What? So What? Now What?
Student Reflections on IPE and Collaborative Practice

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Disclosures

This study was funded in part by Grant Number D56HP20783 from HRSA / HHS (Rabinowitz H, PI, 2010-2015). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the HRSA / HHS.
Outline

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  • Description of Health Mentors Program (HMP)
  • Purpose of Study

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Background

Core Competencies for Interprofessional Collaborative Practice
Sponsored by the Interprofessional Education Collaborative*

Report of an Expert Panel
May 2011

*IPiC sponsors:
American Association of Colleges of Nursing
American Association of Colleges of Osteopathic Medicine
American Association of Colleges of Pharmacy
American Dental Education Association
Association of American Medical Colleges
Association of Schools of Public Health
Background - Health Mentors Program

- Developed a longitudinal mentorship chronic illness curriculum, called the Health Mentors Program (HMP).
- Teams composed of first- and second-year students from medicine, nursing, pharmacy, occupational therapy, physical therapy and couples and family therapy.
- Student groups are paired with a “health mentor,” a community volunteer living with one or more chronic health conditions or disabilities.
3 Goals:

1) Value the contributions of each member of the interprofessional team
2) Understand the perspective of the patient and value patient-centered care
3) Appreciate how a person’s health conditions and impairments interact with personal and environmental factors
Self Reflective Writing

• Interprofessional education (IPE), and HMP specifically, recognizes the need for the development of self-reflection and self-awareness as a tool for professional development.

• Self-reflective writing
  • Identified as an effective exercise through which students can explore their own values, beliefs and attitudes, as well as their implication for future practice.
  • Assist medical educators in detecting where learning competencies are and are not being achieved.

Purpose

• Perform qualitative analysis of student reflection essays to evaluate the impact of the Health Mentors curriculum on what students value and personally learn from their participation.
Methods

- After completion of 2\textsuperscript{nd} year of longitudinal curriculum, all students were asked to submit one personal reflection relative to HMP using the Rolfe Model of reflection-in-action.

"Think critically about how you are affected by your participation in the Health Mentors Program and how you will be able to apply what you are learning to your future as a healthcare professional."

Methods

• IRB Exemption

• 264 papers were de-identified and a random sample was used for this qualitative analysis.

• 6 independent coders from 4 different disciplines reviewed the student reflections.
Responses were qualitatively analyzed using conventional content analysis guided by grounded theory.

Consensus was established through weekly coding meetings where emergent themes were operationally defined, differences in coding were reconciled using a constant comparative approach, a definitive theme set was collectively chosen until thematic saturation was reached.

QSR NVivo 10™ was used to manage qualitative data.

Hsieh, Hsiu-Fang, and Sarah E. Shannon. "Three approaches to qualitative content analysis." *Qualitative health research* 15.9 (2005): 1277-1288
Results

60 papers

15 themes and 14 subthemes

- Program
- Mentor
- Team
- Self
Program

• Referenced in 37/60 papers.
• Majority of students viewed the HMP curricular design positively, specifically citing participation in the team-based home visits as a critical piece in changing their perceptions of the impact of chronic disease on their Health Mentor.
• Students cited the program as being clinically helpful, by improving their understanding of the healthcare system, as well as shaping their vision of interprofessional care.
• A small group of students expressed dissatisfaction with the Health Mentors Program. Logistical errors, including scheduling and changing of mentors, were seen as distractors from learning.

“Through the Health Mentors program, I had the opportunity to see how our Health Mentor’s medical conditions impact her life physically, emotionally, socially, and spiritually. I was able to do this specifically through the home visit, where we not only saw her living conditions, but how she dealt with the situation.”

“I truly do believe that once I start working in the hospital I will look back at the Health Mentors program and thank Jefferson for giving me a leg up on the newly graduated nursing students from other universities.”
Mentor

- Referenced in 37/60 papers.
- Students spoke of the mentor as a teacher, as an individual, and as an inspiration.
  - “Amazing” and “Inspirational”
- Students appreciated the longitudinal relationship with the Health Mentor.
Students described gaining a more comprehensive understanding of the impact of the HM’s family, community, and faith, appreciating the personal and environmental factors that play a role in the HM’s health and wellness.

Students cited these relationships as reinforcement of the need for care centered around the needs of each patient as an individual—giving a face to the realities of living with chronic conditions.

“She is a very positive family-oriented woman who is really inspirational as both a patient as well as a mother and grandmother where she wants to improve her health for her own continued well-being but even more so for the sake of her family.”

“I think we were all able to view how you need to look at the whole person and try to learn their story before you can come up with the best fit solution for a client.”
Team

- Referenced in 42/60 papers.
- ~1/2 of the students identified positive team dynamics as a key component for optimal patient care and better health outcomes - noting improved understanding of team members’ professional roles and responsibilities.
- Students explained that open communication led to the establishment of common goals, which centered around providing the best possible care.
- Positive team dynamics were key in challenging situations, where collaboration and communication were essential in problem-solving.

“From the moment we met we had a mutual understanding that although in different disciplines with different demands we would all work together at these assignments. We also were very open to learning about one another’s discipline, our program’s demands, and what we were learning in order to better understand one another and how we think.”
Self

• Referenced in 55/60 papers.

• Students described the development of a change in outlook on the health profession, as influenced by the program, their mentor, and other students. Students described positive changes in self-assessed knowledge, skills and attitudes.

“This experience with my health mentor has changed how I view my patients and will change how I provide care for my patients. The impact it has on my everyday life is immense because I am thankful for every day of my life for my family, friends and for being healthy. I have realized that these things are truly the most important things to have in life.”
Self (continued)

• Expressed a better understanding of their own professional role, and established personal goals for incorporating IPE competencies into future practice.
• Listening and communication were frequently mentioned as skills they would continue to practice within interprofessional teams and provider-patient relationship.
• Finally, students wrote about the significance of the impact of illness on quality life:

“When going to my mentor’s house, I realized how his disability completely changed every aspect of his life. He had to make many modifications to his home and continues to find new modifications that he can make to increase the ease with which he lives on a daily basis. Things that we constantly take for granted and take 5 minutes to perform, take him 20 plus minutes and he often needs to use adaptive equipment to complete ADLs.”
Conclusions

• Our findings suggest that reflective writing is an effective exercise through which students can explore their attitudes toward IPE and team-based care of individuals with chronic diseases.

• Student ownership of their learning was evidenced by self-identification of improved understanding of collaborative practice goals, indicative of meeting an IPE core competency. Additionally, students described a new level of patient-centeredness after participation in this IPE curriculum.

• Ongoing qualitative and quantitative analysis has been a key component of the Jefferson Health Mentor Program.

• Further work is needed to assess the impact of IPE on patient outcomes.
Acknowledgements

• Co-Authors:
  • Lauren Collins, MD
  • Claire Sokas (Medical Student)
  • Elena Umland, Pharm D
  • Elizabeth Speakman, EdD, RN, CDE, ANEF, FNAP
  • Sokha Koeuth, BBA, MPH
  • Chris Jerpbak, MD
  • Edwin Lim (Pharmacy Student)

• Research Fellowship Team:
  • Howard Rabinowitz, MD
  • Randa Sifri, MD
  • Marianna LaNoue, PhD
  • Katelyn Hurley, MPH