Title:

Helping Students Learn How to be Part of an Interdisciplinary Team Using Simulated Patients

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Session Title:

Interprofessional Team Learning in Simulation

Slot:

H 11: Monday, 30 October 2017: 2:45 PM-3:30 PM

Scheduled Time:

2:45 PM

Keywords:

interdisciplinary teams, simulation and student learning

References:

Abu-Rish E., Kim S., Choe L., et al., (2012). Current trends in interprofessional education of health sciences students: A literature review. Journal of Interprofessional Care, 26: 444-451. Watters C., Reedy G., Ross A., et al. (2015). Does interprofessional simulation increase self-efficacy: a comparative study. BMJ Open 2015; 5:e005472. Doi:10.1136/bmjopen-2014-005472.

Abstract Summary:

An education model was designed that focused on a simulated interprofessional team meeting for a patient. There was an online didactic piece and the main simulation event where students reviewed findings for a simulated patient and engaged in a team meeting simulation, practicing team skills and developing a care plan.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to discuss how simulation can be used to teach interdisciplinary team principles.	Review literature that supports using simulation as a way to teach interdisciplinary team principles.
The learner will be able to describe how to build a practice-based, didactic and simulation-based educational experience to educate interprofessional (IP) groups of students using a simulated patient.	Review the how to develop a didactic and simulation educational experience for students involving multiple student disciplines. Describe how the simulated patient helped with the learning experience.
The learner will understand the student experience in this type of simulation experience.	Review survey results of students who participated in the simulation experience.

Abstract Text:

Interprofessional collaboration is required to optimally manage patients with complex geriatric syndromes. A simulation educational model significantly improved interprofessional (IP) student's knowledge of geriatric concepts and team practice competencies.

Purpose: A main goal of this HRSA grant was to build a simulation-based educational experience to educate IP groups of healthcare students about important assessments and interventions for geriatric syndromes and how to function in an IP team.

Relevance: Interprofessional collaboration is required to optimally manage patients with complex geriatric syndromes. The education of students in IP practice is gaining momentum, with many accreditations requiring a minimum amount of IP education. Unfortunately, when students graduate, they have not been exposed to IP teams and do not understand their role in these teams. The literature is lacking in models to teach students how to work collaboratively in IP teams.

Strategy: An education model was designed that focused on a simulated IP team meeting for a patient with complex geriatric syndromes. Pre-simulation learning consisted of online didactic content including geriatric assessment/intervention skills and teamwork concepts. Simulation events began with interactive geriatric assessment skills practice incorporating TeamSTEPPS concepts. Students then reviewed findings for a simulated patient and engaged in a team meeting simulation, where they practiced team skills as they developed a care plan. Finally, a simulated family caregiver entered the simulation which caused the students to re-evaluate the plan of care to make it more patient-centered. Students learned how to work with the family member and to listen to their concerns and then work with the family member to develop a workable plan based on the patient and family needs and resources available. Multiple disciplines were represented in the team thus utilizing student knowledge within their discipline. Students were able to incorporate communication skills when working with the standardized patient/family member. Progression in IP competencies was measured pre and post education using the Interprofessional Collaborative Competencies Attainment Survey (ICCAS). Items of the ICCAS were analyzed using repeated measures analysis of variance, using 5% level of significance. Satisfaction with the education was assessed at the end of the training.

Evaluation: Students (n=708) attended the simulations and included nursing, medicine, pharmacy, physical, speech and occupational therapy, nutrition, chaplain, social work, exercise science, speech and language pathology and paramedic. Statistically significant improvement was seen in confidence and comfort in participating in an interprofessional team. Qualitative comments also provided evidence of improvement in IP collaborative practice competencies.

Discussion: While this simulation experience focused on the complex geriatric syndromes that require an IP approach for optimal management, the TeamSTEPPS concepts can be used within any IP team setting. Effective models to teach geriatric assessment, interventions and IP practice skills to current healthcare students are lacking. This simulation method was shown to be effective and is easily replicable. Students felt the experience was informative and helped them understand how to work in an IP team environment. Students also appreciated the opportunity to work with other disciplines.