

CLINICAL INSTRUCTORS' PERCEPTIONS OF INTERPROFESSIONAL PRACTICE AND EDUCATION

Nicholas M. Hudak, MPA, MEd, PA-C, Duke University School of Medicine, Physician Assistant Program

Betsy Melcher, MS, ATC, MHS, PA-C, Duke University School of Medicine, Physician Assistant Program

Background: Similar to other health professions, interprofessional education (IPE) has been identified as a key component of expansion of the Physician Assistant (PA) profession and is a required area of instruction for PA program accreditation. While there is increasing momentum behind the IPE movement across all health professions, a recent Cochrane review concluded that there are a low number of quality studies on IPE and the results have been mixed. Health professions educators generally accept that IPE is occurring during clinical education, however, few studies describe IPE interventions and outcomes in clinical settings.

Objectives: This study was designed to explore clinical instructors' perceptions of interprofessional practice in clinical settings, the nature and variety of students' interprofessional interactions during clinical education, and factors that facilitate or limit those interactions.

Methods: This qualitative study involved semi-structured interviews with a purposive sample of clinical instructors from a single program to assess perceptions of interprofessional learning in clinical settings. Interviews were audio-recorded, professionally transcribed, and then analyzed through an iterative process to identify key conceptual themes.

Results/Outcomes/Improvements: Fourteen clinical instructors, comprised of physicians and PAs, were interviewed. Key conceptual themes include that clinical instructors (1) define interprofessional practice in different ways, (2) believe IPE happens through student participation in patient care, (3) keep students apart in clinical settings to avoid diluting learning experiences, and (4) facilitate IPE by introducing students to other members of the team and role modeling team communication.

Significance/Implications/Relevance: Qualitative research is not intended to produce generalizable results, but allows for deep exploration of the perceptions related to the research topic. The findings of this study provide new understanding of clinical instructors' perceptions that can inform teaching and evaluation strategies as well as further research. Health professions educators may enhance IPE at clinical sites by educating clinical instructors about IPE terms, learning objectives, and methods of evaluation. This should involve student interaction with other members of the health care team in direct patient care. Clinical instructors may also have to be deliberate in providing different types of health professions students with opportunities to interact with one another. Making introductions and role modeling are IPE teaching methods that all clinical instructors may incorporate into students' clinical education. These themes may be further explored through quantitative and qualitative research involving students, clinical instructors, and educational programs.

References

1. Core competencies for interprofessional collaborative practice: Report of an expert panel. American Association of Colleges of Nursing Web site. <http://www.aacn.nche.edu/education-resources/ipecreport.pdf>. Published May 2011. Accessed May 29, 2015.
2. Reeves S, Zwarenstein M, Goldman J, Freeth D, Zwarenstein M. Interprofessional education: Effects on professional practice and health care outcomes. *Cochrane Database Syst Rev.* 2013;3:CD002213.
3. Thistlethwaite J. Interprofessional education: a review of context, learning, and research agenda. *Med Educ.* 2012;46(1):58-70.