Innovative Tools for Assessing Interprofessional Competencies
LuAnn Wilkerson, EdD; Margaret Stuber, MD; Mary Ann Shinnick, PhD, RN; Jenna van Drannen, MPH; Viktor Sigalov, MD
1David Geffen School of Medicine at UCLA (DGSOM); 2UCLA School of Nursing; 3UCLA Clinical and Translational Science Institute

Introduction

• There are few assessment tools for evaluating students’ IP competencies in the classroom and workplace settings.
• With funding from the Macy Foundation, the schools of Medicine and Nursing at UCLA are developing 6 assessment tools focused on the IPEC Core Competencies for Interprofessional Collaborative Practice2 to test students’ knowledge, skills, attitudes, and behaviors.
• We are pilot testing the tools in an IPE course, Systems-Based Healthcare, for third-year medical and dental students and advanced practice nursing students.

Methods

• The following assessment tools can be used for formative and summative assessment. Aggregated results can be used for purposes of program evaluation.
  1. A video case assessment,
  2. A workplace observation tool,
  3. Implicit Association Test,
  4. Knowledge test,
  5. Objective Structured Clinical Exam,
  6. 360 multi-source feedback tool.
• Pilot studies are underway to determine psychometric qualities and feasibility.

Results

Implicit Association Test: With Project Implicit (www.projectimplicit.net), we developed an IAT to measure reaction times in associating words like “follower” with the professions of “doctor” or “nurse.” As with race and ethnicity, the IAT assesses unconscious biases, here about nurses and physicians.

Figures 1–2: Scene from one Zaption Video-Based Exam

Video Assessment Tool: Using software that integrates assessments with video (www.Zaption.com), students are asked to analyze IP scenarios. There are three video cases involving IP teamwork in the care of a patient being enrolled in a clinical trial who is now facing end of life decisions.

Table 1: IPEC Core Competencies tested in each assessment tool

<table>
<thead>
<tr>
<th>Competency Domains</th>
<th>IPEC Core Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domain 1</td>
<td>Identify and respond to the unique needs of patients across the continua of care and across institutions of care</td>
</tr>
<tr>
<td>Domain 2</td>
<td>Work effectively in diverse teams</td>
</tr>
<tr>
<td>Domain 3</td>
<td>Collaborate across the continuum of care</td>
</tr>
<tr>
<td>Domain 4</td>
<td>Deliver high-quality, safe, patient-centered care</td>
</tr>
<tr>
<td>Domain 5</td>
<td>Enhance the delivery of health care education</td>
</tr>
<tr>
<td>Domain 6</td>
<td>Promote health and health care systems change</td>
</tr>
</tbody>
</table>

Figures 3–4: Percentage of students answering correctly in the VBE

360° Multisource Tool: Students are assessed by attending physicians, team nurses, etc., on 30 dimensions of the Interprofessional Collaborator Assessment Rubric (ICAR) during their performance in a workplace setting using RedCAP software to produce formative feedback reports.

Figures 5–6: Sample conflict resolution feedback from a student’s 360° ICAR Report

Discussion

Unintended consequences, epic fails, and recoveries
• Students’ scores on the assessments highlight the lack of knowledge of and skills for interprofessional interactions.
• We had difficulty recruiting students for pilot testing assessments when they were not embedded in a required course.

Lessons learned
• Medical students may not be working as often as expected in interprofessional teams during clinical rotations.
• Aggregated individual results can provide program evaluation results at Kirkpatrick levels 2 – 4.

Best ideas and successful practices:
• These six assessment tools fill a current gap in the IPE field for both formative and summative assessment of learners.
• Although these tools were developed for assessment, they can also be useful for teaching in clinical and small group settings.

Reference: