Background
UT Health San Antonio’s Strategic Vision for fiscal years 2018-2022 identifies Teamwork & Collaboration as a core value, and it also highlights strengthening interprofessional team-based learning opportunities across the organization as a key strategy. The Quality Enhancement Plan (QEP), Linking Interprofessional Networks for Collaboration (LINC), is an institution-wide effort to advance our Strategic Vision by enhancing interprofessional education (IPE) at UT Health San Antonio. Key measures of success include increasing student knowledge and skills related to IPE, demonstrating schools’ and programs’ adoption of IPE as a strategic priority through increased activities integrated into programs’ curricula, and increasing opportunities for student IPE experiences across the institution. To contribute to the coordinated implementation of the QEP and to demonstrate compliance with program-specific IPE accreditation standards, the Associate Dean for Academic and Student Affairs within the School of Health Profession (SHP) and the Chair of the SHP IPE Committee are leading the development and implementation of program-specific IPE plans through the contributions and efforts of SHP IPE Committee members and program leaders within each SHP department.

Profession-Specific Accreditation Mandate
The American Speech-Language-Hearing Association (ASHA) joined the Interprofessional Education Collaborative (IPEC) in 2017 and included Interprofessional Education (IPE)/Interprofessional Practice (IPP) language in Speech-language pathology scope of practice in 2018. In the newly implemented 2020 Speech-language Pathology Certification Standards, ASHA has added the new language to promote IPE/IPP. ASHA recommends the integration of IPE/IPP into the scope of practice in Speech-language Pathology, as evidenced by the following standards:

Standard V-B: Supervised clinical experiences should include interprofessional education and interprofessional collaborative practice and should include experiences with related professionals that enhance the student’s knowledge and skills in an interdisciplinary, team-based, comprehensive service delivery model.

Speech-Language Pathology IPE Plan
In accordance with HPAC recommendations, this IPE plan consists of four components: rationale, outcome-based goals, deliberate design, and assessment & evaluation. Details for each component are included below:

Rationale
The American Speech-Language-Hearing Association (ASHA) joined the Interprofessional Education Collaborative (IPEC) in 2017 and included Interprofessional Education (IPE)/Interprofessional Practice (IPP) language in Speech-language Pathology Scope of Practice in 2018. In the newly implemented 2020 Speech-language Pathology Certification Standards, ASHA has added the new language to promote IPE/IPP. ASHA recommends the integration of IPE/IPP into the scope of practice in Speech-language Pathology, as evidenced by the Standard V-B (see above).
The speech-language pathology program, under the Department of Communication Sciences and Disorders (CSD), at UT Health San Antonio launched in the spring of 2017. The integration of IPE/IPP in the curricular design and clinical education has been strategic to date. In order to match the growth of the program in both graduate students and faculty, the CSD faculty have set the goal to plan and introduce one IPE/IPP experience per year.

Initially, the speech-language pathology program integrated co-curricular activities sponsored by the School of Health Professions. These activities focused on knowledge of other professions and their respective scopes of practice. In fall 2019, a partnership with the School of Nursing allowed for the beginnings of an IPP experience between nursing and SLP students. This partnership and associated clinical activity were chosen as clinical experience in screening and prevention as those skills are also clinical certification skills and experiences required for SLP students.

The timely and intentional progression of IPE/IPP activities allows the faculty to directly align activities with the overall vision and goals of the department, the research and clinical pursuits of the faculty members, ASHA’s standards, and the university’s QEP. The SLP program seeks to focus on collaborative interprofessional supervised clinical experiences with current partners within the School of Nursing while also pursuing partnerships with additional schools, departments and/or professions. This will allow SLP graduate students to develop experiences with related professionals that enhance the student’s knowledge and skills in an interdisciplinary, team-based, comprehensive service delivery model.

**Outcome-based Goals**

**Table 1.**

<table>
<thead>
<tr>
<th>Expected Behaviors for SLP Student</th>
<th>Domains of Competence</th>
<th>IPEC Sub-Competencies</th>
<th>Kirkpatrick’s Learning Outcome Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrate knowledge of the principles of interprofessional team dynamics to perform effectively in different team roles</td>
<td><strong>IPEC 2</strong> – Use the knowledge of one’s own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations.</td>
<td><strong>RR1:</strong> Communicate one’s roles and responsibilities clearly to patients, families, community members, and other professionals <strong>RR10:</strong> Describe how professionals in health and other fields can collaborate and integrate clinical care and public health interventions to optimize population health</td>
<td>Level 2a / 2b</td>
</tr>
<tr>
<td>2. Demonstrate collaboration through communication and patient care within an interprofessional team</td>
<td><strong>IPEC 4</strong> - Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan, deliver, and evaluate patient/population-centered care and population health programs and policies that are safe,</td>
<td><strong>TT8:</strong> Reflect on individual and team performance for individual, as well as team, performance improvement <strong>TT11:</strong> Perform effectively on teams and in different team roles in a variety of settings</td>
<td>Level 2a / 2b Level 3</td>
</tr>
</tbody>
</table>
Deliberate Design

Table 2.

<table>
<thead>
<tr>
<th>Program Year &amp; Semester</th>
<th>Name of IPE Activity (Type of IPE Activity)</th>
<th>Learners from Other Programs Involved (Abbr. &amp; Year)</th>
<th>Associated Course/Place in Curriculum (If Applicable)</th>
<th>Faculty Leader(s) from Program</th>
<th>Faculty Leader(s) from Other Programs</th>
<th>Timeframe to be Completed (Month)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1 Fall</td>
<td>LINC Common IPE Experience (Didactic IPE – Collaborative Online Learning)</td>
<td>Learners from all programs at UT Health San Antonio are placed in interprofessional groups of 4 and group composition varies as a result.</td>
<td>INTD 5031: Common Interprofessional Educational Experience - LINC</td>
<td>LINC Didactic IPE Initiative Members: Meredith Quinene (SHP-PA), Bobby Belarmino (SHP-PT), Kelly Lemke (SOD), Daniel Saenz (GSBS), Sadie Trammell Velasquez (LSOM), and Cynthia L. Wall (SON), with support from the LINC Faculty Council Members: Moshtagh Farokhi (SOD), Gretchel Geaga (SON), Keith Krolick (GSBS), Temple Ratcliffe (LSOM), Joseph Zorek (LINC Director)</td>
<td></td>
<td>Fall (Sep to Oct)</td>
</tr>
<tr>
<td>Year 1 Spring</td>
<td>TeamSTEPPS (Didactic IPE)</td>
<td>OT, PT, MLS, SLP, RT, EMS</td>
<td>INTD 5032: TeamSTEP PS - Interprofessional Education Course</td>
<td>Dr. David Henzi</td>
<td>Dr. Bridget Piernik-Yoder (SHP-OT), Dr. George Kudolo (SHP-MLS), Dr. Tammy Harris (SHP-PA), Dr. Bobby Belarmino (SHP-PT)</td>
<td>Spring (Jan to Feb)</td>
</tr>
<tr>
<td>Year 1 Summer</td>
<td>Adult Communication Clinic (Clinical &amp; Co-Curricular IPE)</td>
<td>OT – Year 1</td>
<td>MSLP 5015</td>
<td>Dr. Angela Kennedy, Dr. Cathy Torrington Eaton</td>
<td>Dr. Autumn Clegg (SHP-OT)</td>
<td>Summer (Jun to Jul)</td>
</tr>
</tbody>
</table>

Timely, efficient, effective, and equitable.

The World Health Organization’s definition of IPE, which is endorsed by IPEC, is “When students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes” (WHO, 2010; IPEC, 2016). This emphasis on students aligns well with UT Health San Antonio’s QEP, and the expectation is that student-to-student interprofessional learning will constitute the majority of IPE activities on campus. That said, HPAC provided guidance that offers an expanded interpretation of “from” and “with” highlighting the importance of student learning that takes place from and/or with practitioners or professionals (HPAC, 2019). Student-to-practitioner and/or student-to-professional IPE should be included in this table if it exists in the program.
Didactic IPE = IPE activities that take place in classroom and simulation settings as part of formal curricula (i.e., credit-bearing coursework); Co-Curricular IPE = IPE activities that take place outside of formal curricula (volunteer experiences that augment learning/professional development); Clinical IPE = IPE activities that take place in clinical settings as part of formal curricula (i.e., credit-bearing coursework).

IPE Partners = Students from other professions/programs involved including their year(s) of study

Assessment and Evaluation
The LINC Core IPE Measurement Plan at UT Health San Antonio forms the backbone of IPE assessment/evaluation for all UT Health San Antonio program-specific IPE plans. Valid and reliable tools to measure change in reactions, attitudes/perceptions, skills, and behaviors are included. Table 3 and Figure 1 below provide additional information on tools and administration schedules for the LINC Core IPE Measurement Plan.

Table 3. Tools and Targeted Learning Outcomes of the LINC Core IPE Measurement Plan

<table>
<thead>
<tr>
<th>Level</th>
<th>Measurement Tool*</th>
<th>Constructs</th>
<th>Items</th>
</tr>
</thead>
</table>
| Level 1 Reaction | Interprofessional Reactions Tool (IPRT) | • Preparation  
• Relevance  
• Importance  
• Satisfaction | 13 self-reported items:  
• 9 quantitative items using a 5-point Likert-type response scale; and,  
• 4 qualitative items soliciting written responses to open-ended prompts |
| Level 2a Attitudes/Perceptions | Student Perceptions of Interprofessional Clinical Education–Revised, Version 2 (SPICE-R2) | • Interprofessional Teamwork and Team-based Practice  
• Roles & Responsibilities for Collaborative Practice  
• Patient Outcomes from Collaborative Practice | 10 self-reported, quantitative items using a 5-point Likert-type response scale |
| Level 2b Skills | Interprofessional Education Collaborative Competency Self-Assessment Tool, Version 3 (IPEC-3) | • Interprofessional Interactions  
• Interprofessional Values | 16 self-reported, quantitative items using a 5-point Likert-type response scale |
Level 3 Behaviors

<table>
<thead>
<tr>
<th>Interprofessional Collaborative Competency Attainment Scale—Revised (ICCAS-R)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Communication</td>
</tr>
<tr>
<td>• Collaboration</td>
</tr>
<tr>
<td>• Roles &amp; Responsibilities</td>
</tr>
<tr>
<td>• Collaborative patient-family centered approach</td>
</tr>
<tr>
<td>• Conflict management/resolution</td>
</tr>
<tr>
<td>• Team functioning</td>
</tr>
</tbody>
</table>

21 self-reported, quantitative items using a 5-point Likert-type response scale

* Modified Kirkpatrick levels 2b (skills) and 3 (behaviors) are combined in this table because IPEC-3 and ICCAS-R report to measure both levels

** See Appendices I-IV for complete versions of selected measurement tools

Figure 1. Administration Schedule of the LINC Core IPE Measurement Plan

CORE IPE MEASUREMENT PLAN ADMINISTRATION LEGEND

- **A**: Interprofessional Reactions Tool (IPRT)
- **B**: Student Perceptions of Interprofessional Clinical Education—Revised, Version 2 (SPICE-R2)
- **C**: Interprofessional Collaborative Competency Attainment Scale—Revised (ICCAS-R)
The SLP IPE Plan was initially approved by the SHP IPE Committee and SHP Curriculum Committee on November 18, 2020.

The initial SLP IPE Plan was then updated and approved by the SLP Division within the Department of Communication Sciences & Disorders on September 10, 2021.

Sent to LINC on October 12, 2021