

FACULTY DEVELOPMENT FOR INPATIENT INTERPROFESSIONAL EDUCATION

April Cooper, PharmD; Duke Regional Hospital, Sarah Hale, PhD; Duke University School of Medicine,
Poonam Sharma, MD; Duke Regional Hospital

Background: Pharmacy students are placed in interprofessional teams with physicians and other health professions students in the hospital during their training. While this would seem to be a natural setting for facilitating interprofessional education (IPE) and interprofessional collaboration (IPC), little research has been done to determine faculty physicians' ability to facilitate IPE in the hospital.

Objectives: We sought to determine hospitalists' attitudes towards IPE and IPC, whether hospitalists were facilitating IPE, and hospitalists' knowledge of pharmacy student training. Because there is little data about how to develop and deliver faculty education to improve facilitation of IPE (Hall 2015), we studied the impact of a faculty development activity on hospitalists' knowledge of, attitudes towards, and self-reported rates of facilitating IPE.

Methods: For the initial needs assessment, we surveyed hospitalists at Duke Regional Hospital. The survey included sections that addressed (1) demographics, including questions about duration of career at this site as a hospitalist, duration of working with teaching teams that include a pharmacy student, and how many pharmacy students with which the hospitalist had worked, (2) knowledge of IPE, (3) attitudes towards IPE and IPC with questions based on Curran et al.'s (2007) study of faculty attitudes, and (4) knowledge of the pharmacy student training pathway.

Once the needs assessment was complete, we developed a lecture based faculty development intervention to teach hospitalist faculty about IPE with a focus on facilitating IPE with teams that include pharmacy students. The lecture was a single session given by two of the authors (a physician and pharmacist) during a regularly scheduled hospitalist meeting. To determine the impact of the faculty development lecture, the survey was administered immediately after the session and six months after the lecture.

Results: Thirty-four percent of invited hospitalists (14/41) completed the initial survey. On the initial survey, hospitalists reported working with pharmacy students and had positive attitudes towards IPE and IPC, but only 46% (6/13) reported intentionally facilitating IPE, and none categorized their understanding of pharmacy student training as "good". At six months after the intervention, there was no significant change in hospitalists' attitudes towards, knowledge of or report of rate of facilitation of IPE. While the hospitalists reported working with health professions students, this did not translate into high rates of facilitating IPE, suggesting a need for faculty development even for faculty with exposure to other health professions students.

Significance: This studies demonstrates that neither positive attitudes towards IPE nor experience working with interprofessional learners guarantee that hospitalist faculty have the skill set to intentionally facilitate IPE on the wards. Faculty development remains an ongoing need to promote interprofessional education.

References: Curran VR, Sharpe D, Forristall J. Attitudes of health sciences faculty members towards interprofessional teamwork and education. *Med Educ.* (2007) 41: 892–6.

Hall LW, Zierler BK. Interprofessional Education and Practice Guide No. 1: Developing faculty to effectively facilitate interprofessional education. *Journal of Interprofessional Care*, Vol 29 (2015), 3-7. <http://dx.doi.org/10.3109/13561820.2014.937483>.