a body of research and evidence that demonstrates our contributions and empowers us to continually improve the quality and effectiveness of IPCE.”

— Kate Regnier, MA, MBA, Executive Vice President, ACCME

- Determining topics and strategies for IPCE that engage learners from multiple professions and across care settings
- Exploring IPCE topics that reflect team-care for the future such as population health, social determinants of health, patient-centered care, patient-centered medical homes
- Forming coalitions and partnerships to promote IPCE
- Disseminating outcomes externally (conferences, association meetings, publications) and internally (webinars, RSS, virtual poster sessions)

Commendation Criteria for Joint Accreditation

In this session, Kate Regnier, MA, MBA, Executive Vice President, ACCME, discussed a new proposal that would give providers the option to achieve Joint Accreditation with Commendation. Many providers have expressed that commendation would promote the value of IPCE, encourage the continued evolution of IPCE programs, and reward providers that implement exemplary practices and generate meaningful outcomes.

The accreditors are continuing to gather input on the proposal and expect to release a final version early next year.

Expansion of the Interprofessional Team for Joint Accreditation

Dimitra V. Travlos, PharmD, Assistant Executive Director & Director of Continuing Pharmacy Education Provider Accreditation, ACPE, led a session discussing the expansion of the interprofessional team for Joint Accreditation. This year, Joint Accreditation for Interprofessional Continuing Education announced a new collaboration with the American Academy of PAs (AAPA) and the Association of Regulatory Boards of Optometry’s Council on Optometric Practitioner Education (ARBO/COPE). The new collaboration expands Joint Accreditation, giving jointly accredited organizations the option to include PAs (physician assistants) and optometrists in their accredited education, without needing to attain separate accreditations with AAPA and COPE. In this breakout session, participants discussed the benefits and challenges of continuing to expand the interprofessional team moving forward.

Connie Schmitz, PhD, Consultant at the National Center for Interprofessional Practice and Education, introduces participants to tools and resources to evaluate the IPE team.



More Tools and Resources to Evaluate the Team

At the conclusion of the day, participants heard from Connie Schmitz, PhD, Consultant at the National Center for Interprofessional Practice and Education.

Dr. Schmitz is an educational psychologist with a background in curriculum development, learner assessment, program evaluation, and education research.

She introduced participants to the National Center's Assessment and Evaluation Home Page and Measurement Instrument Collection. The Assessment and Evaluation Home Page can be found at nexusipe.org/advancing/assessment-evaluation-start. The Measurement Instrument Collection can be

found at nexusipe.org/advancing/assessment-evaluation.

The Measurement Instrument Collection contains 67 tools, including Dr. Orchard's Assessment of Interprofessional Team Collaboration Scale (AITCS-II), which have been vetted by the National Center's Advisory Board, to measure IPCE processes and impacts on the Triple Aim (improve the patient experience of care, improve the health of populations, reduce the per capita cost of health care). The Measurement

Instrument Collection is a resource that provides tools to support generalizable evaluation and/or research. Educators can refine the search using a number of factors, to find the tools that best meet their needs.

The Assessment and Evaluation Home Page also contains several additional resources to help assess individuals, teams, or work environments and evaluate the impact of interprofessional education, IPCE, and collaborative practice. These resources include: The

[Measurement Primer](#), a paper that aims to demystify reliability and validity and walks readers through a series of practical steps to help them figure out what kind of tool would work best for them; [The Consumer Report on Team Assessment Tools](#), by Eduardo Salas, PhD, and his colleagues at Rice University; [practical guides](#) on team assessment and evaluation of programs designed to enhance team performance; and [webinars](#) on measurement, assessment, and evaluation.

“We hold these summits to create a collaborative learning culture for our community of IPCE professionals, so that you can create a collaborative learning culture for care teams in your institutions and communities. We’ll continue to offer opportunities to share experiences and to identify new priorities and areas for advancement. You are leaders in the IPCE field, and we stand with you as we work together to make a difference in healthcare.”

— Dimitra V. Travlos, PharmD, Assistant Executive Director,
and Director, CPE Provider Accreditation, ACPE



Dimitra V. Travlos, PharmD, Assistant Executive Director & Director of Continuing Pharmacy Education Provider Accreditation, ACPE, leads a discussion on the expansion of the interprofessional team for Joint Accreditation.

— RESOURCES —

Assessment of Interprofessional Team Collaboration Scale (AITCS-II) tool¹:

A diagnostic instrument to evaluate the level of interprofessional collaboration among a variety of healthcare teams.

nexusipe.org/advancing/assessment-evaluation/assessment-interprofessional-team-collaboration-scale-aitcs

Nexus Assessment and Evaluation Home

Page: A gateway to measurement tools and other resources that can help assess individuals, teams, or work environments and evaluate the impact of interprofessional education and collaborative practice. nexusipe.org/advancing/assessment-evaluation-start

Measurement Instrument Collection: A database of tools, which have been vetted by the National Center for Interprofessional Practice and Education Advisory Board, to measure IPCE processes. nexusipe.org/advancing/assessment-evaluation

Measurement Primer: A monograph commissioned by the National Center for Interprofessional Practice and Education that provides basic information about good practices and processes in measurement instrument selection, development and use. nexusipe.org/informing/resource-center/evaluating-ipecp

Assessing Health Care Team Performance²:

A review of teamwork assessment tools and the evidence supporting their use.

<https://s3-us-west-2.amazonaws.com/nexusipe-resource-exchange/Assessing+Health+Care+Team+Performance.pdf>

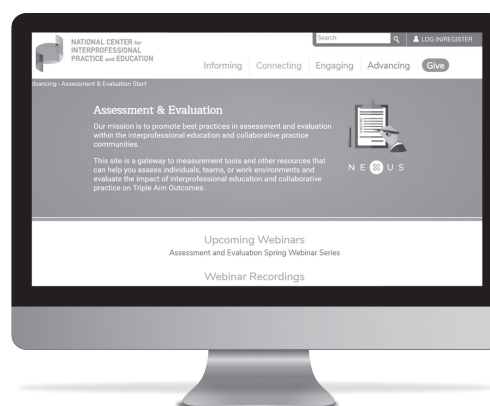
Practical Guides: Moving Theory into

Effective Action: A series of guides from the National Center for Interprofessional Practice and Education on team assessment and evaluation of programs designed to enhance team performance. nexusipe.org/advancing/assessment-evaluation/practical-guide

Webinars: Educational videos from the National Center for Interprofessional Practice and Education on measurement, assessment, and evaluation. nexusipe.org/advancing/assessment-evaluation-start

¹Orchard, C., King, G., Khalili, H., & Bezzina, M. (2012). Assessment of Interprofessional Team Collaboration Scale (AITCS): Development and Testing of the Instrument. *Journal of Continuing Education in the Health Professions*, 32(1), 58-67.

²Iwig, C., Lacerenza, C., Marlow, S., Salas, E. (2016). Assessing Health Care Team Performance: A Review of Tools and the Evidence Supporting Their Use. Rice University Department of Psychology.



Kate Regnier, MA, MBA, Executive Vice President, ACCME, leads a discussion on a new proposal that would give providers the option to achieve Joint Accreditation with Commendation.



Conclusion: Moving Forward

The Joint Accreditation for Interprofessional Continuing Education Leadership Summits are designed to build a community of practice to support the advancement of IPCE.

Through working and learning together, we are generating new models for evaluating the impact of IPCE on team performance, health delivery, and patient care. This work will enable us to translate evidence into practice, continually improve the effectiveness of IPCE, and demonstrate its value and contributions to health leadership.

As we move forward, we are initiating new collaborations with healthcare stakeholders and expanding to

include more professions. By applying the tenets of Interprofessional Collaborative Practice (IPCP) to our collaborations with health leaders, regulatory bodies, accreditors, and IPCE providers, we aim to create sustainable frameworks for integrating IPCE into the continuing professional development for all professions and to support the delivery of effective, safe, and compassionate care for patients and families across the country.

— Key Lessons for IPCE Evaluation —

- **Identify the specific team performance areas that need improvement.** You can use a diagnostic instrument to assess different aspects of interprofessional collaboration and then design activities and evaluations targeting low performance areas.
- **You don't need to reinvent the wheel.** Use resources, such as those found on the National Center's Assessment and Evaluation Homepage and Measurement Instrument Collection, to help you design evaluations.
- **Be deliberate in delivering content that shows participants how the skills and strategies they are learning affect team practice.** Design evaluations to gauge changes in learners' understanding of the principles of team-based care and collaborative practice.
- **Focus on team-based care in evaluations.** Construct evaluation questions that underscore the expectation that individual participants should communicate what they learned to their teams and translate that learning into changes to improve team performance.
- **Give patients a key role in designing IPCE.** Develop evaluations that include assessment of the team's effectiveness in supporting patients as drivers of their own care.
- **Consider strategies that will make it easier for participants to complete evaluations:** shorter surveys, focus groups, and using technology such as smart phone apps.
- **Partner with other organizations.** Collaborate to design assessments and evaluate for changes in patient outcomes.

"We know from data from jointly accredited providers and from a growing body of evidence that participation in IPCE contributes to improvements in team performance, care delivery, and patient outcomes. We encourage you to apply the lessons learned at this Summit to expand your expertise in evaluation and assessment, so that we can better understand how to support care teams in serving their patients and communities. It is also critical to disseminate our outcomes and assessment research throughout the healthcare community so that IPCE is recognized as an integral part of continuing professional development across the health professions."

— Kathy Chappell, PhD, RN, FNAP, FAAN, Senior Vice President, Accreditation, Certification, Measurement, Quality and the Institute for Credentialing Research, ANCC

— About Joint Accreditation for Interprofessional Continuing Education —

Joint Accreditation for Interprofessional Continuing Education™ offers organizations the opportunity to be simultaneously accredited to provide medical, nursing, pharmacy, and optometry continuing education activities through a single, unified application process, fee structure, and set of accreditation standards. Jointly accredited providers may award single profession or interprofessional continuing education credit (IPCE) to physicians, nurses, pharmacists, PAs, and optometrists 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

- Accreditation Council for Continuing Medical Education (ACCME)
- Accreditation Council for Pharmacy Education (ACPE)
- American Nurses Credentialing Center (ANCC)
- American Academy of PAs (AAPA)
- Association of Regulatory Boards of Optometry's Council on Optometric Practitioner Education (ARBO/COPE)

For more information, visit www.jointaccreditation.org



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Joint Accreditation for Interprofessional Continuing Education™
Advancing Healthcare Education by the Team for the Team

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Front cover: (top row, left to right) Tracy Mrochek, MPA, RN, University of Wisconsin-Madison Interprofessional Continuing Education Partnership; Monica Bourke, MSN, RN, Sutter Health; Tina Stacy, PharmD, BCOP, CHCP, Clinical Care Options; Jaime Luther, SSM Health; Anne Grupe, MS Ed, American Society of Clinical Oncology; Joni Fowler, PharmD, Creative Educational Concepts; and (bottom row) Carole Orchard, BSN, MEd, EdD, University of Western Ontario

Photos by Huy Hoang, eLearning and Web Developer, National Center for Interprofessional Practice and Education; Megan Peters Jovic, Communications Specialist, Accreditation Council for Continuing Medical Education (ACCME)



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