An Osteopathic Approach to Facilitating Shared Vision, Interprofessional Education, and Integrated Clinical Practice Among the Colleges at a Health Professions University:

An Example from the Dean of the College of Osteopathic Medicine of the Pacific

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OBJECTIVES

◦ Identify why Interprofessional Education (IPE) is important

◦ Discuss the IPE process at Western University of Health Sciences (WesternU)

◦ Describe the role of the College of Osteopathic Medicine of the Pacific (COMP) in the IPE process

• Synthesize the analogy of the four tenets of Osteopathic Medicine to designing and implementing IPE at WesternU

• Synthesize the analogy of the core competencies of Osteopathic Medical Education to designing and implementing IPE at WesternU
Follow up

- WesternU’s IPE program presented at the AACOM 2009 Conference

- Participants raised questions regarding what appeared to be a “leadership vacuum” within the IPE model

- The current presentation will address this gap, demonstrating the ways in which this role is an innate fit for the “DO,” as IPE is a natural extension of the osteopathic approach
WHY INTERPROFESSIONAL EDUCATION (IPE)

- According to the Institute of Medicine (IOM), there are a recorded 44,000-98,000 deaths annually that are directly due to medical errors*

- Additionally, the IOM found that the majority of medical errors were due to faulty systems, processes, and conditions*

- These can be considered “symptoms” being exhibited by our current healthcare system

*Institute of Medicine, (2000), To err is human: Building a safer health system
WHY INTERPROFESSIONAL EDUCATION (IPE)

The IOM further concluded that to improve healthcare delivery, transitions in the healthcare workforce should include:

○ Stressing evidenced-based practice

○ Modifying ways in which healthcare professionals are regulated and accredited

○ **Providing more opportunities for interdisciplinary (interprofessional) training.**

**Institute of Medicine, (2001), Crossing the quality chasm: A new health system for the 21st century**
IPE AT WESTERNU

• President Philip Pumerantz’s vision

• Formal initiative started in 2007 with university wide collaborative effort that included administration, faculty, staff, and students from all colleges

• University and college missions and resources were analyzed; natural opportunities were identified
BACKGROUND

Western University of Health Sciences is home to **9 distinct health professions colleges:**

- College of Osteopathic Medicine of the Pacific
- College of Allied Health (PT, PA, MSHS)
- College of Graduate Nursing
- College of Pharmacy
- College of Veterinary Medicine
- College of Optometry
- College of Podiatry
- College of Dentistry
- College of Graduate Biomedical Sciences
To produce, in a humanistic tradition, health care professionals and biomedical knowledge that will enhance and extend the quality of life in our communities.
The Mission of the College of Osteopathic Medicine of the Pacific (COMP) is to prepare students to become technically competent, culturally sensitive, professional and compassionate physicians who are life long learners and will serve society by providing comprehensive, patient-centered healthcare with the distinctive osteopathic philosophy.
We produce humanistic healthcare professionals who provide and promote collaborative patient-centered care and coordinated health care management.
WU OFFERS **NATURAL OPPORTUNITIES** FOR IPE
IPE AT WESTERNU

- **Three phase program with assessment throughout all phases:**
  - **Phase one: Case based course**
    - All students participate in small, mixed professions group
    - Implemented January of 2010
  - **Phase two: Simulated activities**
    - In development and scheduled for 2010-2011 academic year
  - **Phase three: Clinical**
    - In development
CHALLENGES AND BARRIERS

Simultaneous development of 3 new initiatives:

1. **Three new colleges**
   - Podiatry
   - Dentistry
   - Optometry

2. **Shared Curriculum**

3. **IPE**
   - Defining difference between IPE & Shared Curriculum
     - IPE – “WHAT” we are trying to accomplish (Goal)
     - Shared Curriculum – “HOW” we are going about it (Method)
CHALLENGES AND BARRIERS

- **Magnitude of the undertaking**
  - Logistical issues
    - space
    - curriculum mapping
    - human resources
    - financial support

- **Communication**
  - The Deans as “Change Agents” in a culture of change
  - Team-building focus
CHALLENGES AND BARRIERS

• **Getting buy-in**
  ◦ Faculty and staff
  ◦ Students

• **Managing fears**
  ◦ Workload (faculty and students)
  ◦ Lack of expertise
  ◦ Time
  ◦ Change
OVERCOMING CHALLENGES & BARRIERS

- Goal to implement IPE, but still maintain autonomy & distinctiveness of each profession

- For COMP, goal to create competent, compassionate, & caring team leaders who are lifelong learners:

  The Osteopathic Physician of the 21\textsuperscript{st} Century:
  - Student focus
  - Teamwork
  - Personal & professional goal achievement
  - Respect for human dignity
  - Professionalism
  - Learning Organization

- Philosophy of Osteopathic Medicine applicable in all phases of IPE program
The body is a unit; the person is a unit of body, mind, & spirit.

The body is capable of self-regulation, self-healing, & health maintenance.

Structure & function are reciprocally interrelated.

Rational treatment is based upon an understanding of the basic principles of body unity, self-regulation, & the interrelationship of structure & function.

– American Osteopathic Association
http://www.osteopathic.org/index.cfm?PageID=ost_tenet
THE BODY IS A UNIT; THE PERSON IS A UNIT OF BODY, MIND, & SPIRIT

• IPE at WesternU is a unit comprised of 9 distinct professions

• Each program needs to provide curriculum specific to the program
  • IPE curriculum could not supplant, conflict or impose upon individual college curricula

• Like the different components & organs of the body, it was important for each college to impart professional identity & professional pride
  • Crucial for each member to understand their own specific roles & functions before they can engage as a team
THE BODY IS CAPABLE OF SELF-REGULATION, SELF-HEALING, & HEALTH MAINTENANCE

• IPE at WesternU is capable of self-regulation, self-healing, & health maintenance

• Like OMM helps restore the body’s innate capacity for self-healing, sometimes only a slight catalyst is necessary to help resolve conflicts & promote well-being
  
  • Deans support team-building as a natural and inherent aspect of leadership philosophies
  
  • Deans set expectation that consensus is better for medicine with both faculty & students (increased collaboration for the good of the whole)

• By supporting this culture & allowing IPE to evolve naturally, the formal IPE curriculum was well received. Additionally, many “grass-roots” efforts to support IPE are appearing.

• Clubs, Faculty Learning Communities, Service Learning, IPE grants & projects, Centers of Excellence
Lessons learned from structure & function include:

- Simultaneous development & implementation of three new processes (*structure*) all affected the implementation & perception of each of the new components (*function*)
- Logistical issues such as physical space & faculty time (*structure*) affected course design (*function*)

Conversely, the function of the course is being analyzed in an ongoing fashion to determine effectiveness.

Lessons learned from observation of function include:

- Need for ongoing faculty training & development
- Need for increased student input regarding effectiveness of the case as a teaching vehicle
RATIONAL TREATMENT IS BASED UPON AN UNDERSTANDING OF THE BASIC PRINCIPLES OF BODY UNITY, SELF-REGULATION, & THE INTER-RELATIONSHIP OF STRUCTURE & FUNCTION

- IPE must not be forced
  - Take advantage of natural opportunities
  - Cases & scenarios must not be contrived….must be believable

- Must address fears of faculty & students
  - How will time count toward academic achievement?
  - Subject matter expert issues
  - Impact on faculty & student workload

- Must have clear cut lines of responsibility & communication amongst the colleges

- Must have administrative support combined with healthy dose of “grass roots” efforts
CORE COMPETENCIES OF THE OSTEOPATHIC PROFESSION

- Medical Knowledge
- Osteopathic Philosophy & OMM
- Interpersonal & Communication Skills
- Professionalism (Leadership)
- Patient Centered Care
- Evidence Based Medicine
- Systems Based Practice
OSTEOPATHIC COMPETENCIES IN IPE?

- While IPE will not manifest all measurable outcomes of Osteopathic Medical Education competencies, many of the philosophies & principles are captured in the identified IPE Competencies.

- Many are common threads for all professions.

- Still a pronounced need to develop measurable outcomes.
IDENTIFIED IPE COMPETENCIES

- Demonstrate effective communication & interpersonal skills for collaborative patient-based care (*Communication & Collaboration*)
- Describe the scope of practice, roles & unique contributions of differing health professions (*Knowledge of health professions*)
- Effectively participate as members of an interprofessional health care team (*Interprofessional awareness*)
- Discuss the impact of ethical dilemmas & cultural implications in clinical care (*Resolving ethical conflicts*)
- Recognize various professional roles related to quality of life issues (*Discussing quality of life issues*)
IPE MEETS OSTEOPATHIC MEDICAL EDUCATION COMPETENCIES

- **Medical Knowledge:** In IPE, the Osteopathic Medical Student (OMS) must have command of medical knowledge to lead, facilitate, and integrate application of knowledge into the healthcare team.

- **Osteopathic Philosophy & OMM:** In IPE, OMS must understand & apply principles of structure & function of the system, & understand the importance of a “whole person approach” to maximize the structure & function of the team.

- **Interpersonal & Communication Skills:** In IPE, OMS must develop & apply communication skills to function as both a leader & member of the healthcare team & facilitate effective teamwork.

- **Professionalism (Leadership):** In IPE, OMS must learn to exhibit all components of professionalism with focus on becoming the healthcare team leader.
IPE MEETS OSTEOPATHIC MEDICAL EDUCATION COMPETENCIES

- **Patient Centered Care:** In IPE, OMS will focus on broader aspects of the patient’s system including psychosocial, economic status, etc. so the healthcare team will develop comprehensive plan to address the patient’s encompassing needs.

- **Evidence Based Medicine:** In IPE, OMS will be expected to expand their overall knowledge base by utilizing up-to-date, evidence based sources & will be exposed to the quality assurance process geared toward improved patient outcomes.

- **Systems Based Practice:** In IPE, OMS will have opportunity to understand the entire system that can affect the health of the individual patient and/or the community at large & promote the health of the system for the greater good.
CONCLUSION

- Crucial need for communication & collaboration with a healthy dose of patience & understanding required to develop/implement IPE program

- Crucial for the Osteopathic Physician to provide the necessary leadership to maximize the potential of the model and healthcare team by facilitating the interaction

- The Osteopathic philosophy and perspective provides a natural, broad-based framework from which to promote this critical new healthcare paradigm with a distinctive HANDS-ON APPROACH!
Q & A
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