

## National IPE Survey

### 1. National Interprofessional and Prevention Health Professions Education Survey

**Dear Colleague:**

**There is an emerging interest in the U.S in expanding interprofessional education (IPE) in health professions educational programs. Many are convinced that IPE is the best way to prepare future health care professionals to practice collaboratively as members of health care delivery teams. We do not have much information at this time, however, about how much IPE is occurring. The Josiah Macy, Jr. Foundation has provided funding for a national survey to help answer this question.**

**This survey was developed by a team of health professions educators from Massachusetts, North Carolina and South Carolina under the auspices of the Healthy People Curriculum Task Force, a group representing the disciplines of allied health, dentistry, medicine, nursing, pharmacy and physician assistants. You have been identified as a leader of health sciences education that would be appropriate to complete the survey. If you do not believe you have the information you need to complete the survey, please forward it to someone at your institution who will be able to respond. We believe the results will provide an important status report about the prevalence of interprofessional and prevention education in our academic health centers. Knowing the prevalence is the first step to advancing IPE in the U.S.**

**We welcome your input and invite you to contribute your thoughts and opinions to this study. Please note, data from this questionnaire will only be reported in collective rather than individual form. We will not share your name, address, or any other information that would enable anyone else to connect information with you now or at any other time in the future. We do hope to do follow up with your institution at a later point and time to measure trends in emerging education.**

**We have tried to make the survey as user friendly as possible and anticipate it will not take you more than about 15-20 minutes to complete. We hope that you will answer as many questions as possible.**

**The results of this survey will be reported through publications and you can contact the primary investigator for information.**

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**In addition, you may contact any member of the research team:**

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**If you have questions or concerns, please contact Norma Epley, Director, University & Medical Center Institutional Review Board, East Carolina University, (252) 744-2914.**

1. Please give your consent to participate in this research.

I understand that there is minimal risk involved in participating in this research study and that it has received IRB review. I understand that I will be provided an opportunity to provide my contact information and that providing my information is optional. I also understand I can exit this survey at any time and decide not to participate even if I consent to participate.

- Yes, I consent to participate. This option will take you to the survey.
- No, I do not consent to participate. This option will exit you out of the survey.

### 2.

The purpose of this survey is to assess the status of Interprofessional Education (IPE) in academic health centers and health education programs across the United States. We would very much appreciate your completion of this brief survey which will provide an overview of IPE at the school or college level of your institution. If someone other than yourself is more appropriate to complete the survey, please forward the link to them with a request to respond on behalf of your school or college.

FOR THE PURPOSES OF THIS SURVEY, THE FOLLOWING DEFINITIONS ARE BEING USED:

**INTERPROFESSIONAL EDUCATION:** "When two or more professions learn with, from and about each other to improve collaboration and the quality of care" (Centre For The Advancement Of Interprofessional Education {CAIPE}, 2002).

**PREVENTION EDUCATION:** Education which teaches about "Anticipatory action taken to prevent the occurrence of an event or to minimize its effects after it has occurred. Prevention aims to minimize the occurrence of disease or its consequences. It includes actions that reduce susceptibility or exposure to health threats (primary prevention), detect and treat disease in early stages (secondary prevention), and alleviate the effects of disease and injury (tertiary prevention)."

**HEALTH PROMOTION:** "An intervention strategy that seeks to eliminate or reduce exposures to harmful factors by modifying human behaviors. Any combination of health education and related organizational, political, and economic interventions designed to facilitate behavioral and environmental adaptations that will improve or protect health."

Definitions from Turnock, Bernard. (2009) Public Health: What it is and how it works. 4th edition. Jones and Bartlett, Sudbury, MA (pg 516 and 509-510, respectively)

3. National Interprofessional and Prevention Health Professions Education Survey

Please read each statement carefully and respond "Yes" or "No" based on your knowledge of the health professions school or college at your institution.

\* 1. Please provide the following information:

University/Institution

Your College/School

Your Professional Discipline

State:

\* 2. Please provide us with the title you hold at the school or college at your institution.

\* 3. This school or college offers COURSES that include opportunities for interprofessional collaborative learning experiences.

- YES
- NO
- DO NOT KNOW

\* 4. This school or college offers COURSES in which students from one profession/discipline work with students from another profession/discipline to learn prevention.

- YES
- NO
- DO NOT KNOW

\* 5. This school or college offers CLINICAL ROTATIONS OR INTERNSHIPS that include opportunities for interprofessional collaborative learning experiences.

- YES
- NO
- DO NOT KNOW

\* 6. This school or college offers CLINICAL ROTATIONS OR INTERNSHIPS in which students from one profession/discipline work with students from another profession/discipline to learn prevention.

- YES
- NO
- DO NOT KNOW

\* 7. This school or college has personnel with designated responsibilities (e.g., administrative, teaching, or research) for interprofessional education.

- YES
- NO
- DO NOT KNOW

\* 8. This school or college has personnel with designated responsibilities (e.g., administrative, teaching, or research) for prevention education.

- YES
- NO
- DO NOT KNOW

\* 9. This school or college has interprofessional or similar language which appears in official institutional documentation (e.g., mission or vision statement, strategic plans, governance documentation).

- YES
- NO
- DO NOT KNOW

\* 10. This institution has an office, center, or other infrastructure that supports interprofessional efforts.

- YES
- NO
- DO NOT KNOW

### 4. Survey Feedback Opportunity

**Thank you for completing this survey. Some participants may wish to be apprised of findings gleaned from within their own institutions. If you would like to see results of this survey from your institution, please complete the following.**

\* 1. Please let us know your preferences:

	YES	NO
A. Would you like to see survey responses provided by colleagues at your institution?	<input type="radio"/>	<input type="radio"/>
B. Would you be willing to have your responses shared anonymously with institutional colleagues who responded "YES" to Item A?	<input type="radio"/>	<input type="radio"/>
C. Would you be willing to participate in a follow-up survey on this subject in the future?	<input type="radio"/>	<input type="radio"/>

\* 2. If you answered "Yes" to items A, B, or C, please consent to supplying your contact information. However, you are still at liberty to decline.

- I consent to supply my contact information. This option will take you to the contact form.
- I do not wish to supply my contact information. This option will exit the survey.

5. Contact Information

If you consented to provide your contact information. Please provide it below:

1. Contact Information:

<b>Name:</b>	<input type="text"/>
<b>Institution:</b>	<input type="text"/>
<b>Address:</b>	<input type="text"/>
<b>Address 2:</b>	<input type="text"/>
<b>City/Town:</b>	<input type="text"/>
<b>State:</b>	<input type="text" value="-- select state --"/>
<b>ZIP/Postal Code:</b>	<input type="text"/>
<b>Email Address:</b>	<input type="text"/>
<b>Phone Number:</b>	<input type="text"/>

**6. SURVEY COMPLETED**

**Thank you for your time and effort in reviewing and /or completing this survey.**

**If you did not participate, please consider sending the link to someone you feel is more appropriate for your institution.**