Interprofessional Education/Interprofessional Practice (IPE/IPP) in CSD Programs Trend Report 2015–2023

Introduction

The American Speech-Language-Hearing Association (ASHA) established Strategic Objective 2: Advancing Interprofessional Education and Interprofessional Collaborative Practice (IPE/IPP) as part of its *Strategic Pathway to Excellence 2015–2025*. As part of this initiative, ASHA included questions in the annual *CSD Education Survey* fielded to academic programs in 2015 through 2023 to gather baseline and progress data on the number and percent of programs that employ IPE approaches that could encompass aspects of both IPE and IPP in the academic and/or clinical curriculum. The *CSD Education Survey* is fielded annually to all U.S. higher education institutions that offer communication sciences and disorders (CSD) degree programs. The IPE/IPP questions were posed to graduate entry-level and post–entry-level clinical degree programs in audiology and speech-language pathology. The data collected were used as the baseline and progress measure for ASHA's IPE/IPP strategic objective performance measure #1, percent of CSD academic programs that have IPE approaches in place.

Strategic Objective 2: Advance Interprofessional Education and Interprofessional Collaborative Practice (IPE/IPP)

Outcome: Academic programs employ IPE models of personnel preparation and both students and ASHA members are engaging in interprofessional collaborative practice

Performance measures: 80% by 2025

- 1. Percent of CSD academic programs that have IPE approaches in place
- 2. Percent of ASHA members participating in interprofessional collaborative practice
- 3. Percent of National NSSLHA students engaged in interprofessional clinical practicum experiences

The IPE/IPP questions posed to academic programs are included in the Appendix of this report. The IPE/IPP questions were slightly modified over time as our knowledge about IPE/IPP desired behaviors expanded. From survey years 2015—present, programs were asked if they implemented IPE/IPP approaches in the curriculum. Programs were counted as implementing IPE/IPP if they answered "yes" to the primary IPE/IPP question. From survey years 2016—present, programs were asked to indicate the types of IPE/IPP activities that they implemented from a closed set of response options plus the opportunity to complete an "Other" text box to indicate additional ways in which they implemented IPE/IPP. Since 2016, programs were asked whether they incorporated explicit IPE learning constructs, competencies, and outcomes that are targeted in IPE learning activities (e.g., Interprofessional Education Collaborative [IPEC] Core Competencies).

Beginning with the 2019 *CSD Education Survey,* four of the response options provided were designated as a **core IPE framework** that is typically implemented by exemplary IPE Centers recognized by the <u>National Center for Interprofessional Practice and Education</u>. The four core components include the following:

1. Explicit IPE learning constructs, competencies, and outcomes are targeted in IPE learning activities (e.g., IPEC Core Competencies).

- 2. Two or more professions are part of the IPE/IPP approach.
- 3. IPE/IPP outcomes target a continuum of learning (e.g., attitudes/perceptions, knowledge/skills, performance in practice).
- 4. Learning experiences connect IPE/IPP academic learning to clinical practice.

This report presents trend data on key IPE/IPP data points collected and monitored from 2015 through 2023. Specifically, the data points provided include the following.

Number and percent of all . . .

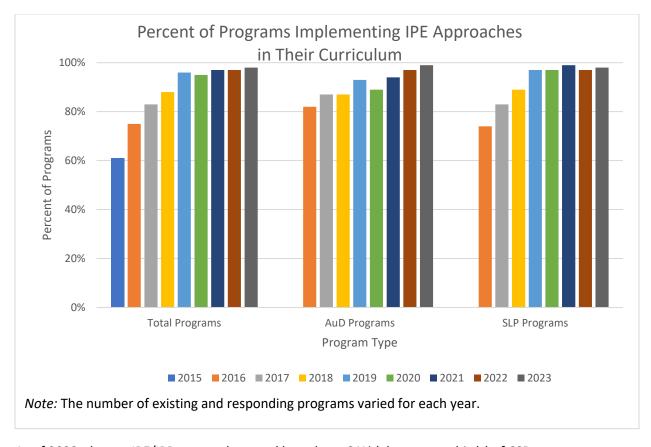
- CSD graduate clinical degree programs, entry-level doctor of audiology (AuD) programs, and master's speech-language pathology programs reporting that they implement IPE/IPP approaches in academic and/or clinical curriculum (2015–2023).
- CSD graduate clinical degree programs, entry-level AuD programs, and master's speech-language pathology programs using elicit IPE learning constructs and outcomes targeted in IPE learning activities (e.g., IPEC Core Competencies) (2016–2023).
- CSD graduate clinical degree programs, entry-level AuD programs, and master's speech-language
 pathology programs for which IPE/IPP learning outcomes target a continuum of learning (e.g.,
 attitudes/perceptions, knowledge/skills, performance in practice) (2019–2023).
- CSD graduate clinical degree programs, entry-level AuD programs, and master's speech-language
 pathology programs that incorporate the core IPE framework typically implemented by exemplary
 IPE Centers recognized by the National Center for Interprofessional Practice and Education (2019
 2023).
- CSD graduate clinical degree programs that implement the various IPE/IPP approaches comprising the closed-set response options (2016–2023).

Utilization of IPE/IPP Approaches by CSD Programs

CSD programs increased the incorporation of IPE/IPP approaches in the academic and/or clinical curriculum for entry-level graduate clinical degree programs from 61% (175/288 programs) in 2015 to 98% (362/371 programs) in 2023 (see Figure 1). The ASHA Strategic Objective performance measure for 80% of academic programs to incorporate IPE approaches by 2025 was achieved for all graduate clinical degree programs, AuD programs, and master's pro speech-language pathology programs. We continue to monitor the sustainability of IPE infusion within CSD programs during the 10-year strategic plan (2015–2025). To date, IPE/IPP increased in

- all entry-level graduate clinical degree programs from 61% (175/288) in 2015 to 98% (362/371) in 2023;
- AuD programs from 82% (58/71) in 2016 to 99% (76/77) in 2023; and
- master's speech-language pathology programs from 74% (187/253) in 2016 to 98% (279/286) in 2023.

Figure 1. Percent of all CSD graduate clinical degree programs, entry-level AuD programs, and master's speech-language pathology programs that reported they implement IPE/IPP approaches in academic and/or clinical curriculum (2015–2023).



As of 2023, the top IPE/IPP approaches used by at least 64% (almost two-thirds) of CSD programs included the following.

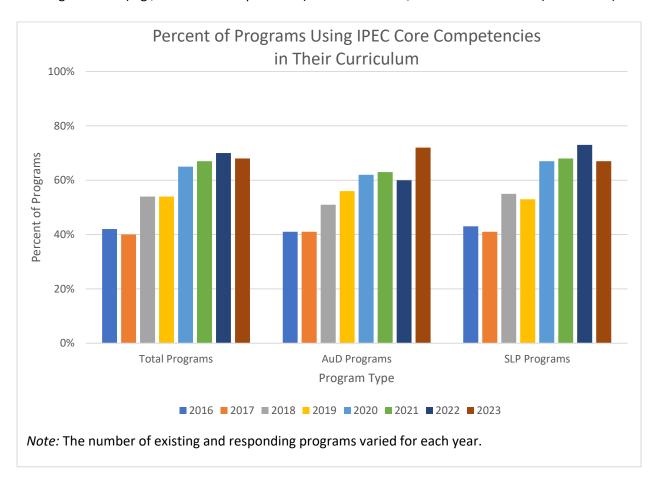
- Two or more professions are part of the IPE/IPP approach 87%
- Learning experiences connect IPE/IPP academic learning to clinical practice 84%
- Case-based learning is used with an interprofessional team approach 79%
- Clinical practica incorporate interdisciplinary teams or cases 69%
- Explicit IPE learning constructs, competencies, and outcomes are targeted in IPE learning activities — 68%
- IPE/IPP outcomes target a continuum of learning (e.g., attitudes/perceptions, knowledge/skills, performance in practice) 64%

Infusion of IPE/IPP Competencies

The incorporation of explicit IPE learning constructs such as the IPEC Core Competencies by CSD programs increased by more than 20% between 2016 and 2023 (see Figure 2).

- Infusion of IPE competencies increased in all entry-level graduate clinical degree programs from 42% (107/252) in 2016 to 70% (246/352) in 2022 and 68% (246/362) in 2023.
- Infusion of IPE competencies increased in AuD programs from 41% (24/58) in 2016 to 72% (55/76) in 2023.
- Infusion of IPE competencies increased in master's speech-language pathology programs increased from 43% (80/187) in 2016 to 67% (188/279) in 2023.

Figure 2. Percent of all CSD graduate clinical degree programs, entry-level AuD programs, and master's speech-language pathology programs using explicit IPE learning constructs and outcomes targeted in IPE learning activities (e.g., IPEC Core Competencies) in academic and/or clinical curriculum (2016–2023).



Continuum of Learning Activities

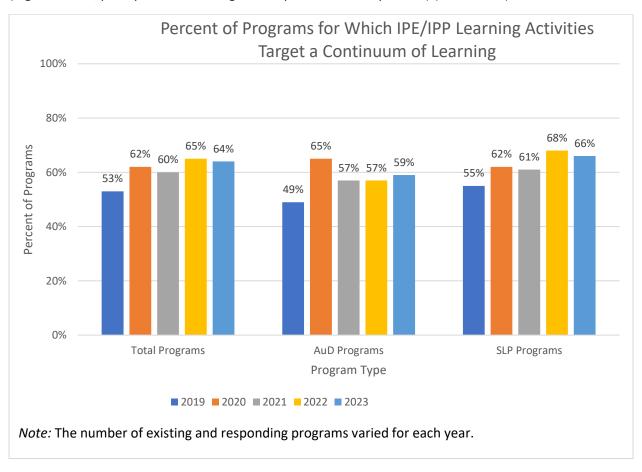
Effective IPE/IPP learning occurs over time and requires repeated exposure along a continuum of learning experiences with targeted learning outcomes to shape the acquisition of knowledge, skills, and aptitudes. IPE/IPP survey questions were included in 2019 to address this learning objective.

Survey results indicate that the incorporation of a continuum of learning activities (e.g., attitudes/perceptions, knowledge/skills, performance in practice) increased by 10%–12% between 2019 and 2023 (see Figure 3).

Incorporating a continuum of IPE/IPP learning activities increased in . . .

- all entry-level graduate clinical degree programs from 53% (177/332) in 2019 to 65% (228/352) in 2022 and 64% (230/362) in 2023;
- AuD degree programs from 49% (33/68) in 2019 to 59% (45/76) in 2023; and
- master's speech-language pathology degree programs from 55% (141/257) in 2019 to 66% (183/279) in 2023.

Figure 3. Percent of all CSD graduate clinical degree programs, entry-level AuD programs, and master's speech-language pathology programs for which IPE/IPP learning activities target a continuum of learning (e.g., attitudes/perceptions, knowledge/skills, performance in practice) (2019–2023).



Core IPE Framework

An analysis of the IPE/IPP approaches reported by CSD programs help to ascertain how IPE/IPP efforts are taking shape over time and how closely they align with a **core IPE framework** that is typically implemented by exemplary IPE Centers recognized by the National Center for Interprofessional Practice and Education. The four core IPE framework components are those in which

- 1. explicit IPE learning constructs, competencies, and outcomes are targeted in IPE learning activities (e.g., IPEC Core Competencies);
- 2. two or more professions are part of the IPE/IPP approach;

- 3. IPE/IPP outcomes target a continuum of learning (e.g., attitudes/perceptions, knowledge/skills, performance in practice); and
- 4. Learning experiences connect IPE/IPP academic learning to clinical practice.

Despite a high percentage of programs (98%) reporting that they implement at least one IPE/IPP approach, as of 2023 only 47% (36/76) of AuD programs and 52% (145/279) of master's speech-language pathology programs incorporate all four of the core IPE framework components representative of exemplary IPE programs into academic and/or clinical curriculum (Figure 4). However, survey responses also indicate a positive shift in the number of core IPE framework components being implemented over time. That is, a decline in implementation of one or two core IPE framework components has occurred for AuD programs—from 41% (28/68) in 2019 to 29% (22/76) in 2023—with a simultaneous increase in the implementation of four core IPE framework components during the same period—from 37% (25/68) to 47% (36/76). Similarly, a decline in implementation of one or two core IPE framework components has occurred for SLP programs from 44% (112/257) in 2019 to 28% (79/279) in 2023 with an accompanying increase in the implementation of four core IPE framework components during the same period from 37% (95/257) to 52% (145/279) (see Figure 5).

Figure 4: Percent of entry-level AuD programs and master's speech-language pathology programs that incorporate all four core IPE framework components into academic and/or clinical curriculum (2019–2023).

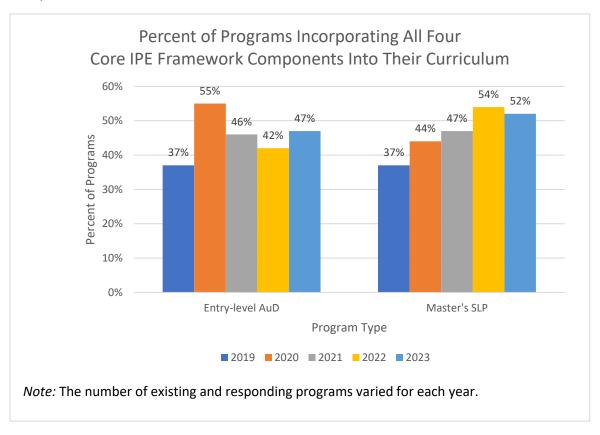
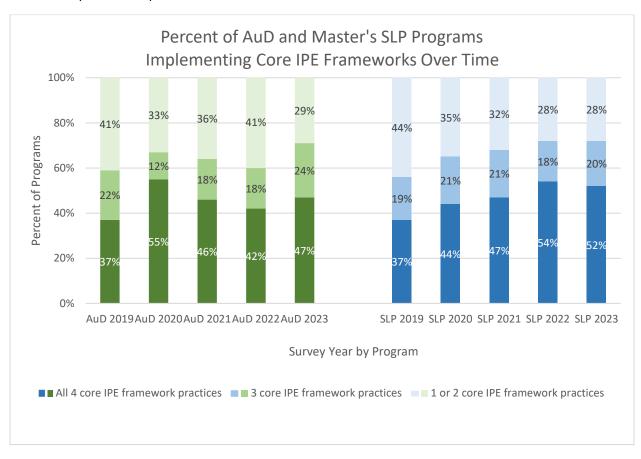


Figure 5: Percent of entry-level AuD programs and master's speech-language pathology programs that incorporate one or two, three, or all four core IPE framework components into academic and/or clinical curriculum (2019–2023).



Appendix: 2023 CSD Education Survey IPE/IPP Survey Questions

Does the degree program employ interprofessional education or interprofessional practice (IPE/IPP) approaches in the academic and/or clinical curriculum?

•	
	Yes No Data not available
Please	e indicate the IPE/IPP approaches that are employed. (Select all that apply.)
IPE/IPI	P Framework
	Explicit IPE learning constructs, competencies, and outcomes are targeted in IPE learning activities (e.g., Interprofessional Education Collaborative [IPEC] Core Competencies)
	Two or more professions are part of the IPE/IPP approach IPE/IPP outcomes target a continuum of learning (e.g., attitudes/perceptions, knowledge/skills, performance in practice)
	Connecting IPE/IPP academic learning to clinical practice Instructing about the role and responsibility of interprofessional teams in changing systems and policies to achieve greater diversity, and equitable and inclusive service delivery outcomes
IPE/IPI	P Experiences and Methods
	Combining faculty across disciplines to teach courses that apply across multiple disciplines
	Integrating students from two or more professions in interprofessional coursework Case-based learning using an interprofessional team approach Problem-based learning using an interprofessional team approach Clinical practica using interdisciplinary teams or cases Simulations using an interprofessional team approach Conducting grand rounds with two or more professions participating Conducting a debrief period with students and facilitators after IPE learning activity
	Interprofessional research projects Journal groups that include two or more professions
	Interprofessional service-learning projects
	IPE events (e.g., 1-day IPE events or workshops)
	Other (please specify)