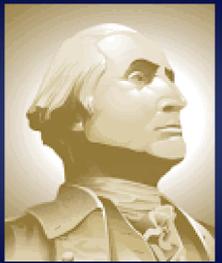


Meeting the Triple Aim: An Experiment in Designing Interprofessional Education for Health Profession Students at GW

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Introduction

Health care reform is calling for a paradigm shift. The Institute of Healthcare Improvement (IHI) has coined the phrase “The Triple Aim” to capture the key features of successful reform: “improve the health of a given population, enhance the patient experience, and reduce or control the per capita cost of health care.”¹ In response, accreditation standards in healthcare professional education are requiring proof of interprofessional learning. With this in mind, our interprofessional faculty team created the first longitudinal interprofessional workshops that engage GW health professional students across several programs (MD, RN, PA, PT, SLP) and schools (SMHS, SON, CC). We focused on authentic learning designed to foster developing competency in understanding one another's professional roles and to value the importance of team based care with the patient and family at the center. (n=393 students reported here.)

We wanted to distill the workshops down to a few key concepts important to preparing health professional students for team practice. We used educational competencies established by the Interprofessional Education Collaborative (IPEC) to construct session learning objectives. As an interprofessional faculty group, we collaborated to design two workshops that are longitudinal in nature. Both workshops center around a patient case and involve students working in groups with faculty facilitators. The first workshop is focused on developing a deeper understanding of professional roles outside one's discipline of study. The second workshop aims to foster communication strategies that improve patient care and team participation.



Procedures and Results

Our workshops have run for two consecutive years. We have collected several different types of outcome data. Here we report qualitative data from the students about the experience, and quantitative data measuring changes in attitudes and perceptions.

1. Qualitative data:

Students valued the opportunity to problem solve face to face and to learn about the roles and responsibilities of health professionals aside from their chosen discipline. Here are selected responses to the survey question: “What did you like best about the session?”:

✓“The small group session in which I got to meet with students in other programs. It was very constructive to learn about what their profession does, as well as their perceptions about what an MD does.”

✓“Talking to the other students about what their education entails to understand the differences between the groups”

✓“Reflecting on the case and seeing how each team member contributes”

✓“The ability to begin developing relationships with other future health care providers.”

✓“Seeing and conversing with MS and PA students face-to-face, as opposed to discussing inter-professional collaboration in theory or just through lecture.”

✓“The exposure to other health professions and the ability to allow our role in the healthcare field be heard”

2. Readiness for and change in attitudes/perceptions of IPE:

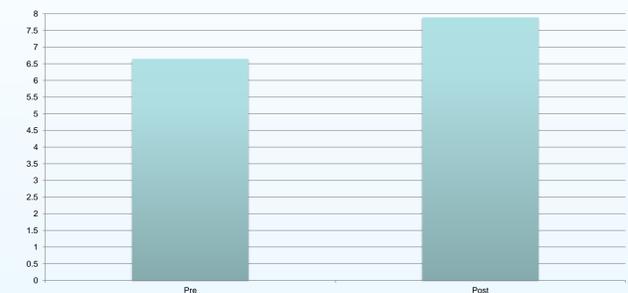
In Fall 2015, we used the Readiness for Interprofessional Learning Scale (RIPLS). RIPLS is a 19-item survey tool used to assess student and professional attitudes and perceptions in order to determine readiness for IP learning and change. It is purported to measure change in attitudes as a result of different interventions.²

Our students' pre-post RIPLS comparisons did not show significant differences as a result of the workshop. (p-values ranged from 0.09-0.9).

Readiness for Interprofessional Learning Scale (RIPLS) A. K. McFadyen et al. (2005)					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Learning with other students will help me become a more effective member of a health care team	1	2	3	4	5
2. Patients would ultimately benefit if health-care students worked together to solve patient problems	1	2	3	4	5
3. Shared learning with other health-care students will increase my ability to understand clinical problems	1	2	3	4	5
4. Learning with health-care students before qualification would improve relationships after qualification	1	2	3	4	5
5. Communication skills should be learned with other health-care students	1	2	3	4	5
6. Shared learning will help me to think positively about other professionals	1	2	3	4	5
7. For small group learning to work, students need to trust and respect each other	1	2	3	4	5
8. Team-working skills are essential for all health care students to learn	1	2	3	4	5
9. Shared learning will help me to understand my own limitations	1	2	3	4	5
10. I don't want to waste my time learning with other health care students	1	2	3	4	5

3. Student understanding of the roles of other professionals

We asked students to rate their agreement (5-point Likert) with two statements that reflected the aims of the Fall event: “I can define the professional roles of other members of the health care team”, and “I can identify opportunities for overlap in professional competency”. We then summed their responses. The pre-post difference here was significant:



I can define roles and identify areas of overlapping competency

Other Lessons Learned

Formative teaching outcomes: assessing for barriers, facilitators

The planning team has debriefed after each workshop assess “lessons learned”. These debriefs have resulted in changes to our program to address some of the barriers (difficulty ensuring adequate faculty facilitation skill) as well as factors that might enhance student engagement. As examples, we have instituted faculty facilitator training and standardized actors to improve consistency of student experience and adherence to learning objectives. We have also added live patient panel discussions to reinforce the voice of the patient and family on the health care team.

Based on the pre-test scores on the RIPLS questionnaire, students come to the IPE events with a positive attitude and readiness to engage in IP learning. Because the pre-test scores are so high, post test scores do not show significant change as a result of the activity but this is likely due to a ceiling effect. Students do, however, report significant increases in their ability to define the roles of other professionals and areas of overlapping competency after completing the IPE activity.

Citations

1. The IHI Triple Aim. (n.d.). Retrieved October 8, 2016 from <http://ihi.org/engage/initiatives/tripleaim/pages/default.aspx>
2. Curran, V. R., Sharpe, D., Forristall, J., and Flynn, K. (2008). Attitudes of health sciences students towards interprofessional teamwork and education. *Learning in Health and Social Care*, 7(3), 146--156.

