Interprofessional collaborative practice focuses on improving the healthcare of individuals and communities, reducing costs, and increasing value. Yes, most health professionals are trained to demonstrate skills and competencies specific to their own profession, which may contribute to challenges in providing effective collaborative care. To address this, health profession educators are now preparing students to demonstrate skills and competencies both professionally and interprofessionally through interprofessional practice and education (IPE). Even though students are gaining the educational background necessary to work on teams, there is growth in emphasizing experiential IPE activities to better prepare students to shape the future of the healthcare system.

**Objective**

This experiential project aims to have dental, social work, and medical students work together as an interprofessional team with a pediatric patient that is currently receiving care at the UM Dental Pediatric Clinic. After evaluating the patient’s medical, social, and dental needs, students will create a comprehensive treatment plan with the patient/family/guardian. They will then present a comprehensive list of the patient/family/guardian to choose from. With this interprofessional and person-centered approach it is expected that the students will be able to recognize the importance of working in teams to improve patient’s outcomes.

**Background**

Interprofessional collaborative practice focuses on improving the healthcare of individuals and communities, reducing costs, and increasing value. Yes, most health professionals are trained to demonstrate skills and competencies specific to their own profession, which may contribute to challenges in providing effective collaborative care. To address this, health profession educators are now preparing students to demonstrate skills and competencies both professionally and interprofessionally through interprofessional practice and education (IPE). Even though students are gaining the educational background necessary to work on teams, there is growth in emphasizing experiential IPE activities to better prepare students to shape the future of the healthcare system.

**Methods**

1. Sharing and debriefing (1st patient encounter)
   1. Sharing and debriefing (2nd patient encounter)
   2. Feedback
   3. Post Surveys

**Metrics**

Learning outcomes and IPE background will be measured by using the Jefferson Tool, student surveys (pre- and post-activity), as well as a post-activity patient satisfaction survey.

**Results**

The anticipated results for this ongoing project include student learning outcomes and patient outcomes. Students’ outcomes include:

1. Improving IPE collaboration skills by knowing better the “Roles and Responsibilities” of each profession involved in the project (Dentistry, Medicine and Social Work).
2. Improving knowledge and practicing “Values and Ethics” concepts by interacting with a real patient and playing an active role as a member of a healthcare team.
3. Improving communication and teamwork are secondary outcomes that will also be assessed during the project.

*These outcomes will be assessed by:*

1. Pre-survey: assessing students’ IPE background;
2. Use of the Jefferson Tool: Preceptors will evaluate student’s ability to work as a team using the Jefferson Tool;
3. Post-survey/Reflection: Assessing conceptual changes on IPE concepts after the activity and learning experience. Feedback about the activity and gains in terms of teamwork and communication skills will be encouraged during the last session, which includes a case presentation and discussion.

Patient outcomes will also be considered to demonstrate the impact of the project not only on the students’ learning experiences but also on the patient’s benefits.

*Patient outcomes include:*

1. Receiving IPE education, tailored and customized person-centered treatment plan including social, dental, and medical needs, as well as goals to improve dental, mental, and overall health. These benefits will be assessed by a satisfaction survey to be completed by family member/caregiver during the last encounter.
2. Long-term assessment will be carried out after the activity by following the metrics presented by the patient, demonstrating that goals have been achieved (better compliance, appointment attendance, number of dental/medical procedures completed, social needs better addressed, impact on case prognosis)

We learned that developing a robust experiential IPE project requires much careful planning to ensure that the patient is engaged in the planning process and can receive optimal care.

**Future Application and Next Steps**

The next step of this project will be running the pilot, involving one group of students to make the length, content and flow of the sessions are sufficient. This will include feedback received from the students and faculty members involved in the project.

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