

Developing a Collaborative Longitudinal Interprofessional Education (IPE) Program Using Standardized Patients

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Introduction

- Communication and collaboration amongst health professionals results in delivery of safer, better health care and improved patient health
- IPE for healthcare professionals has been recommended by the IOM since 1972, but today the U.S. still struggles to deliver it effectively and consistently
- The Interprofessional Education Collaborative (IPEC) core competencies were used to design an experiential IPE curriculum

Desired Outcomes

- Prepare nurse practitioner students for clinical practice through team building, collaborative problem solving and care-coordination
- Help advance practice nursing and other health profession students be workforce ready by providing IPE clinical training opportunities
- Enhance interprofessional collaboration skills of all healthcare students by improving communication skills and team dynamics

Table 1 Methods: Overview of IPE Program

Faculty	Faculty and staff from 3 universities and the following programs/departments planned and implemented the IPE program: Nursing (DNP) Social Work Medicine Pharmacy Nutrition and Exercise Physiology Simulation Information Technology Interprofessional Education
Students	81 Students from 3 different universities and the following health profession programs participated: Doctor of Nursing Practice- Family Nurse Practitioner (2nd year) Doctor of Pharmacy (3rd year) Medicine (2nd year) Master of Science Dietetics (1st year) Master of Social Work (2nd year)
Program	Students were divided into 12 interprofessional (IP) teams (about 7 students per team; 1 to 2 DNP students per team) Teams stayed together across the academic year Teams often included students from more than one physical location Technology (video conferencing) allowed communication across distant locations Students were trained in TeamSTEPPS to learn effective communication strategies Faculty created an evolving patient case to simulate working with an older adult with multiple chronic conditions Standardized patients (SP) were used to play the role of the patient IP teams had 4 interactive cases with the SP over the academic year Teams interviewed the SP, made an assessment, created a plan of care, then reviewed it with the SP Qualitative surveys were used for program evaluation and were based on the 4 IPEC Core Competency domains. Survey questions for students included: <ul style="list-style-type: none"> -Identify personal characteristics important to enhance ability to collaborate with a team -Reflect on benefits of an IP approach to caring for patients with multiple chronic conditions -Consider impact of IP team experience on one's own clinical reasoning skills

Results

Students identified the following personal characteristics as being most important for team collaboration:

- Ability to listen and communicate
- Respect for the patient and other healthcare professionals
- Open-mindedness and flexibility

Results (cont.)

Most student expressed that working in IP teams:

- Challenged their thinking in a positive way
- Enhanced their clinical reasoning skills
- Provided more holistic and higher quality care to the patient

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