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Interprofessional Education in a Department of Urology

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Optimum health care delivery requires increasing reliance on allied health care professionals who are members of highly functioning teams. However, few allied health care professionals are trained in the specific field of urology. Within our urology department, care of patients is fragmented into different segments with little to no crossover of staff. Patient care may benefit from specialty training and additional education sessions for those involved in patient care. Interprofessional Education (IPE) offers a potential way to improve collaboration and may enhance health care outcomes.

The purpose of our pilot program was to design and implement an IPE program within our Department of Urology. The IPE program will apply supplementary training and teaching methods for allied health care professionals.

The method was to develop a comprehensive IPE program for members of the urology team involved in either inpatient or outpatient care. This included nurses, surgical technologists, nurse practitioners, physician assistants, medical assistants, and administrative/clerical personnel who have patient contact. Participation is on a voluntary, non-compensatory basis. The program consists of two major components: Journal Club and The Urology Symposium. The Journal Club meets quarterly to review 4-6 papers, one being a review article, regarding various topics at each meeting. The Urology Symposium is held annually at an off-site location where physicians and allied health care professionals are present. The attendees at the Urology Symposium are members of the Jefferson Department of Urology, past and present. Lectures and presentations are given by physicians and residents on assorted topics. Outcome measures for both the Journal Club and the Symposium include routine participant feedback via anonymous, self reported questionnaires.

All allied health care professionals of the urology department are invited to attend the Journal Club which has been held quarterly since March 2010. The Journal Club includes a brief review of each paper, followed by a group discussion. The articles are picked by the physician moderators of each session, and the nurse who founded the Journal Club. Physician moderators are at hand to answer questions and facilitate the discussion in an informal, relaxed environment. Topics previously covered were: endourology, prostate cancer/treatment, female urology/incontinence, kidney stones/treatment.

Participants are asked to fill out a questionnaire and turn it in at the end of each meeting (Journal Club and the Urology Symposium). Data is collected on the likes/dislikes of each session, asking whether the information provided will help participants in their practice, as well as suggestions for future topics. With the feedback collected so far, it has been shown that 54 percent of participants think the interaction with physicians is the biggest advantage. Being in a relaxed environment allows staff to feel more comfortable asking questions, and permits more time for the physicians to answer them. 100% of participants at every session have said that the information provided will help them in their professional practice. Based on feedback, we will be incorporating more features of lecture into the Journal Club sessions.

Some of the dislikes included: 31 percent suggesting fewer articles be presented, and 18 percent asking that there be more time for discussion, and less focus on reading from the article itself.

The Journal Club is usually held mid-week between five and seven pm. Most staff has finished their shifts by this time, and willingly stay for the entirety of the session. The attendance at each session has shown that our Journal Club has been positively received, and that our staff is dedicated and eager to expand their knowledge. St. Pierre (2009) saw nursing journal clubs as a great method to change nursing practice. “A hospital based nursing journal club can be a fun and interesting way to improve the quality of nursing care by providing the impetus to change practice.” This is exactly what we were aiming for when we developed this program, and so far the results have been encouraging.

In the near future, we plan to give out a questionnaire to patients asking how they perceived their experience within our department (patient office and in the operating room). We will then compare this questionnaire to those given in the past, hoping to see a positive outcome that can be contributed to our meetings. Also, at the next Journal Club meeting, we will be asking attendees to fill out an evaluation regarding their experiences in collaborating with staff and physicians since the Journal Club was implemented. We also hope to see a positive outcome relating to teamwork and an increase in knowledge amongst all staff.

Reference