UW-Madison ICEP 2021
Global Evaluation Survey Results

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Office of Continuing Professional Development
Mission. Provide exemplary and innovative accredited interprofessional continuing education that improves the skills and strategies of healthcare teams, leading to healthier patients and communities.

(Updated 8/15/2019)

JAC 2. The provider gathers data or information and conducts a program-based analysis on the degree to which its CE mission—as it relates to changes in skills/strategy, or performance of the healthcare team, and/or patient outcomes—has been met through the conduct of CE activities/educational interventions.
Respondents by Profession

Respondents by Profession (N=602)

- Other: 16.5%
- Physician (MD, DO): 29.2%
- Registered Nurse: 15.1%
- Researcher/Scientist (PhD): 6.6%
- Social Worker: 6.6%
- Nurse Practitioner: 5.0%
- Physical Therapist: 4.3%
- Educator: 3.5%
- Pharmacist: 3.3%
- Physician Assistant: 2.2%
- Clinical Informatics Specialist: 1.5%
- Genetic Counselor: 1.3%
- Psychologist: 1.0%
- Athletic Trainer: 0.8%
Healthcare Team Members

Respondents were asked to identify members of their current, IP healthcare team.

<table>
<thead>
<tr>
<th>Healthcare Team Members</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>109</td>
</tr>
<tr>
<td>Social Worker</td>
<td>279</td>
</tr>
<tr>
<td>Speech Pathologist</td>
<td>89</td>
</tr>
<tr>
<td>Respiratory Therapist</td>
<td>102</td>
</tr>
<tr>
<td>Researcher/Scientist (PhD)</td>
<td>85</td>
</tr>
<tr>
<td>Registered Nurse</td>
<td>459</td>
</tr>
<tr>
<td>Radiology Technician</td>
<td>83</td>
</tr>
<tr>
<td>Psychologist</td>
<td>147</td>
</tr>
<tr>
<td>Physician Assistant</td>
<td>257</td>
</tr>
<tr>
<td>Physician (MD, DO)</td>
<td>564</td>
</tr>
<tr>
<td>Physical Therapist</td>
<td>160</td>
</tr>
<tr>
<td>Pharmacy Technician</td>
<td>77</td>
</tr>
<tr>
<td>Pharmacist</td>
<td>245</td>
</tr>
<tr>
<td>Patient/Patient Family/Caregiver*</td>
<td>30</td>
</tr>
<tr>
<td>Optometrist</td>
<td>28</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>131</td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>382</td>
</tr>
<tr>
<td>Medical Laboratory Technologist</td>
<td>81</td>
</tr>
<tr>
<td>Genetic Counselor</td>
<td>57</td>
</tr>
<tr>
<td>Educator</td>
<td>137</td>
</tr>
<tr>
<td>Dietitian</td>
<td>146</td>
</tr>
<tr>
<td>Dentist</td>
<td>24</td>
</tr>
<tr>
<td>Dental Hygienist**</td>
<td>11</td>
</tr>
<tr>
<td>Clinical Informatics Specialist</td>
<td>202</td>
</tr>
<tr>
<td>Athletic Trainer</td>
<td>34</td>
</tr>
</tbody>
</table>
Mission. Provide exemplary and innovative accredited interprofessional continuing education that improves the skills and strategies of healthcare teams, leading to healthier patients and communities.

JAC 2. The provider gathers data or information and conducts a program-based analysis on the degree to which its CE mission—as it relates to changes in skills/strategy, or performance of the healthcare team, and/or patient outcomes—has been met through the conduct of CE activities/educational interventions.

JAC 11. The provider analyzes changes in the healthcare team (skills/strategy, performance) and/or patient outcomes achieved as a result of its IPCE activities/educational interventions.

Note: The data in the next slides also pertain to JAC 23, JAC 24, and JAC 25.
Changes in Team Skills/Strategy

Did Participation in This Activity Impact Your Knowledge, Attitudes, and Skills/Strategy/Ability to act pertaining to your practice? (475 responses)

Yes, 89.47%

No, 10.53%
How did you change your knowledge, attitudes, and/or skills/ability to act? (3778 Responses)
Examples

• “I gained knowledge and skill in caring for diverse populations and ideas to change not only my thought process and care but my peers as well.”

• “Ok was able to change my whole perspective on interdisciplinary medicine.”

• “I have a much better understanding on how healthcare is within the communities of our native nations; the resources, challenges, and considerations.”

• “The Case Conference style has allowed me to see a more complete picture of various patient situations and learn from the outcome of our interventions. Current research is frequently shared at these conferences and is very helpful.”
Changes in Team Performance

Did Participation in This Activity Impact Your and/or Your Healthcare Team Performance/Practice? (434 Responses)

Yes, 74.88%

No, 25.12%
How did you and/or your healthcare team improve performance/practice? (3091 Responses)

- Access to care: 111 responses
- Administrative/practice management: 99 responses
- Collaboration between healthcare team members: 134 responses
- Communication with other healthcare professionals: 136 responses
- Coverage/billing for health services: 136 responses
- Diagnosis/differential diagnosis: 106 responses
- Engaged in quality improvement project: 90 responses
- Patient education and communication: 136 responses
- Patient management: 120 responses
- Patient registry: 47 responses
- Research: 76 responses
- Screening: 84 responses
- Teaching of students, residents, fellows, or peers: 104 responses
- Transitions of care: 82 responses
- Treatment: 112 responses
- Use of electronic health records: 108 responses
- Workflow: 103 responses
- Other, specify: 6 responses

- My Healthcare Team Improved Team Performance/Practice
- I Improved How I Practice
Examples

• “Patients received better care because of new evidence based research that was shared with the team (new research regarding patient outcomes when complicated coronary lesions were discovered)”

• “I have been in academic practice for 31 years so knowledge gains and changes in practice are incremental but still relevant”

• “I learned how to build a tool in the EMR that led to easier screening for mood disorders”

• “I have broadened my differential diagnosis for multiple presenting signs/symptoms. More specifically, I have been able to refer patients for more specialized care such as physical therapy for anorectal disorders and referral to allergy for a possible mast cell activation syndrome.”

• “Learning from experiences of other clinicians/professional colleagues always impacts practice in a positive manner to help improve outcomes.”
Changes in Patient Outcomes

Did This Activity Have an Impact on Patient Outcomes as a Result of the Practice Changes Implemented? (431 Responses)

- Yes, 34.57%
- No, 15.55%
- I don't know, 49.88%
Examples

- “Patients are thinking about and making actions towards quitting smoking more.”
- “Patients have become more comfortable sharing their questions/concerns.”
- “Great first step for patients. There is no access to mental health so this is a life saver.”
JAC 9. The provider utilizes support strategies to sustain change as an adjunct to its educational interventions (e.g., reminders, patient feedback).

JAC 10. The provider implements strategies to remove, overcome, or address barriers to change in the skills/strategy or performance of the healthcare team.

JAC 11. The provider analyzes changes in the healthcare team (skills/strategy, performance) and/or patient outcomes achieved as a result of its IPCE activities/educational interventions.
Sharing and Extending Learning

Did You Share Any Materials/Information From This Activity With Others? (496 Responses)
- Yes, 51.00%
- No, 48.99%

If Yes, What Did You Share? (669 Responses)
- Other: 10
- Technology advances: 48
- Referrals to resources: 54
- Referrals to programs/services: 50
- New decision making practices: 66
- New medical methods: 37
- New prescribing practices: 27
- New patient education materials: 43
- Interprofessional ideas, attitudes, and/or...: 86
- General ideas: 65
- Approaches to diverse patient population: 183

If Yes, With Whom? (550 Responses)
- Others: 6
- Health professional(s): 61
- IT Department: 20
- Administration: 42
- Patients/patient families: 65
- Colleagues from the same discipline: 121
- Colleagues from other disciplines: 60
- Members of my interprofessional team: 175

If Yes, How? (610 Responses)
- Worked collaboratively with others: 25
- Worked collaboratively with others: 43
- Shared materials from the activity (ex:...): 88
- Sent via newsletter: 10
- Sent via email: 78
- Role modelled new behavior for others: 45
- Presented at department/practice meeting: 41
- Made administrative changes: 17
- Included in my teaching: 53
- Discussed Informally face-to-face or virtually: 39
- Attended educational activity together: 171
JAC 3. The provider identifies, plans and implements the needed or desired changes in the overall program (e.g., planners, teachers, infrastructure, methods, resources, facilities, interventions) that are required to improve its ability to meet the CE mission.
### Evolution of Global Evaluation Survey

<table>
<thead>
<tr>
<th>Survey</th>
<th>Focus of Changes</th>
<th>Questions</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td></td>
<td></td>
<td>Descriptive statistics; qualitative analysis</td>
</tr>
<tr>
<td>2017</td>
<td>Impact of IP vs non-IP activities; in-depth analysis of barriers</td>
<td>Questions were tailored for IP versus non-IP activities; one question was taken off; additional questions were added</td>
<td>Descriptive statistics, including quantifying barriers to collaborative practice; qualitative analysis using Nvivo</td>
</tr>
<tr>
<td>2018</td>
<td>Learning about respondents’ teams; identifying successful IP activities</td>
<td>Added questions about healthcare team, excellent IP activity; changed barriers questions; issue with choosing multiple activities from the list</td>
<td>Descriptive statistics; there was no need to use NVivo in this round of qualitative analysis</td>
</tr>
<tr>
<td>2019 (Spring and Fall)</td>
<td>In-depth understanding of respondents’ views of IP learning</td>
<td>Added questions about definition of IP learning and importance of IP education to improving of quality of care.</td>
<td>Descriptive statistics; t-tests, one-way analysis of variance, and subsequent post hoc comparisons to evaluate differences by profession in responses to selected questions; qualitative analysis of definitions of IP using NVivo 12.</td>
</tr>
<tr>
<td>2020 (Spring and Fall)</td>
<td>Impact of COVID-19; quantifying responses about IP learning</td>
<td>Added question about COVID-19 impact; a question about definition of IP learning was converted from open-ended to multiple choices question</td>
<td>Descriptive statistics; aggregate analysis of data for selected questions across two surveys</td>
</tr>
<tr>
<td>2021</td>
<td>Quantifying impact from all activities on healthcare teams and patients they serve</td>
<td>Questions about educational impact were converted from open-ended to multiple choices questions; questions about diversity were added</td>
<td>Descriptive statistics; qualitative analysis; review of data in relation to JAC</td>
</tr>
</tbody>
</table>
JAC 5. The provider generates activities/educational interventions that are designed to change the skills/strategy, or performance of the healthcare team, and/or patient outcomes as described in its mission statement.
## Agreement Regarding Education Being IP

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>This activity met the definition of continuing IP education</td>
<td>4.5</td>
<td>4.4</td>
<td>4.4</td>
<td>4.4</td>
<td>4.5</td>
<td>4.2</td>
</tr>
<tr>
<td>Number of Responses</td>
<td>698</td>
<td>487</td>
<td>447</td>
<td>548</td>
<td>410</td>
<td>344</td>
</tr>
</tbody>
</table>
JAC 8. The provider develops activities/educational interventions in the context of desirable attributes of the healthcare team (e.g., Institute of Medicine competencies, professional competencies, healthcare team competencies: values/ethics, roles and responsibilities, interprofessional communication, teams and teamwork).
# Relevance of Education to Improvement in IP Competency Domains

| This conference contributed to my professional effectiveness related to: | Mean on a scale from 1=Strongly Disagree to 5=Strongly Agree |
|---|---|---|---|---|
| Working with an IP team | Engaging in effective IP communication | Defining roles/responsibilities of my team members | Applying values/ethics to IP practice |
| 15 IP live/virtual live conferences (142 responded) | 4.13 | 4.17 | 3.97 | 4.08 |
| 26 IP asynchronous online activities (117 responded) | 4.07 | 4.11 | 3.93 | 4.11 |
| Total: 41 IP activities (259 responded) | 4.10 | 4.14 | 3.95 | 4.09 |
JAC 10. The provider implements strategies to remove, overcome, or address barriers to change in the skills/strategy or performance of the healthcare team.
Barriers to IP Practice

- 2018 survey: A total of 444 responded; 73 of 444 (16.4%) reported no barriers.
- April 2019 survey: A total of 447 responded; 48 of 447 (10.7%) reported no barriers.
- September 2019 survey: A total of 843 responded; 26 of 843 (3.1%) reported no barriers.
- Spring 2020 survey: A total of 626 responded; 84 of 626 (13.4%) reported no barriers.
- Fall 2020 survey: A total of 161 responded; 15 of 161 (9.3%) reported no barriers.
- May 2021 survey: A total of 286 responded; 39 of 286 (13.6%) reported no barriers.
<table>
<thead>
<tr>
<th>Barriers</th>
<th>2018 Survey Reported Barriers</th>
<th>Spring and Fall 2019 Survey Reported Barriers</th>
<th>Spring and Fall 2020 Survey Reported Barriers</th>
<th>2021 Survey Reported Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time-related issues</td>
<td>17% 234</td>
<td>15% 359</td>
<td>16% 406</td>
<td>15% 145</td>
</tr>
<tr>
<td>Resistance to change</td>
<td>15% 210</td>
<td>14% 338</td>
<td>14% 351</td>
<td>15% 147</td>
</tr>
<tr>
<td>Not understanding each other’s roles and/or workflows</td>
<td>12% 161</td>
<td>13% 305</td>
<td>12% 305</td>
<td>12% 115</td>
</tr>
<tr>
<td>Working in silos</td>
<td>11% 160</td>
<td>11% 264</td>
<td>11% 283</td>
<td>11% 112</td>
</tr>
<tr>
<td>Systems barriers</td>
<td>11% 154</td>
<td>11% 251</td>
<td>12% 289</td>
<td>12% 116</td>
</tr>
<tr>
<td>Professional bias/different perspectives</td>
<td>10% 139</td>
<td>11% 258</td>
<td>10% 250</td>
<td>10% 94</td>
</tr>
<tr>
<td>Communication barriers</td>
<td>10% 135</td>
<td>11% 261</td>
<td>10% 255</td>
<td>12% 111</td>
</tr>
<tr>
<td>Resource-related issues</td>
<td>9% 123</td>
<td>8% 197</td>
<td>8% 202</td>
<td>9% 85</td>
</tr>
<tr>
<td>Other barriers</td>
<td>1% 20</td>
<td>1% 33</td>
<td>1% 30</td>
<td>2% 16</td>
</tr>
<tr>
<td>No barriers</td>
<td>5% 73</td>
<td>3% 74</td>
<td>4% 99</td>
<td>4% 39</td>
</tr>
<tr>
<td>Total</td>
<td>100% 1409</td>
<td>100% 2340</td>
<td>98% 2470</td>
<td>102% 980</td>
</tr>
</tbody>
</table>
Examples

• “Working within different sites of a healthcare system, we tend to do things only how we have been accustomed; accounting for systems barriers, resistance to change, and not understanding each other's work patterns.”

• “I find that that younger members of various disciplines seem more open to an Interprofessional collaborative practice. In my secondary place of employment, an unhappy physician seems to like to downplay every other non-physician discipline even if they have a terminal degree in their discipline. I find this to be limited but when I do come across it, it definitely is a negative.”

• “There are many great resources, but we do not have the time during patient care to leave to go to a one hour grand rounds. Often what others learn is not shared collaboratively. Sometime changes are made at one level but not communicated well to the other collaborative disciplines, resulting in frustration.”
Examples

• “Team huddle to share the issue.”
• “Weekly interdisciplinary rounds. Someone leading rounds and calling on each discipline to speak.”
• “Always working to improve communication.”
• “We always try to increase communication in stressful situations and plan ahead so we are ready when chaos comes in.”
• “Having something similar to meet/greet with donuts and coffee or snacks where different professions are presented with quiz/tools that other profession uses and different weeks that profession discusses in detail what they do”
• “These gaps are closing with dedicated work of the department and teams”
• “Conferences like these help”
• “Use of clear communication tools such as SBAR; teaching students to approach health care with an open mind to different perspectives; embracing change; encourage/emulate working as a health care team to provide quality holistic care.”
Discussion

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(Updated 8/15/2019)

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