



Regaining the Trust of Patients and Learners: Embracing Interprofessional Education and Collaborative Practice

Holly J. Humphrey, MD, MACP
President, Josiah Macy Jr. Foundation

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Disclosures

I have no financial conflicts to disclose.









Learning “in front of an audience” was a source of insecurity....

“I felt so insecure because you do everything on the fly in the room and I’m just not good at that yet. I’m not at that level.”

– Resident





CHARACTERISTICS OF AN IDEAL LEARNING ENVIRONMENT

- ✓ People's health is the priority.
- ✓ The climate is equitable and diverse and creates a sense of belonging for all, including patients, health professionals, and their learners.
- ✓ Learners have real responsibility and relevant, meaningful experiences.
- ✓ Psychological safety exists for all, including patients, health professionals, and their learners.
- ✓ Collaboration characterizes the clinical care team.

Team Based Approach in the Clinical Learning Environment

“Team-based care is one of the guiding principles of a learning health system. It stresses interdependence, efficient care coordination, and a culture that encourages parity among all team members.”

Cohorting
increases
feeling of
“teaming”

“[The] collegial vibe was so much more pleasant to me than having one nurse on one floor that I barely had time to talk to, and is always paging me...” – Resident



“ I felt less like I was managing the patient and more that the team was managing the patient...” –Intern



Why Is IPE A Macy Foundation Priority –Over A Decade Later?



If Interprofessional Education & Practice Are So Valuable, Why Doesn't Everybody Do It?



Because It's Hard

- Calendars and schedules
- Language
- Methods of work
- Academic Policies
- Variations among learners
- Over-crowded curriculum
- Complexity of design
- Discipline-specific processes



Established
systems seek to
protect, defend,
and conserve
themselves

Kegan R, Lahey L. Immunity to
Change, 2009

Traditions and siloes run deep...



“There were perceived disadvantages, including concerns that the model may hinder physician role development through reduced clinical autonomy and limiting access to traditional learning modalities and venues.”

Hallen S, et al. JGME,
October 2020

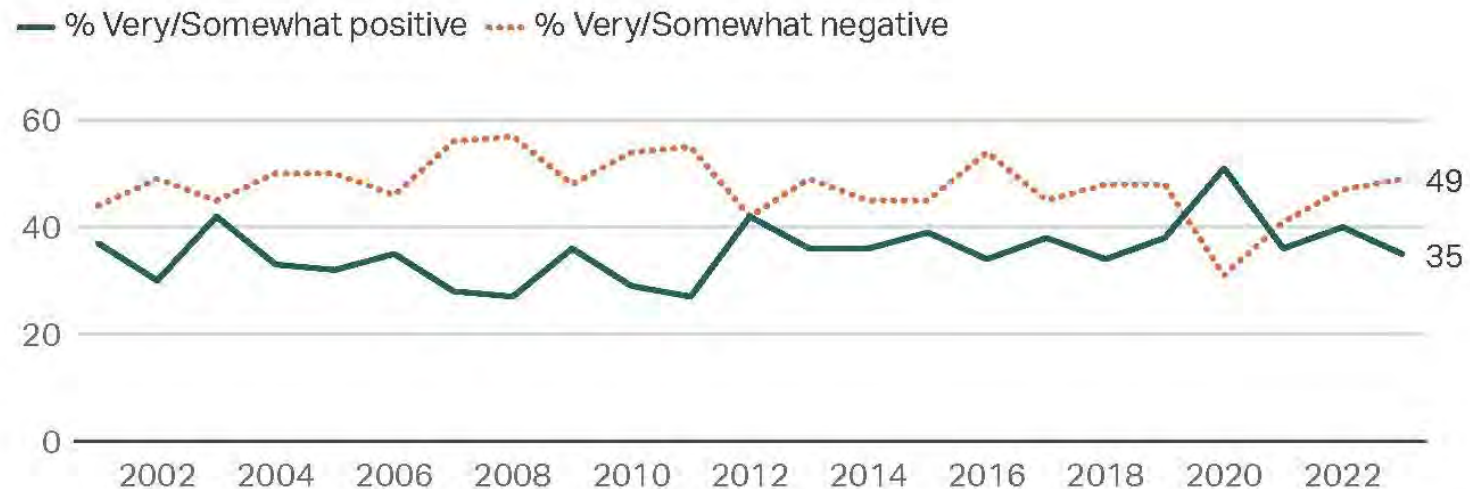


External Pressures and Perverse Incentives
Undermine Best Practices

Interprofessional Practice in Context of Declining Trust

Views of Healthcare Industry

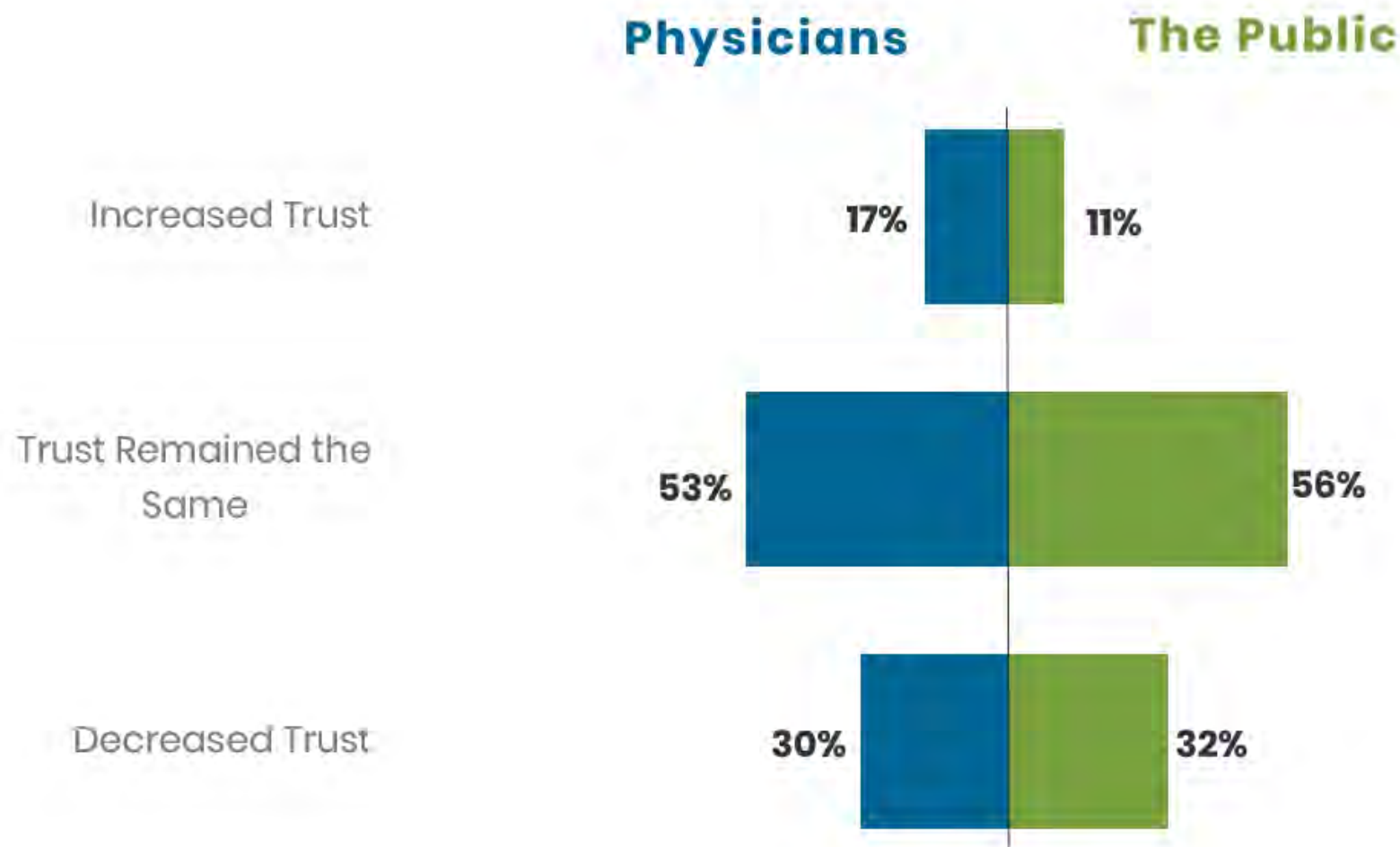
On another subject, for each of the following business sectors in the United States, please say whether your overall view of it is very positive, somewhat positive, neutral, somewhat negative or very negative. How about the healthcare industry?



“How has the pandemic impacted your level of trust in the health care system as a whole?”

Erosion of Trust

ABIM Foundation.
Surveys of Trust in
the US Health Care
System. NORC at
the University of
Chicago, 2021.



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HOW DID WE LOSE
TRUST?

REGAINING TRUST:
LEARNING FROM
EXEMPLARS

REFRAMING
PROFESSIONAL
VALUES

THE ROLE OF
LEARNERS

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HOW DID WE LOSE
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REGAINING TRUST:
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IDENTITY

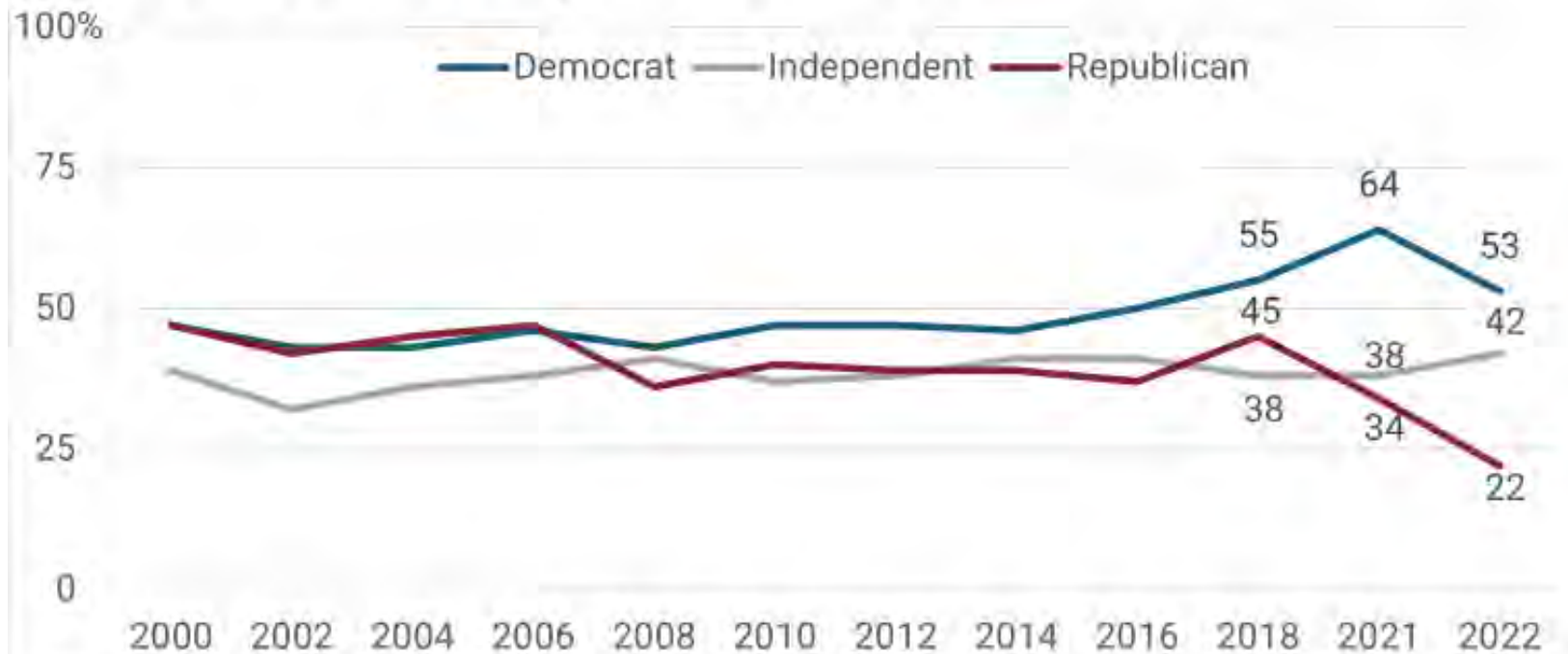
THE ROLE OF
LEARNERS

Partisan Gap in Confidence



Large partisan gap on confidence in the scientific community remained as Republicans continued to lose trust.

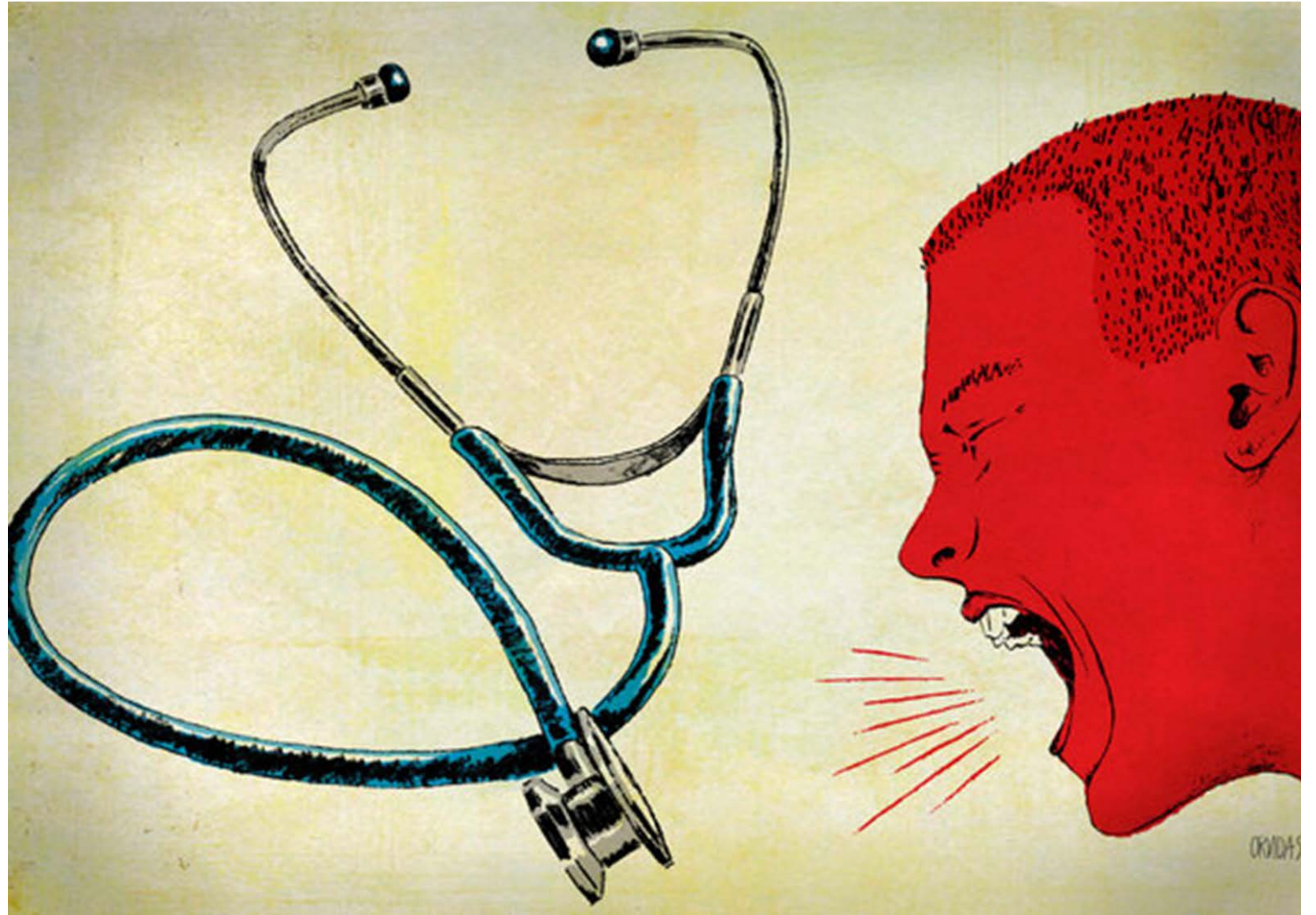
Percent of adults who had a great deal of confidence



Question: [Scientific community] I am going to name some institutions in this country. As far as the people running these institutions are concerned, would you say you have a great deal of confidence, only some confidence, or hardly any confidence at all in them?

Source: General Social Survey, the latest conducted May 5 - December 20, 2022.

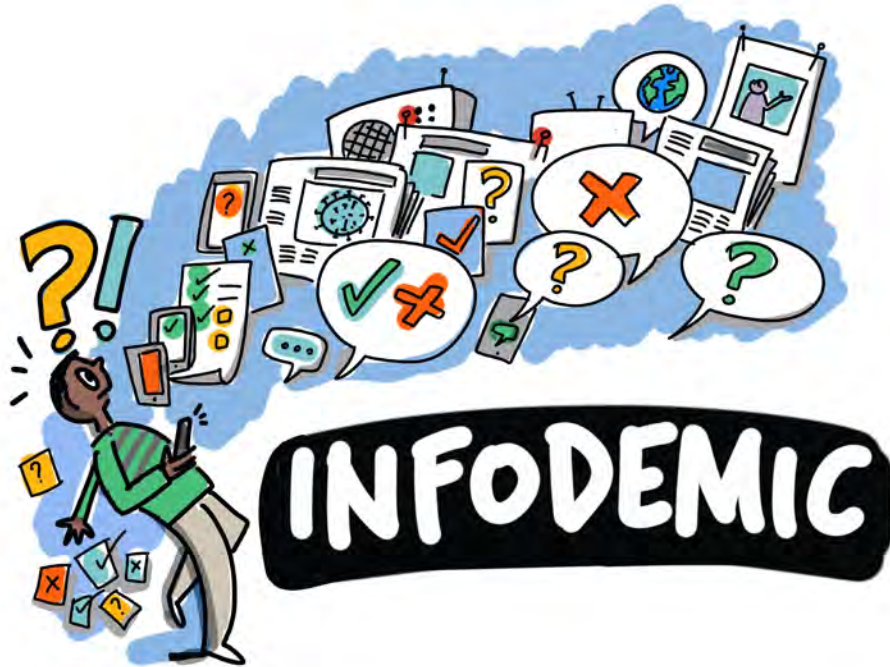
“Stabbed.
Kicked. Spit On.
Violence in
American
Hospitals Is Out
of Control”



Misinformation

An *infodemic* is too much information, including false or misleading information in digital and physical environments during a disease outbreak.

World Health Organization, 2022



Confronting Health Misinformation: The US Surgeon General's Advisory on Building a Healthy Information Environment

I am urging all Americans to help slow the spread of health misinformation during the COVID-19 pandemic and beyond. Health misinformation is a serious threat to public health. It can cause confusion, sow mistrust, harm people's health, and undermine public health efforts. Limiting the spread of health misinformation is a moral and civic imperative that will require a whole-of-society effort.

A handwritten signature in black ink, reading 'Vivek Murthy'.

Vivek H. Murthy, M.D., M.B.A.
Vice Admiral, U.S. Public Health Service
Surgeon General of the United States





Interprofessional Team Diversity: Strength or Vulnerability?

*“Any time you talk
about ‘teams’, you are
talking about doctors
being paid for the work
that nurses do....”*

Anonymous Dean
School of Nursing

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Framework of Trust



Facilitate
quality
interactions



Listen
with
humility



Align
incentives



Organize
around the
rule, not the
exception



Use distrust
as a warning
mechanism



Learning from Exemplars

- A Scorecard for Clinical Learning Environments – University of California San Francisco School of Medicine
- Project ARIISE: Addressing Racial Inequities through Interprofessional Simulation and Experiential Education – University of Utah College of Nursing
- Relating Across Differences: An Improvement Process for Clinical Units – Brandeis University Heller School for Social Policy and Management

A Scorecard for Clinical Learning Environments

Sources of Data:











- Medical student clerkship evaluations
- ACGME surveys for residency and fellowship
- UCSF Work Experience Survey for faculty and residents
- UCSF Staff Engagement Survey
- Patient experience survey

Summary: Scorecard for Clinical Learning Environments



CLE SUMMARY

University of X | Department of X | June 2022

	Overall outcomes: overall low/marginal levels of satisfaction across all stakeholder groups and high levels of burnout among trainees and faculty	
 Diversity, Equity, Inclusion & Belonging	Clinical learning environments are inclusive and welcoming to diverse learners, faculty and staff Strengths: High scores for positive learning environment among students; respect and support scores among faculty and fellows Areas for Improvement: resident and fellows' perceptions of learning environments as inclusive, perceptions of equity across all groups	
 Teamwork & Collaboration	Clinical learning environments promote teamwork and collaboration Strengths: All learners report exposure to interprofessional teams and collaboration Areas for Improvement: (Perceptions of) teamwork by learners and staff	
 Alignment of Health Systems & Education Goals	Clinical learning environments allow for alignment of patient care and education goals Strengths: High scores for student satisfaction with learning spaces and break rooms. Areas for Improvement: Balancing patient care and education, reducing non-physician obligations, opportunities for open dialogue about work	
 Continuous Improvement of Individuals, Teams & Systems	Clinical learning environments focus on continuous quality improvement for individuals, teams and systems Strengths: Patient safety reporting awareness, fellow engagement in adverse event investigation Areas for Improvement: Feedback for trainees, resident experience with QI/PS, overall culture of continuous improvement	



Domain summary:

	Students	Residents	Fellows	Faculty	Staff
Teamwork modeled/taught					
Team works well together					

Medical Students	2020	2021	Benchmark	Target	Status
Exposure to interprofessional collaboration and teamwork	85%	90%	84%	100%	

Residents	2021	2022	Benchmark	Target	Status
Interprofessional teamwork skills are modeled/taught	4.8	4.2 (↓)	4.2	5	
Group works well as a team	85%	89%	85%	100%	

Fellows	2021	2022	Benchmark	Target	Status
Interprofessional teamwork skills modeled/taught	4.5	4.8	4.2	5	
Group works well as a team	95%	98%	87%	100%	

Faculty	2021	2022	Benchmark	Target	Status
Interprofessional teamwork skills modeled/taught (residency)	4.8	4.6	4.5	5	
Interprofessional teamwork skills modeled/taught (fellowships)	4.6	4.7	4.5	5	
Group works well as a team	81%	82%	80%	100%	
Effective teamwork (residency)	4.8	4.5 (↓)	4.6	5	
Effective teamwork (fellowships)	4.5	4.7	4.6	5	

Clinical Staff	2021	2022	Benchmark	Target	Status
Team has made progress on goals	2.6	2.6	3.6	5	

CLE Scorecard: *Teamwork and Collaboration Domain*



CLINICAL LEARNING ENVIRONMENT OUTCOME MEASURES

Outcome measures reflect whether overall, clinical learning environments support learners, faculty, and staff so that they thrive at work and patients receive high quality care.

Student Experience	2020	2021	2022	Benchmark	Target	Status
Overall quality of clerkship experience	4	4	4	4	5	

Resident Experience	2021	Benchmark	Target	Status
Burnout	58%	42%		
Recommend as place to work	58	34	100	
Would consider staying with Organization	50%		100%	

Fellow Experience	2021	Benchmark	Target	Status
Burnout	40%	42%		
Recommend as place to work	70	34	100	
Would consider staying with Organization	70%		100%	

Faculty Experience	2021	Benchmark	Target	Status
Burnout	43%	42%		
Recommend as place to work	-11	10	100	

Staff Experience	2021	Benchmark	Target	Status
Burnout	44%	42%		
Satisfied with organization	4.0	4.5	5	
Recommend as place to work	6.9	8	10	

Patient Experience	2021	Benchmark	Target	Status
Trust in Nurses	85%	81%	100%	
Trust in Doctors	85%	83%	100%	
Would recommend this hospital	90%	87%	100%	

CLE Scorecard: Outcome Measures



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Project ARIISE



University of Utah, 2023

Appendix 5: Story Circle Flyers

Project ARIISE Storytelling Workshop



We are so looking forward to seeing you for our storytelling circle on Saturday, May 15th.

We ask that you **arrive at 9:45** to the College of Nursing at the University of Utah. The location of the college is outlined in the map below and is right next to the College of Nursing, so it is perfect for parking. (Note: the map was intended for folx getting vaccines but outlines parking at the U quite well). Parking will be available free of charge at the college on weekends.

When you arrive please come to the front door and call or text Gaby Garcia, who will be on site and can be reached at 801-564-1337.

09:45- Arrival to the College of Nursing at the University of Utah

10:00- Welcome from the Project ARIISE Team

10:15-12:15- Storytelling Circle w/ Ashley Finley + Candida Duran Taveras

12:15-1:00- Lunch w/ the ARIISE team and other storytellers (Lunch will be provided and Beth will be in touch regarding dietaries)

Stories allow health professions students to imagine the quality care they hope to provide in the future.....

“I voiced my concerns; they were ignored....I just stopped saying anything.”

-S.

“I remember being there just gasping for air in excruciating pain. The nurse ignored it. She didn’t believe how much pain I was in.”

-C.

“I think something’s really wrong...I was afraid I would die...are they going to let me die?”

-J.

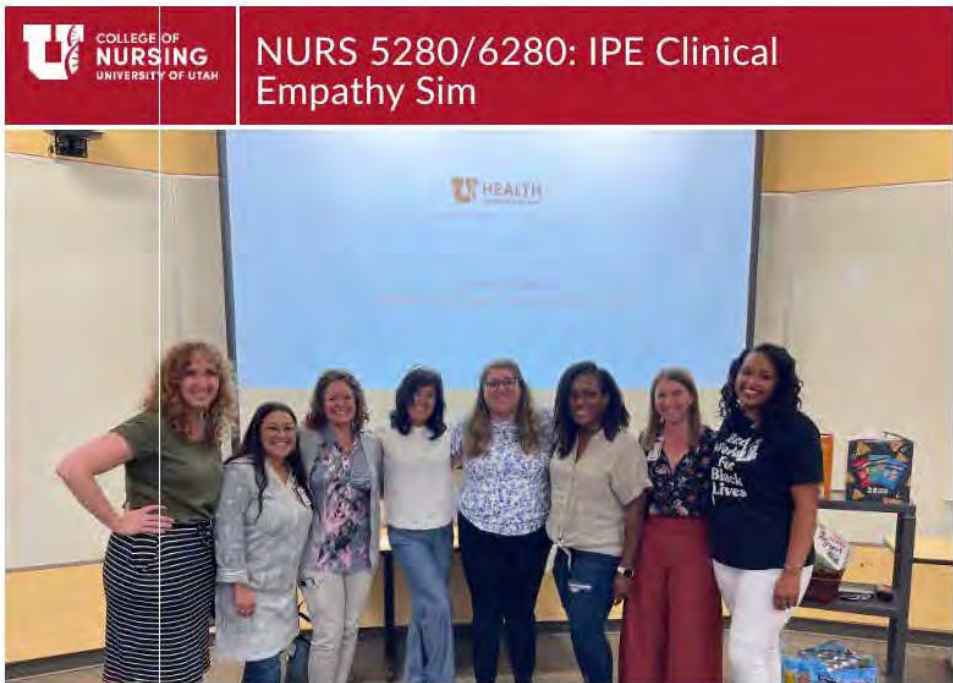


Project ARIISE:

Placing the patient experience at the center of learning



NURS 6280-001 Fall 2022 IPE: Clinical Empathy Sim



View Co

New Ana

View Co

Coming Up
Nothing for the n

7:45am - 8:20am	Breakfast & Check-in
8:20am - 10:10am	<ul style="list-style-type: none">• Welcome & Training Information• What's in a Name Activity• Cultural Fortitude Activity
10:10am - 10:25am	Break
10:25am - 12:20pm	<ul style="list-style-type: none">• Facilitation vs. Teaching• Cultural Frames of Reference Activity
12:20pm - 12:50pm	Lunch
12:50pm - 3:50pm	<ul style="list-style-type: none">• Resisting Single Stories Activity• Thickening the Narrative Activity• Catchphrase Activity• Cultural Empathy Mingle Activity
3:50pm - 4:05pm	Break
4:05pm - 5:00pm	<ul style="list-style-type: none">• Interacting with Patient Narratives Activity• I Like, I Wish, I Wonder Activity• Assignments/homework & Logistics of Facilitator Activities



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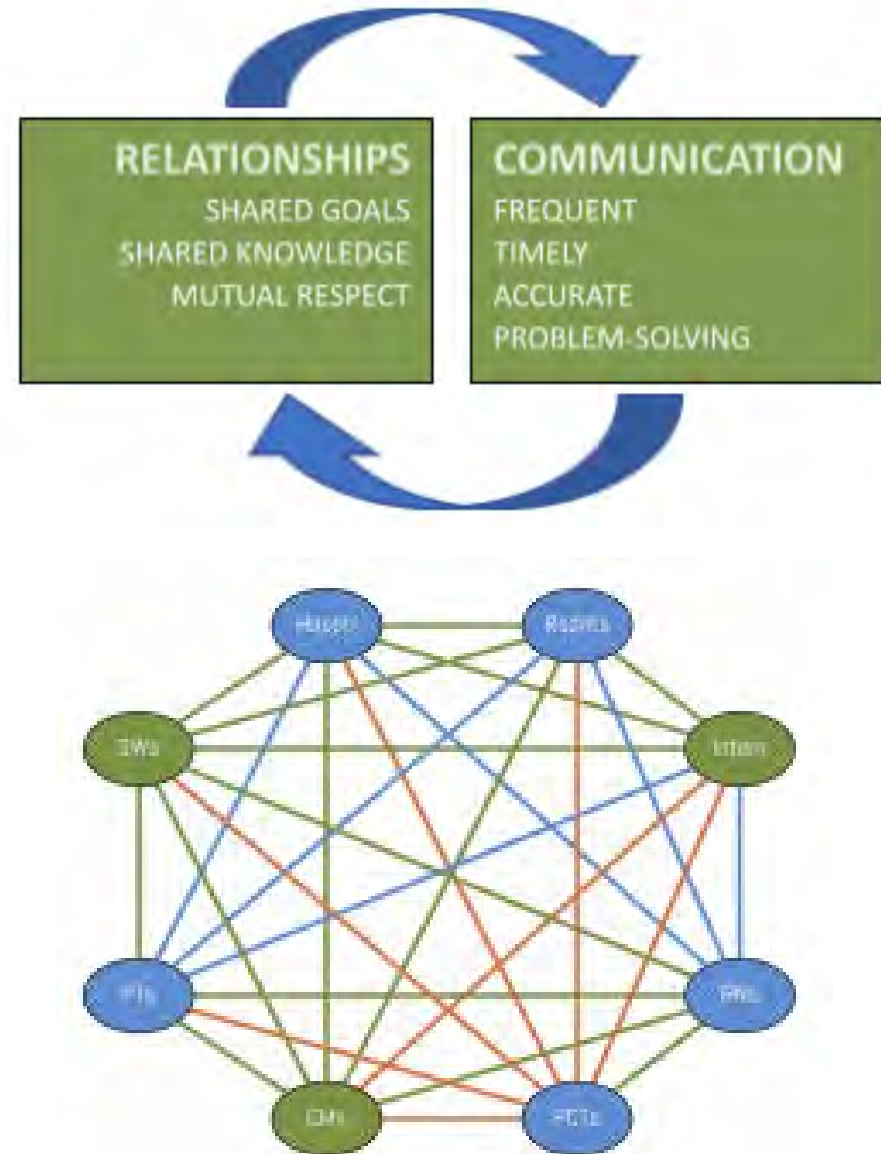


Relating Across Differences (RAD)

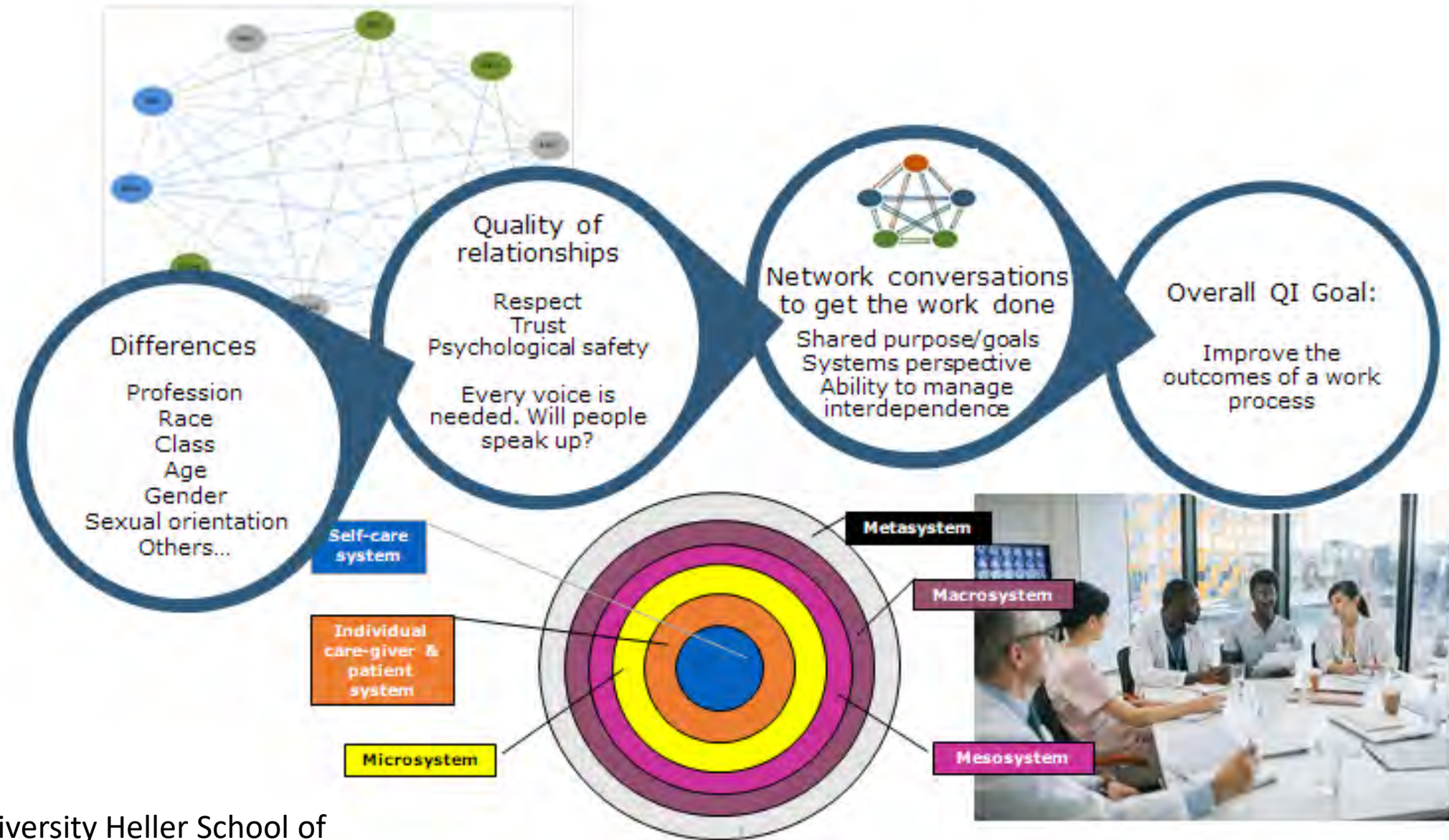
- Professional and social differences have a profound effect on communication and relationships within a work system.
- Diversity: valuable or impediment?
- How can difference be harnessed as a resource?

Relating Across Differences (RAD)

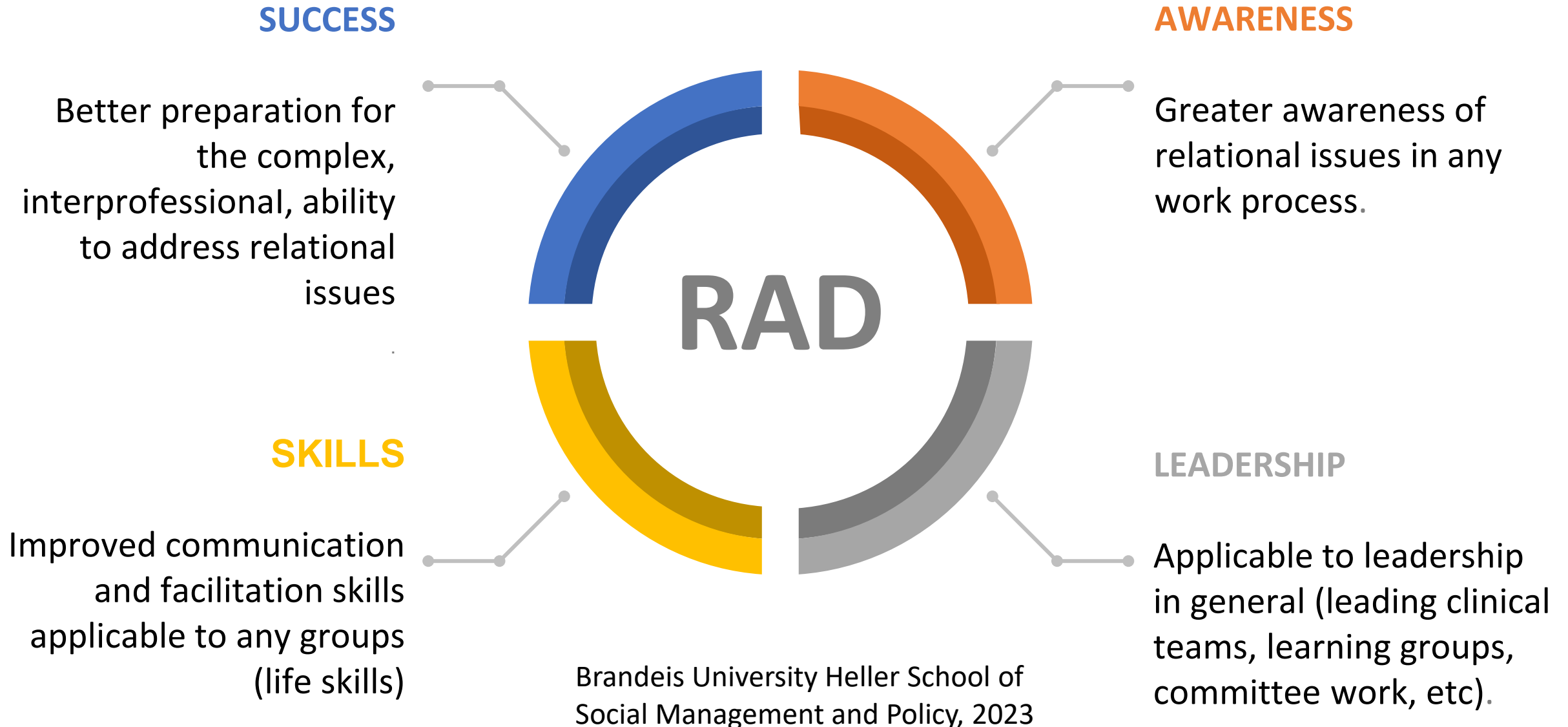
- Relational Coordination: A framework for investigating and improving the relational core of a work process
- Describes aspects of communication and relationship that support interdependent, complex tasks in rapidly evolving contexts.
- Relational Mapping used to assess relationships and design interventions, all undertaken in partnership with the members of the work-system.



Systemness, Relationships and Differences



Benefits of RAD Training





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Professional Value Integration vs. Professional Identity Formation

For a generation of learners who care deeply about their personal identities, individuality, justice, and inclusion, we need to make sure we are not enabling harm / identity dissonance....

Instead of merging “identities,” does it make more sense to prioritize and champion the integration of professional values into one’s personal identity, thereby creating the professional self?



“The World Is Flat”

System Citizen Characteristics

Domain

- Personal characteristics & attitudes
- Knowledge/skills
- Habits
- Roles

Example Characteristics

- Mindset of growth, humility & curiosity; Expertise in listening and collaborating
- Teamwork & collaboration; Creating & supporting a learning health system
- Systems thinking (inclusive of accessing others' perspectives); Critical thinking
- Collaborator / team contributor



“The interplay between systems citizens and the health system requires all individuals whether they function in leadership suites or clinical team huddles, examination rooms or classrooms to view themselves as citizens of the same country.”

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Item	% Strongly Agree & Agree
I felt I was an active member of my care team and not just an observer	84%
The care team talked to me often about my treatment plan	95%
The care team meetings helped me understand my treatment plan	100%

Let's pick up the iPACE!
*Leveraging innovative educational research
to redesign healthcare delivery*



We are better together!