


Aspire to Inquire: Launching a Joint Accreditation Application for Interprofessional Continuing Education

Patricia A. Smith, DNP, RN-BC
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Presentation Outcomes

- At the conclusion of the presentation participants will be able to:
 - List the attributes of interprofessional continuing education (IPCE).
 - Identify the eligibility criteria for Joint Accreditation (JA).
 - Describe the application process for Joint Accreditation (JA) for IPCE.
 - Describe the context of learning objectives & evaluation measures for IPCE.
 - Identify the successes and opportunities from one academic medical center's JA application journey.

Definition of Interprofessional Continuing Education (IPCE)

- According to the World Health Organization (WHO):
 - Interprofessional education is an action that "occurs when students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes." ([Framework for Action on Interprofessional Education and Collaborative Practice](#), WHO, 2010)

Attributes of Interprofessional Continuing Education (IPCE)

- Provides ability to share skills and knowledge between professions (Bridges et al., 2011)
- Allows for enhanced understanding, shared values, & respect for roles of other healthcare professionals (Bridges et al., 2011)
- Creates a learning environment that develops an interprofessional, team-based approach in delivering safe, high quality care to improve patient outcomes (Reeves & Kitto, 2017)
- Improving communication and collaboration by an interprofessional team leads to better patient care delivery (Brook et al., 2013)

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4

Joint Accreditation: Why It Is Important

- National and international health leadership organizations identify interprofessional continuing education (IPCE) and team-based care as a critical component of health care improvement.
- The Institute of Medicine's (IOM) seminal 2003 report titled [Health Professions Education: A Bridge to Quality](#) stated that health professionals need to "cooperate, communicate, and integrate care in teams to ensure that care is continuous and reliable."
- Joint Accreditation promotes interprofessional continuing education leading to improvements in healthcare delivery and better patient outcomes.

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5

First, there was a



- Penn Medicine is comprised of the University of Pennsylvania's Perelman School of Medicine, 5 acute care hospitals, a primary care provider network, 7 outpatient multi-specialty satellite services, home care/hospice services, and a rehabilitation center
- The interest in IPCE grew out of our strong emphasis on quality and patient safety
- This initiative was embraced by the highest levels of Penn Medicine's educational and clinical leadership

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6

Aligning the Stars – Creating a Shared Vision for Patient Safety

- ♦ Chief Medical Officer & Chief Nursing Officers (CMO/CNOs) Alliance at UPHS began in 2006 creating a shared vision for patient safety
- ♦ Their work resulted in the "Blueprint for Quality and Patient Safety" launched in 2007
 - This framework drove improvements in clinical care, safety, and the patient experience
- ♦ Unit-Based Clinical Leadership (UBCL) teams operationalized this framework promoting an interprofessional approach to patient safety and quality of patient care
 - Teams included a nurse leader, a physician, a CNS, & a quality-safety manager

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7

Aligning the Stars: Formalizing the Interprofessional Continuing Education Structure

- ♦ **Collaboration with:** the Penn Medicine Nursing PSNA Approved Provider Unit (APU) & the U of Penn Perelman School of Medicine – Office of Continuing Medical Education (CME)
- ♦ **IPCE structure formalized by:** the Corporate Director of Nursing Professional Development and Innovation, Penn Medicine Nursing & the Director of the U of Penn - Office of CME
- ♦ Joint Accreditation was embraced by the institution's clinical and educational leadership focusing on 2 disciplines initially: **Medicine and Nursing**

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8

Our Journey Begins... Heading Towards Joint Accreditation

- ♦ **Eligibility Criteria:**
 - There is a structure and process to plan and present education designed by and for the healthcare team that is intact and functional for at least the past 18 months
 - At least 25% of all continuing education activities developed by the organization during the past 18 months are deemed as "interprofessional" and demonstrates an integrated planning process which includes health care professionals from 2 or more professions who are reflective of the target audience the activity is designed to address
 - The organization engages in the Joint Accreditation process demonstrating compliance with the criteria for joint accreditation & if currently accredited, any associated accreditation policies required by ACCME, ACPE, & ANCC

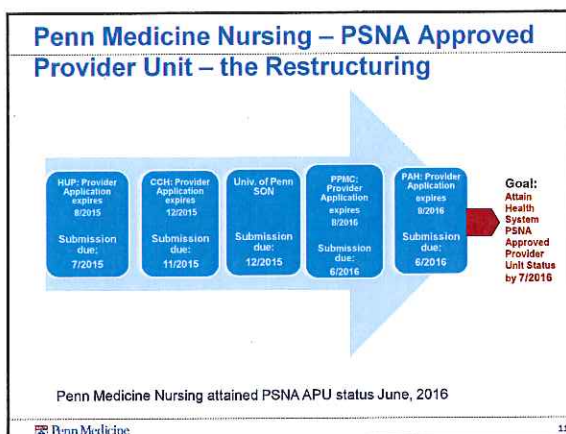
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9

Joint Accreditation – Application to Accreditation Timeline		
Milestone	Cycle 1	Cycle 2
18 month IP Planning Period prior to applying	January 1, 2015	April 1
Determination of eligibility	June 1, 2016	October 1
• Intent to apply		
• Eligibility Review Fee		
Provider informed of eligibility	July 1, 2016	November 1
Provider deadline for submission	September 1, 2016	January 1
• List of educational activities (18 months)		
• Application Fee		
Provider informed of activities for review (9 files)	October 15, 2016	February 1
Provider contacted to schedule interview date	January/February, 2017	April/May
Provider deadline to submit:	March 1, 2017	July 1
• Self-study report		
• Activity files		
Interview with accreditors – Regarding Self-study Report	June, 2017	October
Provider notification of decision for JA	July 31, 2017	November 30

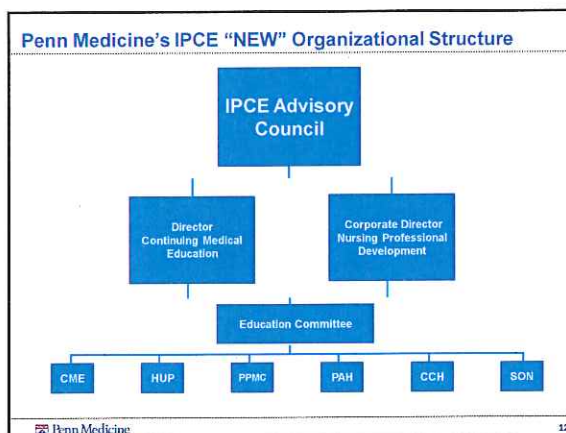
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10



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11



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12

Steps to Forging the Joint Accreditation Trail – Joint Accreditation Criteria (JAC)1 - 13

♦ Achieving the JAC :

- JAC 1: U of Penn Continuing Education Mission
 - Crafted a new mission statement for IPCE at Penn Medicine
- Two Formal structures were developed to support IPCE:
 - **IPCE Advisory Council**
 - Members include U of Penn Professors of Medicine, the CMO, the CNO, Nursing Leadership Directors for Education, APP, Senior Vice Dean for Education, Director of CME, & Associate Dean for Practice & Professor of Pain Practice
 - Provides strategic guidance to the leadership of IPCE programs
 - Provides perspectives on programmatic needs
 - Reviews goals and resources across the institution
 - Recommend/endorse new policies and organizational structures to support IPCE
 - **IPCE Education Committee**
 - Members include the Co-Directors of IPCE, one Lead Nurse Planner, an IPCE Outreach Specialist, one Physician Peer Reviewer, one Accreditation Specialist

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13

Steps to Forging the Joint Accreditation Trail

♦ Achieving the JAC: Our Initial Steps

- Reviewed requirements exploring feasibility for JA for IPCE
- Addressed concerns with accreditation bodies – were we ready?
- Studied similar efforts in other academic medical centers
- Meetings held with Penn Medicine's leadership in 2015 receiving support to move forward with project
- Reviewed planned continuing education activities for the next 18 months to ensure 25% were IPCE (January 2015 – June 2016)

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14

Steps to Forging the Joint Accreditation Trail

♦ We are Up and Running – Our Initial Steps

- Created an action plan: IPCE concentrated on disciplines of nursing and medicine
- Education Committee attended formal training – Joint Accreditation Summit, Chicago, IL
- Reviewed planned CE activities for the ensuing 18 months ensuring 25% were IPCE
- Reviewed program planning & certification forms for review and revision
- Added the compilation of CME/CNE language to all online/offline templates

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15

Steps to Forging the Joint Accreditation Trail

• We are Up and Running – Continuing Steps

- Trained 130 Penn Medicine program coordinators on the new IPCE application process
- Set up a revised Learning Management System (LMS) for the JA framework
- Education Committee held weekly meetings performing program content reviews & activity planning for jointly developed CE activities
- Completed the JA milestones

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15

Steps to Forging the Joint Accreditation Trail

• Completing the JA Milestones

Milestone	Submission Date
• Organizational Intent to Apply	6/12/2016
• Submission of eligibility review fee	
• Provider informed of eligibility decision	7/1/2016
• Submission of Provider CE Activity List	9/1/2016
• Application Fee	
• Provider informed of activity files for review	10/15/2016
• Provider deadline to submit the:	3/1/2017
□ Self-study Report	
□ Activity files for review	
• Self-study Report Interview with Joint Accreditors	5/12/2017
• Meeting between the Joint Accreditors	June, 2017
• Provider notification of decision	July, 31, 2017

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17

Steps to Forging the Joint Accreditation Trail – JA Milestones

♦ Penn Medicine's:

- CE Activity List
 - >600 CME/CNE activities were submitted
 - 27% were deemed IPCE
- 9 Program activity files selected for review
- Self-study Report
 - Consisted of 145 narrative pages
 - 9 Program activity files were added as addendums to the report
- Meeting with Joint Accreditors
 - 40 minute discussion via conference call included the IPCE Education Committee, CNO, & CMO at Penn Medicine
 - Review of self-study report

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18

We Blazed the JA Trail

♦Our



Includes:

- Increasing collaboration with Penn Medicine Nursing & the U of Penn SOM - Office for CME & IPCE
- Amplifying the promotion of strategic IPCE programs jointly planned
- Developing one Program Planning Document, Disclosure Form, and Evaluation Form for IPCE
- Distributing an on-line evaluation connected to the program certificate of completion
- Stimulating creation of fluid pathways across health professions
- Supporting Penn Medicine's efforts in QI and patient safety across professions
- Enhancing budgetary support for Joint Accreditation

We Blazed the JA Trail

♦The



encountered....

- Increasing the promotion of IPCE programs jointly defined and planned
- Cultivating a mutual language between CNE and CME continuing education activities
- Breaking down hierarchical silos between medicine and nursing keeping IPCE as a focus for all
- Ensuring the target audience is represented in the program planning process
- Validating resources and costs
- Developing evaluation strategies to include measurement of the team's performance (ie. Open ended questions: "How does your learning from this program affects the team?", "What was the impact on the team?")

We Blazed the JA Application Trail – What is Next?

Our...



Includes:

- Increasing the number of IPCE CE activities
- Faculty training development in IPCE
- Increasing grant support for IPCE for health professions
- Educational design resources
- Promoting research in education and QI across interprofessional disciplines
- Employ sound teaching methodologies and assessment strategies
- Crafting curricular approaches for team-based learning for local, regional, national, and international learners

A Resource: Penn Medicine's Website

- ♦ <http://pennmcneonline.com>



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22

Conclusion – Two Concepts for Reflection

- ♦ **AAPI – Always Anticipate Positive Intent**

– Creighton University, Health Sciences Continuing Education

- ♦ **Keep your mantra in focus:**

- **By the Team – for the Team!**

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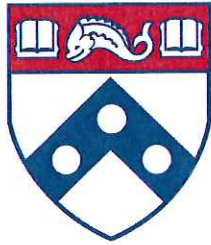
23

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24



Contact: pat.smith@uphs.upenn.edu

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25
