

Sustaining IPE through Engaging, Re-engaging and Strategizing: IPE for the ‘Long Haul’

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Background

UHN is a very large multi-site academic hospital network (7000 students annually, 7 sites, 1230 beds, 10 clinical programs) in Toronto, Ontario, Canada. It has a rich history of leadership and engagement in interprofessional education and care (IPEC).

In the past ten years, significant organizational changes (e.g., funding, personnel, hospital integration) have occurred within the network. These changes led to charting a new IPEC strategy through engaging and re-engaging with people across the network.

Early Steps

Given the complexity of the organization, we began with a comprehensive understanding of IPEC at UHN. This included an online survey of all staff, discussions with key informants and an analysis of IPEC priorities, successes and activity data.



Based on the findings, an IPEC plan was then developed for advancing IPEC at UHN.

Key Findings	Strategic Priorities	Select Actions	Examples of ‘new and unconventional partnerships’
Current and emerging strategic priorities of the organization can be further advanced through IPEC.	Advance hospital strategic priorities through IPEC	<ul style="list-style-type: none">Engage and re-engage with professional practice, clinical program operations and new clinical program education leadership to learn where IPE was already thrivingExplore how IPE could advance work in priority areas (e.g. patient and family education, patient-centred care and patients as partners, new space planning etc.)Determine intended and unintended outcomes of IPE (e.g. staff recruitment)	<ul style="list-style-type: none">Patient and Family Education leaders were working to advance healthcare providers’ capacity for Health Literacy across the network. This was a tremendous opportunity to partner interprofessional approaches to learning this content and resulted in an innovative interprofessional learning workshop for staff and students.Create interprofessional learning opportunities for students and staff to enable new partnerships with Quality and Safety teamInvolve patients as partners in developing IPE activities
Cohesive IPEC leadership across recently integrated hospital network is needed.	Align and strengthen IPE leadership across the hospital network	<ul style="list-style-type: none">Formalize creation of a network-wide IPEC team and IPE strategic plan	<ul style="list-style-type: none">Work with 10 clinical programs as the IPEC team spans UHN.Foster identification, development and growth of active IPEC supporters from across the hospital network into a focused group dedicated to advancing IPE within the network (“Advancing IPE Group”).
There is inconsistent awareness and understanding of IPEC across the network.	Develop greater awareness and understanding of IPEC	<ul style="list-style-type: none">Formalize and maintain distribution lists of staff with interest and expertise in IPERegular communications with all personnel and leaders engaged in this workDevelop recognizable, consistent IPEC branding across the network	<ul style="list-style-type: none">Raise awareness with 16,000 UHN personnelPartner with the UHN Communications team, to ensure that the brand for IPEC is well-aligned with the corporate identity
The network would benefit from clear ‘IPE expectations’ and understanding of what ‘excellence’ would look like in IPE.	Set the standard of IPE excellence	<ul style="list-style-type: none">Advocate for inclusion of an IPE indicator on the TAHSNe Student Survey as a target for UHN and local hospitals, as well as UHN’s clinical programsSet targets for IPE productivity in collaboration with leadership	<ul style="list-style-type: none">In partnership with the Corporate Planning team, the development of an IPE- sensitive balanced scorecard indicator has enabled new conversations and opportunities for IPE.
There is a need to focus on innovation and scholarship in practice-based IPE.	Strengthen innovation and scholarship in practice-based IPE	<ul style="list-style-type: none">Foster the work of the local IPE champions group dedicated to creating a new approach to maximizing IPE placement reach for students across UHNCollaborate with other teaching hospitals to share and advance IPEC content	Through partnering with UHN IPEC champions and students , IPE placements were refined and developed to enable: <ul style="list-style-type: none">additional student and staff participation across UHN (‘modified IPE placements’) andmore authentic interprofessional collaboration experiences through a new ‘IPE work-shadow placement’.
Staff and personnel value IPEC and want to advance capacity for IPEC (e.g. to teach students interprofessionally, to practice more collaboratively, to transform existing work from multi to interprofessional).	Build capacity for IPEC	<ul style="list-style-type: none">Provide a range of learning opportunities for personnel (open and targeted) including: coaching and mentorship for individuals and groupsIPE opportunities for staff and students togetherIPE workshops and IP Care resources online for UHN personnel including self-directed e-learning modules	<ul style="list-style-type: none">Capacity building for UHN has included not only the individuals and teams within the organization but also for the organization as a whole e.g. development of resources to enable understanding of interprofessionalism as applied to organizational priorities (including space planning, integration of IPEC in lean and other quality improvement approaches)
Engagement in IPE can be advanced through more efficient IPE placement planning processes.	Develop efficient IPE processes	<ul style="list-style-type: none">Identify logistical challenges through process mapping and identification of efficienciesDevelop a centralized IPE student placement database	<ul style="list-style-type: none">Partner with a lean quality improvement expert to refine planning processes for hospital practice-based IPE student placements.