Title: A Fast Pivot to Expand Interprofessional Education Through Online Team Training

Name(s) of presenters and school affiliation

Primary Presenter
a. Allison Shorten, PhD, RN, FACM, FAAN.
   b. Department Chair, Acute, Chronic & Continuing Care, UAB School of Nursing. Director, Office of Interprofessional Curriculum, Center for Interprofessional Education and Simulation
   c. Professor
   d. ashorten@uab.edu

Other Presenters
a. Penni Watts, PhD, RN, CHSE-A
   b. Director of Clinical Simulation, UAB School of Nursing. Assistant Director, Office of Interprofessional Curriculum
   c. Associate Professor
   d. piwatts@uab.edu

a. Shelly Camp
   b. Administrator, Office of Interprofessional Curriculum
   c. Office Service Specialist III
   d. Scamp6@uab.edu

a. Peter Bosworth, MBA
   b. Program Director, Office of Interprofessional Curriculum
   c. Program Director II
   d. bosworth@uab.edu
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Background:

Interprofessional team-based training (IPTT) provides a clinically relevant opportunity for students from multiple professions to experience learning across the four interprofessional (IP) competency sub-domains. Implemented over 10 years, prior to the COVID pandemic, IPTT served approximately 900 students in two cohorts, in-person each year. COVID-19 forced IPTT faculty to pivot swiftly to online delivery via Zoom, providing an opportunity for health professions students to obtain clinically focused IP learning experiences.

Aim:

The aim was to take a face-to-face IPTT activity and successfully convert it to an online offering and expand its availability to remote learners.

Methods:

Students from nursing, medicine, dentistry, optometry, pharmacy, physical therapy, occupational therapy, laboratory sciences, social work, and public health are placed in groups of approximately 10-15 students. Students prepare an elevator pitch to introduce their profession to their team. Groups are divided into smaller teams to focus on a patient case designed to address social determinants of health. Trained facilitators use a video and training guide for the 1.5-hour experience. While developing their plan together, student teams are guided by facilitators to explore professional roles, values, priorities, and most importantly, communicate with students from other professions.
Results:

After successfully piloting ‘IPTT on-line’ during summer 2020 (18 sessions), ‘IPTT on-line’ served 324 learners from 10 professions in Fall 2020, and 447 learners from 12 professions in Spring 2021. Student and facilitator feedback revealed significant advantages to on-line delivery including greater scheduling flexibility, increased access to “distance” students, smaller group size and expanded reach to new professions. Students shared that they enjoyed the learning experience, valued the opportunity to engage in IP teamwork, and acknowledged the value of other professions in planning patient care. ICCAS survey 20-item mean scores also showed improvements in perceptions of IP knowledge and competence, increasing from 3.45 to 4.11 (Cohen’s D = 1.31) before and after the IPTT experience.

Conclusion:

The ability to run IPTT ‘on-demand’ balances initial logistical challenges such as re-training facilitators and adapting to online engagement strategies. Future evaluation will examine outcomes for on-line cohorts across different professions with pre-COVID delivery and strategies for sustaining hybrid delivery.