

Creating Healthy Work Environments 2019

Asking Nurses and Physicians What They Want to Know About Each Other's Profession

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In realizing opportunities for new models of practice and education in program development, our workshop will provide guidelines for nurses and physicians in obtaining/improving/clarifying roles and responsibilities within a specified clinical environment, i.e. critical care units, floor units, clinics etc. We will introduce the Interprofessional Education Collaborative Core Curriculum with an emphasis on Roles and Responsibilities; emphasize how improved communication can result from understanding roles and responsibilities; explain how our workshop can affect patient and clinician safety. Finally we will provide a sample of our focus group questions, how we processed and interpreted the data, and our planned implementation.

In our study a qualitative description design approach was utilized to interpret data gathered via focus groups. Sandelowski describes qualitative descriptive designs as, “typically an eclectic but reasonable and well-considered combination of sampling and data collection, analysis, and re-presentational techniques.” By promoting critical thinking as an adjunct to interprofessional education and behavior we believe we will promote a means for comprehension, application and synthesis of the information provided that can be taken and used in any clinical setting. We also believe that by promoting smaller group interactions and providing guidelines to conduct an inquiry, the success of interprofessionalism is enhanced by allowing for discussion, questions, and actual interaction between professions in a way that a traditional orientation lecture may not.

Found in the context of our study, these two groups, nurses and physicians, did not know far more than they knew about one another's profession. Notable, however, was the “wanting to know” element of the discussion. In other words, at the same time the participants were articulating something they did not know about the other profession, they were also keen to point out their interest in learning more about the topic under discussion, and would often expand on what their interests were. The study structure and approach could be considered for use by other Institutions as a template or guide for gaining greater insight into the IPE needs and interests of their respective staff and culture in order to craft curriculum accordingly.

As more postgraduates present to the clinical environment with background in IPE, the clinical setting needs to be prepared to encourage and continue interprofessionalism. The study demonstrates that in a brief amount of time, valuable data specific to a particular setting can be obtained, and that there is potential to use this in order to build an environment-specific interprofessional education tool for healthcare professionals.

Title:

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References:

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Abstract Summary:

This workshop offers a way to align new and experienced clinicians with each other, and provides a means that allows a dialogue to begin or proceed. Learners will walk away with an understanding of the benefits of knowing each other’s roles and responsibilities based on the IPEC framework.

Content Outline:

While IPE is taking hold in increasing numbers of medical and nursing schools, it is still not present in every program’s curriculum. There are also the experienced nurses and/or physicians who have not heard the term interprofessionalism or had it explained to them. Based on our study of nurses and physicians, this workshop offers a way to align new and experienced clinicians with each other and provides a means that allows a dialogue to begin or proceed. Our learners will walk away with an understanding of the benefits of knowing each other’s roles and responsibilities based on the IPEC framework; the ways and means by which to find out information or have questions answered about the other profession; an outline by which they can create a unit specific tool to help create an interprofessional environment. By promoting critical thinking as an adjunct to interprofessional education and behavior we believe we will promote a means for comprehension, application and synthesis of the information we provide that can be taken and used in any clinical setting. We also believe that by promoting smaller group interactions and providing guidelines to conduct an inquiry, the success of interprofessionalism is enhanced by allowing for discussion, questions, and actual interaction between professions in a way that a traditional orientation lecture may not.

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