Impact of a Graduate Interprofessional Clinical Immersion Experience with Older Adults
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Purpose
- Evaluate the impact of a clinical immersion experience with an older adult patient population on the development of interdisciplinary and team care competencies among medical and nurse practitioner students.

Background
- Core Competencies for Interprofessional (IP) Collaborative Practice restructure the organizing educational framework to include interprofessional education (IFE) of all health professions students (IPEC, 2011).
- IPEC competencies are aligned within four domains: 1) Values and Ethics, 2) Roles and Responsibilities, 3) IP Communication; and 4) Teams and Teamwork.
- The Partnership for Health in Aging (PHA) and the American Geriatric Society (AGS) multidisciplinary competency domain #4, Interdisciplinary and Team Care, closely align with the IPEC competency domain of teams and teamwork.
- Extant literature suggests that health professions move from educating in discipline-specific silos to IP cohorts to better appreciate the unique and combined contribution of various providers in the management of complex health problems. Data indicates that IP education may promote better patient outcomes.
- Strategies need to be developed, implemented and evaluated that focus on increasing knowledge and attainment of IPEC competencies, particularly with vulnerable older adults.

Specific Aims
- To obtain foundational knowledge as a first step for future IPE development and evaluation.
- Implement and evaluate an online educational strategy designed to augment clinical immersion.
- Assess and evaluate graduate students’ perceptions of a 2-week interprofessional clinical immersion.

Interdisciplinary and Team Care Competencies
- Multiple healthcare providers working together to achieve positive outcomes for older adults.
- Incorporating discipline-specific information into team care planning and implementation.

Setting and Participants
- Small scale prospective pilot.
- One group pre- and post- educational intervention.
- Post clinical immersion debriefing.

Project Design
- Large multi-site Federally Qualified Health Center located on the west coast of Florida.
- Graduate health professional students from the University of South Florida Colleges of Medicine and Nursing completing rotations focused on care of older adults under the terms and provisions of a Geriatric Workforce Enhancement Program (GWEP) grant awarded.

Interprofessional Collaboration Competency Domain

Interprofessional Collaborative Competency Attainment Survey (ICCAS) *
( Archibald, Trumpower, & MacDonald, 2014)

Attitudes Towards Health Care Teams Survey (ATHCTS) * (Hyer, Fairchil, Abraham, Moezy, & Fulmer, 2000)
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Debriefing Results (n = 4)

Central Concept
- Collaboration Practice
- Core values and Practice Roles for Older Adults
- Value of Geriatric Environment
- Resources for Older Adults
- Interprofessional Team Action for Practice

Illustrative Examples
- “Working collaboratively with the medical student and among their nursing and pharmacists improved understanding and enhanced knowledge in medication-based practice and patient education.”
- “Understanding what options are available in older adults that can’t leave the home requires planning for the clinical environment, such as Senior Caseworker.”
- “The computer operator created a voice teacher learning environment during the clinical immersion to aid geriatrics.”
- “The emphasis of the electronic medical record in the data sharing process creates the desire and need to better design for the lay person and patient communication for the healthcare team members.”

The Learning Continuum pre-licensure through practice trajectory

The Partnership for Health in Aging (PHA) and the American Geriatric Society (AGS) multidisciplinary competency domain #4, Interdisciplinary and Team Care, closely align with the IPEC competency domain of teams and teamwork.

Methods/Analysis
- Following IRB approval (R00027133), this project was conducted in a prospective manner over a 6 week period from October to early December.
- Each clinical immersion experience was 2 weeks in duration and included 1 to 2 nurse practitioner students and 1 medical resident participants, forming an interdisciplinary student team.
- Following informed consent, participants were asked to complete the Interprofessional Collaborative Competency Attainment Survey (ICCAS) and the Attributes Towards Health Care Teams Survey (ATHCTS) at the beginning of each immersion rotation, prior to the educational intervention, and at the end of each immersion rotation.
- Debriefing sessions were conducted at the conclusion of each immersion experience to obtain student perceptions on the clinical immersion experience.

Instruments
- Interprofessional Collaborative Competency Attainment Survey (ICCAS) *
- Attitudes Towards Health Care Teams Survey (ATHCTS) *

* Copy for viewing upon request

Discussion
Implications for Practice
- 11 central concepts identified from the debriefing data that can impact future clinical immersion curricular design.
- Identification of health information systems and patient volume as potential barriers within a clinical immersion experience.

Limitations
- Collection of pre- and post-intervention ICCAS and ATHCTS data was delayed as a result of unintended changes in the Fall 2016 start dates for students’ clinical rotations. Data in this category were collected from three students and were insufficient for analysis.

Recommendations
- Replicate pilot project in future semesters with larger samples.

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