

Background



University of Wisconsin-Madison Interprofessional Continuing Education Partnership

Annual Global Evaluation Survey

Observation from 2016-2021 surveys

Reported changes in practice from interprofessional (IP) and non-interprofessional (non-IP) activities included statements consistent with IP, collaborative practice

Inquiry



Did non-IP activities have impact in areas consistent with collaborative practice?

Was this impact comparable to the impact of IP activities?

Methods—2022 Global Evaluation Survey



Did participation in this activity impact your knowledge, attitudes, and/or skills/strategy/ability to act pertaining to your practice?



How did you change your knowledge, attitudes, and/or skills/ability to act? Choose all that apply.

Impact Related	I Gained New	I Changed My	I Gained New
to	Knowledge	Attitudes	Skills/Ability to Act
<categories></categories>			

Did participation in this activity impact your and/or your healthcare team **performance/practice**?



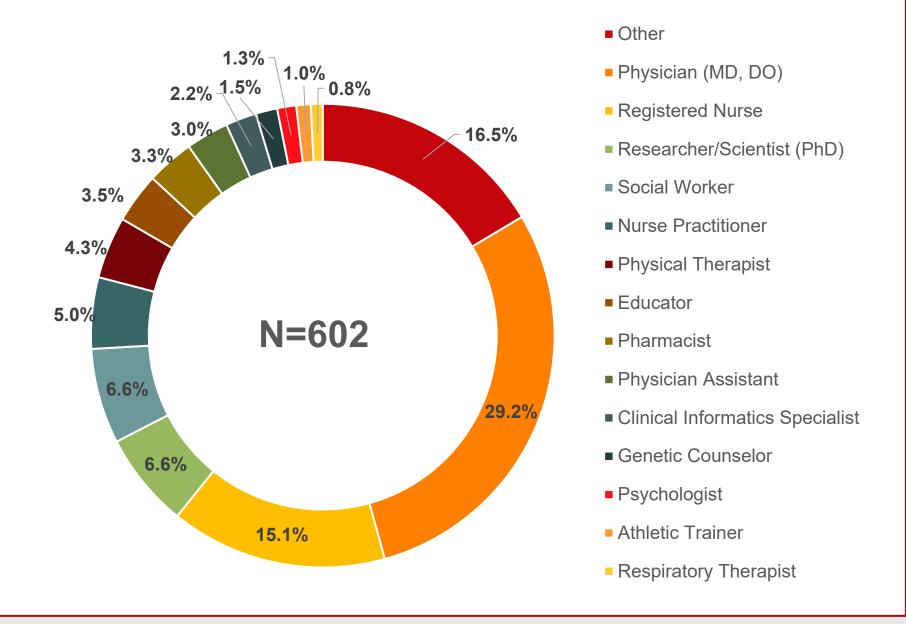
How did you and/or your healthcare team improve performance/practice? Choose all that apply.

Performance/Pra	I Improved How I	My Healthcare Team Improved
ctice Related to	Practice	Team Performance/Practice
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Statistical analysis: Fisher exact test with significance level P < .05

Survey Respondents by Profession





Knowledge, Attitude, and Competence



Activity had impact on knowledge, attitudes, and/or skills/strategy/ability to act

- IP activities: 89% (303 of 341)
- Non-IP activities: 91% (127 of 139)
- The difference was not significant

Categories

Applying values/ethics to interprofessional practice Care for diverse patient populations **Clinical pare Communication with other professionals** Defining the roles/responsibilities of my team members Patient education and communication **Population health** Processes related to patient care Research Resources/tools to support patient care Working with an interprofessional team Other

Knowledge, Attitude, and Competence (Cont.)



	I gained new knowledge		I changed my attitudes		I gained new skills/ability to act	
	IP	Non-IP	IP	Non-IP	IP	Non-IP
Applying values/ethics to interprofessional practice	52%	48%	14%	11%	30%	23%
Communication with other professionals	45%	40%	13%	9%	32%	27%
Defining the roles/responsibilities of my team members	44%	35%	14%	13%	25%	24%
Working with an interprofessional team	44%	39%	15%	13%	26%	23%

IP: N=303

Non-IP: N=127

The differences were not significant.

Performance/Practice



Activity had impact on the learner and/or healthcare team performance/practice

- **IP activities: 76%** (237 of 311)
- Non-IP activities: 72% (92 of 128)
- The difference was not significant

Categories

Access to care Administrative/practice management Collaboration between healthcare team members Communication with other healthcare professionals Coverage/billing for health services Diagnosis/differential diagnosis Engaged in quality improvement project Patient education and communication
Collaboration between healthcare team members Communication with other healthcare professionals Coverage/billing for health services Diagnosis/differential diagnosis Engaged in quality improvement project
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Coverage/billing for health services Diagnosis/differential diagnosis Engaged in quality improvement project
Diagnosis/differential diagnosis Engaged in quality improvement project
Engaged in quality improvement project
Patient education and communication
Tation Cadacton and Communication
Patient management
Patient registry
Research
Screening
Teaching of students, residents, fellows, or peers
Transitions of care
Treatment
Use of electronic health records
Workflow

Performance/Practice (Cont.)



Performance/Practice Related to	I Improved How I Practice		My Healthcare Team Improved Team Performance/Practice		
	IP	Non-IP	IP	Non-IP	
Collaboration between healthcare team members	42%	38%	41%	29%	
Communication with other healthcare professionals	44%	35%	38%	29%	

IP: N=237

Non-IP: N=92

The differences were not significant.

Discussion



All activities had impact in the areas pertaining to IP practice, with no significant differences between IP and non-IP activities

Intentional effort to change institutional culture towards embracing IP values may explain documented impact of IP and non-IP activities in our program

The CE planning process, including the planning document, that is supportive of collaborative, interprofessional learning could influence the educational design and delivery of uniprofessional education for learners as members of the healthcare team, leading to the observed outcomes

School of Medicine and Public Health School of Nursing School of Pharmacy



