INTRODUCTION
The West Michigan Interprofessional Education Initiative, led by Grand Valley State University, and in partnership with the Helen DeVos Children's Hospital (HDVCH) tested an innovative interprofessional patient safety curriculum. This study addressed the need for health professionals to communicate effectively in the provision of safe, quality, patient-centered care.

The safety program research was designed to provide interprofessional education learning experience to health professions students and staff. The engaged learners:

- Nursing students n=78
- Medical students n=38
- Physician Assistant students n=3
- Pediatric residents n=50
- 7 Children’s staff n=43

METHODOLOGY
- Didactic, simulation and safety rounding completed by staff and students.
- Pre and post-tests administered to students during the didactic phase. Staff had completed the didactic prior to implementation of the study.
- Post-simulation and METI tests were administered for students and staff.
- Students and staff participated in a safety rounding experience, a post-clinical knowledge test and an overall program satisfaction survey.

SPECIFIC AIMS
a) Evaluate the effectiveness of simulation and safety rounding on basic safety behavior knowledge (communication) and satisfaction with selected learning experiences of students and staff on a 24 bed unit in a 206 bed children’s hospital
b) To determine the effect of the safety program on indicators include:
   1. The serious safety events rate
   2. The number of precursor events
   3. The number of near miss events

PHASE 1: Didactic
• The two hour didactic patient safety content module program is part of the system-wide patient safety culture transformation developed at HDCH, and presented by patient safety consultants to staff.

PHASE 2: Simulations
• Nine recorded safety vignettes illustrating specific communication behaviors and a live simulation with interprofessional team participants (staff and students).

PHASE 3: Safety Coach
• Safety rounding experience with a safety coach on 7 Children’s pilot unit.

KNOWLEDGE EVALUATION

CONCLUSIONS
• Didactic instruction made a difference in knowledge gained (p-value < 0.05)
• Feedback from participants supported the idea that simulation helped critical thinking and decision-making abilities
• Knowledge gained after didactic for students was maintained throughout the clinical rotation
• Safety rounding coaches reported that students were able to identify safety behaviors
• Overall 7 Children’s had fewer reported safety events than total hospital