

Nursing and Interprofessional Education in the Experiential Learning Commons

CATALYST FOR CHANGE: According to the Society for Medical Education “IPE for medical and nursing students can encourage positive mutual attitudes, better understanding of professional roles in caring for patients and their caregivers as well as improved information and knowledge exchange to cooperate during their daily practical work. By teaching future health care personnel how to work collaboratively through a team-based approach, we can minimize fragmentation of care delivery, reduce medical errors and adverse outcomes, and improve patient care and patient outcomes.”

INTRODUCTION: Modern healthcare is a team activity, which features a group of health professionals working together to deliver excellent care and quality patient outcomes. As healthcare becomes progressively more specialized, interprofessional collaboration in healthcare becomes more important than ever. Therefore, to ensure that we train our student nurses to provide high quality patient care, it is imperative that we include interprofessional activities in our nursing curriculum. To this end, IPE activities have become a permanent part of the Saint Francis University’s Nursing program and two of those activities are the “Physical Therapy and Nursing Students Experience” and the “Developmental Psychology and Patient with Pre-eclampsia Experience.”

EXPERIENCE A: Physical Therapy and Nursing Students Experience:

Step #1: In a classroom setting, the Physical Therapy instructor presented junior level nursing students with a PowerPoint presentation titled “Medical Patient Transfer” that included both text, oral and pictorial presentations.

Objectives: Discuss and define various patient transfer techniques; Describe and apply principles in body mechanics for safe patient transfer and caregiver safety; Discuss appropriate measures to determine the type of assistance needed for a proper transfer; Discuss appropriate equipment needed to perform proper transfer; Discuss the interactions between nursing and physical therapy as it relates to coordination of patient care.

Topics: Safe transfers; Assisted vs unassisted transfers; General Transfer Principles for Pivot transfer; Recumbent dependent lifts; Sitting transfer; Bed mobility; Standing transfers; documentation; steps in coordinating a patient transfer; planning; organization; communication. Patient and clinician safety: medical records review; Healthcare Team collaboration; Interview/meet with patient; Principles and Precautions to follow.

Question/Answer/Discussion topics included: questions and answer session to help students become aware of what they do or do not know; the role physical therapists play in patient care; how physical therapists and nurses collaborate when caring for patients; why correct transfers are needed and how they assist in nursing care, patient care and patient function; the impact of proper transfer techniques the well-being of the healthcare providers

Step #2: took place in the Experiential Learning Commons Interprofessional Skills Lab. This environment facilitates learning by providing the faculty and students with a fully functioning clinical setting, models, equipment, and supplies necessary to learn hands-on clinical skills, the delivery of patient care, and the prioritization of patient care through clinical exposure, feedback, and evaluation. Phases included: Student orientation to equipment used for patient transfer by the Physical Therapy Department; Demonstration on proper technique and usage of the equipment by the Physical Therapy Department; Hands-on Experience for Nursing students, under the supervision of the Physical Therapy Department and the Nursing Department faculty:

- Learned how to safely transfer patients using the techniques reviewed in the PowerPoint presentation and demonstrated by the Physical Therapy Department

- Learned the proper techniques to ensure their safety when transferring patients as demonstrated by the Physical Therapy Department
- Learned how to collaborate with members of other healthcare disciplines

Step #3: Debriefing and Student Evaluations

- Debriefing: To maximize the learning experience, provide an opportunity for additional questions and clarification, review of the objectives, and allow the students to reflect on what they learned from both the classroom and hands-on experiences, a debriefing was conducted with the students by the nursing and physical therapy faculty.
- Students Evaluations: Students then completed an online evaluation that included questions related to the preparation phase (PowerPoint presentation and demonstration session) of their experience, the hands-on/practice session, and the debriefing experience. Responses for all three areas were overwhelmingly positive. In addition, students were able to free text comments into the online form. Most free text comments were positive with the students asking that additional interprofessional experiences be added to their curriculum.

EXPERIENCE B: Developmental Psychology and the Patient with Severe Preeclampsia

This case presented a 23-year-old African American female diagnosed with severe preeclampsia admitted to the labor and delivery unit for assessment and surveillance.

Objectives/Students will: receive an overview and tour of the ELC to understand how it can be used to further student learning and progression of studies through use of hands-on and applied learning tools (manikins and pre-scripted scenarios); participate in the learning experience; be made aware of the difference between eclampsia and preeclampsia and the dangers to the mother and child of such complications and the hectic nature of a birthing environment, and the importance of an Interprofessional approach to a birth scenario; will apply what they learned from class lecture and the text) of the importance of skin-to-skin contact directly after birth and how the reality of eclampsia and preeclampsia can negatively affect this psychological and physiological experience for the mother and newborn; discuss with nursing and psychology faculty the developmental outcomes/milestones to the newborn because of a preeclampsia birth; collaborate with interprofessional team as appropriate; communicate effectively with patient, family, and health care team

Step #1: Students (nursing and psychology) received a tour and an overview of the Experiential Learning Commons (ELC) and how the facilities are used to further student learning and progression of studies through use of hands-on and applied learning tools such as manikins and pre-scripted scenarios used during and for simulation

Step #2: A history of the patient's condition was provided to the psychology students by the senior level nursing students and the nursing faculty who were conducting the simulation experience. It should be noted that all disciplines from the School of Health Sciences and Education (nursing, physician assistant, physical therapy, occupational therapy, exercise physiology, education, and social work) were represented in the psychology class. Step # 2 took place in the Experiential Learning Commons Maternal/Infant Room with the psychology class students observing and taking notes while the nursing students conducted the actual simulation. This room is customized to prepare students to practice caring for the laboring woman and her newborn and is equipped with high-fidelity human patient birthing and newborn simulators

Step #3: The simulation scenario was conducted using the SimMom Laerdal high fidelity birthing manikin, the SimNewB infant manikin and the SimCapture video recording system. One of the most important objectives during the experience was for the nurses caring for the patient to identify the potential physiological risks to mother and baby and to respond with appropriate clinical management strategies. Second was for the observers (the psychology class) to recognize the stress caused by a traumatic pregnancy and delivery and the potential effects this can have on both the

mother and the infant that could include: Inability to emotionally cope and Psychiatric complications such as post-traumatic stress disorder (PTSD) and post-partum mood disorders (PPMD).

It was for observers (psychology) and participants (nursing students) to identify both physical and psychological interventions that could be implemented to assist the mother and the infant. Suffering a serious illness, combined with the unexpected (caesarean section, birth of a premature child, infant loss, or an emergency medical situation) is a heavy burden to bear both physically and psychologically. Finally, observers and presenters needed to be aware of the potential impact such a situation could have on the caregivers, particularly if the outcome resulted in death of the infant and/or mother.

Step#4: Debriefing and Evaluations: Debriefing, with Nursing and Psychology faculty, was used to maximize the learning experience, for questions, clarification, and reflection on what they learned. Students completed an online evaluation, which included questions related to the pre-briefing, the hands-on session, and the debriefing experience. Responses were overwhelmingly positive in all three areas. These students also asked for the addition of more interprofessional experiences to their curriculum

EVIDENCE OF SUSTAINABILITY: To ensure high quality patient care an effective interprofessional collaboration between healthcare professionals is required. Interprofessional education (IPE) has a positive impact on teamwork in daily health care practice and the overwhelmingly positive response from students and faculty to these two IPE experiences reinforces the Nursing Departments intention to continue to assimilate IPE into the nursing curriculum. In doing so Nursing Department leadership recognizes the importance of teamwork and collaborative practice to providing the safest and highest quality care to patients.

POTENTIAL FOR REPLICATION AND DISSEMINATION: Interprofessional education (IPE) in healthcare is a model in which, in this case, nursing students work together across disciplines to help them develop interprofessional communication, collaboration, and teamwork. The results of these experiences, including the student evaluations, are shared with the faculty members from the respective departments, the Chairperson of the Nursing Department and the Dean of the School of Health Sciences and Education.

CONSISTENCY WITH AACN MISSION AND VISION: Integrating interprofessional education for nurses into the nursing curriculum is key to transforming nursing education and the inclusion of IPE activities supports AACN's Mission of striving for excellence in patient care and their Vision to create a healthcare system driven by the needs of patients and families where...nurses make their optimal contribution. As stated in AACN's Interdisciplinary Education and Practice Position Statement, Saint Francis University's Nursing Program believes that "All health care disciplines share a common and primary commitment to serving the patient and working toward the ideal of health for all. While each discipline has its own focus, the scope of health care mandates that health professionals work collaboratively and with other related disciplines." To these ends, the SFU Nursing program actively and consciously includes IPE activities in its courses of study.

DEMONSTRATION OF ADVANCEMENT OF NURSING EDUCATION: IPE promotes interprofessional cooperation between and among all healthcare professions including nursing. Therefore, skills learned by the participation in interprofessional education experiences lend themselves to improved interprofessional communication and enhanced understanding of the roles of those disciplines participating in these experiences, as well as a better prepared workforce. All primary preconditions to decrease medical error and improve cooperative patient-centered care.