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Interprofessional Geriatric Education: Team-based Care for Chronic Conditions

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The Eastern Pennsylvania-Delaware Geriatric Education Center (EPaD GEC) mission is to provide interprofessional geriatric education in Northeast and Southeast Pennsylvania and Delaware. EPaD GEC consortium members (Thomas Jefferson University (TJU), Christiana Care Health System (CCHS), Marywood University (MU) and Philadelphia Senior Center (PSC)) are committed to improving the health and quality of life of older adults and their caregivers by translating new evidence and innovative practice models into practical curricula and programs. One of our educational goals is to develop a structured curriculum on geriatric topics that can be integrated into the educational curricula of multiple health disciplines.

The GEC steering committee is comprised of faculty from disciplines: medicine, nursing, social work, pharmacy, occupational therapy, physical therapy, public health, physician assistant and gerontology. Members of this steering committee are involved in developing, implementing and evaluating curriculum on specific geriatric topics which is then posted on the EPaD GEC website, including management of chronic conditions, depression and palliative care. The curriculum for each topic will contain a didactic component (teaching slide sets and web-based self study modules) and a clinically relevant, interactive interprofessional geriatric clinical skills experience. Interprofessional, patient-centered management of chronic conditions is the first topic for which a complete set of educational resources and curriculum, including slide sets, innovative web modules and an interprofessional clinical skills scenario has been fully developed, tested and made available for use by educators from within and beyond the EPaD GEC consortium.

The process of developing the curriculum for managing chronic conditions began with the steering committee meeting initially to identify and develop content areas relevant to all disciplines in chronic illness care. Discussions regarding content areas reflected the differences in practice and guidelines for each professional discipline. The varying levels of knowledge of the learners in each discipline also had to be considered when developing interprofessional curriculum. Five subheadings were ultimately agreed on by all disciplines in the chronic care curriculum: (1) Effective interprofessional teams in the management of chronic conditions, (2) Evidence-based management in chronic conditions, (3) Caregiver and family support, (4) Self-management of chronic conditions

and (5) Social issues in the management of chronic conditions. The steering committee group subsequently divided into small groups (2-3 people) to work together to develop slide sets for each subheading. An interprofessional working group reviewed all the slide sets to ensure that the contents were consistent, non-duplicative and relevant to all disciplines. The final slide sets were approved by the EPaD GEC Steering Committee. Slide sets were then translated into interactive web-based self study modules by Academic and Instructional Support and Resources (AISR) of TJU. The chronic conditions slide sets/web modules emphasize the importance of each health care team member including the patient and caregiver. Case studies are used within the modules to illustrate the roles of various health care members and the importance of working as a team and focusing on patient-centered care.

Outcomes being measured are the number of learners who complete the modules, including their level of training and professional discipline, and their evaluation of the modules. Pre- and post-test questions were developed to test learner knowledge and understanding of the content of the modules. Students, including geriatric fellows and family medicine residents, medical, nursing, pharmacy, OT, PT and social work students have rated the modules highly and confirmed their value in understanding patient-centered, team-based care of the older adult with complex comorbid illnesses.

After completion of the didactic modules, a new interprofessional working group was constituted, including representation from most of the clinical disciplines trained at EPaD GEC consortium institutions, and including experts from the Jefferson University Clinical Skills and Simulation Center to develop and pilot an interdisciplinary team-based clinical scenario. Tasks included adapting the evaluation checklist used by standardized patients and faculty to reflect key elements of team interaction and team-based, patient centered care; training standardized patients to use the new checklist to evaluate the team, as opposed to individual clinicians; and crafting a robust clinical scenario which requires input from multiple members of the healthcare team, patient and family for best outcomes.

The clinical skills scenario follows an active older woman admitted for an acute stroke. A video demonstrating the roles of various health professionals in the early evaluation and

management of the patient serves to remind students of the importance of working together as a team, and demonstrates the degree of impairment and rehabilitation needs of the patient. After viewing the video, an interprofessional group of students reviews the patient “chart” and participates in a 15 minute session to share information among the professions and plan the discharge planning meeting. The student team then meets with the patient and adult child for 20 minutes to review the current status and prognosis, make recommendations and plan the next steps in the patient’s care. Students then debrief with each other, faculty observers and the two standardized patients (patient and daughter). Evaluation of the pilot was extremely positive in all aspects, with all participants (standardized patients, faculty, and students from medicine, nursing, OT, PT and pharmacy) stating this was a very valuable teaching/ learning experience and requesting participation in additional similar sessions.

There are many challenges to developing interdisciplinary curriculum including differing academic schedules, individual accountability and clinical responsibility and discipline-specific expectations of professional education. Other challenges include understanding the differences in culture, practice, licensing and guidelines for each of the professions, varying levels of knowledge of the learners in each discipline, identifying appropriate opportunities to incorporate the modules in training and obtaining continuing education credits for varied professionals.

Despite the challenges, addressing the priorities for interdisciplinary education is important. Working together in these interprofessional teams allow for collaborative and creative problem solving. It also improves faculty interaction among various disciplines and has led to other collaborative efforts. Most importantly, the diversity of knowledge, skills and experience enriches the educational product. The chronic conditions educational materials and other interprofessional geriatric education resources can be accessed via the EPaD GEC website <http://epadgce.jefferson.edu>.

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