

Getting Started With Interprofessional Practice and Education in Community-Based Settings

In 2016, the National Center for Interprofessional Practice and Education (the National Center) engaged 16 schools of nursing across the nation in the “Accelerating Interprofessional Community-Based Education and Practice” initiative (Accelerating Initiative). The National Center is focused on solution-oriented interprofessional activities that occur at the “Nexus” where health professions education and health systems evolve simultaneously to advance the patient experience of care, population health, and reducing costs.

The Accelerating Initiative was funded by four private foundations to create and evaluate nurse-led community-based models of interprofessional education. The funders, the Robert Wood Johnson Foundation, the John A. Hartford Foundation, the Josiah Macy Jr. Foundation, and the Gordon and Betty Moore Foundation, were interested in sustainable and scalable projects that would further inform interprofessional practice and education (IPE). Schools were awarded \$50,000 and were required to match those funds to support their projects. This editorial shares lessons learned from the initiative and provides guidance for schools in establishing community-based IPE programs.

The participant universities are located across the nation, and include private and public doctoral universities with academic health centers and high or very high research activity. The schools created a variety of partnerships both within and outside of the traditional health care system in community-based settings. Partnerships within health care include health care provider systems,

county health departments, community mental health agencies, community clinics, long-term care, and home care programs. Partnerships outside health care include a senior center, public school, addiction treatment center, and housing authorities.

The populations of concern ranged from school-aged children to public housing residents and from community-dwelling vulnerable populations to homebound older adults. Interventions targeted increasing access to care for vulnerable populations; assessing needs and providing care coordination through hotspotting; and providing support for substance use disorders, mental health, oral health, nutritional health, environmental safety, and medication management.

Harder+Company Community Research (2019) partnered with the National Center to conduct a comprehensive program evaluation. They identified the following lessons learned:

- Working in a community-based setting gave students hands-on experience with the ways in which social determinants of health impact the lives of patients.
- Nexus programs allowed student interprofessional care teams to showcase how their expertise could aid specific vulnerable patient populations.
- Working on interprofessional teams helped students learn more about effective team-based care and collaboration.
- Many of the Nexus programs increased access to primary care for vulnerable populations. Some Nexus programs have seen reduced readmis-

sions and emergency room visits, and improvements in health indicators.

- In many Nexus programs, patients report being more satisfied with their care as well as the additional time and attention that they received from a team-based approach to care.

Key enabling factors facilitated partnership development and success of the initiative. The most successful programs started with what people and families needed rather than focusing first on developing an IPE curriculum or student competencies. Strong institutional support for interprofessional practice and education was critical to success. Leadership is necessary to create the vision, provide resources, and remove barriers.

Academic institutions with a history of strong community collaboration helped facilitate the community-based partnerships necessary to jump-start the Nexus programs. A community presence is essential to establishing viable partnerships. Some Nexus sites built on existing programs, providing a foundation for stronger interprofessional models and community connections.

Findings from the Accelerating Initiative prompted the National Center to create an introductory toolkit to facilitate faculty in launching their own NexusIPE™ (Brandt et al., 2019). A core set of four nonsequential activities are key as you consider how to move your IPE agenda forward. These are:

- Learn the Critical Success Factors of NexusIPE.
- Take the time to get to know your IPE ecosystem.
- Build the right NexusIPE team at the right time.

- Define your vision and get ready to communicate it.

First and foremost, it is essential that Nexus partnerships focus on a culture of health, not the provision of health care services. This frame of reference creates a broader perspective that facilitates creative partnerships. The critical success factors include leadership from both a bottom-up and a top-down approach. Bottom-up leadership is demonstrated by IPE champions who serve as “boots on the ground” and operationalize the IPE experience. Senior leadership provides “top-down” support by setting the tone and expectations for IPE. Resourcing IPE is essential for dedicated time and funding. Showcasing is an important mechanism to promote recognition of the work.

Knowing your IPE ecosystem is im-

portant as it provides insight into what is needed within the community. Focusing on the needs of individuals and families within a community facilitates a meaningful experience for learners as well as increasing the capacity for an authentic, mutually beneficial, sustainable partnership. Building the right team involves consideration of community partners as well as the involvement of other disciplines. Finally, it is important to define a shared vision and communicate it to a variety of stakeholders.

As you think about creative approaches to creating the nurse of the future, some solutions may be as close as your backyard.

References

Brandt, B.F., Dieter, C.J., Willson, A., & Pejsa, L. (2019). *Setting the stage for a transforma-*

tive NexusIPE™ Team: An introductory toolkit. <https://nexusipe.org/accelerating/toolkit>
Harder+Company Community Research. (2019, August). *Accelerating interprofessional community-based education and practice initiative: Final evaluation report.* <https://nexusipe.org/accelerating/harder-report>

Barbara F. Brandt, PhD, EdM, FNAP

*Director, National Center for Interprofessional Practice and Education
University of Minnesota
brandt@umn.edu*

Amy J. Barton, PhD, RN, FAAN, ANEF

*Editor
Amy.Barton@ucdenver.edu*

The authors have disclosed no potential conflicts of interest, financial or otherwise.
doi:10.3928/01484834-20200422-01