

REGIS UNIVERSITY

Investigating the Value of Interprofessional Education through an

End of Life Experience

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Results

CONTEXT

What is my lens that I look at

How might this materia



Background

- According to the Institute of Medicine, a lack of interprofessional (IP) collaboration has been noted regarding end-of-life care, yet palliative care is recognized to require an interdisciplinary, team-based approach.¹
- Although there are efforts to increase end-of-life education, most healthcare professionals are not prepared to care for the dying in a collaborative, IP fashion.

Purpose

This mixed method, cohort study explores the socialization and value of IP education from the student perspective from an IP simulation focusing on end of life.



ISVS 9 Tool *p≤.01

ISVS 9A Pre IPE Event

ISVS 9B Post- IPE Event

I am able to share and exchange ideas

I have gained an enhanced awareness of my own role on a

	iii a teaiii uiscussioii	team
*Q2:	I have gained an enhanced perception of myself as someone who engages in interprofessional practice	I feel comfortable being the leader in a team situation
*Q3:	I feel comfortable in speaking out within the team when others are not keeping the best interests of the client in mind	I see myself as preferring to work on an interprofessional team
Q4:	I believe that the best decisions are made when members openly share their views and ideas	I have a better appreciation for the value in sharing research evidence across different health professional disciplines in a team
*Q5:	I feel comfortable in describing my professional role to another team member	I believe that it is important to work as a team
*Q6:	I have gained an enhanced awareness of roles of other professionals on a team	I am able to negotiate more openly with others within a team
*Q7:	I have gained an appreciation for the importance of having the client and family as members of a team	feel comfortable in being accountable for the responsibilities I have taken on
*Q8:	I am comfortable engaging in shared decision making with clients	I have gained a better understanding of the client's involvement in decision making around their care
Q9:	I feel comfortable in accepting responsibility delegated to me within a	I feel comfortable in clarifying misconceptions with other members of the team about the role of someone in my

profession

Themes Question **Ignatian Pedagogy Conceptual Model**

Understanding and appreciating the roles of disciplines to increased collaboration **Enhance effective**

- communication **Clarify and prioritize patient** and team goals Improve listening skills
- Increase compassion Continued self-reflection of uncomfortable situations
- **Evaluation-What practice** Importance of wisdom have I arrived at?

Action-What caught my

practice action does it

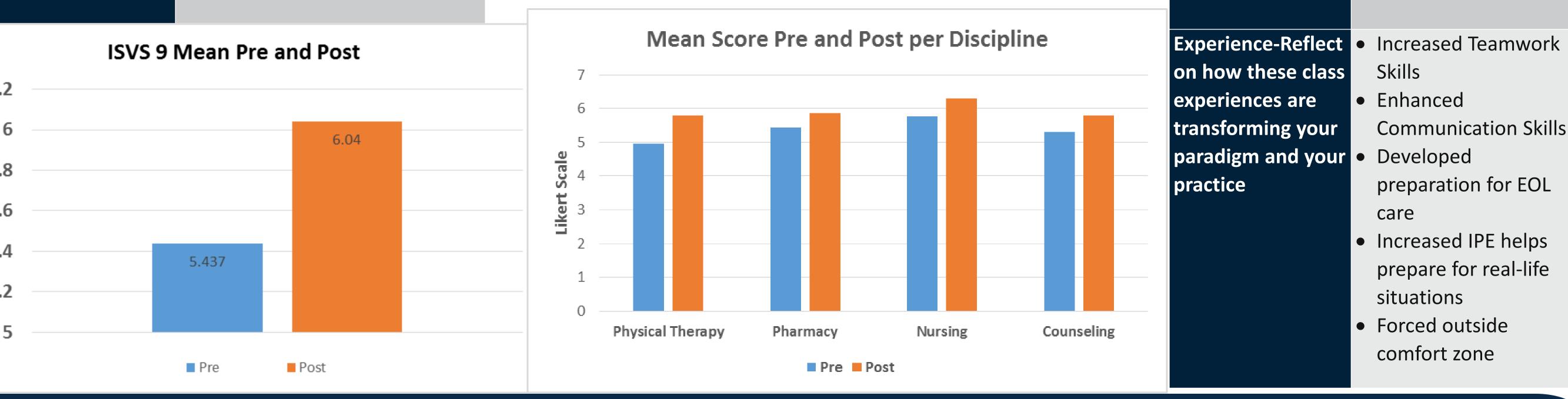
Evaluate how you were

transformed.

attention and what

require of me?

- Team-centered approach Comfort with EOL Situations
- o Listening o Empathy
- o Compassion
- Humility



Question Context-what is the lens that I look • Personal at this material through? How might this material transform my practice?

o Discipline o Role in family o Family members o Personal experience

- o Limited Religion
- Service in military Affective domain

Themes

- Advocate
- o Compassion o Empathy
- How this might transform practice-
- Patient first
- Interpersonal skills Role and
- Responsibilities
- Enhanced
- **Communication Skills** paradigm and your • Developed preparation for EOL
 - Increased IPE helps prepare for real-life
 - situations Forced outside
 - comfort zone

- Data was robust with 244/321 participants quantitatively and 82 qualitative post reflection completed (76%).
- Paired t-test revealed a statistical significance in 8 of 9 questions (p-value ≤0.05) and 7 of 9 questions (p value ≤0.01) collectively.
- Discipline specific change occurred in Nursing, Physical Therapy, Pharmacy and Counseling respectively.
- Qualitative themes included: how might this material change your practice revolving around meeting people where they are at; transforming your paradigm and practice; the action the simulation required of the students; and how the student was transformed as a result of participation in this simulation.

Conclusions

- IPE is enhanced through an end of life simulation, as evidenced by positive gains in the value of interprofessional practice.
- The qualitative themes reported the importance of listening, empathy, and an increased awareness of uncomfortable situations, such as communication about the end of life.

Methods

- Nursing, pharmacy, physical therapy, and counseling students participated in a two-hour IP end of life simulation event.
- Willing participants were assigned to IP groups and self-assessed their Interprofessional Socialization and Value (ISVS-9A)² prior to the simulation.
- The event progressed with a didactic lecture on communication at the end of life, then participation in a role play activity where students actively participated as an interprofessional team creating a care plan for a patient with advanced cancer. After the event, students then self-assessed using the ISVS-9B² as well as a post-reflection.
- A paired t-test further analyzed comparisons to the groups, pre- and post-assessments.
- Qualitative questions revolved around the Ignation Pedagogy³ on the context, experience, action and evaluation of the event and open coding occurred by an experienced researcher.

References

- ¹Institute of Medicine (2015). Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life. Committee on Approaching Death: Addressing Key End of Life Issues. Washington (DC): National Academies Press (US); March 19, 2015.
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- Pennington, Karen; Crewell, Judy; Snedden, Traci; Mulhall, Margaret; and Ellison, Nicole (2013) "Ignatian Pedagogy: Transforming Nursing Education," Jesuit Higher Education: A Journal: Vol. 2: No. 1, Article 6. Available at: https://epublications.regis.edu/jhe/vol2/iss1/6