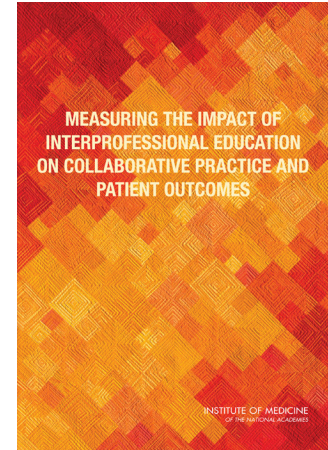


Measuring the Impact of Interprofessional Education on Collaborative Practice and Patient Outcomes



Interprofessional education (IPE) occurs when learners of two or more health and/or social care professions engage in learning with, from, and about each other to improve collaboration and the delivery of care. Although the value of IPE has been embraced around the world—particularly for its impact on learning—many in leadership positions have questioned how IPE affects patient, population, and health system outcomes. This question cannot be fully answered without well-designed studies, and these studies cannot be conducted without an understanding of the methods and measurements needed to conduct such an analysis. To respond to this need, the Institute of Medicine (IOM) convened a committee to examine the methods needed to measure the impact of IPE on collaborative practice and health and system outcomes.

The committee advises that it appears possible to link the interprofessional learning process with downstream person- or population-directed outcomes, provided that thoughtful, collaborative, and well-designed studies are created to answer such questions. However, the complex analyses needed to establish such a relationship are not typically conducted for any education reform effort including IPE. The committee highlights four areas that, if addressed, would lay a strong foundation for evaluating the impact of IPE on collaborative practice and patient outcomes: (1) more closely aligning the education and health care delivery systems; (2) developing a conceptual framework for measuring the impact of IPE; (3) strengthening the evidence base for IPE; and (4) more effectively linking IPE with changes in collaborative behavior.

To address the current lack of broadly applicable measures of collaborative behavior, the report recommends that interprofessional stakeholders, funders, and policy makers commit resources to a coordinated series of well-designed studies of the association between IPE and collaborative behavior, including teamwork and performance in practice. These studies should be focused on developing broad consensus on how to measure interprofessional collaboration effectively across a range of learning environments, patient populations, and practice settings.

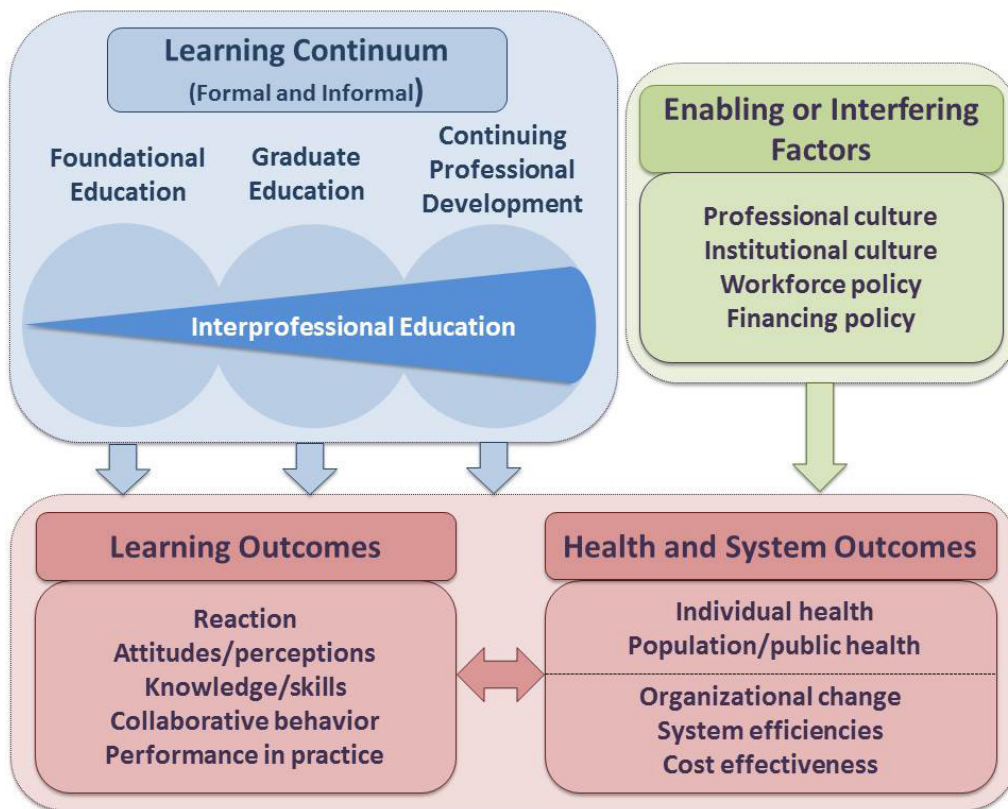
Due to the complexity of IPE and the environments in which it takes place, and given the wide array of confounding variables that could affect validity of the results, the committee also recommends that health professions educators and academic and health system leaders should adopt a mixed-methods research approach for evaluating the impact of IPE on health and system outcomes. When possible, such studies should include an economic analysis and be carried out by teams of experts that include educational evaluators, health services researchers, and economists, along with educators and others engaged in IPE.

In addition, the committee put forth a conceptual model for evaluating IPE that could be adapted to particular settings in which it is applied.

An Interprofessional Conceptual Model for Evaluating Outcomes

After determining that no existing models sufficiently incorporate all of the necessary components to guide future studies, the committee developed a conceptual model that includes the education-to-practice continuum, a broad array of learning, health, and system outcomes, and major enabling and interfering factors (see figure). This model is put forth with the understanding that it will need to be tested empirically and may have to be adapted to the particular settings in which it is applied. For example, educational structures and terminology differ considerably around the world, and the model may need to be modified to suit local or national conditions. However, the overarching concepts of the model—a learning continuum, outcomes, and enabling and interfering factors—would remain.

FIGURE: The interprofessional learning continuum (IPLC) model



NOTE: For this model, “graduate education” encompasses any advanced formal or supervised health professions training taking place between completion of foundational education and entry into unsupervised practice.



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