# June 2, 2023 11:30-12:30pm

|  | In attendance |  | In attendance x |  |
|--|---------------|--|-----------------|--|
| Mellynn Baker  |               | Donald Johnston                          |                 |  |
| <ul> <li>Board of Regents</li> </ul>                     |               | Northwestern State University            |                 |  |
| Rebecca Hirschhorn                                       | х             | Raven Jackson                            | х               |  |
| <ul> <li>Louisiana State University A&amp;M</li> </ul>   |               | Xavier University                        |                 |  |
| Mary Fernandez   |               | Haywood Joiner                           | х               |  |
| <ul> <li>Nunez Community College</li> </ul>              |               | Louisiana State University of Alexandria |                 |  |
| Aimee Gros   |               | Rachael Reed                             |                 |  |
| <ul> <li>University of Louisiana at Lafayette</li> </ul> |               | Dillard University                       |                 |  |
| Tina Gunaldo   | х             |  |                 |  |
| LSU Health Sciences Center New Orleans                   |               |  |                 |  |

### Agenda:

- 1. Health Works (HW) Commission
  - a. Reported outcomes of IPE Event May 2023 meeting (pasted after agenda)
  - b. Should develop a letter sent to Chancellors of each institution describing statewide efforts Tina will work on this and ask Leadership team for approval
  - c. During a previous HW Commission meeting, there was a suggestion for our Consortium to connect with Healthy State (<u>https://www.livehealthystate.org/</u>)
    - i. Meets the need to expand our Consortium beyond education groups
    - ii. Mary Fernandez will reach out to the contact individual noted on the website
- 2. Statewide Virtual IPE Activity
  - a. Provide update from Development group Post-Event Debriefing meeting
    - i. Is your institution and/or program interested in engaging in a fall **and** spring IPE experience for early learners?
    - ii. Recommendations from Development group
      - Continue to support IPE at the state level for introductory IPE, allowing for programs to develop advanced IPE engagements within their own institution or regionally – refer to <u>HPAC guidance</u> for supporting quality IPE.
      - 2. If funding allows, host the vaping health misinformation case in Fall 2023 (co-led by Tina at LSUHSCNO and Don at NW), and work on developing a new case for Spring 2024 (led by Don at NW).
      - 3. Add additional budget item for an IPE and "topic" expert to support development of the new case
- 3. Connection with Simulation Council
  - a. Tina and Haywood met with Daryl Lofaso, chair of Simulation Council. Daryl provided information related to the proposal for the past Simulation Expo, and will ask the Council about their interest in collaborating in a future expo/conference.
    - i. The Simulation Council was not interested in collaborating for the 2024 Simulation Expo at this time.
- 4. Fall 2023 and Spring 2024 Professional Conference
  - a. Based on the feedback from #7 below, our recommendation is for the Consortium to
    - host a virtual professional development session (3 hours) on Monday, December 18<sup>th</sup>, led by Raven Jackson at Xavier
      - 1. will collect information from speakers (learning objectives, CV, disclosure statement, etc. so participants can submit for continuing education to their own State Boards.

- ii. host an in-person professional development conference (6 hours), led by Haywood LSUA
- iii. develop a logo for the Consortium
- 5. Schedule next Leadership Meetings August and November
  - a. In August, begin discussion of new leadership and succession planning for July 1, 2024
- 6. Ask Mellynn about appropriate time to propose a budget for Fall 2023 and Spring 2024 conference and IPE event.
- 7. From December 2021 Meeting
  - a. What would you like this group to address? What is important to you, your program and your institution?
    - i. Buy-in to IPE (having faculty think of IPE as equally important as other content areas)
      - 1. Accreditation standards also support buy-in
      - 2. Faculty learning terminology what is IPE and what it is not; where is IPE in our programs; is IPE included in your syllabus
    - ii. Networking who is doing what
    - iii. Identifying resources
      - 1. Identifying other programs to work with
    - iv. Sharing ideas/activity (what worked, what did not work)
      - 1. Developing scenarios
    - v. Faculty development
      - 1. Faculty needs to be supported by higher administration if they engaged in IPE.
      - 2. How to create accountability with faculty to help support sustainability
    - vi. How to integrate IPE into programs; how to avoid hiccups
    - vii. How to get it started? How to get buy-in? How to build the program? What is best practice?
    - viii. Possibilities for collaboration
    - ix. Developing seminars for linking or sharing information
    - x. State-wide or regional conferences (building of ideas)
    - xi. Health systems by LDH regions
      - 1. Pharmacy has to work with medicine
    - xii. Statewide opportunity for IPE
    - xiii. IPE certification/scholars

### Sent to HW Commission:

# **Training**

The LA Interprofessional Consortium with support from the Board of Regents via the Health Works Commission provided a statewide interprofessional education (IPE) learning experience for 9 institutions and 9 health professional programs. The IPE event provided an efficient and effective opportunity to support institutions in meeting an IPE accreditation standard, while preparing the future workforce for collaboration. Additionally, the virtual IPE experience also provided an opportunity for students to engage with students from other health professions that are not co-located on their respective campuses. The event was 90 minutes in length and utilized Zoom breakout rooms for small group discussions.

### **Topic of Training**

An interprofessional discussion: Mitigating vaping misinformation

# Number of attendees

490 students registered; 478 (95.5%) attended Cost: \$7806.25 for 478 students Cost per student (not including in-kind): \$16.33/student; including in-kind \$39.27/student

### Student Feedback

82-93% of students who completed the survey agreed or strongly agreed with the statements below.

|  | STRONGLY<br>AGREE | AGREE         | NEUTRAL      | DISAGREE    | STRONGLY<br>DISAGREE | TOTAL | WEIGHTED<br>AVERAGE |
|--|-------------------|---------------|--------------|-------------|----------------------|-------|---------------------|
| The IPE activity provided me the<br>opportunity to learn with students<br>from other health professions.   | 62.32%<br>253     | 31.28%<br>127 | 4.68%<br>19  | 0.99%<br>4  | 0.74%<br>3           | 406   | 4.53                |
| The IPE activity provided me the<br>opportunity to share my training,<br>knowledge and/or perspective with<br>students from other health<br>professions. | 62.07%<br>252     | 31.03%<br>126 | 5.42%<br>22  | 0.74%<br>3  | 0.74%<br>3           | 406   | 4.53                |
| I was able to share my knowledge<br>and/or perspective during my team's<br>discussion on mitigating vaping<br>misinformation.                            | 62.07%<br>252     | 31.03%<br>126 | 5.42%<br>22  | 0.74%<br>3  | 0.74%<br>3           | 406   | 4.53                |
| 60 minutes was an appropriate length for the IPE experience.   | 54.43%<br>221     | 26.60%<br>108 | 11.82%<br>48 | 5.17%<br>21 | 1.97%<br>8           | 406   | 4.26                |
| The pre-work prepared me with the<br>knowledge to engage in discussions<br>with other students on my team.   | 52.59%<br>213     | 31.11%<br>126 | 12.10%<br>49 | 2.96%<br>12 | 1.23%<br>5           | 405   | 4.31                |
| I would recommend this IPE experience to peers.  | 50.99%<br>207     | 31.28%<br>127 | 12.56%<br>51 | 3.20%<br>13 | 1.97%<br>8           | 406   | 4.26                |

## Faculty Feedback

Approximately 93% of faculty agreed or strongly agreed with the statements below.

|   | STRONGLY<br>AGREE | AGREE  | NEUTRAL | DISAGREE | STRONGLY<br>DISAGREE | TOTAL |
|---|-------------------|--------|---------|----------|----------------------|-------|
| The IPE event met our program's curricular needs.   | 42.86%            | 50.00% | 7.14%   | 0.00%    | 0.00%                |       |
|   | 6                 | 7      | 1       | 0        | 0                    | 14    |
| Faculty were provided adequate instructions before  | 57.14%            | 35.71% | 7.14%   | 0.00%    | 0.00%                |       |
| the event.  | 8                 | 5      | 1       | 0        | 0                    | 14    |
| Students were provided adequate instructions before | 64.29%            | 28.57% | 7.14%   | 0.00%    | 0.00%                |       |
| the event.  | 9                 | 4      | 1       | 0        | 0                    | 14    |
| The amount of pre-work was appropriate for          | 57.14%            | 42.86% | 0.00%   | 0.00%    | 0.00%                |       |
| students.   | 8                 | 6      | 0       | 0        | 0                    | 14    |
| The case topic was beneficial for our students.     | 50.00%            | 42.86% | 7.14%   | 0.00%    | 0.00%                |       |
|   | 7                 | 6      | 1       | 0        | 0                    | 14    |
| As a faculty member, I would have my students       | 61.54%            | 30.77% | 7.69%   | 0.00%    | 0.00%                |       |
| participate in future statewide IPE events.         | 8                 | 4      | 1       | 0        | 0                    | 13    |

### <u>Summary</u>

Currently 25 health profession academic programs require interprofessional education as a component of the curriculum. The LA Interprofessional Consortium and faculty from across the state developed and implemented the first statewide IPE learning experience with positive outcomes from both student and faculty perspectives.

Faculty from various institutions shared and combined resources to develop a cost-effective educational experience, which helped 9 programs demonstrate engagement in IPE – a step in the right direction to meet respective accreditation standards.

Thank you to the Board of Regents and the Health Works Commission.