FACULTY PERCEPTIONS OF INNOVATION AND CHANGE DYNAMICS IN INTERPROFESSIONAL EDUCATION

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Introduction

The effectiveness of interprofessional teams is critical to safe and effective delivery of health care. Educators in the health professions are encouraged to embed interprofessional education (IPE) into curricula. However, integrating IPE presents structural, curricular and human challenges.

• IPE research has focused heavily on learners in pre-licensure and continuing education settings, but less is known about IPE from the faculty point of view.

• A phenomenological study of nursing and medical faculty perceptions regarding key factors in IPE was conducted to remedy that gap.

• The first data analysis revealed two major themes: student-centered, and environment/culture (Loversidge & Demb, JIC (2015).

• During the primary data analysis, the researchers noticed strong references to innovation and change threaded throughout the themes.

• A secondary analysis of the data focused on faculty perceptions of innovation and change dynamics in interprofessional education.

Aims/Purpose

• This poster presents the findings from the innovation and change analysis

Reference: Loversidge, J. M. & Demb, A.(2015). Faculty perceptions of key factors in interprofessional education.*Journal of Interprofessional Care. 29*(4), 298-304. doi:10.3109/13561820.2014.991912.

Methodology

A phenomenological approach was used to understand & interpret the participant's lived experiences.

Sampling
• Sites
  • 3 large Midwestern Institutions
• Participant Selection
  • Intensity/purposive sampling
  • 5 each nursing and medical faculty (2 additional from nursing)
• Sample size
  • Total 32 interviews
  • 17 nursing faculty
  • 15 medical faculty

Data Collection
• Semi-structured interviews, avg. 60 min each
• Digitally audio-recorded and professionally transcribed
• Field notes/research journal
• Document analysis

Data Analysis
NVivo 10 (QSR International)
• Continuous data analysis and reduction
• First analysis: 3 rounds of coding
• Second analysis: 2 rounds of coding

Trustworthiness
• Member checks
• Peer debriefing
• Reflexive journaling

Soundness
• Triangulation of questions
• Triangulation of data through document review
• Thick description
• Search for disconfirming evidence
• Bracketing/clarification of researcher bias

Findings
Innovation Themes

Theme	Subthemes
Innovative Inter-faculty Partnerships	❖ Fundamental curricular redesign of programs ❖ Team teaching ❖ Interdepartmental IPE grants

Curricular Innovation	❖ Collaborative methods & content
	  -Common ground, e.g. QI, Ethics
	  -Peer learning
	❖ Authenticity: meaningful experiential collaborative learning
	  -Working alongside high-functioning interprofessional teams
	  -Spontaneous teachable moments
	❖ Intentionality: faculty facilitated pedagogies
	  -Mentoring/role modeling
	  -Debriefing
	  -Narrative reflection

Sources of Innovation	❖ Faculty as innovators ❖ Student-driven innovation

Change Themes

Theme	Subthemes
Leverage for Organizational Change toward IPE	❖ Champions at Leadership Level ❖ External drivers, e.g. accreditation, IOM reports ❖ Grant funding ❖ Press from early adopters
Growing Organizational Change	❖ Organizational culture strategically refocused ❖ Critical mass of early adopters w/ shared norms/values ❖ Incentivized IPE for students

Sources of Resistance	❖ Structural
	  -Programs in silos
	  -Separate professional cultures
	  -Competition for scarce resources
	  -Saturated curricula
	  -Financial barriers
	❖ Human
	  -Faculty & student perceptions of relative advantage/ disadvantage of IPE innovation
	  -Status quo/path of least resistance

Discussion

Innovation Themes:
• The most successful curricular innovations used collaborative methods, e.g. interprofessional team teaching or peer learning, and/or focused on content common to both professions.
• Authentic, meaningful IPE experiences were the most powerful drivers of IP learning.
• Faculty intentionally employed innovative approaches to pedagogies to help students learn collaboration & teamwork.
• Partnerships between faculty in nursing & medicine led to innovations in curriculum planning, teaching, grant funded projects, & long-term professional relationships.
• Both faculty and students drove innovation. Student pressure for change was motivated by either enthusiasm or frustration.

Change Themes
• Faculty perceived leverage for change came from multiple internal and external sources; leader champions were key.
• The most successful progress toward an IPE-friendly culture included both strategic initiatives and organic (i.e. grass-roots) adoption.
• Sources of resistance were categorized as structural or human.

Implications

• Academic medical centers aiming to embed IPE into the organizational culture should engage leader champions who are in a position to leverage structural & funding support, and encourage inter-faculty collaboration.
• Innovative approaches to fundamental curricular redesign require interfaculty partnerships, with leadership support.
• The most meaningful curricular innovations revolved around common ground, were authentic & experiential, and intentionally delivered.