Collaborating Across Borders III, An American-Canadian Dialogue on Interprofessional Health Education & Practice

November 19-21, 2011

Hilton Tucson El Conquistador Golf & Tennis Resort, 10000 N. Oracle Rd., Tucson

“Collaborating Across Borders III, An American-Canadian Dialogue on Interprofessional Health Education & Practice” (CAB III) is the third biennial Canada-United States joint conference focusing on issues in interprofessional health education and practice. CAB III is open to government leaders, policy makers, health-care professionals, educators and students.

Ronald S. Weinstein, MD, professor of pathology with the University of Arizona College of Medicine, is local organizer and co-chair for the CABS III. Dr. Weinstein is also professor of public policy with the UA Mel and Enid Zuckerman College of Public Health and founding director of the Arizona Telemedicine Program. John H. V. Gilbert, Ph.D., and Barbara Brandt, Ph.D., will serve as co-chairs of the conference with Dr. Weinstein. Dr. Gilbert is professor emeritus at the University of British Columbia. Dr. Gilbert serves on Health Canada’s Health Education Policy Taskforce, and Collaborating Committee on Entry to Practice Credentials and is Co-Chair of the WHO Study Group on Interprofessional Education & Collaborative Practice. Barbara Brandt, Ph.D., is Associate Vice President for Education, the University of Minnesota Academic Health Center and Professor, Pharmaceutical Care and Health Systems, University of Minnesota College of Pharmacy.

CAB III will address issues identified by the National Academy’s Institute of Medicine (IOM) in a series of reports which demonstrated the need for increased interprofessional team training in the United States. (See following section, “About the Institute of Medicine reports.”)

Speakers will include national and international leaders in health-care education and policy who will facilitate discussions of interprofessional education, practice and policy in an international context. The conference will showcase best practices, outcomes and lessons learned and provide a venue for scholarly dialogue and networking.

A special focus will be the use of electronic technologies, such as social networking platforms that allow students in interprofessional teams to share expertise, tasking and team decision making in real time case simulation and virtual reality vignettes.

Tracks at previous CAB conferences have included:
- Cutting Edge Innovations in Curriculum and Instruction
- Faculty/Teaching Skills Development
- Transformation/Change/Leadership
- Addressing Barriers Through Policy Development
- 21st Century Technology-Enhanced IPE
- New Models of Care/Communities of Practice
- Interprofessional Education Through the Eyes of Students
CAB III is sponsored by the American Interprofessional Health Collaborative, Canadian Interprofessional Health Collaborative, University of Arizona Health Sciences Center, University of Minnesota Academic Health Center and Arizona Telemedicine Program.

About Interprofessional Education

According to the Centre for the Advancement of Interprofessional Education, interprofessional education occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care.™ The University of Minnesota defines interprofessional education as occurring when students from the health professions and related disciplines learn together about the concepts of health-care and the provision of health-care services toward improving the effectiveness and the quality of health-care. Effective interprofessional education generally involves collaboration, respectful communication, reflection, application of knowledge and skills and experience in interprofessional teams.

About the Institute of Medicine reports

The Institute of Medicine (IOM) report Crossing the Quality Chasm: A New Health System for the 21st Century (2001) describes a chasm in the United States health-care system as a result of complexity in health-care, changes in the public’s health-care needs and challenges in the health-care delivery system. Recommendations in that report include restructuring health professions education toward interprofessional practice. A 2003 IOM report, Health Professions Education: A Bridge to Quality, states a new vision for health professions education in which “all health professionals should be educated to deliver patient-centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches and informatics.” A 2004 IOM report, Health Literacy, emphasized the need to improve the health-care education of the U.S. general public, in order for individuals to have a greater role in their own health care in the future.

Interprofessional education at the Arizona Health Sciences Center

Tucson was selected to host CAB III in part because of the University of Arizona’s efforts in implementing distance learning and social networking technologies in its interprofessional education programs. The Arizona Telemedicine Program and its T-Health Institute division in downtown Phoenix have developed several innovative visible social networking platforms, customized for use in interprofessional team-training of students at decentralized locations. CAB III will highlight some of the unique features implemented at the T-Health Amphitheater on the Phoenix Bioscience Campus, a first-of-a-kind education delivered via an “e-classroom-of-the-future” used by health-care students in several health-care education tracks.

“The Arizona Telemedicine Program has won many national awards for its innovations in distance education. We anticipate that Internet-based learning will be transformational for interprofessional team training, and this will be highlighted at the CAB III conference,” says Ana Maria Lopez, MD, MPH, medical director of the Arizona Telemedicine Program and associate dean for outreach and multicultural affairs at the UA College of Medicine.
“The Arizona Health Sciences Center has an excellent interprofessional education program, led by a core team from the UA Colleges of Medicine, Nursing, Pharmacy and Public Health” says Dr. Weinstein. “Many of our Arizona Health Science Center faculty members and students will attend CAB III and present scientific papers on a number of facets of interprofessional education at the UA.”

Recently, the AHSC interprofessional education program held a three-hour pandemic flu exercise involving more than 400 students and more than 40 faculty from the UA Colleges of Medicine, Nursing and Pharmacy; UA Mel and Enid Zuckerman College of Public Health; UA James E. Rogers College of Law and Arizona State University School of Social Work. The exercise was led by Andy Theodorou, MD, chief medical officer, University Medical Center/Diamond Children’s; UA professor of pediatrics; chief, pediatric critical care medicine and associate head, UA Department of Pediatrics. Participants collaborated via telemedicine and a new technology, “CoverItLive,” at locations in Tucson, Phoenix and Yuma, AZ. Using simulated flu cases, the students discussed challenging medical, legal and ethical issues that arise when health-care systems are inundated by needs for service.

The discussions were led by Richard Carmona, MD, MPH, FACS, 17th Surgeon General of the United States; distinguished professor, UA Mel and Enid Zuckerman College of Public Health; and vice chairman, Canyon Ranch, and Dr. Theodorou. The participation of Christopher Robertson, JD, PhD, associate professor, UA James E. Rogers College of Law, and his law students added an additional dimension to the program, notes Dr. Weinstein.

“Drs. Carmona and Robertson emphasized that many legal and regulatory issues come into play when health-care systems are massively overwhelmed with critical needs for access to health care, such as occur in pandemics and natural disasters. Decisions about who gets access to life-saving technologies and therapies often are best made by interprofessional teams. Training in team coordination decision-making should be part of the curriculum of health-care professions schools, and the UA is integrating such curricula into their training,” says Dr. Weinstein.

Dr. Theodorou addresses the pandemic flu exercise participants

Dr. Carmona (right) discusses a legal issue with Dr. Robertson (foreground); Dr. Weinstein is seated behind Dr. Carmona.

The AHSC interprofessional education program for UA medicine, nursing, pharmacy and public health students is administered through the UA Office of the Vice President for Health Affairs and the UA College of Medicine Department of Pediatrics. The Arizona
Geriatric Education Center, part of the Arizona Center on Aging at the UA College of Medicine, houses a federally-funded interprofessional “Faculty Scholars in Aging” program. Several UA College of Medicine faculty members are collaborators on a Josiah Macy Jr. Foundation-funded planning grant for a multi-university post-baccalaureate education program to be housed at the Arizona State University College of Nursing and Health Innovation in Phoenix. For more information about interprofessional education at AHSC, visit the website http://ahsc.arizona.edu/node/453

The Arizona Telemedicine Program

The Arizona Telemedicine Program (ATP) at the UA College of Medicine has been involved with interprofessional education programs for more than a decade. Part of ATP’s mission is to foster innovations in health-care education and health-care delivery systems. In 2003, ATP was invited by then-UA President Peter Likins to apply for federal supplemental budget funding to create an Institute for Advanced Telemedicine and Telehealth (T-Health Institute).

Today, the T-Health Institute leverages information technologies to create and promote interprofessional education programs and is headquartered on the Phoenix Bioscience Campus being developed in downtown Phoenix. The ATP team-designed international award-winning T-Health Amphitheater incorporates innovative social networking platforms and multi-site videoconferencing over the Arizona Telemedicine Network. These first-of-a-kind platforms are designed to overcome some of the communication barriers in interprofessional education. The ATP continues to develop innovative education programs and to evaluate the use of advanced telecommunications technologies to facilitate decentralized interprofessional education.

Students in the Arizona Telemedicine Program’s T-Health Amphitheater.

About Dr. Brandt

Barbara F. Brandt, Ph.D. is currently Assistant Vice President for Education, the University of Minnesota Academic Health Center and Professor, Pharmaceutical Care and Health Systems, University of Minnesota College of Pharmacy. Her current responsibilities include developing and implementing academic health center-wide interdisciplinary education, community-based education and technology-enhanced learning programs in allied health, dentistry, medicine, nursing, pharmacy, public health and veterinary medicine. She is the Principal Investigator for a newly-awarded Area Health Education Center grant.

Prior to that time, she was Associate Professor of Pharmacy Practice and Science and Director, Curriculum and Faculty Development at the University of Kentucky College of Pharmacy. She
co-chaired the Curriculum Committee charged with implementing the entry-level Doctor of Pharmacy degree.

Dr. Brandt holds Master of Education and Doctor of Philosophy degrees in Adult and Continuing Education with a specialty in continuing professional education from the University of Illinois at Urbana-Champaign. She has extensive teaching and administrative experience in continuing education for health professionals, most recently as Associate Director of Continuing Pharmacy Education in the University of Kentucky College of Pharmacy. Dr. Brandt has written many articles and has given numerous national presentations in the area of continuing professional education and curricular development.

In 2000, she participated as a United States Public Health Service Primary Care Policy Fellow. She also was appointed to serve a 2000-2006 term on the Board of Directors of the American Council on Pharmaceutical Education. Dr. Brandt serves as a member of the Advisory Council to the Center for Interdisciplinary, Community-Based Learning of the Association of Academic Health Centers.

Dr. Brandt has worked in a number of areas of curricular and educational change in pharmacy. Since 1996, she has served as a facilitator for the annual American Association of Colleges of Pharmacy Institute on Pedagogical and Curricular Change, a program in which over seventy colleges of pharmacy have participated. Additionally, she is designing a national interdisciplinary Teaching Excellence Development Program co-sponsored by eight professional associations representing health professions schools.

Dr. Brandt has also worked with and/or given presentations to such organizations as the American Medical Student Association; the National Health Service Corps and the Office of Pharmacy Affairs, Bureau of Primary Health Care, Health Resources and Services Administration; the American Association of Dental Schools; the American Association of Colleges of Nursing; the American Association of Clinicians for the Underserved; the American Association of Colleges of Pharmacy; the Kentucky Administrative Office of the Courts; Center for Health Professions, University of California, San Francisco; the University of Minnesota College of Pharmacy; Association of Schools and Colleges of Optometry; Samford University School of Pharmacy; University of Southern Indiana Undergraduate Curriculum; the University of Iowa College of Pharmacy and Idaho State University School of Pharmacy.

About Dr. Gilbert

John H. V. Gilbert, Ph.D. is founding Principal & Professor Emeritus, College of Health Disciplines, University of British Columbia, where he was also founding Director of the School of Audiology and Speech Sciences, and Director of the School of Rehabilitation Sciences. Throughout his long career he has served on many national and international boards and committees.

His many honors include: a Fulbright Scholarship; a David Ross Research Fellowship; a Medical Research Council of Canada Post-Doctoral Scholarship; the Outstanding Alumnus Award of the School of Liberal Arts, Purdue University; a UBC Isaac Killam-Walton Outstanding Teaching Award; 50th Anniversary Medal for outstanding service to the UBC Faculty of Medicine; and the Distinguished Service Award of the British Columbia Institute of Technology.
Dr. Gilbert is a Fellow of the Canadian Academy of Health Sciences and immediate Past President, International Association for Interprofessional Education and Collaborative Practice. At the present time he is Project Lead of the Canadian Interprofessional Health Collaborative, funded by Health Canada, as well as, Visiting Scholar at Humber College, Toronto. He serves on Health Canada’s Health Education Policy Taskforce, and Collaborating Committee on Entry to Practice Credentials and is Co-Chair of the WHO Study Group on Interprofessional Education & Collaborative Practice.

Dr. Gilbert currently serves on the Boards of the Michener Institute for Applied Health Sciences in Toronto, the British Columbia Health Education Foundation, the Women’s Health Research Institute of B.C., the Paramedic Advisory Committee of the Justice Institute of B.C., and British Columbia’s Patient Care Quality Review Board. He is a member of the Editorial Board of the Journal of Interprofessional Care, and Co-Editor of the online Journal of Research in Interprofessional Education. Dr. Gilbert is a consultant in Health Education Policy.

About Dr. Weinstein

Dr. Ronald S. Weinstein is founding Director of the Arizona Telemedicine Program, founding Director of the Institute for Advanced Telemedicine and Telehealth (T-Health Institute), founding Director of the Four Corners Telehealth Consortium, Professor of Pathology, in the College of Medicine, University of Arizona, (Department Head, 1990-2007), Professor of Public Policy, Mel and Enid Zuckerman College of Public Health, University of Arizona, and Adjunct Professor, Biomedical Informatics, Arizona State University. Throughout his career he has served on many national and international committees and boards.

His many honors include: a Ford Foundation Congressional Internship in the U.S. Congress; a Clinical and Research Fellowship at the Massachusetts General Hospital, a Teaching Fellowship at Harvard Medical School; a Distinguished Visiting Professor from Johns Hopkins School of Medicine; a James A. Campbell, M.D. Alumni Award for Distinguished Service from Rush Medical College, in Chicago, Il; the Kash Mastofi Distinguished Service Award from the International Society for Urological Pathology; the Leopold Koss Medal, from the International Society for Urological Pathology; the American Telemedicine Associations’ Presidents Award; the Eliphalet Nott Medal (Distinguished Alumnus Award) from Union College (Schenectady, New York); the Distinguished Service Award from the Arizona Medical Association; and the Lifetime Achievement Award from the Association for Pathology Informatics. Companies co-founded by Dr. Weinstein have received national and international awards, including International Wall Street Journal recognition for innovation.

Dr. Weinstein is past-President of five professional societies including: the United States and Canadian Academy of Pathology; the International Society for Urological Pathology; the International Council of Societies of Pathology; and the American Telemedicine Association. He is President-elect of the Association for Pathology Informatics. Dr. Weinstein has lectured extensively throughout North America, Latin America, Asia, Europe and the Middle East. A popular teacher, Dr. Weinstein has received the University of Arizona College of Medicine’s Lifetime Teaching Award and has been honored at five Arizona College of Medicine graduation ceremonies.
Dr. Weinstein is a prolific writer and has authored over 500 professional publications, including scientific papers, published abstracts, book chapters, and monographs. He has served on over a dozen editorial boards. Dr. Weinstein has been an entrepreneur and inventor with U.S. patents to his credit. He has been involved with six start-up companies, serving in roles ranging from President and CEO, to Scientific Director.

Dr. Weinstein is regarded as a pioneer in the field of telemedicine and was recently honored with the title of President Emeritus from the American Telemedicine Association. He is known to many as the “father of telepathology”. Dr. Weinstein was an academic pathology department chair for 32 years (15 years in Chicago and 17 years in Arizona) before he turned his attention to interprofessional education and education reform.

**Interprofessional education at the University of Minnesota**

Interprofessional education for health professions students has been discussed at the University of Minnesota for many years. An April 1967 report to the Board of Regents references changes in the education program to include “closer integration of all health science programs, in recognition of the ‘team approach’ to comprehensive health-care.” The UM Center for Interprofessional Education was chartered in December 2006 by the University of Minnesota Academic Health Center deans of the schools of dentistry, medicine, nursing, pharmacy, public health and veterinary medicine. The first CAB conference was hosted by the University of Minnesota in October 2007 and provided a venue for American and Canadian health professionals, educators and students to discuss issues in interprofessional education. For more information about the UM Center for Interprofessional Education, visit the website [www.ipe.umn.edu](http://www.ipe.umn.edu)

**The American Interprofessional Health Collaborative**

The American Interprofessional Health Collaborative (AIHC) is a recently established organization rooted in the rich history of interprofessional and interdisciplinary health professions collaboration in the United States dating back to the mid-20th century. Several individuals who have been involved in shepherding the AIHC organizational formation have professional histories anchored in the interprofessional education (IPE) and interprofessional care (IPC) movements from the 1970s. AIHC leaders played key roles in the planning and running of the CAB I and CAB II conferences. AIHC is based at the University of Minnesota; for more information visit the website [http://blog.lib.umn.edu/cipe/aihc/about/homepage.html](http://blog.lib.umn.edu/cipe/aihc/about/homepage.html)

**The Canadian Interprofessional Health Collaborative**

The Canadian Interprofessional Health Collaborative (CICH) promotes interprofessional education, collaboration in health-care practice and patient-centered care. To foster better patient care, CIHC members are working together to strengthen interprofessional education for the collaborative, patient-centric practice (IECPCP) knowledge base. The goal is to share this knowledge with policy makers, planners in the health and education systems, health professionals and educators to ensure benefits to all Canadians. CICH is funded by Health Canada, the Federal department responsible for helping Canadians maintain and improve their
health while respecting individual choices and circumstances. For more information about CIHC, visit the website www.cihc.ca

Origin of CAB Conferences

Collaborating Across Borders emerged from conversations between Canadian and American attendees at the 3rd international biennial All Together, Better Health, interprofessional conference in London, UK, in 2006. Several white papers providing background to fund strong interprofessional education (IPE) and practice (IPP) initiatives for health care in Canada drew heavily from earlier efforts in the US as well as the UK. During this time, Health Canada provided funding for a national infrastructure, the Canadian Interprofessional Health Collaborative (CIHC), to focus on IPE and IPP. As a result, the CIHC was in a position to inform revitalization of IPE efforts in the U.S., which had been regaining visibility around efforts to improve patient safety in acute care settings. The intent is to hold Canadian and American co-sponsored CAB conferences on the “off” years to the biennial international conference, All Together, Better Health.

CAB I (www.ipe.umn.edu)

CAB I – An American-Canadian Dialogue in Interprofessional Health Education- was held under the sponsorship of the Canadian Interprofessional Health Collaborative (CIHC) and the University of Minnesota Academic Health Center, a pioneer U.S. institution for IPE, in October 2007. It provided a venue for about 300 American and Canadian health professionals, policy makers, educators, and students to discuss topics in peer-reviewed sessions related to innovations in curriculum and instruction, faculty development, transformation/change/leadership, policy development, technology-enhanced IPE, and new models of care. Emphasis was on evidence for best practices, showcasing outcomes, and sharing lessons learned. There was a special effort to include students’ views, as both CIHC and Minnesota had fostered strong student-led IPE..

CAB II (http://www.cabhalifax2009.dal.ca)

Canada reciprocated by hosting CAB II- Building Bridges Between Interprofessional Education and Practice- in Halifax, Nova Scotia in May of 2009 for over 425 conferees, who explored shared issues related to interprofessional education and practice. The conference title reflected the importance of establishing relationships and networks to promote the further development of the relationship between IPE and IPP.

Several initiatives were facilitated by these exchanges: Journal of Interprofessional Care Baldwin Award in honor of U.S. IPE pioneer DeWitt Baldwin Jr.; joint editorial board of new online Journal of Research in Interprofessional Practice and Education, and creation of the American Interprofessional Health Collaborative (AIHC), modeled after the CIHC.

CAB III

As IPE and IPP are maturing in both Canada and the United States, interest in sharing experiences and practical approaches for IPE implementation is growing. Planning is underway for CAB III to be held in Tucson, AZ November 19-21, 2011. It is co-hosted by the AIHC and
CIHC, in collaboration with the University of Arizona Health Sciences Center, the University of Minnesota Academic Health Center and the Arizona Telemedicine Program.

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