

Longitudinal Assessment of Student Attitudes about Interprofessional Learning Experiences: A Mixed Methods Approach

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Statement of Problem

There is growing number of interprofessional (IP) experiences offered across Duke health education programs

In the past, assessment strategies have focused on a single IP experience, but not across the entire health professions curricula

No longitudinal strategy to examine levels of influence these activities have on learner attitudes toward IP education

This project seeks to address this gap

Objectives

- 1. To longitudinally study learner attitudes about IP experiences as they relate to the Core Competencies for Interprofessional Collaboration (IPEC)¹
- 2. To provide baseline data about learner attitudes information to individual health professions programs and to interested stakeholders across Duke Health
- 1. To serve as a catalyst for follow-up educational initiatives that could potentially provide outcomes-based evidence for IP education across the health professions

Approach

Phase 1 began in Fall 2015; mixed methods

Qualitative – 4 focus groups with a single cohort of learners from ABSN, DPT, MD and PA programs; interview questions aligned with IPEC

Quantitative – same cohorts of learners completed Interprofessional Attitudes Scale (IPAS)²; survey aligned with IPEC

Qualitative Themes at Matriculation

2015 Focus group participants (7 ABSN, 8 DPT, 4 MD, 6 PA):

- > Stated IP education as important to their training and eventual practice
- > Has high level of importance in "developing good habits early"
- Characterized high-quality IP experiences as:
 - Mandatory activities with interactive sessions that are challenging
 - Activities that dispel misconceptions of other professions and free from judgment

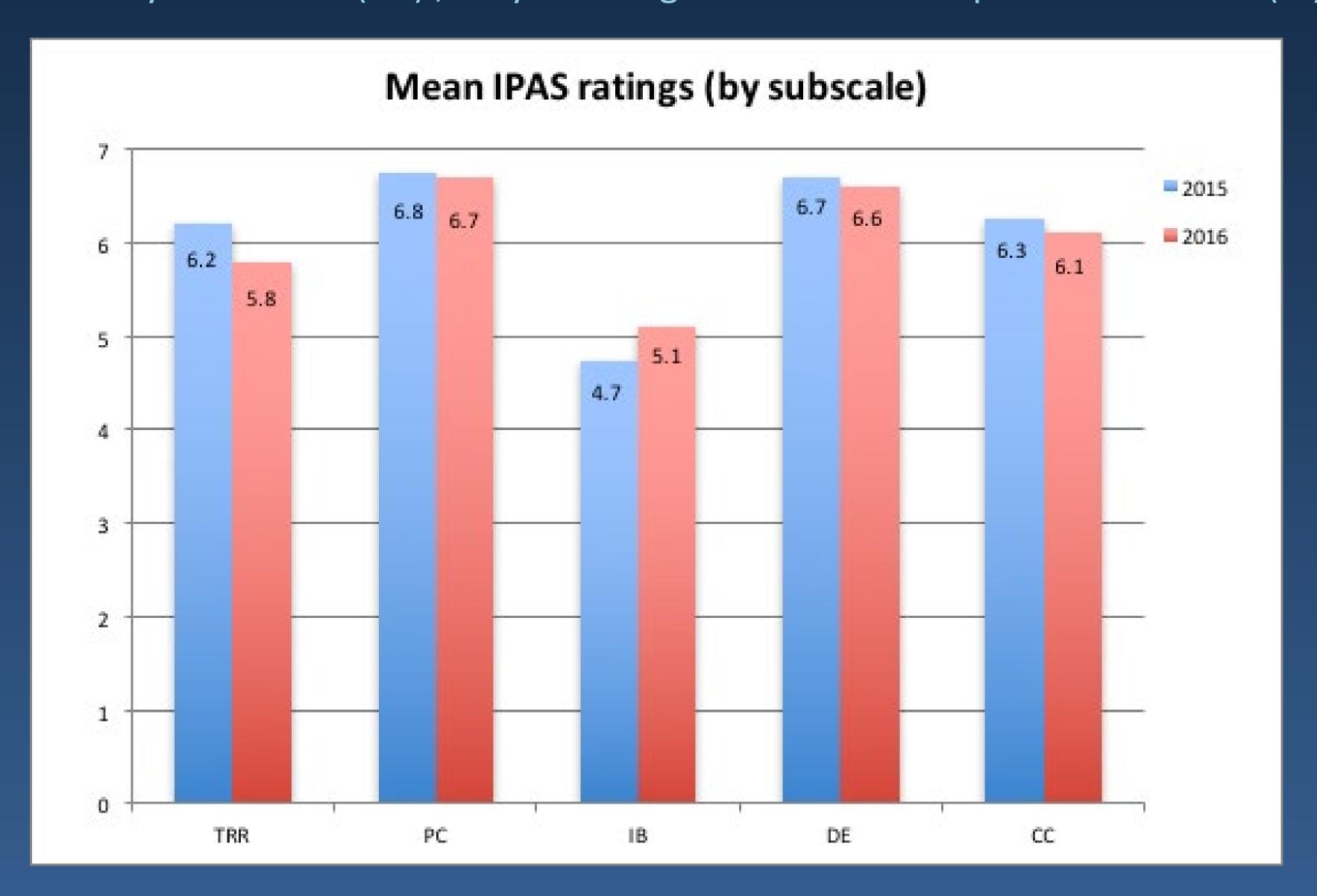
Qualitative Themes after Year 1

2016 Focus group participants (7 ABSN, 8 DPT, 4 MD, 6 PA):

- > Most impactful IPE experiences occurred in clinics/wards
- Clinic/Ward IPE experiences:
 - Rarely structured by respective programs
 - Seldom occurred with other learners, but most often with practicing licensed professionals

Quantitative Summary

2015 and 2016 data consistent; Students have strong agreement for Patient-Centeredness (PC) and Diversity and Ethics (DE), only some agreement for Interprofessional Bias (IB)



Conclusions

Focus group participants consistently discussed a desire to engage in meaningful IPE experiences as an expectation of their curricula at Duke

Focus group participants preferred real-life IP educational experiences, modeled by healthcare teams

Focus group themes consistent with survey results

Survey data shows first year students rate items associated with Interprofessional Bias lower than others

Student expectations are valuable in revising and developing future IP opportunities, curricula, programming and strategic planning

Next Steps

Replicate focus groups and survey administration annually until cohort graduation

Adjust focus group interview guide to address Interprofessional Bias survey items

References

- 1. Interprofessional Education Collaborative Expert Panel. Core Competencies for Interprofessional Collaborative Practice: Report of an Expert Panel. Washington, DC: Interprofessional Education Collaborative; 2011.
- 1. Norris J et al. The Development and Validation of the Interprofessional Attitudes Scale: Assessing the Interprofessional Attitudes of Students in the Health Professions. Acad Med. 2015
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