

Comparative Evaluation of Interprofessional Education Experiences Among Doctor of Pharmacy Students at Two Medical Centers

Dan Majerczyk, PharmD, Ed.M., FCCP, BCPS, BC-ADM, CACP, Laura Licari, PharmD, Vicky Shah, PharmD, BCPS
Roosevelt University College of Science, Health, and Pharmacy



Background

Pharmacy schools adhere to the Accreditation Council for Pharmacy Education (ACPE) guidelines, emphasizing interprofessional education (IPE). Graduates must demonstrate core interprofessional competencies, actively engaging as healthcare team members.

According to ACPE Standard 2.3, IPE aims to enhance collaboration and patient care quality. Curricula integrate didactic and experiential learning opportunities for students to engage with diverse healthcare professionals, fostering teamwork and mutual learning.

Objective

To compare the Interprofessional Education (IPE) experiences of Doctor of Pharmacy students at Loyola University Medical Center and Rush University Medical Center, highlighting each program's unique approach to fostering interprofessional collaboration.

Methods

Mixed-methods approach, including Pre/Post TeamSTEPPS assessments for teamwork dynamics, Simulation Evaluations for practical skills, Faculty/Staff Debriefings for professional insights, and Unsolicited Feedback for students' perspectives.

Rush University Medical Center

Framework for IPE 502



Loyola Stritch School of Medicine



Results

Findings indicate significant improvements in interprofessional confidence among students participating in both programs.

Loyola's simulations stand out for their practical clinical scenario-based interactions, effectively simulating real-world healthcare environments.

Conversely, Rush's IPE course excels in its theoretical grounding, applying the IPEC domains through advanced digital platforms to deepen students' understanding of interprofessional values and ethics.

Across both programs, enhanced teamwork, communication skills, and comprehensive interprofessional understanding were noted, affirming the value of diverse educational approaches.

Conclusions

The comparative analysis between Loyola and Rush's IPE experiences reveals their distinct, valuable contributions to preparing Doctor of Pharmacy students for the collaborative healthcare landscape.

Decisions on program selection should be based on educational objectives, available resources, and personal preferences.

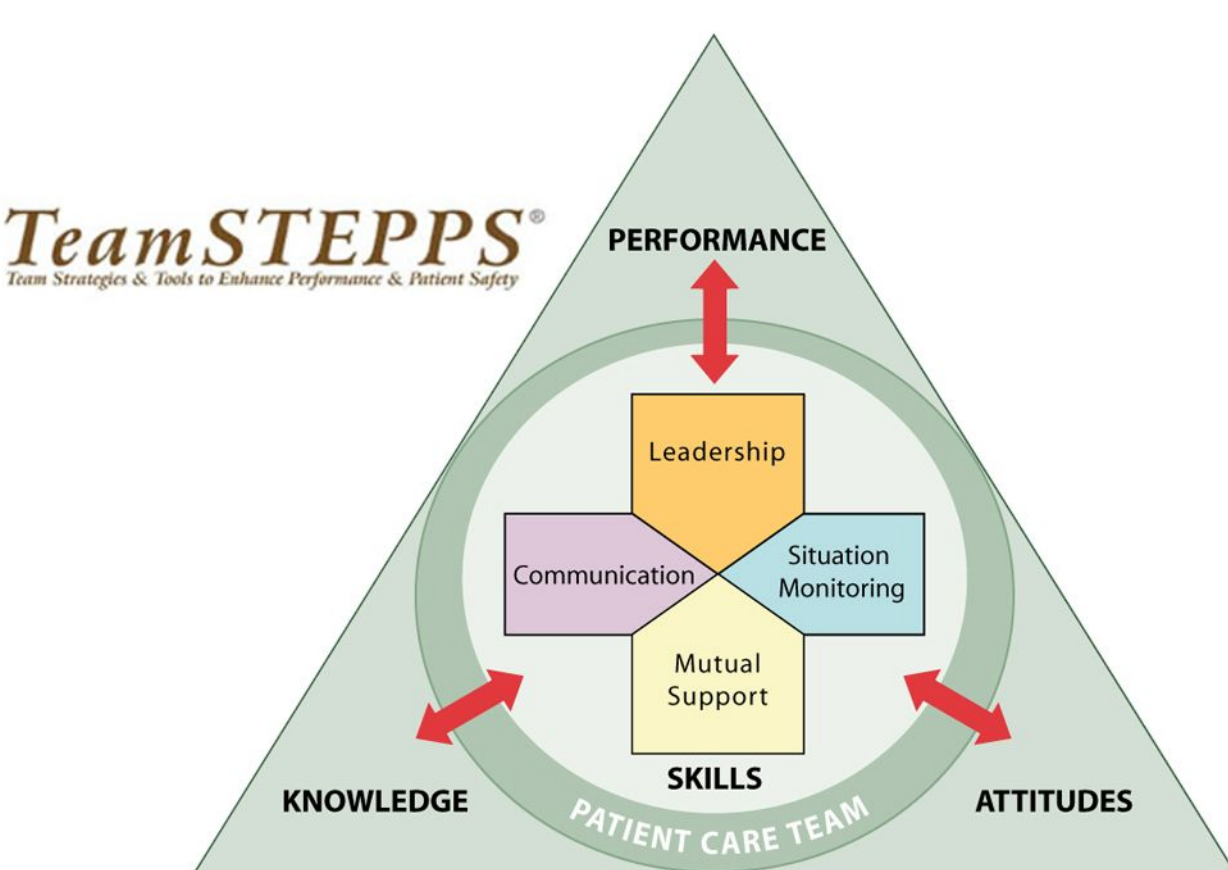
Further research is encouraged to explore the sustained impacts of these educational experiences on professional practices and patient care outcomes, with the goal of solidifying interprofessional education as a cornerstone of pharmacy education.

Acknowledgement

We would like to acknowledge the Center for Simulation Education for the creation of the evaluation, and the collection and sharing of the data, such as: *Evaluation data from the Loyola University Chicago Center for Simulation Education Simulation Session Evaluation; shared with permission (Quinones & Waznonis, 2024).*

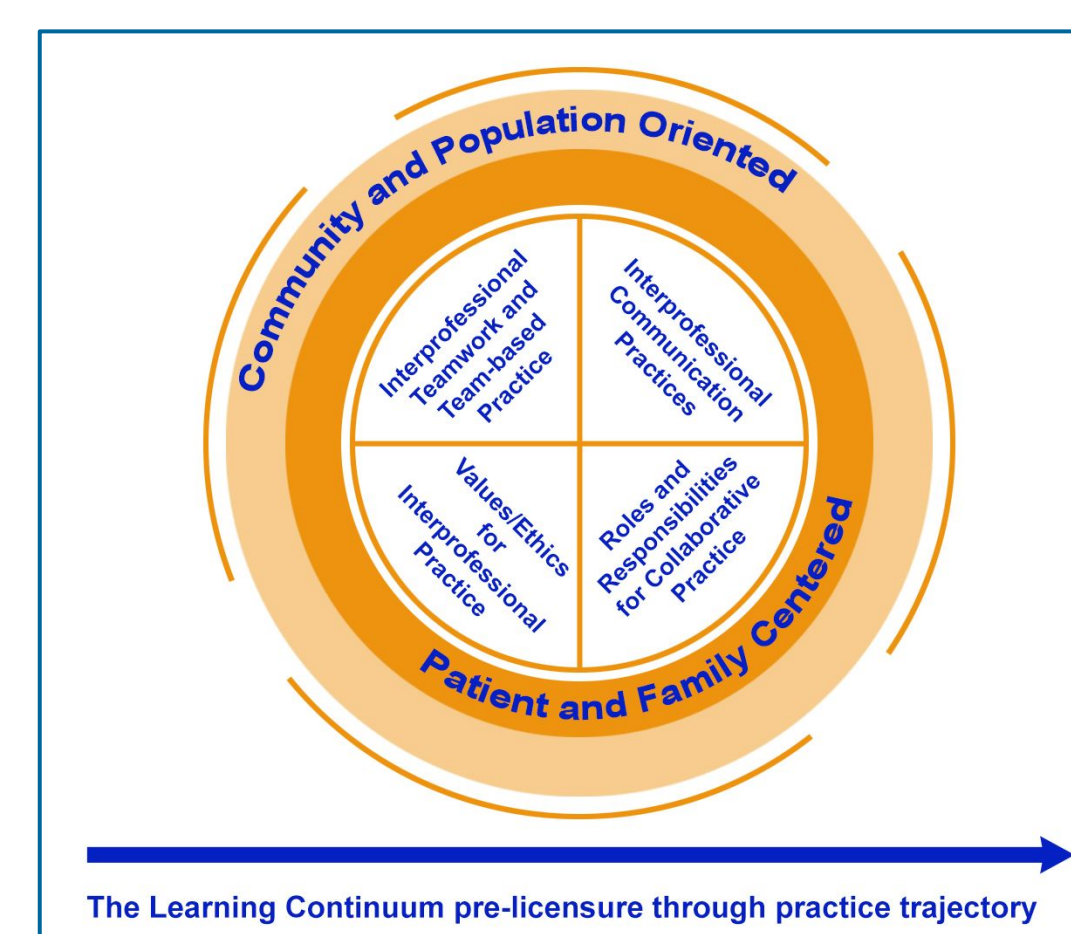
We would like to acknowledge the Office of Interprofessional Education at RUSH University Medical Center in Chicago, IL for the contribution via the IPE 502 course.

Time	Activity
1 week prior	<ul style="list-style-type: none"> TeamSTEPPS Pre-Assessment TeamSTEPPS module Stroke PowerPoint Download TeamSTEPPS pocket guide, tPA criteria, ED Med Cart
180 Min	Simulations Cardiac Arrest Cases Asystole, Ventricular Tachycardia, Pulseless Electrical Activity, Ventricular Fibrillation
70 Min	Prebriefing <ul style="list-style-type: none"> General Orientation and Agenda (main room, 20 min) Icebreaker (breakout rooms – students only, 10 min) Team-based Learning Quiz (10 min in breakouts, 15 min in main) Scenario-specific Orientation and Q&A (15 min main room)
43 Min	Sim 1 – 35 min scenario/ huddles + 8 min debrief <ul style="list-style-type: none"> 2 planned huddles w/in scenario (faculty led, 5 min each) 1 debrief (faculty led immediately after end scenario, 8 min)
32 Min	Sim 2 – 20 min scenario + 12 min debrief <ul style="list-style-type: none"> No planned huddles within scenario
60 Min	Post-Simulation <ul style="list-style-type: none"> Reinforced Learning Activities (50 min) TeamSTEPPS Post-Assessment (5 min) Simulation Evaluation (5 min)



TeamSTEPPS

Evidence-based framework that optimizes healthcare team performance through improved communication and teamwork, enhancing patient safety and care quality.



IPEC

Establishes core competencies for interprofessional education, emphasizing teamwork, communication, values, ethics, and roles to improve health outcomes through collaboration.