

IOM Global forum on Innovation in HPE
Workshop II: Educating for practice – Nov. 29th & 30th, 2012

SUMMARY & REFLECTIONS

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SOME CONTEXT FOR MY THOUGHTS

- ✘ Lawyer, mother
- ✘ Former public defender
- ✘ 25 years on the clinical faculty at UW-Madison Law School – 1/2 Law, 1/2 IPE “off the grid”
- ✘ Newly appointed Associate Dean for Academic Affairs & Experiential Learning
- ✘ Co-founder and Director of the Center for Patient Partnerships (www.patientpartnerships.org)
- ✘ Nearly 19 year metastatic ovarian cancer survivor

If the 20th century was about thinking the world apart, then the 21st century must be about thinking it back together again.

SOME QUESTIONS WE HAVE RAISED

- ✘ How do you work together if you don't really know how someone else works, what skills and knowledge they have, what language they speak?
- ✘ What is IPE?
- ✘ How do we know if IPE delivers higher quality, better care?
- ✘ Are there other models than IPE that accomplish the same goals as well or better?

MORE QUESTIONS

- ✘ Is there an ideal number of professions for IPE?
- ✘ Are there any irreplaceable professions?
- ✘ What's the minimum number of courses or programs needed to launch?
- ✘ What are the roles for academics and practitioners in design and implementation?
- ✘ How do you define success?
- ✘ What is the value added of what we're doing?

STILL MORE QUESTIONS

- ✘ What glasses do **you** have on?
- ✘ How have you been able to preserve time for reflection?
- ✘ How have you made progress with men and other professionals?
- ✘ Who do we need to talk to that isn't here?
- ✘ What do university leaders think of health sciences education?
- ✘ Where are broader sources of support/resources?

GUIDANCE RE: GETTING STARTED

- ✘ Take the time to be intentional - mission/vision.
- ✘ There are few substitutes for trusted committed leadership.
- ✘ It's about passion and commitment by a person or people with vision. That's why it works.
- ✘ They have to “manage up” – share the stories, gather evidence, build a network of other champions.
- ✘ Adverse conditions create opportunities for change. (see: Joplin, J)
- ✘ We need to learn a lot more about culture change, to become culture change agents.

GUIDANCE RE: ASSESSMENT

- ✘ If we don't get the research and evaluation right, IPE will be a "new idea" again in 40 years.
- ✘ We need evidence, data, proof of the "value proposition."
- ✘ But see: "All that is valuable is not measurable, and all that is measurable is not valuable."
Einstein A.
- ✘ Need to be visionary and inclusive in determining what we measure.

GUIDANCE RE: SETTING UP

- ✘ Groups are not teams.
- ✘ The team is the unit of learning and work.
- ✘ The faculty must be the focus of IP learning as well (learning communities).
- ✘ Create value for learning sites.
- ✘ Plagiarize with pride!
- ✘ Hierarchy and gender are tangled up together.
- ✘ We must create and protect space to reflect.

GUIDANCE FROM OUR STUDENTS

- ✘ What the students told us:
 - + The social interactions are important too – not just the academic. Relationships are central.
 - + IPE is a high touch learning environment where small is beautiful.
 - + IPE is best when it is memorable, well facilitated and positive, interactive (professionally and personally), with student involvement, and where education and practice are linked.
 - + Other disciplines are “missing” in IPE.
 - + Real leaders harmonize academic calendars!

QUESTION #1

- ✘ Is it important to have patients participate in designing, planning, evaluating and promoting IPE?
- + Why is this still so rare?
 - ✘ Maybe because we're not experts yet.
 - ✘ Cross-cultural outreach is hard.
 - ✘ It takes time, intentionality, hard work to get value.
 - ✘ We don't believe patients' input is essential. But...
- + And what about students' participation in design, planning, evaluation and promotion?

QUESTION #2

- ✘ What about students who aren't so enthusiastic about IPE?
 - + While majority rule doesn't control curriculum, this question begs us to ground IPE intentionally for our students in the context of their lives in practice, and yours.
 - ✘ Share the roots of your passion for IPE, why you wish you were trained that way, why you want it for them.
 - ✘ When students can feel we care about them, they will paddle a long way with us before they can see the shore.
 - ✘ Engage students in every aspect – it's about the relationships.

QUESTION #3

- ✘ What holds us back from letting go of traditional models of care? Do we worry about losing:
 - + Our histories, stories, heroes/heroines?
 - + The kinship of our disciplines, our guilds?
 - + Our identities, how we see ourselves and how others see us?
 - + Solo expertise, mystique?
 - + Protection of the clan?
 - + Market dominance?
 - + Our cultures and languages?

QUESTION #4

- ✘ Should we include population/community health, context (ICF) and social determinants of health in IPE projects, outcomes measures?
- ✘ Broader interprofessionalism allows broader impact on outcomes.
- ✘ Yes, but we don't want students to get depressed or overwhelmed. Let's focus on the triple aims.
- ✘ But is aiming for improvement in health care delivery alone, and not SDH too, hobbling our efforts with IPE and other innovation – making it akin to rearranging deck chairs on the Titanic?

QUESTION #4 CONT.

- ✘ And, conversely, might addressing SDH head on create the proverbial tide that raises all boats?
- ✘ Addressing SDH would implicate other disciplines—social work, law, others? Is that too complex, will it sink us?
- ✘ How does our business based health care model limit innovation compared to our colleagues' efforts in countries with national health delivery system models?
- ✘ Are we being too bold?
- ✘ Are we being bold *enough*?

A FEW TREASURED RESOURCES

- ✘ Parker Palmer “A New Professional: The Aims of Education Revisited” Changemag.org Nov/Dec 2007
- ✘ Parker Palmer, “The Violence of Our Knowledge: Toward a Spirituality of Higher Education,” 21st Century Learning Initiative, <http://www.21learn.org>
- ✘ Arthur Zajonc, *Meditation As Contemplative Inquiry: When Knowing Becomes Love*, Lindisfarne Press, 2008
- ✘ Dr. L. Dee Fink, *Creating Significant Learning Experiences*, Jossey-Bass, 2003
- ✘ Dr. Ben Crabtree,

The history of the curriculum is one in which theories are never realized in the manner they are intended. There are always unintended, unanticipated and unwilled consequences as theories are put into action.

Tom Popkewitz

THANK YOU!

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