An Interprofessional Case-based Experience to Improve Health Professions Students’ Interprofessional Competency

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Background and Purpose

- Interprofessional education (IPE) is an educational approach that encourages collaboration among health professionals.
- Research supports that IPE improves health professions students’ interprofessional attitudes and skills thereby leading to improved patient outcomes.
- IPE can be implemented in curriculum through structured learning experiences that address IPE core competencies.

Methods

Before the case study:
- Students created an elevator pitch describing their specialty.
- Students completed the pre-ICCAS survey.

Using the following scale, please rate your ability for each of the following statements: 1 = “Horrible”; 2 = “Poor”; 3 = “Fair”; 4 = “Very good”; 5 = “Excellent”

1. Promote effective communication among members of an interprofessional (IP) team

During the case study (1.5 hours):
- Students listened to an introduction on interprofessional teamwork and shared their elevator pitch.
- Students reviewed the case and prioritized goals reflecting the patient’s goals and their own role in the healthcare field.

After the case study:
- Students reflected and shared takeaways on the experience.
- Students completed the post-ICCAS survey.

Results

- Students improved across every item on the 21 questions ICCAS survey. The greatest increases were in Q6, 7, 12.
- Students vocalized their support, and almost all saw it as a valuable learning experience.

Conclusion: this pilot supports that IPE implemented in structured learning experiences improves student confidence in their own interprofessional competency.

Future goal: increase the IPE exposure and expand the diversity of patient cases to represent other key challenges.

Discussion

- Students improved across every item on the 21 questions ICCAS survey. The greatest increases were in Q6, 7, 12.
- Q6: ability to seek out team members to address issues
- Q7: ability to work effectively with team members to enhance care
- Q12: ability to recognize how others’ skills and knowledge complement and overlap with my own

Students vocalized their support, and almost all saw it as a valuable learning experience.

Conclusion: this pilot supports that IPE implemented in structured learning experiences improves student confidence in their own interprofessional competency.

Future goal: increase the IPE exposure and expand the diversity of patient cases to represent other key challenges.

References

1. van Diggelen C, Roberts C, Burgess A, Melis C. Interprofessional Education: tips for design and implementation. BMC Medical Education. 2020;20(S2).

Figure 1. Visual representation of a method for IPE implementation involving structured learning experiences with interprofessional collaboration and the 4 core competencies of IPE. Overall, this leads to improved learner and patient outcomes.

Figure 2. Chart showing relative proportions of health professions students during the structured learning experience.

Figure 3. Example item from the ICCAS survey – a validated instrument to evaluate effectiveness of interprofessional experiences using self-reported interprofessional competency.

Figure 4. Graph comparing student responses (n=39) on the pre-and post-ICCAS survey. Results were converted numerically using the following scale: poor = 1, far = 2, good = 3, very good = 4, excellent = 5. Scores were averaged for the pre- and post- ICCAS survey and the difference (Post - Pre) is graphed above.

Figure 5. Two example student responses on the ICCAS survey following the structured learning experience.

Student impressions:
- Question 21: Compared to before the learning activity, my ability to collaborate interprofessionally is: “very good”
- 97% thought the learning experience was valuable

“An effective exercise - I learned from the other team members”
“IT was great to work with multiple professions”

Figure 6. Chart showing relative proportions of health professions students during the structured learning experience.