

Interprofessional Education Clinic Development and Sustainability using Emergency Department Resources



DukeMedicine

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Introduction

- Interprofessional education (IPE) provides critical experiences to develop skills for providing high quality patient care
- IPE is optimally performed in a work-based patient care setting
- The emergency department (ED) is an ideal environment for IPE development given the availability of patients with undiagnosed complaints

Aim

To evaluate the feasibility of the implementation of an IPE Clinic in an academic health center by analyzing location, faculty participation, quality of patient care and student learning experience

Clinic Development

- Development to implementation required 3 years
- Vice deans of professional programs, Health System and ED leadership and risk management involvement
- Faculty support with clinical time compensated

Clinic Development

- Interprofessional and interdisciplinary
 - Medical faculty from family medicine, internal medicine and emergency medicine

Phase	Location	Acuity (ESI Level)	Faculty	Students
1	Clinic 0.25 miles from ED	4-5	MD/NP	MD/NP
2	Unused radiology space adjacent to ED	3-5	MD/NP	MD/NP/PA
3	Unused radiology space adjacent to ED	3-5	MD/NP/PA/D PT/RN	MD/NP/PA/D PT/BSN

Assessment

- Total of 909 patients seen during study period from December 2014 to July 2016
- Change in location allowed for inclusion of ESI 3 and more radiology studies
- Most common chief complaint was musculoskeletal

Results

Figure 1. Patient complaints

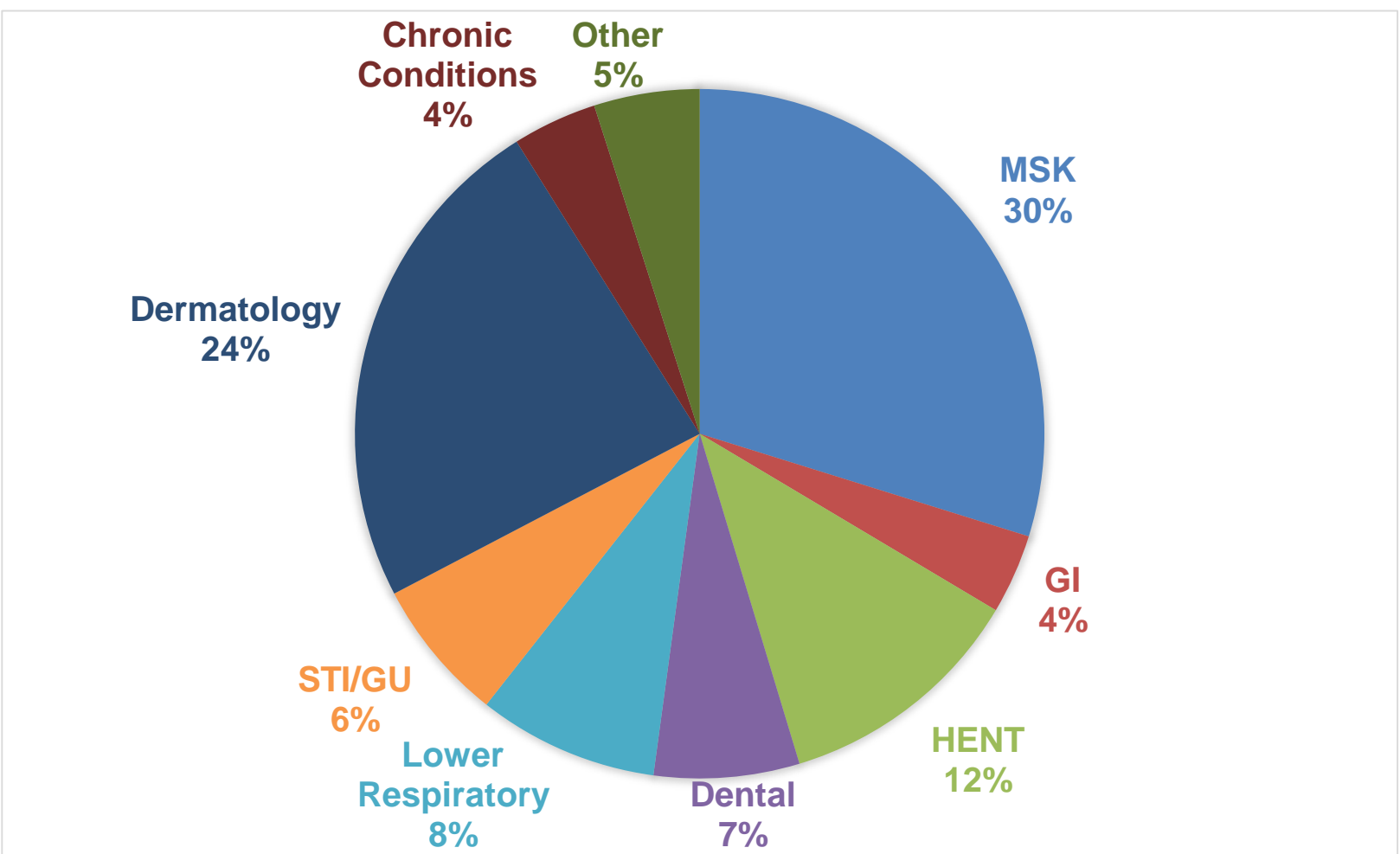
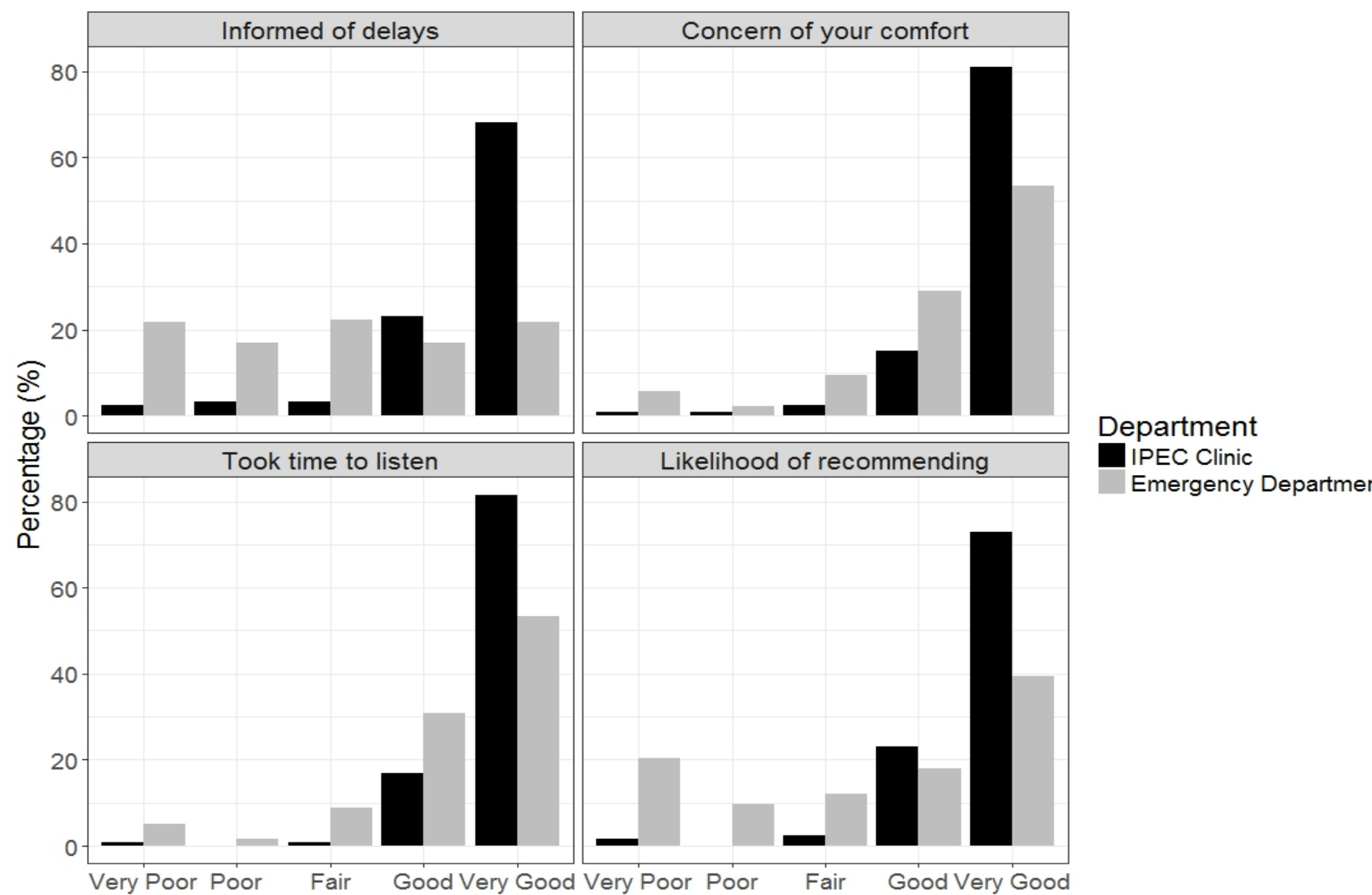


Figure 2. Patient Satisfaction



Results

- IPE clinic patients had similar or lower lengths of stay (5.4 vs 7.3 hours, $p < 0.0001$) and higher satisfaction (figure 2) than patients who remained in the ED
- Students reported appropriate levels of supervision, effective modeling of interprofessional behaviors and opportunities for feedback

Conclusions

- ED-based IPE clinic is viable and sustainable after years of development and institutional financial support for faculty
- ED patient care can be delivered efficiently with high patient satisfaction while maintaining a focus on student education
- High learner satisfaction, participation and engagement allowed for greater student leadership
- Program involvement broadens and clinical model improves with ongoing assessment

References

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