

**Title:**

East Carolina University Interprofessional Collaboration:  
Developing Future Interprofessional Leaders

**College**

College of Allied Health Sciences (lead), College of Nursing, Brody School of Medicine, and  
College of Dental Studies

**Project Lead:**

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## **Needs or Opportunities:**

During the past two decades, clinical care has rapidly evolved to meet the needs of communities, patients, and providers with team-based care that incorporates collaboration among a diverse population of health professions. Interprofessional collaborative care is associated with improved patient and provider outcomes. Additionally, team-based care is one of the proposed solutions to address the lack of providers and large patient panels experienced in primary care. Although team-based care is valued, teamwork skills are not emphasized or taught in most health professional programs. To provide quality and cost-effective care, health professionals must be better prepared to lead and collaborate in interprofessional teams in community settings. Healthcare practices, payment models, and accreditation standards are transforming rapidly, and East Carolina University (ECU) needs to prepare learners to be ready to participate and lead in the current healthcare climate.

Introducing teamwork and collaboration early in an interprofessional curriculum is essential to train health professions learners to participate and lead in the healthcare system of the future. In 2016, the Interprofessional Educational Collaborative (IPEC) published The Core Competencies for Interprofessional Collaborative Practice to inform accreditation standards and health professional programs curriculum on the necessary competencies for interprofessional collaborative care. This document is currently under revision and the advisory and working group have proposed an increased emphasis on team science and teamwork skills. The updated framework includes 33 competencies in four areas: values and ethics, roles and responsibilities, communication, and teams and teamwork.

ECU no longer funds or supports Interprofessional Education at the University level. The current support for IPE comes from the College of Allied Health Sciences (CAHS), College of Dental Medicine, and the Truist Leadership Center. The CAHS has an IPE Taskforce with an ongoing foundational curriculum with two faculty receiving workload buy outs and a stipend for a team leader. The Dental School has a clinical faculty member as the IPE director without an IPE curriculum. Although the Brody School of Medicine faculty encourages and supports IPE through student group activities and clinical experience, they do not have a structured IPE curriculum. Eastern Area Health Education Center (AHEC) does provide limited support to the local ECU chapter of Institute of Healthcare Improvement which includes interprofessional objectives.

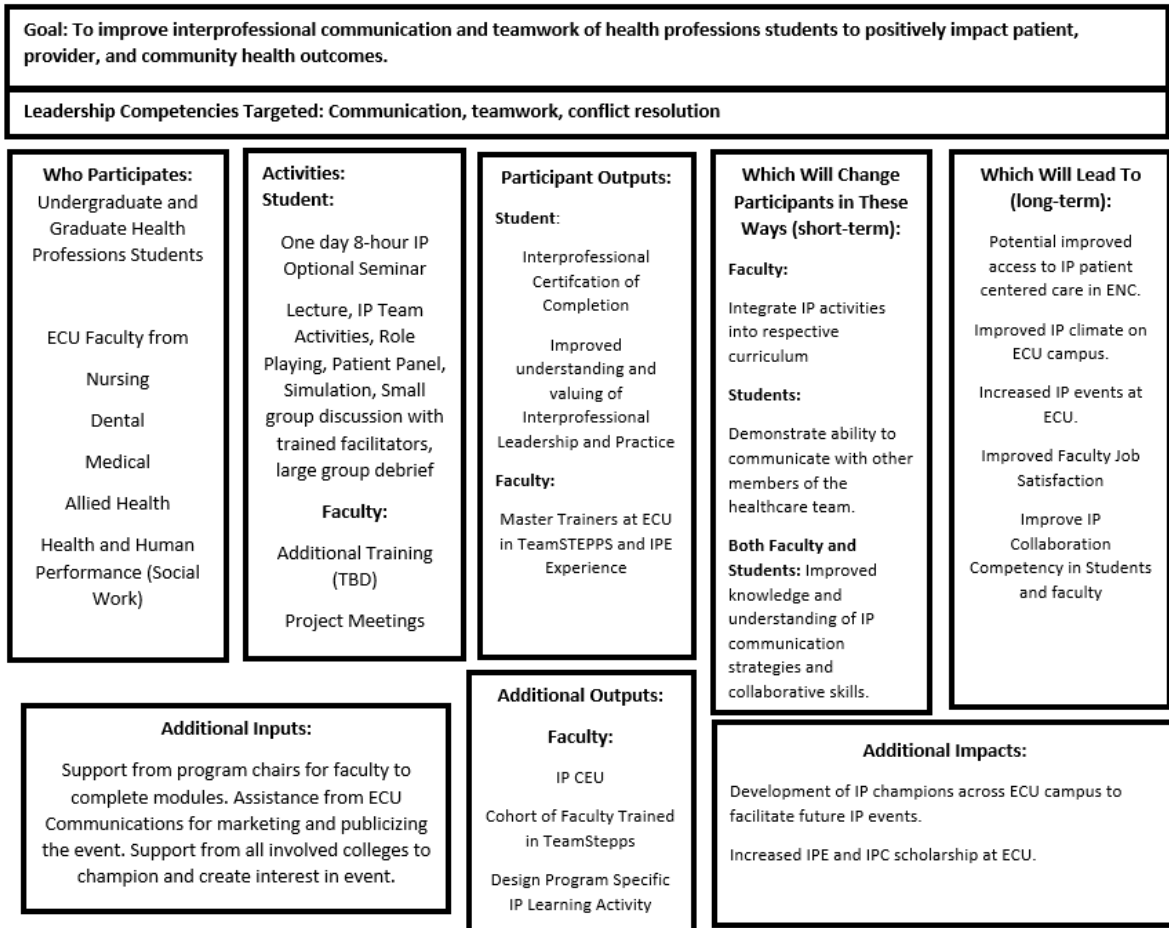
## **Aims:**

The project's aims are to provide interprofessional education to ECU pre-licensure healthcare students through a workshop on Developing Future Interprofessional Healthcare Leaders. The goal is to improve interprofessional leadership, communication, and teamwork of pre-licensure health professions students to positively impact patient, provider, and community health outcomes. The workshop will target 60 undergraduate and graduate pre-licensure health professions learners from College of Allied Health Sciences, College of Nursing, School of Dental Medicine, Brody School of Medicine, and College of Health and Human Performance, specifically the Department of Social Work.

By the end of the workshop the learners will be able to:

1. Choose effective communication tools and techniques to facilitate discussions and interactions that enhance team function.
2. Listen actively and encourage the ideas and opinions of other team members.
3. Express one's knowledge to team members involved in patient care with confidence, clarity, and respect working to ensure a common understanding of information, care decisions, and treatment.
4. Apply leadership practices that support collaborative practice and team effectiveness.
5. Reflect on individual and team performance for future performance improvement.

**Logic Model**



**Activities:**

**Faculty Development:**

In 2022, the Health Sciences Interprofessional office supported three faculty to attend a TeamSTEPPS Course. As stated above, this office no longer exists and ECU does not have a faculty development program for interprofessional education or collaborative practice. Although there is interest in IPE and collaboration, continued training is needed to develop a bench of faculty ready to facilitate for this project and future context-specific interprofessional activities to

sustain the momentum that this project has created. NEXUS offers a train-the-trainer faculty development program that helps faculty learn to create and facilitated IPE programs and activities. This type of training or similar training will be identified for the Fall of 2023 or Winter of 2024. Truist monies and college or departmental funds will be combined to support continued faculty interprofessional development.

Interprofessional Leaders Seminar/Workshop:

Time	Activity
7:30 – 8:00	Arrival, networking, team assignment, and light breakfast
8:00 – 8:30	Welcome, Purpose, Introduction to the Workshop, and Ice Breaker
8:30 – 9:30	The Patient Perspective
9:30 – 9:45	Break
9:45 – 12:00	Interprofessional Leadership and Team Skills
12:00 – 1:00	Eat Lunch and Participate in Team Building Activity
1:00 – 1:05	Large Group and Small Group Introduction to Simulation Scenario
1:00 – 2:30	Breakout Rooms, Team Huddle, Simulation I, and Debrief
2:30 – 3:45	Breakout Rooms, Team Huddle, Simulation II, and Debrief
3:45 – 4:00	Break
4:00 – 4:30	Large Group Debrief, Reflection, and Post Survey

The seminar began with networking, small group introductions and ice breaker including establishing team norms followed by a dive into the patient perspective. A speech therapist who experienced a life changing medical diagnosis spoke to students about the importance of collaboration and patient centered care. She taught through narrative to set the stage for the “Why” behind the seminar-keeping the patient at the center of the healthcare team. The stipend supported faculty facilitators who completed additional training, provide the team content through lecture, active learning, and small group discussions. The workshop didactic content incorporated TeamSTEPPS principles in addition to the concepts of shared leadership, situation leadership, psychological safety, communication strategies, group dynamics, conflict resolution, and collaborative practice. Each small group had at least one faculty facilitator. For specific content and activities please see [Interprofessional Seminar Schedule and Activities](#) and Appendix A Faculty Facilitator Guide.

Student Scholarship and Conference Presentations:

With the data from 2022 and 2023, students, mentored by faculty from the project team, will submit an abstract at an interprofessional conference in 2023-2024 academic year. This experience will allow students to present as interprofessional leaders at a regional or national conference.

**Implementation Fidelity, Quality, and Outputs:**

Fidelity. In April of 2022 and February of 2023, our team provided a one-day interprofessional learning activity to a diverse collection of healthcare students across ECU’s health sciences and main campus. One of the challenges we continue to face is student attrition and scheduling to ensure that all interested students have the option to attend. Health professions students are often

overwhelmed with studying, class, clinical hours, and mandatory testing. For example, enrolling medical students has been difficult due required step testing. To increase enrollment in 2023 we advertised early, identified IP champions across campus including department chairs and deans, and sent out multiple social media and email announcements.

Additionally, based on feedback from faculty facilitators and the core team, content was modified to include team science, shared leadership, psychological safety, effect of artificial intelligence on healthcare and communication, and the systematic issues facing teamwork in healthcare in addition to TeamSTEPPS content.

Quality.

Quality was monitored during the program via team and faculty facilitator discussions and post-workshop student surveys. Student perceptions were based on a 5-point Likert scale from strongly disagree-strongly agree. Please see Table 1 for student perceptions and Tables 2 & 3 for total counts for student and faculty participation and represented colleges and departments.

Table 1. Quantitative and Qualitative Student perceptions of the learning activity.

	2022	2023
The workshop was a valuable learning experience.	4.94	4.7
The learning environment was positive for this workshop.	5	4.86
The patient panel was useful for my future career.	4.7	4.9
The communication and conflict activity were useful for my future career.	4.8	4.7
The simulation scenarios were useful for my future career.	4.9	4.8
<p><i>“Agenda was clear and followed well, activities were helpful and achieved the stated objectives, I feel more comfortable working inter professionally after doing this session”</i></p> <p><i>“I loved that there were so many different types of professions - I had a nursing PhD student, med student, and NP student in my group, and I’ve never gotten to do Interprofessional work with them. I loved that we got to stay with the same group for most of the day but had an opportunity to mix with other people at lunch.”</i></p>		

Outputs.

A total of 20 faculty and 65 students have participated. Student, faculty, and college participation increased from 2022 to 2023. Please see Tables 2 and 3. The project has reached multiple programs and colleges. Since inception students from the following programs have participated: Disabilities and Addictions Counselor, Dental Medicine, Healthcare Services and Information Management, Medical, Medical Family Counselor, Nursing, Neuroscience, Nutrition, Occupational Therapy, Physician Assistant, Physical Therapy, Public Health, and Speech Therapy.

Lastly, an additional three faculty members have completed TeamSTEPPS training.

Table 2. Total number of faculty and student participants and percentage increase from 2022 to 2023

	<b>Faculty Facilitators</b>	<b># Programs Represented</b>	<b>Students Involved (final)</b>	<b># Programs Represented</b>	<b>Registered Students</b>
<b>2022</b>	8	5	24	6	34
<b>2023</b>	12	8	41	9	67
<b>% Change</b>	50%	60%	87%	50%	97%

Table 3. Number of students represented from each college

	<b>CAHS</b>	<b>Medicine</b>	<b>Dental School</b>	<b>Nursing</b>	<b>Health and Human Performance</b>
<b>2022</b>	5	5	5	9	0
<b>2023</b>	7	0	10	6	18

**Evidence of Impacts:**

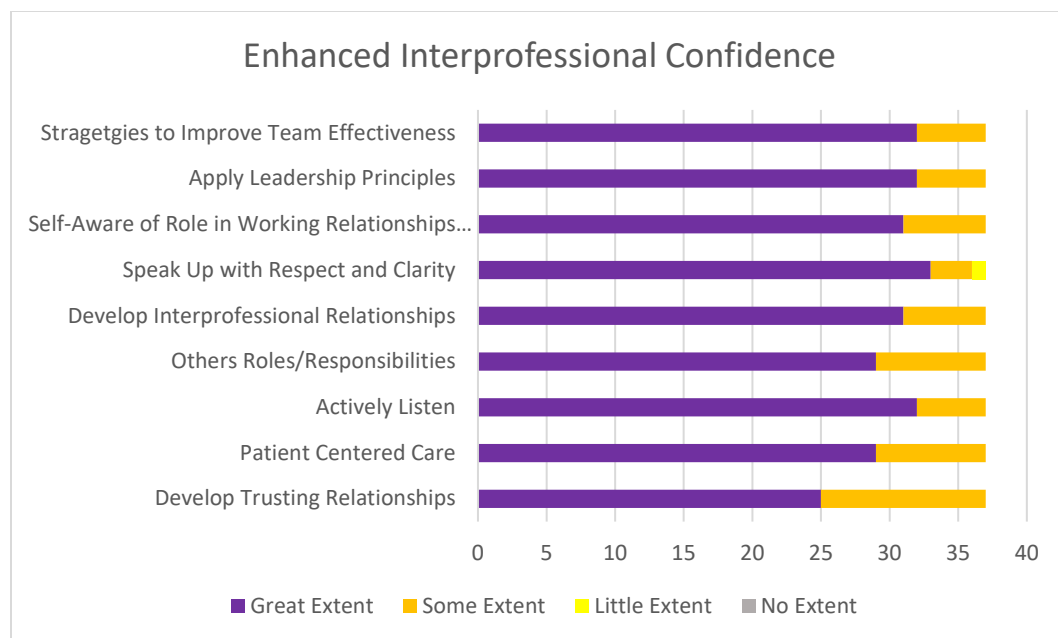
Our project is still in its early stages and the long-term impacts are yet to be elucidated. Student perception and interprofessional confidence was assessed via a Qualtrics survey post-event and through student success stories. Although not directly measured, faculty and institution impacts were gathered during project team meeting discussions and faculty facilitator debriefs post seminar.

**Impacts During Participation.**

In 2022, the participants were surveyed after the seminar and reported high perceived interprofessional confidence based on a 5-point Likert Scale. The group means for teamwork and interprofessional competencies ranged from 4.4-4.9. However, a pre-test survey was not collected to evaluate change. After meeting with Adrienne Smith, the survey was modified for 2023 to evaluate students perceived enhanced or improve interprofessional confidence because of participation in the one-day seminar with perception of change rated on a 4-point scale. Again, students noted great improvements across many areas. Please see Table 4.

Table 4. Students’ perceptions of improvements in interprofessional confidence and teamwork.

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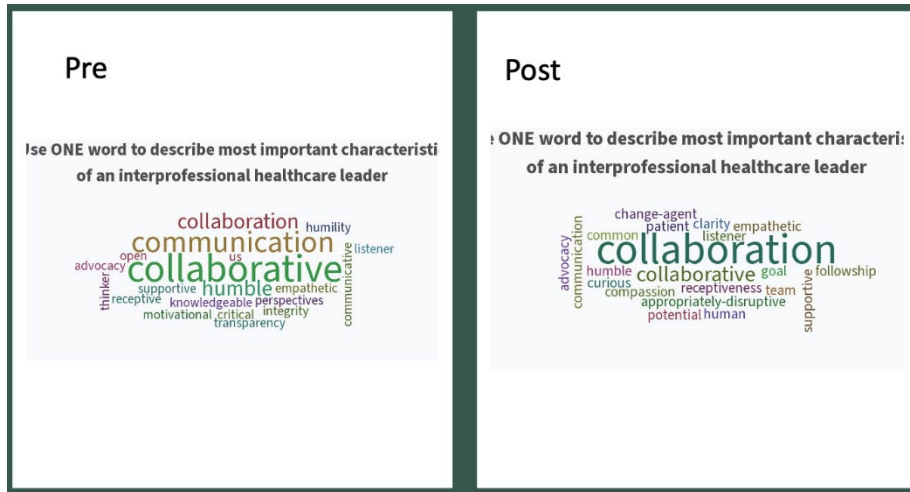
An additional survey questions asked students, “Where your beliefs about interprofessional collaborative care for patients altered due to your participation in today’s seminar?”. 90% of students responded “Yes”. Student responses, including a word cloud and qualitative statements, represented a transformational change in the way they perceived leadership and collaboration in healthcare. (See Table 5 and Table 6). For example, new phrases in the post word cloud included change agent, humble, followership, and disrupter. Additionally, open text box responses challenged the hierarchy of healthcare, desire for interprofessional collaboration to be the standard of care, and increased focus on the need for collaboration.

Table 5. Student written responses.

Leadership	System Change	Valuing Collaboration
<i>“Doctors being at the head isn’t always true.”</i>	<i>“It is incredibly important to the quality of patient care and much easier than I anticipate it being.”</i>	<i>“I feel it is even more important to manage patient care and promoting positive patient outcomes.”</i>
<i>“We all have equal positions in changing patient outcomes.”</i>	<i>“I feel like it should be the standard of care.”</i>	<i>“I knew inter-professional care was important but this event strengthened that belief even more.”</i>
<i>“Leadership is not assumed by scope of practice.”</i>	<i>“Hope for system change.”</i>	
<i>“Team leadership may not best be guided by the profession.”</i>	<i>“I can be an agent for collaborative care.”</i>	



Table 6. Word Cloud



Post-participation Impacts.

Student success stories indicated a strong post-activity response. Please see Appendix B for two student success stories and one additional student testimony.

The team plans to survey students’ post-graduation to evaluate clinical care impacts. However, this plan is problematic due to the difficulty in obtaining their private or non-ECU email for future communication. This is something that has been discussed as an issue at the Trust Leadership Collaborative Convening and will hopefully be talked about further.

Institutional Impacts.

Involved faculty have noted an increase in interprofessional networking and activities between the departments and colleges. For example, The Brody School of Medicine Medical Education Day planning committee included CON and CAHS and included an interprofessional theme inviting a nationally known interprofessional physician, researcher, and educator to speak and facilitate a workshop for interested faculty and students. In addition, the dental and social work faculty were awarded an interprofessional clinical grant to improve students’ readiness to work together to address rural mental health issues. Although these are not direct impacts, the project team forged new collaborations and relationships due to their involvement in this project.

Lastly, physical therapy students who attended the 2022 event also expanded their passion for interprofessional collaborative care and volunteered their time to provide a physical therapy perspective to patient care at the Crossroads Community Clinic with medial and behavioral health students. Other students from the 2022 cohort won first place in the Health Sciences Student Leaders Interprofessional Case Competition.

In future years, the plan is to formally survey faculty who were involved on the project team or as faculty facilitators to measure the faculty and institutional impacts. However, faculty did express positive impacts related to networking, changes in teaching, and hope for the future. Please see Table 7 for examples of elicited faculty perceptions.

Table 7. Faculty Perceptions

*“Faculty benefited from seeing how students are approaching their own knowledge and skills in an interprofessional setting, allowing faculty to adjust how we are presenting in the classroom and increasing the value in our collaborative discussions with students.”*

*“Professionally, I truly enjoy connecting with others who are committed to IPE and are committed to team care. I also enjoy the enthusiasm my students show for IPE when we debrief after the TRUIST event.”*

*“From this experience, faculty participants and facilitators gain hope for our future in healthcare.”*

*“The experience reenergizes faculty by working with students who will be assessing standardized patients as a team. The students’ visible delight in engaging with a patient, discussing the case, and reporting back is contagious! The day reminds us that what we do matters, and the students appreciate what we are doing to help them be better healthcare providers, clinicians, and staff.”*

### **Lessons Learned.**

As evidenced by survey findings, team discussions, faculty perceptions, and student comments, our project achieved its aims with potential long-term impacts for faculty, and future patients and healthcare professionals. Overall, this seminar was engaging, meaningful, and impactful for both students and faculty. ECU students and faculty value and desire more interprofessional educational learning activities. Participants felt that this should be required for all healthcare students and faculty left with a sense of hope and energy for the future of healthcare.

However, there is room for improvement and growth. The optimal timing for this one-day event is problematic as evidenced by the lack of medical student attendance at the 2023 event. Students would prefer a weekday event, but faculty have heavy teaching and clinical responsibilities during the week. This project would be strengthened by including students from each represented college on the planning team to provide the student perspective, champion the event with their peers, and identify an optimal date and time. Additionally, advertising the event early, identifying interprofessional champions in each college, and social work requiring attendance for one of their classes increased participation in 2023. Another possibility is to identify a course or programs willing to require students to attend to increase our reach.

One challenge is the lack of institutional support for IPE and practice. Although there is a large grassroots effort from faculty and students, projects like ours suffers sustainability concerns related to high demands on faculty workloads and poor funding. Interprofessional work is time

consuming and challenging with few adequately trained healthcare professionals providing true interprofessional collaborative care. One avenue moving forward is to use our current momentum and leverage the success of our one-day seminar by engaging with other student programs (IHI, HS-SLC, & AHEC Scholars, Eastern AHEC), and interprofessional service learning opportunities (free clinics, interprofessional disaster day, and migrant worker clinics) to support interprofessional competencies for all pre-professional healthcare students.

Logistically, students would also like more networking time during lunch to talk with students from other professions. Additionally, the previous participants students who are currently licensed and working in the healthcare field, could be invited back to facilitate as licensed professionals to bring the real-world perspectives and continue to develop as interprofessional leaders.

In their words:

*“That there should be more events like this as we are adapting into healthcare professionals so that we know how to use them soon after entering into the real world. That no one profession is better than the other, we all need to practice humility and work together.”*

*“This workshop should be offer to everyone in public service field. Learning to collaborate with each other is key to patient health”*

## Appendix A: Faculty Facilitators Guide

### Faculty Information: Activities for the Day

1. Introduction Chris
  - a. Word Cloud Poll
  - b. Review the Agenda and Objectives for the day.
2. Skittles Ice Breaker
  - a. Purpose/Objectives of the activity:
    - i. Students will learn about each other as individuals through exchange of information.
    - ii. Students will practice active listening.
  - b. IPEC Core Competency:
    - i. VE6: Develop a trusting relationship with other team members.
    - ii. TT2 Develop a consensus on ethical principles to guide teamwork.
    - iii. VE3 Embrace individual differences of the health team.
  - c. Faculty Instructions/Small Group Facilitation Question:
    - i. Thank you for sharing!
    - ii. ***Working on teams requires a degree of getting to know each other and building trust. How can learning about others on your team improve mutual trust and understanding?***
    - iii. ***During our time together today, we will be getting to know each other through activities, discussions, and working with a standardized patient (actors) through a case study. As a team, let's determine some guidelines for our interactions. For example: it is important that we treat each other with respect. What other behaviors do we want to describe? (Developing Team Norms)***
    - iv. ***Write the expectations and norms on large poster (ask Blair)***
3. Patient Discussion: Valuing the Patient Perspective Chris Leads
  - a. Purpose/Objectives of the activity:
    - i. Students will hear from a healthcare provider who experienced optimal and suboptimal teamwork from her healthcare team and reflect on the impact to outcomes.
  - b. IPEC Core Competency:
    - i. CC8 Communicate the importance of teamwork in patient-centered care.
    - ii. VE1 Place the interests of patients at the center of interprofessional healthcare.
    - iii. RR1 Communicate one's roles and responsibilities clearly to other professionals.
  - c. Faculty Instructions/Small Group Facilitation Questions:
    - i. 8:30-8:15 Facilitation Questions Prior to Patient Discussion
      1. ***In your personal or family healthcare experiences share at time when you and/or family members were or were not included in healthcare decisions. How did this impact their outcomes?***

2. ***If you were working with a team of other healthcare professionals, how can you ensure that the patient perspective is heard and valued?***
  3. ***What are the barriers to patient centered care?***
  4. ***As a provider or worker in healthcare, why is it important to provide patient centered care?***
- ii. 845-915 Patient Discussion
  - iii. 915-930 Post Facilitation Small Group Questions
    1. ***What part of Carly's story resonated with you? Why?***
    2. ***What role or responsibility could your profession have or had in her healthcare journey?***
    3. ***How might her story and perspective change how you provide care as a future healthcare team member?***
4. Didactic Content Chris, Kelley, Jennifer, Thompson
    - a. Purpose/Objectives of Didactic Content
      - i. Students will understand the similarities and differences between interprofessional education/practice, collaborative practice, and teamwork.
      - ii. Students will identify characteristics of shared and situational leadership.
      - iii. Students will value the importance of psychological safety to promote interprofessional collaboration.
      - iv. Students will identify appropriate communication strategies for collaboration.
    - b. IPEC Core Competency:
      - i. TT5 Apply leadership practices that support collaborative practice and team effectiveness.
      - ii. VE5 Work in cooperation with those who receive and provide care, who contribute to or support the delivery of healthcare.
      - iii. CC1 Choose effective communication tools and techniques to facilitate discussions and interactions that enhance team function.
      - iv. CC6 Use respectful language appropriate for a given difficult situation, crucial conversation, or conflict.
    - c. Small Group Facilitation Questions or Polls:
      - i. See PowerPoint
      - ii. Faculty facilitate small group instructions
5. Conflict Negotiation Time
    - a. Purpose/Objectives of the activity:
      - i. To understand the importance of how an individual and team's actions build or diminish trust.
      - ii. To identify motivations that may impede or facilitate trust on interprofessional teams.
      - iii. CC6 Use respectful language appropriate for a given difficult situation, crucial conversation, or conflict.
    - b. IPEC Core Competency:
      - i. VE6 Develop a trusting relationship with team members.

- ii. VE 8 Manage ethical dilemmas specific to interprofessional teams.
  - iii. VE 9 Act with honesty and integrity in teams.
  - iv. CC 4 Listen actively and encourage ideas and opinions of other team members.
  - v. TT6 Engage self and others to constructively manage disagreements about values, roles, goals, and actions that arise among the team.
- c. Faculty Instructions:
- i. Help Tim facilitate the event by answering questions and encouraging collaboration.
  - ii. Help students consider how their actions and decisions may impact /team others.
- d. Group Facilitation Questions (Tim):
- i. *How did the exercise go?***
    - 1. *Review tools of communication***
    - ii. *What did your group learn about “winning” the game?***
    - iii. *Did any of the groups violate an “agreement” with you? How did this make you feel?***
    - iv. *What would have been your actions if you knew people before that activity?***
    - v. *Did you think or discuss the ongoing relationships with the participants?***
    - vi. *Time Permitting in your small group: Consider a complex of difficult patient case, how might individual motivations, pride, perceived hierarchy, previous relationships, and/or ego impact patient outcomes? How about trust among your interprofessional team?***
6. Standardized Patient Simulations: Randy and Tammy
- a. Faculty Instructions: See Simulation Guide
7. Large Group Debrief and Survey Entire Team (4:00-4:30)
- a. Large Group Facilitation Questions and Wrap UP
    - i. *Any “AHA” moments from any part of today?***
    - ii. *How might this impact the remainder or your education and future practice?***

## B: Student Success Stories and Testimony



### TRUIST leadership success story

## Lynnz Brewer

An ECU physical therapy student finds their voice and advocates for patients with other healthcare providers.

### Interprofessional Healthcare Leadership Seminar



#### beginning the journey

Before coming to ECU to complete their graduate degree in physical therapy, Lynnz was familiar with their role in collaborating with other health professionals as an athletic trainer but wanted to learn more about working on an interprofessional team as a physical therapist.

#### new avenues to leadership

Lynnz was informed about the Interprofessional Healthcare Leadership Seminar. They wanted to involve themselves in order to promote inclusivity as a nonbinary person. Lynnz wanted to educate healthcare providers on how to best treat and work with LGBTQIA+ patients.

#### a broadened perspective

The Interprofessional Healthcare Leadership Seminar helped Lynnz develop a better understanding of how they can lead and work in a team dynamic as a physical therapist through clinical scenarios. While they had hands-on experience as an athletic trainer, they got to talk with other students from other healthcare professions to practice patient care with simulated case studies. Lynnz found that they could educate other students on their role as a PT. The simulated case studies and interprofessional environment boosted their confidence and ability to talk about their field. They feel like they are more willing to speak out thanks to the seminar.

#### their testimonial

"The leadership skills I learned at the Seminar were active listening, collaboration, and trust. Before this seminar I thought I knew how to do these things however this seminar helped me apply it to the healthcare setting. I feel more confident working with other healthcare providers and using my voice for questions, thoughts, and concerns even if I am not the leader in the team meeting. Trust was a major one for me because I was not used to working as a team and I learned to let go some of the control in the situation which really helped the team."

#### understanding the change process

The Interprofessional Healthcare Leadership Seminar, and one activity in particular, helped Lynnz understand the importance of teamwork firsthand through a game. If the team was perceptive of how collaboration would lead to more points, they could perform well. They said, "It was really funny because people had gotten super competitive, but they didn't realize the point of the game until afterwards." Lynnz walked away reflecting that the attitude of "they're my patient first" and adhering to a pecking order amongst professionals is detrimental to patient care.

#### the lasting impacts

Lynnz can see the change in how they understand and interact with other healthcare professionals. They feel as if they are a stronger physical therapist thanks to the interprofessional leadership experience. After participating, Lynnz thinks the hands-on seminar should be required by all ECU students in healthcare. The opportunity to collaborate as a team to create the best patient care was insightful: "We need to learn how to talk as healthcare providers as we're treating people, not conditions."

#### continuing the journey

Lynnz is completing their clinicals and hopes to work with LGBTQIA+ patients. They are interested in pelvic health and musculoskeletal injuries and hopes to continue to collaborate with other health professionals to support their patients.



## TRUIST leadership success story

### Heather Hubeli

An ECU physical therapy student experiences first-hand the value of teamwork in the healthcare profession

Interprofessional Healthcare Leadership Conference



#### beginning the journey

Heather enrolled in ECU's physical therapy school knowing that she wanted to get involved with the student run physical therapy clinic, but beyond that, she had little to no expectations as a student being that the world was in the midst of the COVID-19 pandemic.

#### new avenues to leadership

Heather was given the opportunity to attend the Interprofessional Healthcare Leadership Seminar after becoming a graduate assistant with the student run physical therapy clinic. She knew that the conference would be interesting but did not know the extent of the inspiration she would get from attending.

#### a broadened perspective

The interprofessional Healthcare Leadership Conference helped show Heather the value of her perspective as a physical therapy student and leader in the medical space. After being pre-assigned a team for the conference that consisted of healthcare providers of all kinds, she was unsure of the importance of her role as a student. As she received some encouragement and gained confidence in herself through exercises and panels, she understood the importance of her perspective and the importance of working hand-in-hand with other healthcare providers in order to give patients the best care possible from all facets.

#### her testimonial

"I gained so much confidence in my role as a student physical therapist on an interdisciplinary team, and I have been able to directly relate the skills I gained into practice on my clinical rotations over the past year. I am a better advocate for my patients and feel more comfortable speaking up in an interdisciplinary space. I think that every student in a healthcare profession would benefit from participating in an event like this, to help inspire the kind of teamwork that will provide better outcomes for all patients we work with over our careers."

#### understanding the change process

Heather was deeply impacted by the stories she heard during the panels at the Interprofessional Healthcare Leadership Seminar. She recalls the story of a speech pathologist who got sick, which made her question "what kind of care would I want if I were in her shoes?" She has no doubt that it would be care from providers who are all working together.

In addition to the panels, Heather gained a new confidence through exercises and debriefing with her team. **"I can go in a room with doctors and nurses and what I have to say is valuable,"** she says.

#### the lasting impacts

Working in a hospital, where the MD is stereotypically the leader of a healthcare team, it can be difficult to feel overlooked or pushed aside. After gaining extensive knowledge and confidence through the leadership conference and other experiences, Heather realizes the importance of working together and the worth each person brings to a team. "If everyone could be involved with [experiences] like this in school, it would make such a difference."

#### continuing the journey

Working directly with her clinical instructor who does interprofessional research at UNC, Heather has been able to directly apply her confidence and knowledge from the leadership conference. Heather will continue advocating for interprofessional work after graduation and throughout her career.



## Student Testimony: Student has since matriculated into an ECU graduate program.

*The IPE Leadership Seminar was a very enriching experience! I attended the seminar as both a senior undergraduate nutrition student at ECU and 2nd year AHEC Scholar. I felt the structure of the seminar was both applicable and insightful to current events in the healthcare system. The guest speakers that shared their own healthcare experiences with the group moved me personally and encouraged me to think to myself how I can be a vessel for change when I become a healthcare provider. What also made this experience great was having the opportunity to collaborate with students, faculty, and professionals in various fields of healthcare in efforts to devise ideas and plans for how changes can be made in the future toward use of more interdisciplinary/interprofessional team-based practice.*

*Toward the end of the seminar, we had a chance to practice our skills working as an interprofessional team with our small interdisciplinary table teams with a mock-patient in a mock-hospital room. This part of the experience was the best because it not only offered an opportunity to test my individual clinical skills in nutrition but also allowed me to have the opportunity to work closely with the medical, nursing, and dental students in my group to ensure the diagnosis and care plan were devised as one unit rather than 3 separate units of care. I left the seminar feeling not only empowered and excited about my own future in healthcare but also in the future of healthcare itself because all change starts small and with time and investment large-scale changes are bound to be made. The only thing I wish I saw more of was undergraduate students because I feel interprofessional care principles should be taught as a student learns their own discipline course work so unified healthcare teams and team-based practice can become the standard of expectation in real-world environments.*

*Overall, I am very glad I was invited to attend this IPE event! I value the experience and cherish the knowledge that was gained in attendance. I was able to expand my network and gain new friends. I strongly hope that this and more IPE events like it are offered and encouraged to ECU Allied Health Science students and local community professionals for years to come!*

# Truist Interprofessional Leaders Seminar

## EXPENSES

TOTAL EXPENSES			Estimated	Actual
			\$15,000.00	

AHEC Fees	Estimated	Actual
Managment Fee	\$2,500.00	
Technology Support	\$275.00	
Supplies	\$75.00	
Admin Fee (\$10 per student)	\$600.00	
<b>Total</b>	<b>\$3,450.00</b>	<b>\$0.00</b>

Standardized Patients	Estimated	Actual
13 Staff and Fee	\$3,000.00	\$300.00
<b>Total</b>	<b>\$3,000.00</b>	<b>\$300.00</b>

Faculty Teamwork/IP Development	Estimated	Actual
Travel to Interprofessional Collaborative x 4 (2023)#	\$700.00	
<a href="#">NEXUS Summit x 4 2024</a>	\$1,900.00	
<b>Total</b>	<b>\$2,600.00</b>	<b>\$0.00</b>

Food	Estimated	Actual
Food (breakfast/lunch)*	\$2,450.00	
<b>Total</b>	<b>\$2,450.00</b>	<b>\$0.00</b>

Speakers/Facilitators	Estimated	Actual
Small Group Facilitator Stipends!	\$3,000.00	
Patient Speakers	\$500.00	
<b>Total</b>	<b>\$3,500.00</b>	<b>\$0.00</b>

Student Development	Estimated	Actual
<a href="#">Nexus Summit x 4</a>	\$580.00	
<b>Total</b>	<b>\$580.00</b>	<b>\$0.00</b>

Goal: 60 Student Participants

\* Quoted \$35 per person for breakfast and lunch

! Facilitate Student Small Groups of Students 6 groups x \$500 (8 hour work day/Saturday)

# Cost Shared with Colleges: See email from C. Lysaght with invitation

Nexus Summit is Virtual: Past students can present interprofessional work from Truist Seminar and Interprofessional Clinics/Classes

Nexus Summit is Virtual: Faculty can best learn how to teach and practice as interprofessional team/team leaders

<https://summit2023.nexusipe.org/>

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**From:** Kelly Lockeman <[kelly.lockeman@vcuhealth.org](mailto:kelly.lockeman@vcuhealth.org)>  
**Sent:** Monday, August 7, 2023 4:49 PM  
**To:** Lysaght, Christine R <[LYSAGHTC@ECU.EDU](mailto:LYSAGHTC@ECU.EDU)>  
**Cc:** Jess Whelpley <[whelpleyjj@vcu.edu](mailto:whelpleyjj@vcu.edu)>  
**Subject:** VCU Emswiller Interprofessional Symposium Invitation

This email originated from outside ECU.

Dear Chris,

As we emerge from the challenges during the pandemic, we are evaluating our strengths and opportunities in IPE at Virginia Commonwealth University. One of our strengths has been the Emswiller Interprofessional Symposium, a one-day conference that we have held each spring since 2013. One of the symposium's greatest strengths has been the learning that occurs across institutions in our region. We continued the symposium virtually in 2021 and as a hybrid event in 2022. This spring, we paused the symposium while we considered how best to continue it in our new post-pandemic world. As an IPE leader at your institution, we would like to invite you to a special Emswiller Interprofessional Symposium this fall to discuss IPE in an evolving world.

On **Saturday, October 7, 2023**, we will hold a special version of the Emswiller Interprofessional Symposium on the VCU campus in downtown Richmond. Instead of inviting individuals and groups to submit abstracts, we will bring together **IPE leaders from institutions in our region** to present an overview of their institutions' interprofessional initiatives and the challenges they face. We see this as a structured opportunity to discuss common issues as IPE leaders in higher education. The goal of this alternative format is to provide a venue for networking and cross-institutional collaboration.

There will be **no cost to participate** in the 2023 symposium event, and lunch will be provided. Participants will only need to cover their own travel expenses. We plan to commence mid-morning with a plenary talk by Dr. Lucinda Maine, former chair of the Interprofessional Education Collaborative. This presentation will be followed by institutional presentations and roundtable discussion. We will conclude by 4:00 PM. We hope most participants will be able to drive in for the day in an effort to minimize travel costs.

**Please let me know by August 31 if you are able to participate and would like to present.** Also, let us know if you would like to bring anyone else from your institution. We are hoping to have 1 or 2 interprofessional leaders from each institution, but we are flexible. We also welcome learners who have been engaged in IPE and aspire to be future faculty leaders of IPE.

We look forward to hearing from you!

Kelly

Chris—Forgive me for the form letter! I wasn't sure who to include from ECU, but I figured you could let me know who is leading your IPE task force now. And if there isn't someone formally in charge, let me know who else at ECU would be most interested in participating. I hope you had a great summer!

--

**Kelly Lockeman, PhD** (she/her)  
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Office of Assessment, Evaluation, and Scholarship  
Director of Evaluation and Assessment,  
Center for Interprofessional Education & Collaborative Care  
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*I often send email outside of typical business hours. Please don't feel obligated to reply outside your own working hours.*