

# INTERDISCIPLINARY LEARNING PROJECT

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## ABSTRACT

### Description

With a 20 year history, we have implemented a multifaceted IPE program for members of the urology team. These include urologists, both faculty and community, residents, medical students, nurses, nurse practitioners, physician assistants, medical technicians/assistants and administrative/ clerical personnel with patient contact. The program was designed with three components: a yearly symposium for all, and journal club(JC) and lectures for non-physicians. Participation is on a voluntary, noncompensatory basis. Outcome measures include routine anonymous participant feedback via questionnaire.

### Results

The programs were very positively received. Limiting obstacles were also observed. Initially too many papers were assigned in the Journal club. Timing of lectures became impossible because of the demands of office and OR schedules. The lecture and JC portions were merged. The symposium has been most successful and enduring. The major difficulty has been for the speakers to present on levels for all participants.

### Conclusion

A program for education of individuals at different levels of learning, experience and practice can be designed and may require modifications to suit all participants.

## INTRODUCTION

- Health care delivery involves a complex interplay between multiple health care professionals, including both physicians and non-physicians.
- Non-physician health workers include nurses, NPs, PAs, medical technicians, administrative/clerical staff, and social workers.
- Team members must work together well to provide effective patient care.
- Interprofessional education (IPE) refers to any type of training or teaching initiatives in which  $\geq 2$  professions are learning interactively.
- IPE offers a potential way to improve collaboration and, in doing so, to enhance health outcomes.

## PURPOSE

- To develop and implement an IPE program for non-physician team members in our Department of Urology.
- To identify key features of IPE to train health and social care professionals to work together effectively.

## MATERIALS & METHODS

- 3 part program**
  - Urology Symposium
  - Non-Physician Journal Club
  - Lecture Series
- Urology Symposium**
  - Yearly since 1996
  - Presentation by faculty, alumni, visiting faculty, nonphysician members
  - 8 – 12 lectures, 4-5 hours
  - Held off site, food and accommodations provided
  - Faculty, local urologists, residents, medical students, nonphysician staff
- Journal Club (JC)**
  - Started after nurses banned from residents JC
  - Quarterly with papers chosen by faculty
  - Modeled on residents JC
  - Review of papers by one person followed by group discussion
- Lecture Series**
  - Planned 30 minute lectures
  - 2 year series by subject
- Evaluation**
  - Outcome measures indirect anonymous, self reported questionnaire following event
  - Participant feedback is elicited for continued program improvement

## RESULTS

- Symposium & JC were well attended with a variety of nonphysician health care workers with positive feedback for both
- In Symposium, attendees suggested larger screen and more time for questions
- In JC, improvements were to limit # of papers and increase discussion
- Lecture series not instituted

NON-PHYSICIAN JOURNAL CLUB: PARTICIPANT FEEDBACK (%)	
RESPONSES	Feedback
<b>Liked</b>	
Faculty/physician interaction	45
Meeting other team members	27
Informal/relaxed environment	27
<b>Disliked</b>	
Too many papers	18
Nothing	67
<b>Suggestions</b>	
Fewer papers	27
More discussion	18
Invite more nurses	18

## OFF-SITE UROLOGY SYMPOSIUM ATTENDANCE (%)

ATTENDEES	2008	2009	2010	2015	2016
<b>Urologists</b>	40.9	43.5	36.4	38.9	43.7
<b>Residents/Fellows</b>	22.7	8.7	18.2	20.8	14.1
<b>Medical Students</b>	4.5	10.9	3.6	5.5	9.8
<b>Non-physicians</b>					
Inpatient/OR	18.2	15.2	18.2	9.7	11.3
Outpatient/Office	6.8	8.7	10.9	15.3	12.7
<b>Industry</b>	6.8	13.0	12.7	9.7	4.2
<b>Total #</b>					
Signed in	44	46	55	72	71
Counted	52	55	63	90	90

## DISCUSSION

- The value of IPE has been demonstrated in benefiting collaborative practice.
- A multifaceted IPE program has been positively received by participants.

### Urology Symposium

- Consistently well received with increasing attendance
- Currently CME approved
- Relative participation (%) has been nearly constant
- Key factors include long term in advance notification and elective scheduling on a weekend day. Others are food and housing.

### Nonphysician Journal club

- Informal setting for interactive learning with faculty
- Residents Journal club model was not suitable
- Participants (28%) suggested fewer papers
- Lectures as part of Journal club are most effective

### Lecture Series

- Not possible because of scheduling conflicts and demands of the participants' clinical work.
- Not accepted by department administration
- High turnover in staff promotes a shorter schedule combined with JC

## CONCLUSIONS

- This IPE program has been successfully implemented and positively received.
- The Symposium was initiated before the formal concept of IPE and remains useful
- JC format has changed to meet schedule, expectations and needs
- Future studies are needed to determine whether the learning program improve clinical outcomes for urology patient

## REFERENCES

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