INTERPROFESSIONAL EDUCATION IN PSYCHIATRIC MENTAL HEALTH GRADUATE EDUCATION: LESSONS FROM THE CLASSROOM

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Presenters have no conflicts of Interest to disclose

OBJECTIVES

- **Outcome 1:** Identify deliberate curricular revisions including on-line, in-person, and simulation experiences that were made to enhance interprofessional education as part of the HRSA ANE grant
- **Outcome 2:** Describe four indicators of interprofessional learning and competence and describe examples of positive student IP learning
- **Outcome 3:** Analyze ways in which IP knowledge can be translated to practice and recommendations for change
BACKGROUND

- Traditional education: Silo education socializes negative biases and naïve perceptions of others.
- Need for change:
  - Changing health care requires IP collaboration.
  - Create a "collaborative practice-ready workforce" in education and practice.
  - New models needed to reach the Quadruple Aim

HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA) FUNDED EDUCATION PROGRAM

- Enhancing Interprofessional Integrative Psychiatric/Mental Health Nurse Practitioner Education to Address Health Care of Persons with Psychiatric Disorders and Other Chronic Conditions (PI Merrie Kaas, $1.3M/3 years)
- First funded IPE project focusing on psychiatric-mental health nursing education

GRANT GOALS

- Enhance the psychiatric mental health NP DNP courses with evidence-based integrative approaches for persons with multiple chronic mental and physical health conditions
- Create interprofessional educational learning experiences for PMH NP, PharmD, and Occupational Therapy students, faculty and staff at clinical sites.
- Design, implement and evaluate agency-tailored, authentic IP clinical education experiences for PMH NP, PharmD, and OT students in partnership with two community based mental health care agencies.
PARTNERS
- Faculty from U of M School of Nursing, OT, and Pharmacy.
- Faculty from Interprofessional Education Resource Center (IERC)
- Evaluation Team: Upfront Consulting
- National Center for IPE/CP housed at U of M

YEAR 1: DEVELOPMENT
- Design with the end in mind and think backwards
- Frequent faculty meetings
  - Shared language
  - Common commitment
- Departmental meetings
  - Student Schedules
  - Approval of course changes
  - Cross listing of courses
- National Center for IPE
  - IPE/CP Competencies
  - Resources & Literature
  - Data base
INTERPROFESSIONAL COMPETENCIES IN HEALTH CARE

Integrated enactment of knowledge, skills, and values/attitudes that define working together across the professions, with other health care workers, and with patients, along with families and communities, to improve health outcomes in specific care contexts

- Communication
- Roles & Responsibilities
- Team & Teamwork
- Values & Ethics

(Interprofessional Education Collaborative (2011). Core Competencies for Interprofessional Collaborative Practice.)

Student IPE Learning Goals
Indicators of IP Competency (IPEC)

1. Communication
   Expresses ideas in an assertive & respectful manner, is receptive & available
2. Roles and Responsibilities
   Understanding roles; those unique and those shared and accepts accountability for one’s contributions
3. Team and teamwork
   Understanding team dynamics, shared accountability, leadership & problem-solving
4. Values and Ethics
   Display mutual respect, honor differences

YEAR 2:

- On-line & In-person Changes to two PMH DNP courses
- Learning with, about and from each other
  - Courses redesigned to include IPE content
  - Pharm D student cohort to courses
  - IP group work and assignments
COURSE CONTENT PROMOTING IPE

- Fall Semester: Fundamentals of PMH APRN
  - Learning about each other
    - Video chats
    - On-line discussions
    - IPE modules
  - Learning with each other
    - Social Determinants of Health
    - Small group work
    - Case based learning
    - Mind map assignment
    - Interviewing skills

- Spring Semester: Diagnostic Assessment/Treatment
  - Learning With each other
    - Psychiatric Diagnosis and Treatment
    - Interviewing
  - Learning From each other
    - Holistic Assessment
    - Treatment planning
    - Consistent student group membership to promote open/honest communication

CURRICULAR REVISIONS: SIMULATION

- Purpose: Skill development
  - PMH DNP, PharmD., and OT students
  - Students experience and experiment with models of IPC
  - ‘Authentic recreation’ rather than ‘imitation’ of reality
  - Practice
  - Debrief and discuss the experience as a group
  - Self reflection assignments
  - Interprofessional team huddles before and mid-interview
SIMULATIONS PROMOTING IPE

- Fall Semester: Three simulation experiences
  - Focus: Therapeutic interviewing process & holistic health assessment
  - IP competencies: communication, roles & responsibilities
  - Unfolding cases using Standardized Patients and IP student teams
  - Increasing interprofessional interviewing (Uni-professional to co-located to collaborative interviewing)
  - IP student small group discussion/debrief

- Spring Semester
  - Focus: Diagnostic Assessment and Treatment Planning
  - IP competencies: team & teamwork, values & ethics
  - Faculty interview exemplar
  - Interprofessional interviewing
  - IP student small group discussion/debrief
  - Consistent student group membership to promote deeper communication and trust among team members

INDICATORS OF INTERPROFESSIONAL LEARNING & COMPETENCIES

1. Communication
   - Expresses ideas in an assertive & respectful manner, is receptive & available
2. Roles and Responsibilities
   - Understanding roles; those unique and those shared and accepts accountability for one’s contributions
3. Team and teamwork
   - Understanding team dynamics, shared accountability, leadership & problem-solving
4. Values and Ethics
   - Display mutual respect, honor differences
STUDENT OUTCOMES: QUANTITATIVE

- “Interprofessional Collaboration Self-Assessment of Knowledge and Competence” (Peterson, PI)
  - Descriptive study examining changes in student knowledge and confidence about IPE and IP collaborative practice.
  - Three data points: Time 1 & 2: pre and post simulation day in Fall Semester and Time 3 in Spring
  - 20-item self assessment survey
  - Findings:

STUDENT OUTCOMES: QUALITATIVE

- Communication:
  - I think if we keep our discussions patient-centered, we can really be effective.
  - The more times we work together the more open and honest our discussion becomes.

- Roles & Responsibilities
  - We are all more confident in our own roles and how they complement each other
  - We didn’t really know what each other did, and now we do!

- Team & Teamwork
  - We learned how to make goals that made sense to all of us.
  - We can accomplish so much more together than we ever could by ourselves.

- Values & Ethics
  - The two semesters were really important because we really got to know the other students and their priorities.
  - This is the way I want to practice after I graduate.

TRANSLATING IP KNOWLEDGE TO PRACTICE

- Student Feedback: Readiness for Practice
  - I know that if I had gone in alone with the patient, I would not have gathered even close to as much information as we did and I truly appreciate the different viewpoints my team brought.

  - I feel as though we are all much more comfortable in the patient interviews and are all more confident in our skills. I also feel as though I know how to trust team members to collect information so that we do not have to collect it all.
TRANSLATING IP KNOWLEDGE TO PRACTICE

- Student Feedback: Impact on Practice
  - I feel I have shared language and common purpose with other professionals who I work with and it enhances the patient-centered experience.

  - The collaboration has informed my perspective and my treatment with clients, where it is more holistic, more well-rounded.

PEARLS & RECOMMENDATIONS

- Meet regularly with IP faculty team to plan and address course and curricular issues
- Develop shared language with IP colleagues
- Help all faculty develop IPE competencies
- Listen to student feedback to make improvements
- Stay flexible with plans
- Teach students to keep the patient needs at the center.
- Team and faculty process mirrors student learning