Title:
Impact of Interprofessional Week on Student Perceptions of Interprofessional Education

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Abstract Describes: Completed Work/Project

Applicable Category: Academic, Students, Researchers

Keywords: academic, active learning and interprofessional

Abstract Summary:
Interprofessional Education (IPE) Week featured panel discussions, lectures, and experiential learning activities, such as serious games and simulations. This study discusses impacts of IPE Week on students' perceptions of interprofessional education, measured by the Student Perceptions of Interprofessional Clinical Education-Revised, and compares results based on the type of activity attended.

References:
Abstract Text:

**Purpose:** To help prepare health care students to collaborate as members of an interprofessional team, multiple health care professions at a mid-sized private Midwestern university created an Interprofessional Education (IPE) Week. The IPE Week activities addressed interprofessional competencies required by many health profession’s accreditation standards. Thirteen different IPE activities were offered including panel discussions, lectures, and experiential learning activities, such as serious games and simulations. This study sought (1) to determine if participation in at least one IPE Week activity would increase student awareness and perceptions of IPE, as measured with the Student Perceptions of Interprofessional Clinical Education-Revised (SPICE-R) instrument (Dominguez, Fike, MacLaughlin, & Zorek, 2015) and (2) to determine the difference in outcomes based on the type of learning activity attended (experiential or passive).

**Methods:** Students who participated in at least one IPE Week activity were eligible to be in the study. One week prior to IPE Week, students completed a demographic questionnaire (profession, gender, class status, prior participation in IPE activity) and the SPICE-R instrument. The week after IPE Week, students again completed the SPICE-R and indicated the IPE Week activities in which they participated. Faculty classified the events as experiential or passive, based on the level of student involvement of each event. Students’ pre- and post-survey results were linked with a unique identifier. Researchers used Wilcoxon signed-ranks to determine the presence of differences within groups pre- and post-IPE Week. Change scores were created to determine differences between pre- and post-IPE week scores. Activities that were poorly attended (less than 10 participants) were excluded from analysis. Three didactic and four experiential activities were included in the final analysis.

**Results:** A total of 190 students completed both the pre-SPICE-R and the post-SPICE-R. Participants were from the following departments: athletic training (15.3%), nursing (42.1%), occupational therapy (26.8%), physical therapy (5.3%), public health (6.3%), and other (4.2%). The most attended activities were Breaking-Down Stereotypes (19.5%), Diabetes Escape Room (16.7%), and Emergency Care Simulation (14.3%). In comparing SPICE-R pre-scores and post-scores for all participants, improvement in perceptions of IPE occurred, regardless of the type of learning activity attended. However, taking part in an experiential events activities resulted in significantly higher scores in all three factors of the scale: teamwork and team-based practice, roles/responsibilities, and patient outcomes. However, participating in a didactic learning activity did not result in significant improvement in perceptions of the teamwork and team-based practice factor.

**Conclusion:** Results suggest that IPE Week activities that include participation of a diverse group of health care students can have an impact on student perceptions of
interprofessional clinical education. Both didactic and experiential learning experiences may significantly improve students’ attitudes toward IPE. However, experiential learning experiences may have greater ability than more passive approaches in increasing perceptions of interprofessional teamwork and team-based practice. These results align with findings by Griffin et al. (2016), who found that healthcare students were more satisfied with interactive learning sessions related to IPE.