Collaborative Approach to Overcoming Barriers to Interprofessional Education Through Legislative Reform: A Colorado Case Study

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Objectives

- Describe the legal challenge that existed for Colorado’s IP clinical education.
- Describe results of a survey of US intern legislation/rules
- Identify strategies to address the challenges, including:
  - Educational options
  - Legislative actions
- Identify stakeholders associated with the issue
- Anticipate the support and opposition and delineate the risks and benefits of each strategy with respect to each stakeholder
Change doesn’t usually happen gradually. There is a tipping point.

The power of context: small or subtle things that create change
Interprofessional education (IPE) has been offered to University of Colorado professional degree students for fifteen years:
20 hours over two semesters of professional ethics and interprofessional approaches to health care decision making
Other activities

• Interprofessional orientation (13 years)
  – 6 hours in small groups focusing on professional qualities and collaboration
• Interprofessional Health Fair (10 years)
  – Two week health fair screening rural residents with limited primary care access
The Tipping Point: Kaiser Interdisciplinary Rural Track Training and Service Grant

• Three year grant 2009-2012

• Goals:
  – Increase the overall health care presence within rural communities
  – To create the foundation for experiential interprofessional training in rural health care settings
The facts about IPE

- Institute of Medicine suggests schools pursue IPE in order to optimize patient care.
- ACPE and other accreditors request professional programs to pursue IPE.
- Pharmacy students are being asked to participate in interprofessional clinical education.
The facts about IPE

• Pharmacy students are an abnormality as they are the only profession licensed as students

• Current requirements for intern licensure in Colorado required a pharmacist to supervise interns, thus necessitating a licensed pharmacist for each IPE experience
The desired outcome

Allow pharmacy interns to participate in team-based patient-specific care activities when those activities are supervised by a health-care provider who is licensed to provide those services.
Gathering Background Information

- NABP model practice act
- Accreditation standards for all health professions
- National guidelines regarding IPE
- Is pharmacy intern licensure desirable and/or necessary?
  - 5 states (encompassing 14 schools of pharmacy) do not require intern licensure
The Colorado Story

- Colorado Department of Regulatory Agencies
  - 2011 Sunset Review of the Colorado State Board of Pharmacy
    - Periodic review mandated by Colorado statute
    - Analysis of performance of each state board
    - Assesses need for regulation
CO Pharmacy Sunset Review

• Comprehensive review of the Pharmaceuticals and Pharmacists Act
• The Act provides regulatory oversight for pharmacy businesses, pharmacists, and pharmacy interns
• Provided the opportunity for revising statutes covering intern supervision
Pharmacy Intern Supervision

- Prior statute required pharmacy interns to be supervised by registered pharmacists while engaging in the practice of pharmacy.
- Sunset Review included robust discussions about the need to regulate and license pharmacy interns in Colorado.
Pharmacy Intern Stakeholders

- Efforts to expand quality IPE opportunities for students required support from other stakeholders
  - Colorado Pharmacy Coalition
    - A broad coalition of pharmacy stakeholders providing input on professional matters
  - Colorado Pharmacists Society
  - Colorado State Board of Pharmacy
Pharmacy Intern Stakeholders

• Regis University School of Pharmacy
  – Joined CU as Colorado’s second school of pharmacy
  – Inaugural class graduated 2013

• Developed a collaboration with CU as new experiential department and activities were created
Pharmacy Intern Supervision

• New legislation provided for supervision of pharmacy interns by regulated health professionals
  – Within the context of curricula of approved schools of pharmacy

• Details of supervision to be included in rules promulgated by the Colorado State Board of Pharmacy
Pharmacy Intern Supervision

• State Board identified 12 health professionals permitted to supervise interns, including:
  – Physicians and physician assistants
  – Registered and advanced practice nurses
  – Dentists
  – Podiatrists
  – Veterinarians
Pharmacy Intern Supervision

• Overlap in scope of practice must exist between pharmacy and supervising profession
• State Board of Pharmacy will allow accreditation standards to regulate the training concerns of pharmacy students
ACPE Guidance

• ACPE accreditation statement supports non-pharmacist preceptors in support of high quality inter-professional educational experiences
  – Pharmacy faculty involvement
  – Maximum one elective APPE
Identify strategies to address the challenges of IPE:

- What are the educational options?
- What are the legislative actions?
- Do interns need to be licensed?
Identify stakeholders associated with the issue:

• Who has concerns with the provision of Interprofessional education?

• Who has concerns over the licensure of pharmacy students?
• Using the strategies you identified, anticipate
  
  – 1) the support and opposition
  – 2) perceived risks and benefits with respect to each stakeholder
Conclusion: the power of context

• The “tipping point” was getting the grant and creating the new required curriculum

• Previous successes
  – Ethics, IP Health Fair, etc. helped foster a receptive climate for IPE activities
  – Shared goals with other Schools of Pharmacy
  – Collaborative environment with pharmacy stakeholders

• The “sudden” change to pharmacy law was actually years in the making
Harness the power of context

• Look for existing partners to build IPE
• Recognize that a series of smaller successes can help lead to a big change
Questions or comments?