

# Education and Training Challenges and Opportunities for Multidisciplinary, Interprofessional Cancer Care

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# Objectives

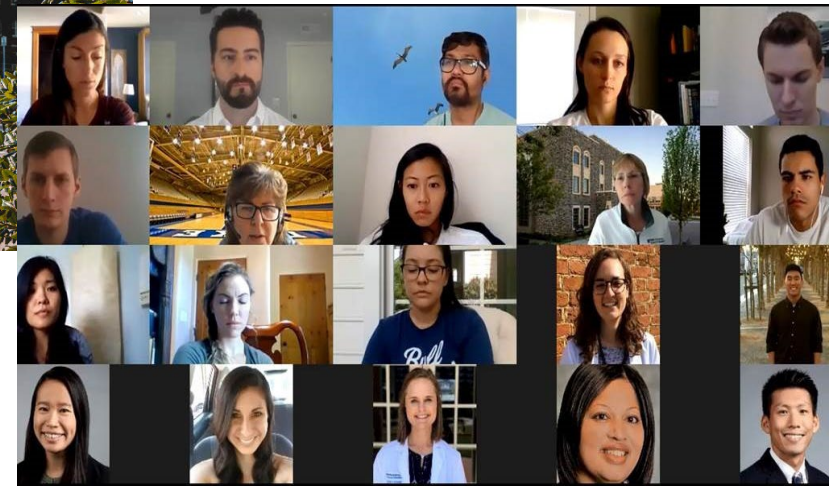
- Identify evidence for interprofessional collaborative practice (IPCP)
- Define core competencies for interprofessional education (IPE)
- List facilitators and barriers to implementation of IPE
- Describe how team science informs implementation of IPE/IPCP—particularly for complex care
- List challenges and opportunities for preparing a “collaboration-ready” workforce for cancer care





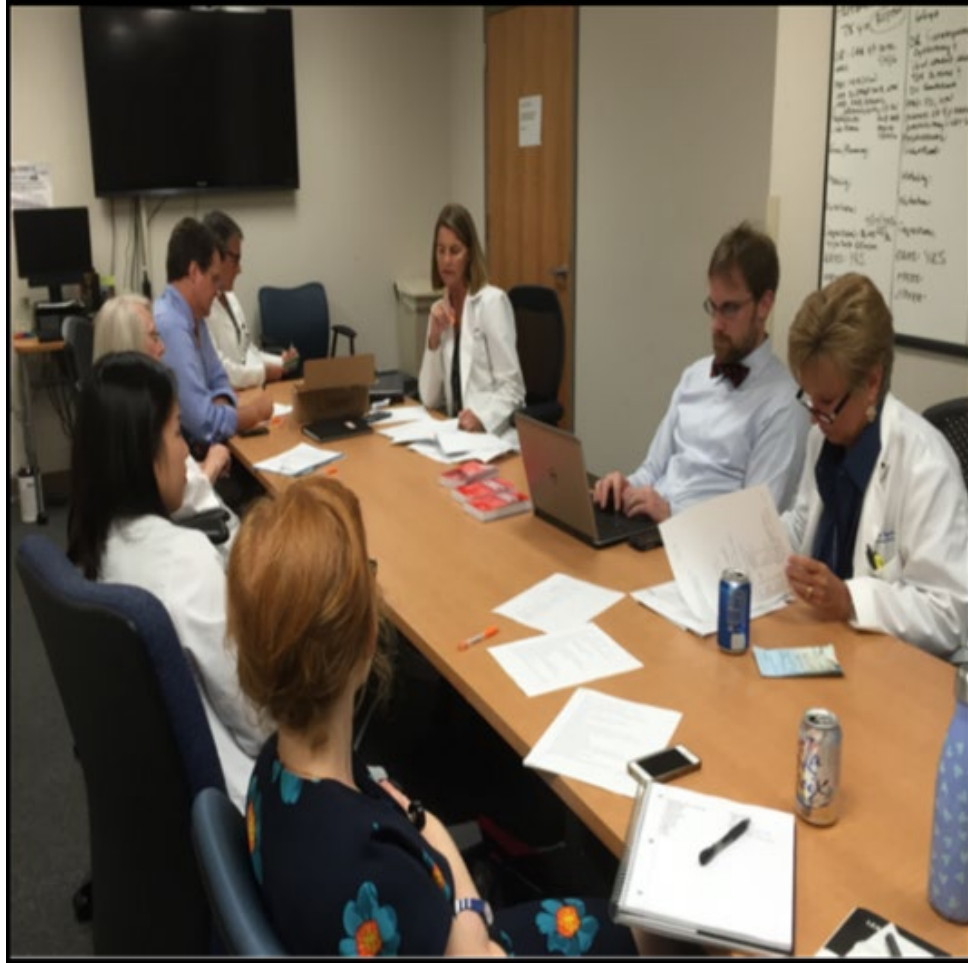
# DUKE IPEC

Interprofessional Education & Care Center

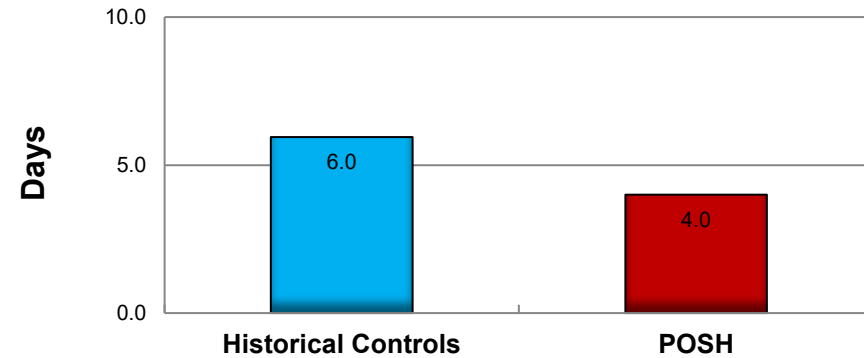




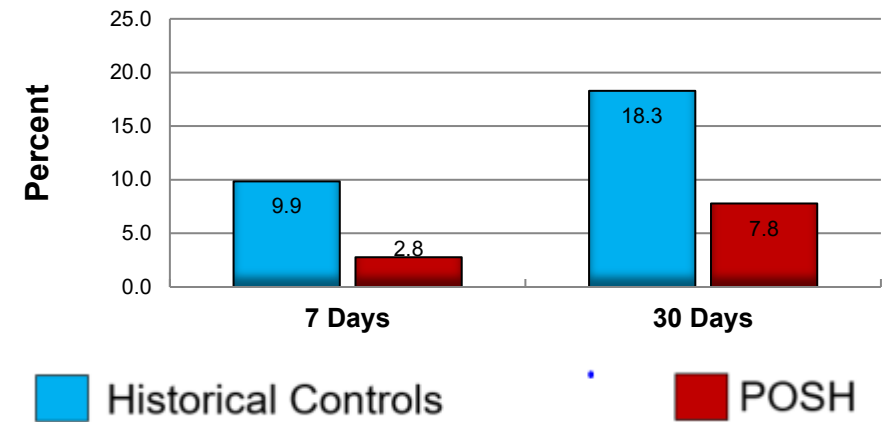
# Perioperative Optimization of Senior Health (POSH)



### Median Length of Stay

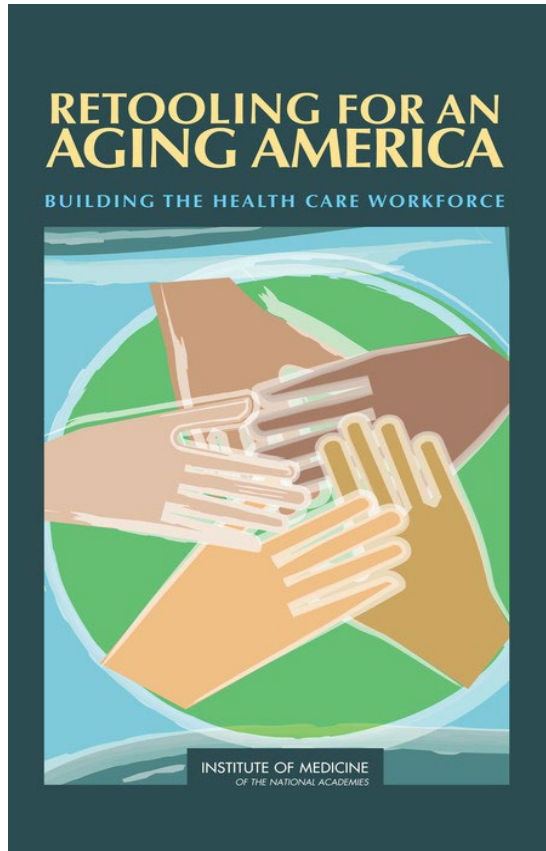


### Readmission at 7 Days and 30 Days



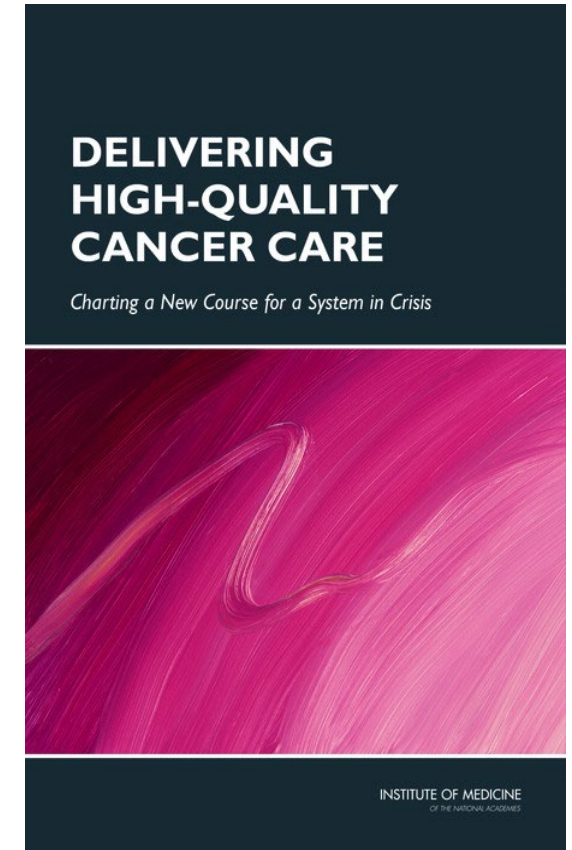
McDonald SM, et al. JAMA Surgery, 2018.

# IOM/NAM Reports on Geriatrics and Cancer Care



Institute of Medicine (US)  
Committee on the Future Health  
Care Workforce for Older  
Americans. 2008.

- Highlighted aging population and increasing complexity of care
- Need to grow a diverse workforce able to respond to complex care needs—including social needs
- Emphasized importance of multi-disciplinary, interprofessional education and practice



National Academies of Sciences,  
Engineering, and Medicine. 2013.



# Definitions

## World Health Organization for IPE and IPCP

### Interprofessional Education:

- Occurs when two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes



### Interprofessional Collaborative Practice:

- Occurs when multiple health workers from different professional backgrounds provide comprehensive health services by working with patients, their families, carers, and communities to deliver the highest quality of care



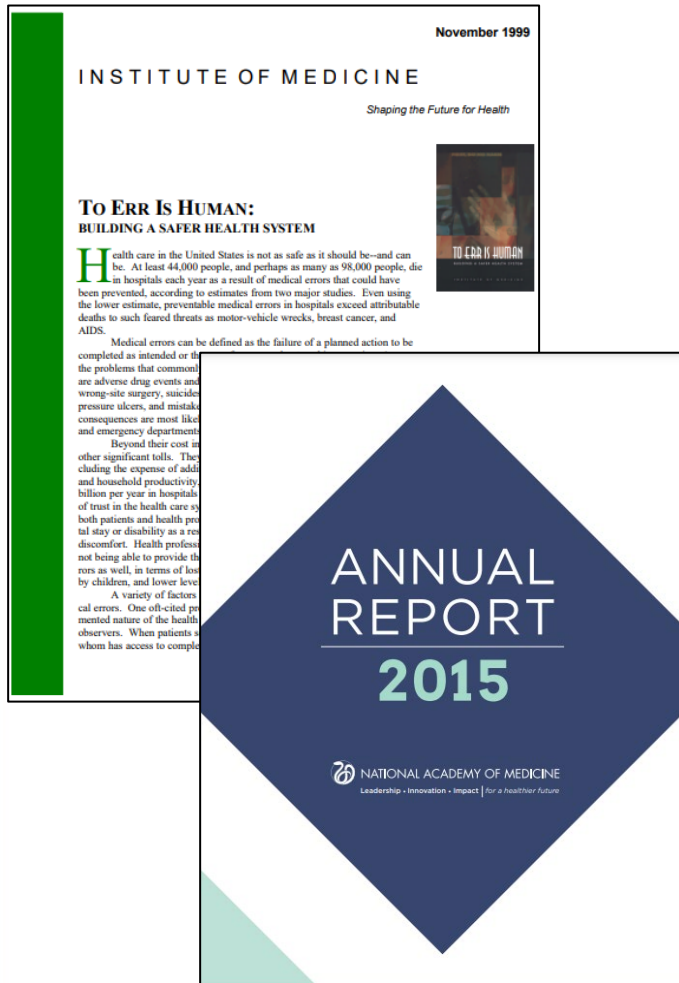
<https://www.myamericannurse.com/interprofessional-practice-a-blueprint-for-success/>

# Rationale

## Providers are *Underprepared* for Collaborative Practice

### National Academy of Medicine Reports

- **1999:** Health professions school graduates are clinically competent BUT **relatively unprepared to practice in interprofessional teams**
- **2015: Poor preparation to work on teams contributes to a range of adverse outcomes**
  - Medical/safety errors
  - Provider and patient satisfaction
  - Low workforce retention
  - System inefficiencies, higher costs
  - Suboptimal community engagement

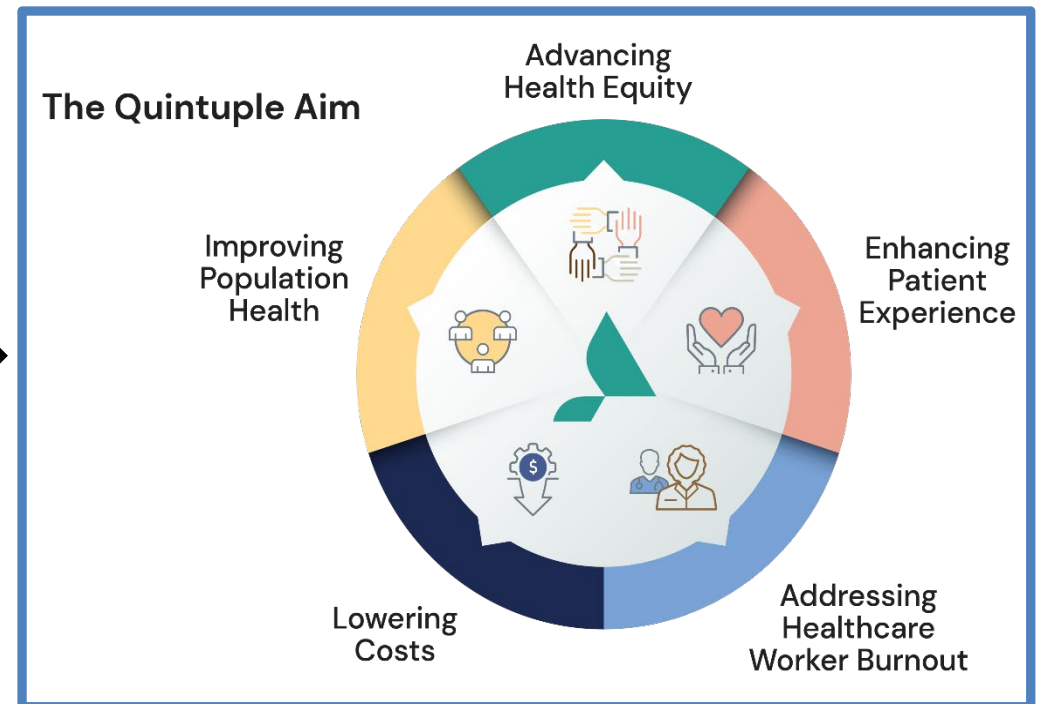
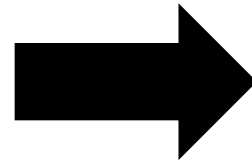




# Rationale

## Providers are *Underprepared* for Collaborative Practice

U.S. health care is moving in the direction that **no one provider, profession, or model can change the processes of care or address the systemic issues independently**



<https://www.accolade.com/health-equity/>



# Benefits

## Team-Based Care Advances Health and Healthcare

Organizational benefits	Team benefits	Patient benefits	Benefits to team members
Reduced time and costs of hospitalization	Improved coordination of care	Enhanced satisfaction with care	Enhanced job satisfaction
Reduction in unexpected admissions	Efficient use of health-care services	Acceptance of treatment	Greater role clarity
Service more accessible to patients	Enhanced communication and professional diversity	Improved health outcomes and quality of care Reduced medical errors	Enhanced well-being

Reeves et al. Cochrane Database Sys Rev. 2017

McGuier, E.A., et al. Systematic Reviews, 2021.

Babiker, A. et al. Sudanese journal of paediatrics 2014.

# *Challenges*

## Key Barriers to Implementing IPCP

- Lack of reimbursement/payment mechanisms
- Logistical barriers
- Lack of functioning models
- Resistance to change
- Lack of education/training

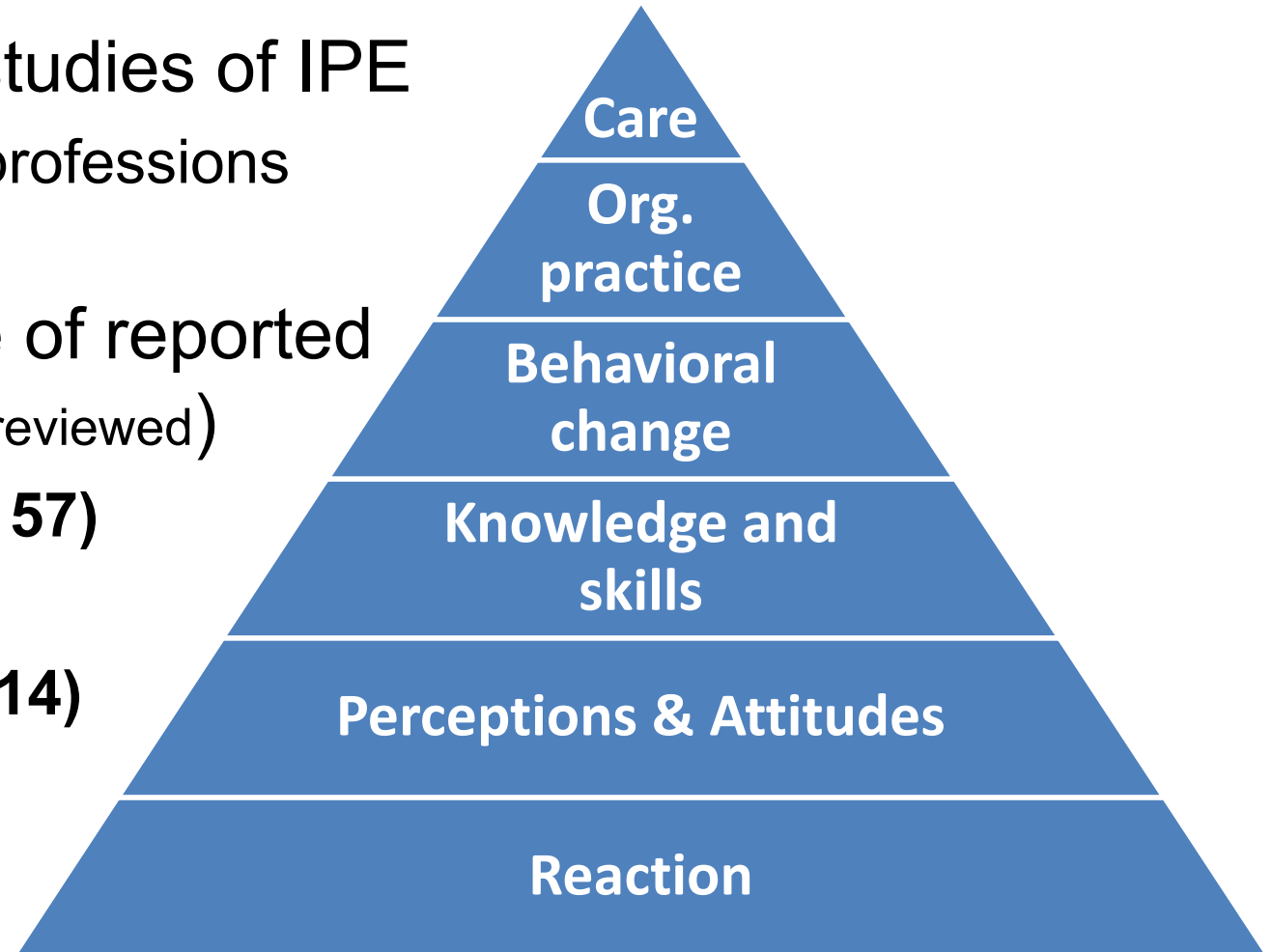
Rawlinson C, et al. Int J Integr Care. 2021.



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# Evidence for IPE

- Systematic reviews of 250 studies of IPE
  - Majority in undergrad health professions students
- Improvements across range of reported outcomes (# positive studies/total reviewed)
  - **Knowledge and skills (125/157)**
  - **Behavioral change (33/38)**
  - **Organizational practice (11/14)**
  - **Patient/clinical care (39/50)**



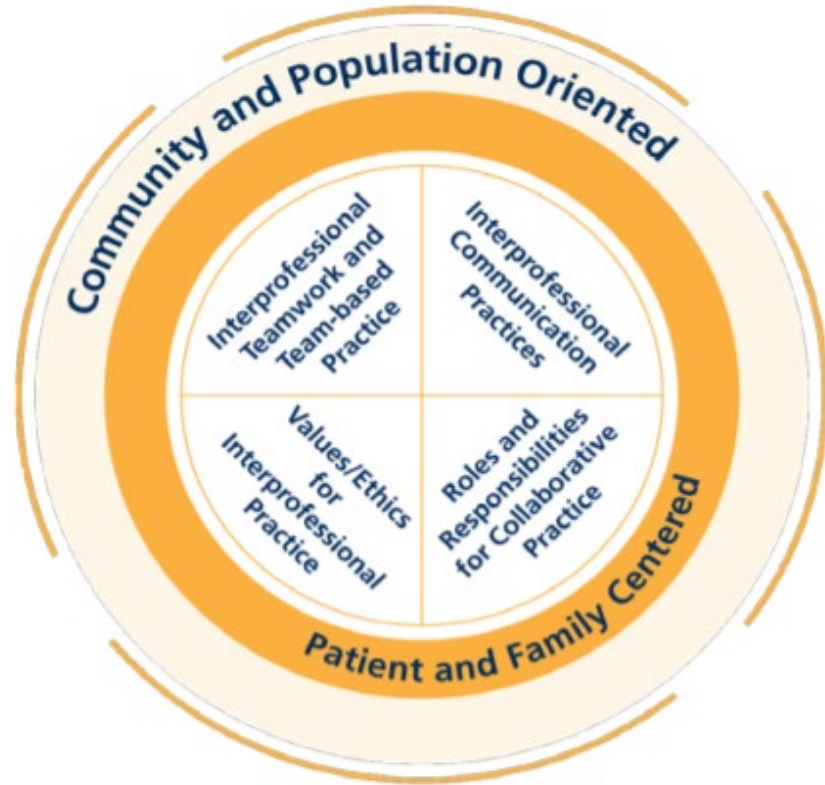
Mattiazzi, S., et al. Journal of Interprofessional Education & Practice, 2022.

Reeves S. et al, Medical Teacher, 2016.

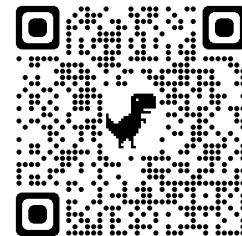
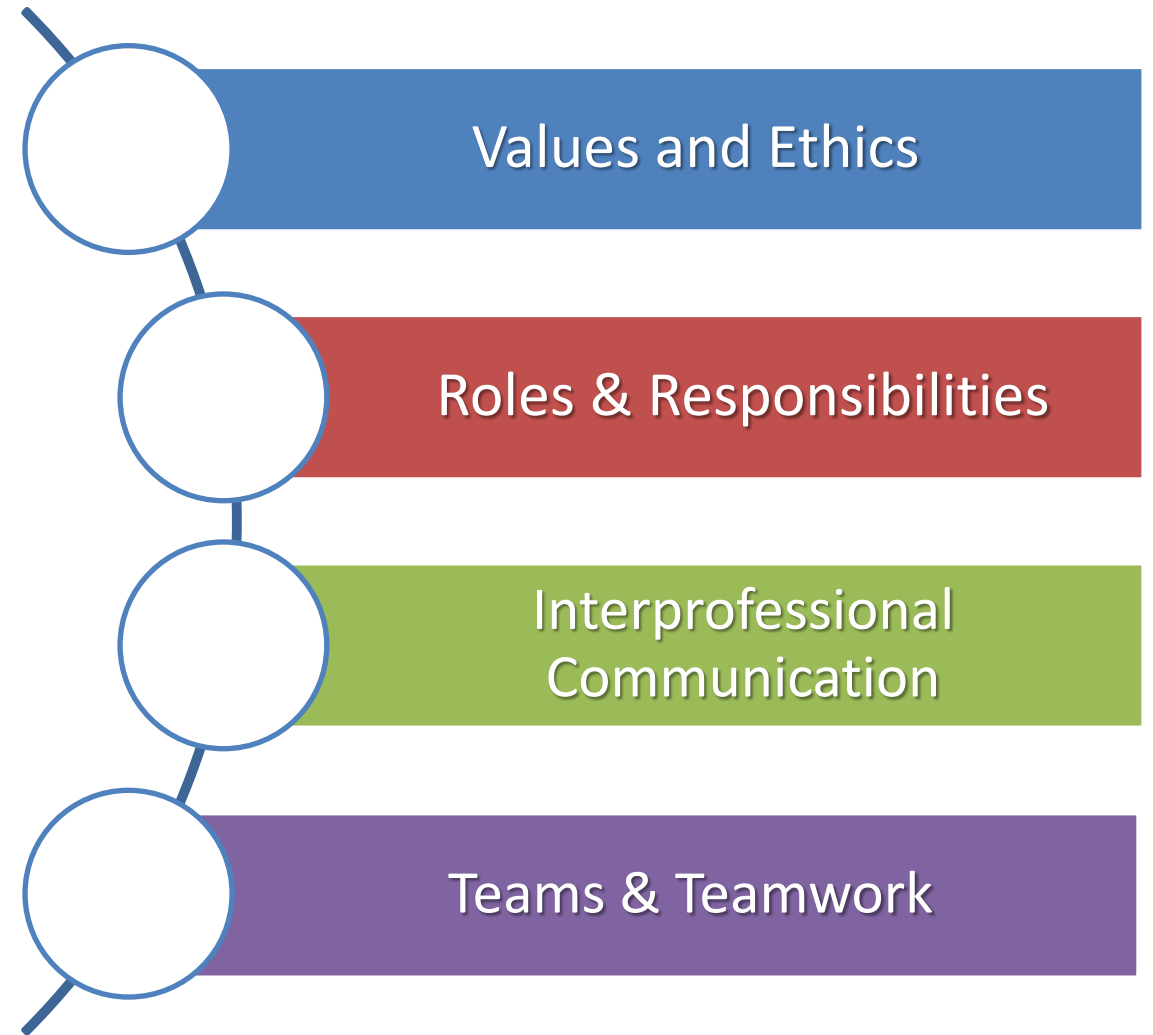
<http://www.kirkpatrickpartners.com/OurPhilosophy/tabid/66/Default.aspx>



# IPEC Core Competencies



The Learning Continuum pre-licensure through practice trajectory



Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice: 2016 update. Washington, DC: Interprofessional Education Collaborative.

# Implementation of IPE: Key issues

## Micro

- Socialization
- Learner context
- Faculty support



## Meso

- Leadership and resources
- Administrative support



## Macro

- Educational and clinical procedures and policies
- Academic-clinical-community partnerships



Bogossian, F., et al. *Advances in Health Sciences Education*, 2023.

# Summary and take home...



- Growing evidence for benefits of IPCP and IPE
- IPE gaps: identify specific competencies & clinical practice sites
- Embrace more fluid definitions of how teams do work
  - Leadership and scope
  - Technology
  - Community engagement
- Modify education and health policy to meet current demands in growing the workforce

*“IPE/IPCP needs to shift from today’s predominant focus on students in the pipeline (Institute of Medicine, 2015) to designing clinical practice environments to support continuous learning that benefits not just learners, but patients, populations, and providers as well.”*

**Erin Fraher and Barbara Brandt.** J Interprof Care. 2019



# References

- Health Professions Accreditors Collaborative. (2019). Guidance on developing quality interprofessional education for the health professions. Chicago, IL: Health Professions Accreditors Collaborative.
- Van Houtven, C. H., Hastings, S. N., & Colón-Emeric, C. (2019). A path to high-quality team-based care for people with serious illness. *Health Affairs*, 38(6), 934-940.
- Mitchell, P., M. Wynia, R. Golden, B. McNellis, S. Okun, C.E. Webb, V. Rohrbach, and I. Von Kohorn. 2012. Core principles & values of effective team-based health care. Discussion Paper, Institute of Medicine, Washington, DC. [www.iom.edu/tbc](http://www.iom.edu/tbc).
- Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice: 2016 update. Washington, DC: Interprofessional Education Collaborative.
- World Health Organization (2010). Framework for action on interprofessional education & collaborative practice. Retrieved January 4, 2019, from [http://whqlibdoc.who.int/hq/2010/WHO\\_HRH\\_HP\\_N\\_10.3\\_eng.pdf](http://whqlibdoc.who.int/hq/2010/WHO_HRH_HP_N_10.3_eng.pdf).
- Rawlinson C, Carron T, Cohidon C, Arditi C, Hong QN, Pluye P, Peytremann-Bridevaux I, Gilles I. An Overview of Reviews on Interprofessional Collaboration in Primary Care: Barriers and Facilitators. *Int J Integr Care*. 2021 Jun 22;21(2):32.

# References

- Institute of Medicine (2015). Measuring the impact of interprofessional education on collaborative practice and patient outcomes. Washington, DC: National Academies Press.
- Reeves, S., Fletcher, S., Barr, H., Birch, I., Boet, S., Davies, N., Kitto, S. (2016). A BEME systematic review of the effects of interprofessional education: BEME Guide No. 39. *Medical Teacher*, 38, 656-668.
- Mattiazzi, S., Cottrell, N., Ng, N., & Beckman, E. (2022). The impact of interprofessional education interventions in health professional student clinical training: A systematic review. *Journal of Interprofessional Education & Practice*, 100596.
- Fraher E, Brandt B. Toward a system where workforce planning and interprofessional practice and education are designed around patients and populations not professions. *J Interprof Care*. 2019 Jul-Aug;33(4):389-397. doi: 10.1080/13561820.2018.1564252. Epub 2019 Jan 23. PMID: 30669922
- McGuier, E.A., Kolko, D.J., Klem, M.L., Feldman, J., Kinkler, G., Diabes, M.A., Weingart, L.R. and Wolk, C.B., 2021. Team functioning and implementation of innovations in healthcare and human service settings: a systematic review protocol. *Systematic Reviews*, 10(1), pp.1-7.