

## Developing Interprofessional Preceptors to Promote Intentional Interprofessional Education in Practice Settings: Reflections from the Preceptors in the Nexus Workshop



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is critical as they are the nexus (or bridge) between education and practice.

### Background

Until recently, interprofessional education (IPE) efforts have focused primarily on the development of educational interventions delivered in

classroom or simulation settings (Abu-Rish et al., 2012; Loversidge & Demb, 2015) rather than in practice settings. Students describe frequent missed opportunities for applying IPE concepts in “real-life” practice settings (Gilligan et al. 2014). Although health profession students may be co-located in the same hospital unit or clinic, few interprofessional interactions actually occur. With the recently released Health Professions Accreditation Collaborative and the National Collaborative for Improving the Clinical Learning Environment documents on IPE (HPAC, 2019; Weiss, 2019), there is a shift in focus to intentional experiential learning in practice-based settings where students, residents and clinicians can learn together. And with this shift, preceptors need professional development to support and facilitate interprofessional, experiential learning in practice.

### Methods

The curriculum for Preceptors in the Nexus was developed based on personal experience and was informed by local and national evidence when available (Sick et al., 2019; Shrader, Jernigan, Nazir & Zaudke, 2018; Shrader, Zaudke & Jernigan, 2018; Shrader & Zaudke, 2018). The online toolkit is available for free and the national workshop is held annually at the NCIPE at the University of Minnesota (NCIPE, 2015; NCIPE, 2019).

The interprofessional preceptor professional development curricular content is based on five key concepts:

1. Co-location is NOT enough. You must be intentional and explicit about IPE in practice.
2. The hidden curriculum (i.e., the culture and organizational standards conveyed informally to learners) is a powerful influence on IPE in practice.
3. Engage all learners on the continuum (e.g., foundational, graduate, and workforce) in IPE in practice.
4. Reflection and debriefing about IPE in practice is critical.
5. Interprofessional learners are value-added (i.e., add value to the care of patients) and IPE can help transform practice.

Training sessions included a discussion of the key concepts, a description of the model at KUMC, debriefing skills, simulated interprofessional precepting and the use of a tool to assess a site’s readiness for IPE (InSITE) (i.e., a site whose structure and function is optimized to teach students interprofessionally) (Sick et al, 2019). Teaching methods included lectures, skills practice in small groups, video cases, and five-person simulations done in the large workshop room. Some participants elected to participate in follow-up phone calls with the facilitators after the workshop to discuss their progress on implementing changes at their home institutions.

A survey about the training sessions was completed voluntarily and anonymously by participants after they attended the Preceptors in the Nexus workshop in 2018 and 2019. Data were analyzed using descriptive statistics and open-ended comments were analyzed for themes.

### Introduction

Demand is increasing for health profession graduates to enter practice ready to function effectively in interprofessional collaborative teams centered on patient care. The World Health Organization (2010) postulated that interprofessional education yields practitioners ready for interprofessional collaborative practice, which in turn is the path to improving our fragmented health system. In 2014, the University of Kansas Medical Center (KUMC) received funding from the Josiah Macy Jr. Foundation in response to the need to develop interprofessional preceptors (Josiah Macy Jr. Foundation, 2013). We define interprofessional preceptors as a preceptor from any profession that intentionally educates learners from different professions in authentic practice-based environments, combining patient care and clinical teaching with explicit learning about how interprofessional collaboration contributes to high quality, patient-centered, team-based care (Shrader & Zaudke, 2018). KUMC created a partnership with the National Center for Interprofessional Practice and Education (NCIPE) and the University of Minnesota to develop an online toolkit, curricular materials, and a “Preceptors in the Nexus” workshop focused specifically on professional development for interprofessional preceptors. Interprofessional preceptor development

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Photo of "Preceptors in the Nexus" workshop courtesy of Dr. Sarah Shrader, University of Kansas



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**Results**

The number of participants in 2018 and 2019 was 24 and 43, respectively. Participants rated, on a four-point Likert Scale of strongly agree to strongly disagree, the utility of each training session. A majority of the survey items were rated strongly agree or agree by participants across both years. Combining data from the two years, assessment of participant perceptions of their interprofessional learning in practice skills from before to after the workshop on a three-point scale of confidence, showed increased confidence (see Table 1). Analysis of open-ended comments showed that the most valuable aspects of the workshop were the hands-on activities, including debriefing, simulation and use of the InSITE tool. For example, one participant noted, "Practicing debriefing and actually articulating was helpful. Best part was role play." The biggest suggestion for improvement was the need for more time for the participants to engage with their teams.

**Table 1.** Pre- and Post-Conference Confidence in Skills on Interprofessional Learning in Practice, 2018-2019

	Pre-Workshop	Post-Workshop
Confident	3 (5%)	37 (62%)
Somewhat Confident	48 (78%)	23 (38%)
Unfamiliar	10 (16%)	0 (0%)

**Discussion**

Developing interprofessional preceptors is important and challenging work needed to "move the needle" on creating IPE opportunities in practice and to positively impact how future healthcare is delivered. While there are other national

interprofessional team trainings (e.g., T3: Train the Trainer, TeamSTEPPS®), we are unaware of other national workshops focused on training interprofessional preceptors. Additional preceptor training materials for Preceptors in the Nexus are available online for further self-study (NCIPE, 2015). Although the Preceptors in the Nexus workshop fulfills a need to advance the field of interprofessional practice and education, limitations include the limited enrollment of preceptors and the lack of data demonstrating the impact of this training on interprofessional learners, patients, and the healthcare system.

We have learned many lessons over the years, including:

1. Develop interprofessional preceptors in some capacity to foster learner experience of and appreciation for IPE in practice; this preceptor development is essential.
2. Create multiple methods of delivering the interprofessional preceptor development message including websites, online learning, and in-person training sessions.
3. Use foundational and graduate learners as catalysts for change and a valuable reason to provide professional development to healthcare professionals in the workforce on interprofessional collaboration.
4. Emphasize the value that interprofessional foundational and graduate learners can bring to interprofessional preceptors and their practice settings.
5. Provide simple and effective educational materials (e.g., interprofessional debriefing guide, interprofessional value-added learner tasks) (NCIPE, 2015) that interprofessional

preceptors can use to create more intentional IPE in practice settings.

**Conclusion**

Development of interprofessional preceptors is necessary because of the increased focus of IPE in practice settings. Preceptors are the nexus of IPE and need training to optimize interprofessional clinical learning environments. Institutions wishing to improve their ability to graduate students who are collaborative practice-ready should send a team for Preceptors in the Nexus training to learn skills needed to train other interprofessional preceptors, or use some of the online tools and our lessons learned to build a preceptor professional development program at their home institution.

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