The Inter Health Professionals Alliance: Student Perceptions of Interprofessional Education & Barriers to Co-curricular Participation

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Interprofessional education (IPE) occurs when members of >1 health profession learn and work together interactively to improve the health and well-being of patients. This is accomplished through:

- improvements in **collaborative team behaviors** (Morey et al. 2002)
- mental health **practitioner competencies** (Young et al. 2005)
- increased **patient satisfaction** (Campbell et al. 2001)

Opportunities to participate in IPE in university settings can be met with similar success, as students:

- see **improvements in attitudes** towards interprofessional teams
- **greater confidence** in professional roles (Eccott et al. 2012)
- enhance knowledge regarding **ethical decision making** (Wilhelm et al. 2014)
These findings were emphasized by a qualitative study conducted by the founding members of the Inter Health Professionals Alliance (IHPA) at Virginia Commonwealth University (VanderWielen et al. 2014) and presented at a previous Emswiller Symposium!

This study identified the following as core benefits of group involvement in IHPA, from the perspective of founding members:
This study seeks to expand upon these findings by exploring perceptions of general membership of the same student-led interprofessional organization as it enters its’ sixth year of operations.

Specifically, we wanted to be able to:

1. Examine how students at VCU perceive interprofessional education
2. Explore how students’ perceptions influence their choice to participate in optional interprofessional opportunities
Study Design & Measures

Concurrent embedded methods design used to collect quantitative and qualitative data using online, anonymous survey administered via e-mail to current members of IHPA

Conducted in Spring 2015, using web-based survey and database tool, Research Electronic Data Capture (REDCap)

Attitudes Toward Health Care Teams Scale (Leipzig et al. 2002)
  • Attitudes Toward Team Value (11 items)
  • Attitudes Toward Team Efficiency (5 items)

Open ended questions developed by research team
  • Pilot-tested with IHPA graduates
  • Used to understand how students define and view IPE
Quantitative Data Analysis

Descriptive statistics provided for study population

Attitudes Toward Health Care Team subscales
• Sample size
• Mean, SD, and range provided
• Internal reliability calculated
Qualitative Data Analyses

Individual responses downloaded and imported to Atlas.ti, based on each individual question

Codes were developed by research team using in-vivo coding process
• Definitions of IPE, benefits of IPE, outcomes of IPE, etc.

Once coding structure developed, all team members individually coded transcripts
Team met on a weekly basis to conduct line-by-line analysis of qualitative responses.

Team meetings were focused on coming to agreement over coding structure and resolving discrepancies in individual coding.

Atlas.ti was used to create a master file with agreed upon codes to organize data and calculate frequency of code usage which was used to explore emerging themes.
Virginia Commonwealth University

- Urban, public research university
- VCU Health Sciences on MCV Campus includes five schools: Allied Health Professions, Dentistry, Medicine, Nursing, and Pharmacy
- Center for Interprofessional Education and Collaborative Care (CIECC) founded with goal of overseeing interprofessional education in 2012
- The Inter Health Professionals Alliance established by health professional students seeking to promote interprofessional interaction and engagement among students on the MCV Campus in 2010
Inter Health Professionals Alliance (IHPA)

IHPA has worked towards cultivating a network of health professionals rooted in teamwork and collaboration leading to high-quality, well-rounded patient care by:

- Focusing on community outreach
- Providing voluntary opportunities to expand and apply knowledge in an interprofessional setting
- Enhancing future practice
- Helping students understand different team roles and how those roles can be filled by different team members
## Participant Characteristics

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants</td>
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<td></td>
</tr>
<tr>
<td>Average age</td>
<td>26.0</td>
<td></td>
</tr>
<tr>
<td>Sex</td>
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<td></td>
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<tr>
<td>Male</td>
<td>5</td>
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<td>3.6</td>
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<td>Race</td>
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<td>42.9</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>3.6</td>
</tr>
</tbody>
</table>

Note: Two respondents did not provide demographic information.
Distribution of Participants

Other includes: School of Education, PhD Student with unspecified school, Dietetic Intern (Registered Dietitian), Traditional Baccalaureate Program (Pre-Dental, Pre-Physical Therapy, and unspecified)
## Attitudes Toward Health Care Teams Scale

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>α</th>
<th>mean</th>
<th>SD</th>
<th>range</th>
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</thead>
<tbody>
<tr>
<td>Attitudes Toward Team Value (5-item)</td>
<td>28</td>
<td>0.813</td>
<td>4.21</td>
<td>0.466</td>
<td>1.73 - 5.00</td>
</tr>
<tr>
<td>Attitudes Toward Team Efficiency (11-item)</td>
<td>29</td>
<td>0.807</td>
<td>3.37</td>
<td>0.867</td>
<td>1.00 - 4.60</td>
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</tbody>
</table>

Note: Higher values = more positive attitude towards construct
Theme 1: Lack of Consensus on Motivations Toward IPE
- When defining IPE, students responded with variety of definitions. Most definitions lacked depth and clarity: “learning with members from all different health disciplines”; “working interprofessionally”

Theme 2: Suggestions to Increase Participation in IPE
- Responses were focused on networking and social events: “…more short activities that promote networking”, “happy hours” and “fun social activities”

Mismatch in definition of IPE and suggestions to increase IPE
- Asking about high quality IPE focus on skill-building/ability to apply in the future, while suggestions for increased participation focus on social events and networking activities
Perceived Benefits to IPE

Theme 3: Benefits of IPE viewed through future orientation lens
“...very relevant to what we will be doing in the future, and each profession needs to have a basic understanding of the hurdles and issues related to others' professions that they will be working with.”

- **Knowledge & Skill Building**: “...opportunity to appreciate how others can enhance problem solving capabilities, including patient treatment...”

- **Networking**: “In the future, we will have to work together with professionals from other disciplines so [it] is a good way to begin a relationship and bridge of communication.”

- **Roles & Expertise**: “…helps to broaden my views and perceptions ... I am able to see how my future career fits in with others, and this motivates me to learn as much as I can now, so that when I join a 'real' healthcare team in the future, I can fully ... step up to my job.”
Perceived Barriers to IPE

Theme 4: Barriers attributed to time and personal interest

Time: referred to most often as a barrier to participation in optional IPE activities
  • Scheduling, conflicts with academic requirements, and priority-setting were specifically mentioned: “I can attend activities based on my work/school schedule”

Personal Interest
  • Participants stated that topics and events had to be relevant to personal interest: “topics that interest me”
Discussion

Attitudes toward Team Efficiency and Team Value
Attitudes toward Team Value higher than Team Efficiency

No significant correlation between the two scales: not overlapping constructs
  ● Students may see value of healthcare team, but may also find it inefficient

Important to look at these constructs from a mixed-methods approach:
  Use of quantitative scales show positive attitudes, but qualitative data showed:
    ● Underdeveloped definitions and identification of components of high quality IPE
    ● Concept of priority and motivations to participate, driven by future orientation
Discussion

Perceptions of IPE

*Underdeveloped understanding of IPE:* students may need to be introduced to what IPE is in order for students to place higher priority on participation

Benefits of IPE

*Lens of Future Orientation:* other than networking/being social with classmates, students described benefits of IPE relevant to their future careers.
  - Responses did not refer to them benefitting to them in their current classes/academic endeavors

Barriers to IPE

*Priority:* Blend of time and personal interest identified as barriers; called into question how important IPE is perceived during time as students
Conclusions

- While students perceive benefits of IPE, motivations to participate and students’ perceptions of what encompasses meaningful IPE may vary, which could impact rates of participation in IPE activities.

- Individuals promoting student-led initiatives should proactively gain student perspectives on the importance of IPE and how to increase and maintain participation.

Limitations: unique setting with five health professional schools and a center dedicated to interprofessional education and care, use of optional online survey, and small sample size.
