
THE GEORGE WASHINGTON UNIVERSITY

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International Immersion Experience Impact on Nurse Practitioner and Medical Students Readiness for Interprofessional Education

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Learner Objectives

- Identify interprofessional core competencies
- Examine a study abroad educational intervention
- Judge the value of the Readiness for Interprofessional Learning Scale
- Conclude the value of global interprofessional education models

Disclosure - Debra A. Kosko, East Carolina University

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Background

Fragmentation of care & poor communication between healthcare professions contributes to poor quality, high cost healthcare ---

While care delivered by well-functioning team's decreases costs and improves clinical outcomes

A photograph of a street scene in Nicaragua. On the left, a child is seen from behind, carrying a large, colorful pinwheel on their back. The pinwheel has multiple colored sections (red, yellow, blue, green) and a central hub. The child is walking on a paved street. To the right, a young girl in a white dress is walking towards the camera. In the background, there is a yellow building with a red-tiled roof and a balcony with a metal railing. The building has arched doorways and windows. The text "Nicaragua Interprofessional Study Abroad Program" is overlaid on the right side of the image in a pink, stylized font.

Nicaragua Interprofessional Study Abroad Program

Background

Educating health professions students about team-based care and how to work with other health professionals, known as Interprofessional Education (IPE) ---

Provides the necessary skills to transform the US healthcare delivery system

Background

Educational models that successfully teach interprofessional (IP) core competencies to our health professions students are needed

Interprofessional Core Competencies

- Values/Ethics for IP Practice
- Roles/Responsibilities
- IP Communication
- Teams and Teamwork

Objective

Evaluate the impact of a 2 week IP study abroad program on health professions student's readiness for IPE

Methods

- Outcome-based summative program evaluation
- Convenience sample of 4 family nurse practitioner (FNP) students & 7 medical students.

Methods

Education Model:

- 2 week immersion study abroad in Nicaragua
Students provided patient care in FNP/medical student teams
- Attended debrief sessions
- Everyone stayed at the same hotel, ate meals together, shared free time

Methods

RIPLS – The Readiness for Interprofessional Learning Scale

Administered

- Before departing for Nicaragua
- Immediately upon returning from Nicaragua
- 2 months after returning from Nicaragua

Results

3 of the 4 RIPLS sub-scales had internal consistency reliabilities > 0.90 :

- Teamwork & collaboration
- Negative professional identity
- Positive professional identity

Results

Pre-intervention mean subscale scores exceeded 4.3 out of a maximum 5.0 ---

Indicating a strong ceiling effect.

These high mean scores dipped slightly, never below 4.0, at post-intervention.

Results

Mean scores 2 months after returning from
Nicaragua –

Rebounded and were > 4.5 for all three subscales

Limitations

- Small sample size
- Instrument was not sensitive to capture the change in attitude/knowledge



Conclusions

- RIPLS was a reliable instrument for this program evaluation
- High pre-study abroad scores made it difficult to evaluate substantial change between pre-study abroad and post-study abroad

Conclusions

The IPE program may have produced important changes ---

However, RIPLS could not detect these changes because of the high pre-study abroad ceiling effect.

Conclusions

More research is needed in order to create interprofessional education models that can transform clinical practice:

- Creative models that are “outside the box”
- Global education models
- Immersion education models
- Development of valid and reliable instruments

Implications

Global models of education can also serve
to promote interprofessional
clinical practice globally!

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