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Deirdre Yarosh, BS, MA, PharmD Student

College of Pharmacy, Thomas Jefferson University, deirdre.yarosh@jefferson.edu

Elena M. Umland, PharmD

College of Pharmacy, Thomas Jefferson University, elena.umland@jefferson.edu

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Examining Health Mentors' Perceptions of Student Teamwork

Deirdre Yarosh, BS, MA, PharmD Student

Elena M. Umland, PharmD

College of Pharmacy, Thomas Jefferson University
Philadelphia, PA

Statement of Issue: With the increasing emphasis on interprofessional teamwork in healthcare, the need to train future health care professionals to work together as a functional team to provide patient-centered care is clear. Limited information exists regarding education of health care students and teamwork training.^{1,2} This research evaluates student team performance.

Background: Thomas Jefferson University (TJU) offers a unique, two-year program emphasizing delivery of patient-centered care and providing valuable skill development by pairing interprofessional student teams with a Health Mentor (HM). The HM is an adult community volunteer with one or more chronic health condition(s). Student teams include representatives from couple and family therapy, medicine, nursing, occupational therapy, pharmacy, physical therapy, and physician assistant. The purpose of this study is to evaluate how the HMs perceive their student teams over time by using the Jefferson Teamwork Observation Guide (JTOG), a survey tool based upon the Interprofessional Education (IPE) Core Competencies.³

Methods: HMs completing one full year with their interprofessional student teams were invited to complete the JTOG survey in spring 2015. JTOG surveys were mailed to a total of 125 HMs. This 21-item survey asked the HMs to evaluate the ability of their student teams to work together with specific questions focusing on each of the four IPE core competencies (values/ethics, communication, roles/responsibilities, and teamwork) as they relate to interprofessional team-based care.³ Each item was evaluated using a 4-point Likert scale. Open-ended comment sections for each question were included to provide HMs the opportunity to describe specific observations or examples and to explain their ratings. The JTOG survey will be sent to the HMs again after their final interprofessional student team meeting during fall 2015. The quantitative and qualitative results from both surveys will be compiled and analyzed to evaluate HM perceptions of team functioning. Results from these surveys will be used to provide feedback to and better educate TJU students as well as to identify areas for improvement in this HM program.

Results: Quantitative and qualitative results from the spring 2015 mailing of the survey have been compiled. Eighty-three of the 125 HMs responded to the JTOG survey (66.4% response rate). Of the respondents, 65% were female and 35% were male, and the average age was 65 years. The demographics of the HMs completing the survey were representative of the demographics for all HMs volunteering in the program. Of the respondents, 26% were African American/Black, 4% were Asian/Pacific Islander, 65% were Caucasian/White, and 5% were multi-racial. This survey evaluated demonstration of IPE core competencies as well as patient-centeredness. Of the questions pertaining to patient-centeredness, 97.5% either agreed or strongly agreed that their teams met patient-centeredness criteria. Relative to the competencies of teamwork, roles and responsibilities, communication and values and ethics, there was 97.6%, 97.7%, 98.2% and 100% agreement or strong agreement by the respondents their teams met these competencies respectively. Open-ended comments were provided and full evaluation is forthcoming; while they appear positive, full discussion of these results at this time would be premature.

Conclusions: These results illustrate that the students participating in this interprofessional longitudinal program are perceived by their HMs to be well prepared regarding the IPE core competencies.

Discussion: These preliminary results need to be further evaluated to identify statistical significance of the quantitative results and trends in the qualitative data. The information obtained from the fall 2015 survey will help determine if any changes in HM perceptions of interdisciplinary team performance occur over time.

Next Steps: Based on the exceptionally positive results, it appears that there may be need for more discriminating tools in evaluating students' ability to meet IPE core competencies. This may involve adjusting the tools or, perhaps, further training for the observer relative to the IPE core competencies and their intent and meaning.

References:

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