

# Interprofessional graduate students' perspectives on caring for vulnerable populations

Patricia Moyle Wright, PhD, CRNP, CNS, CHPN, CNE

Associate Professor of Nursing, The University of Scranton

## **Background**

- Interprofessional collaboration is key to improving the health of all individuals, particularly vulnerable populations (Institute of Medicine, 2011).
- Vulnerable populations have complex needs best met through interprofessional teams because "... the expertise and instincts of a number of trained health practitioners are brought to bear in an environment that values brainstorming, consultation, and collaboration (The Pew Health Professions Commission, 1998)."
- Interprofessional education helps prepare professionals for interprofessional practice (Bajnok, Puddester, MacDonald, Archibald, & Kuhl, 2012).

### **Research questions**

- What vulnerable populations do interprofessional graduate students encounter during clinical rotations?
- What do interprofessional graduate students see as barriers to providing quality care for vulnerable populations?
- What ethical issues do interprofessional graduate students perceive when caring for vulnerable populations?
- How can opportunities for interprofessional learning opportunities be expanded?

### **Method**

- Focus group study conducted after IRB approval
- Instructors invited interprofessional graduate students to participate but did not serve as moderators. No instructor had knowledge of who participated. Attendance indicated consent.
- Participants included: Family Nurse Practitioner (n=31), Occupational Therapy (n=19), and Physical Therapy (n=37) students.
- Students were asked to discuss their clinical experiences with vulnerable populations, barriers to quality care, ethical issues, and interprofessional education.

# **Results**

- Vulnerable populations: Patients with limited English proficiency, older adults, uninsured or underinsured patients, and low SES groups. Rural residents, undereducated patients, teenage parents, at-risk youth, and patients who have chronic disease (mental illness, HIV, cardiac disease, or renal failure).
- Barriers: Age, lack of social support, fragmented care, lack of diversity among providers, out-of-pocket health care costs, and lack of transportation.
- Ethical issues: Reimbursement regulations restricted care. Some providers refuse to provide care for patients on medical assistance plans.
- Interprofessional education: Increased opportunities for collaboration needed during educational programs. Service learning opportunities, telehealth, and "teaching exchanges" where students with expertise in a certain area, such as patient transfers, would teach students in other programs those skills. Case studies and development of interdisciplinary care plans would also provide opportunities for collaboration.