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Category: IPE

Abstract Title: Michigan Center for IPE: "Next Phase"

Background: The Michigan Center for Interprofessional Education was founded in 2015 as a shared joint venture by the Provost's Office and the Ann Arbor campus health science deans. Throughout the first six years, the U-M IPE community laid a robust foundation, with dozens of IPE experiences, investment in research and innovative teaching, scholarly publications, and engagement of a broad community of interested faculty. While the successes have been impressive, the ultimate question of "Does IPE improve the Quadruple Aims of Health?" has not yet been answered.

Actions, Methods, or Intervention: The Center for IPE underwent a leadership transition in Fall 2021, creating an opportunity for reflection and planning for the future. Center leadership went on an extensive listening tour, meeting with leaders and stakeholder groups including the health science deans, Provost Office leadership, Center for IPE committee and workgroup chairs, leadership of Centers and institutes across campus, different campus partners, and IPE consultants and national/international IPE collaborators. Feedback provided during these discussions resulted in broad agreement on three areas of exploration for the Next Phase of the Center, which were then expanded by the Center for IPE Executive Committee (EC) into 5 Strategies to support one Goal. The resultant Strategic Blueprint, endorsed by the EC and the Health Science Deans, specifies an 18-month Action Plan for each Strategy.

Results: The three primary areas of exploration included a focus on using principles of innovation to develop IPE Curricular Experiences, intentional and innovative assessment, and an investment in enablers to support these two explorations. The explorations led to the agreement on a single goal: Innovating and Implementing IPE to Improve the Quadruple Aims of Health. The resultant 5 strategies are oriented towards explicitly demonstrating the impact of IPE on health as follows: (1) Defining, Implementing and Scaling the Core Curriculum, (2) Experiential Innovation, (3) Intentional Measurement and Research, (4) Educator Development, (5) Systems-Based Problem Solving. For each Strategy the EC developed a specific set of challenges and identified action steps to tackle over the next 18 months, transforming the organization of the Center and its relationship with University partners. In addition, the EC identified the third Strategy (measurement and assessment) as the most critical to address the singular Goal.

Lessons Learned: The Center for IPE laid a good foundation in the first phase, but big questions about the impact of IPE remain unanswered. There was detected energy, synergy and resolve towards the singular goal in the "listening tour" among many stakeholder groups, which will be critical to build a movement in IPE across 10 schools on three campuses towards this goal. The challenges of faculty engagement, the complexity of the practice and community-based settings, the need to define the measurement tools of team behaviors, and how to attribute outcome improvement to educational interventions remain daunting.

Future Application and Next Steps: This Strategic Blueprint has been endorsed by the IPE EC and Health Sciences Council of deans, and is supported by the UM Provost's Office. Work is underway to restructure the Center and recruit faculty, staff, and student leaders to work within this transformative movement to innovate education and improve health.