

# Interprofessional Dedicated Education Units (IPDEUs)

## A Massachusetts General Hospital and MGH Institute of Health Professions Collaboration



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# Drawing on a Decisive Moment

- ❑ Health system facing unprecedented growth: aging population, and seriously ill adults, infants & children living longer with complex conditions
- ❑ Documented failure to recognize and treat pain and other distressing symptoms
- ❑ Exponential cost of care increases without improved value
- ❑ Value-based care taking over as the new mantra while Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) implementation starts taking hold
- ❑ Dissatisfaction and confusion about medical care and the health system

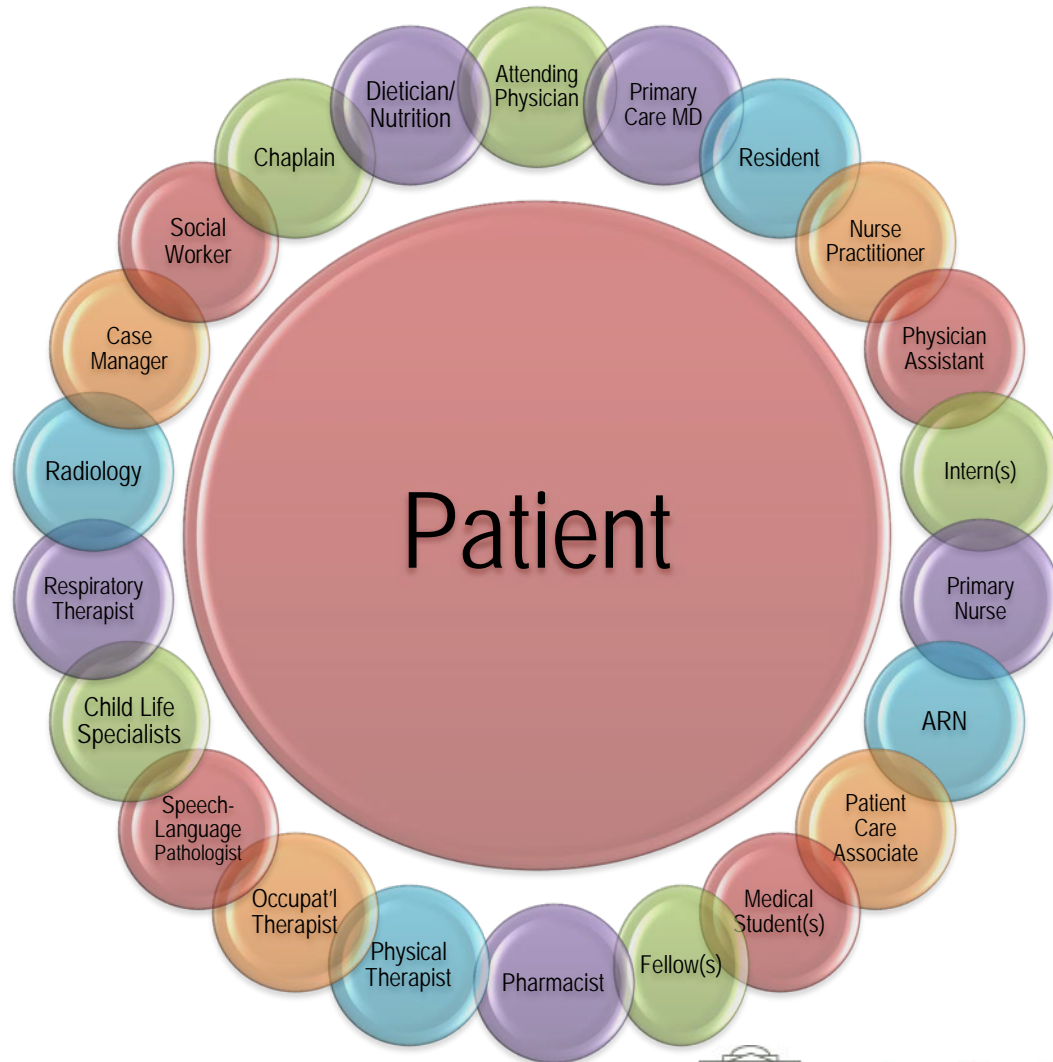


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# Complexity of the Care Team



# The journey toward Interprofessional Collaborative Practice...



...begins with true  
Academic-Practice  
Partnership



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# Interprofessional Dedicated Education Units (IPDEUs)

Three inpatient acute care units:

- 2 Medical Units
- 1 Cardiac Stepdown Unit



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# Evolution of the IPDEU Model

## IPDEU model 1.0

- Semester-long ½ day/week
- Focus: Uni-Professional and IPE competencies
- Clinical instructors (CIs) are unit Nurses, OTs, PTs SLPs
- Clinical Faculty Coordinator (CFCs)
- CFC-facilitated wrap-up debrief



## Unsustainable model

Despite reports of “ah-ha” moments by Students and unit CIs:

- Complex logistics
- Cost: Need to overstaff
- Only 12 students/semester
- CIs frustrated with role
- Students perceived as “losing hours”



# Decision Point: Model unsustainable, “What Next?”

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## End the Program?

*“It was a nice idea.*

*We tried, but it doesn’t work for either of us.”*

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## Leverage our Collaboration?

*“We have something special here.*

*How can we make it work?”*



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# Evolution of the IPDEU Model

## IPDEU Model 2.0

- Two week blocks
- Student dyads do two ½ days
  - One with Nurse instructor
  - One with OT, PT or SLP
- Single focus: IP aspects of patient-centered care delivery
- Interprofessional Instructor (IPI) role defined, and IPIs trained
- IPIs cover typical caseload and participate in wrap-up debrief session
- Scalable: Currently running 3 blocks, on 3 IPDEUs  
48 students/semester/unit = 144





# IHP

# MGH

Provost

Senior VP for Patient Care

Director of  
IMPACT  
Practice

Academic Deans  
SHRS /SON

Executive Director  
Institute for Patient Care

Rehab  
Directors

Nursing Unit  
Directors

Clinical Faculty  
Coordinators

IPIs  
Nursing and P...

**WHAT IMPACT are we having ...  
on IPIs, Students, Units, Patients?**

Dyads

Patients

## Organizational Structure



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# Building Blocks of True Academic-Practice Partnerships

- ❑ Shared commitment to exemplary practice and student success
- ❑ Building leadership relationships at all levels through various initiatives
  - Placements ≠ Relationships
- ❑ Sharing resources
- ❑ Working as a team to solve complex challenges
- ❑ Making it work for all stakeholders – especially our patients



## Student Quote

*[Our IPI] showed us what it was like to treat patients as an SLP, but most importantly she showed us how to be compassionate with patients and advocate for them. I felt that I learned more about patient interaction than the speech stuff...an amazing lesson to me.*

[Student survey response]



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## IPI Quote

*In teaching, you emphasize...certain elements of your practice. In the IPDEU setting, in reinforcing the rationale behind these [interprofessional] practices, I noticed [my] increased emphasis on persistence and follow-through surrounding interprofessional [teamwork] in my personal practice.*

[IPI survey response]



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Thank you



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