



EVOLUTION OF THE INTERPROFESSIONAL STUDENT TEAM: ZERO TO SIXTY IN TWO WEEKS

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“Interprofessional Education for Advanced Practice Nurses”

BACKGROUND

- Implementation of theory based courses-IPEC Competencies¹ (didactic)
- Challenges of knowledge application²
 - Communication and understanding each other's language
 - Coordinate actions
 - Patient-centered care
 - Use of available technologies
 - Addition of standardized patients (SP) experience tied to competencies-Clinically complex cases



RESEARCH QUESTION

Can movement from knowledge to skill acquisition become expeditious?



COURSE

- Time frame: two week rotation; ran 8 times in 2015
- N= 181 student participants –graduate level
 - Athletic Training (MS): 8
 - Clinical Counseling (MS & PhD): 8
 - Medical (MD): 48
 - Nursing (MSN & PhD): 56
 - Physical Therapy (DPT): 44
 - Speech –Language Pathology (MS): 17



LEARNING ACTIVITIES

- Week 1: meet online-knowledge acquisition
 - Complete 4 online modules for knowledge
 - Challenge: Develop a team plan of care for a patient case following IPEC objectives
 - Present to whole class when meet for SP session
- Week 2: meet in person-face to face emersion
 - Complete two SP cases as “team”: Teenager oncology and Elderly homebound veteran
 - Group interview of SP
 - Pause for feedback
 - Finish interview with plan of care



MEASUREMENT

- Tool: UB Interprofessional Competency Scale³ – modified-faculty measured
 - Likert scale 1-7
 - Four domains: values/ethics; roles/responsibilities; IP communication; teams/teamwork
 - 16 statements
- Four times throughout the day
 - 2 times for each SP case
 - During first part of interview (pre-test)
 - After feedback (post-test)



UNIVERSITY OF BUFFALO IP COMPETENCY TOOL



University at Buffalo

IPEC Competency Scale

The content in the following statements contain items relevant to collaborative practice. Please respond to each statement indicating the degree to which the student exhibited this competency.

	Strongly Disagree	Mostly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Mostly Agree	Strongly Agree
Values/Ethics							
1. Patient/client care plans and treatment goals incorporate best practice guidelines from nursing and dental professions.							
2. Respect and ability to work together are evident among team members.							
3. Team members negotiate the role they want to take in developing and implementing the patient/client plan of care.							
4. Team members encourage patients/clients to be active participants in care decisions.							
5. Information relevant to health care planning is shared with the patient/client.							
Roles/Responsibilities							
6. Team members are respectful of each other's roles and expertise.							
7. Engages other health care professionals who compliment his/her own professional expertise to develop strategies to meet specific patient care needs.							

	Strongly Disagree	Mostly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Mostly Agree	Strongly Agree
IP Communication							
8. Addresses patients/clients concerns effectively through consultation and discussion							
9. Uses effective communication strategies to share patient/client treatment goals and outcomes of care.							
10. Reports relevant information relating to patient/client status or care plan to the appropriate team member							
11. Utilizes effective communication to facilitate discussions and interactions that enhance team function.							
12. Organizes and communicates information with patients and health team members in a form that is understandable, avoiding discipline-specific terminology when possible.							
13. Expresses knowledge and opinions to team members involved with patient care with confidence, clarity, and respect working to ensure common understanding of information and treatment and care decisions.							
Teams and Teamwork							
14. Members of the team have a good understanding of patient/client care plans and treatment goals.							
15. Roles and responsibilities for patient/client care are clearly evident.							
16. Engages other health professionals in shared patient-centered problem solving.							



RESULTS-

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EVOLUTION BEYOND KNOWLEDGE ACQUISITION

	Pre		Post		p-value
	X	Range	X	Range	
Values	23.2	6-32	29.6	18-35	.000
Role	10.4	5-14	12.0	7-14	.000
Communication	27.1	8-41	34.2	12-42	.000
Teamwork	13.2	5-20	17.5	10-21	.000
Total	73.9	25-106	93.3	53-112	.000



STUDENT COMMENTS

- “Realism, variety, having more than one person to talk to, working as a team”
- “Having a professional leader give feedback, having a second conference after feedback”
- “How complex the cases were – challenging and thought provoking”
- “It was very good to see what the other professions are like “in action”. I learned a lot about how they each handle their roles in an interprofessional setting”



CONCLUSIONS

- Ability to form a team quickly when specific task is given
- Ability to use meeting online to expedite process
- Ability to measure application of competencies
- Research Suggestions-future use and follow-up in real clinical settings



REFERENCES

1. Interprofessional Education Collaborative Expert Panel. (2011). Core competencies for interprofessional collaborative practice: Report of an expert panel. Washington, D.C.: Interprofessional Education Collaborative.
2. Newhouse RP, Spring B. Interdisciplinary Evidence-based Practice: Moving from Silos to Synergy. *Nursing outlook*. 2010;58(6):309-317. doi:10.1016/j.outlook.2010.09.001.
3. UB IPEC Competency Scale-unpublished

