EVALUATING READINESS FOR INTERPROFESSIONAL LEARNING IN AN UNDERGRADUATE PROGRAMME FOR HEALTHCARE STUDENTS FROM 6 DISCIPLINES IN LAUSANNE, SWITZERLAND

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Context

In 2015, 5 educational and health institutions implemented a 2 days Interprofessional Education (IPE) project to bring together undergraduate students from 6 disciplines.

Aim

To explore the impact of this IPE project on the student's readiness for interprofessional learning.

Method

Pre-post design with the French validated questionnaire "Readiness for Interprofessional Learning Scale" (RIPLS).

IPE Programme

The programme combined three half days consisting plenary sessions and interprofessional team building through exercises around complex clinical situations in interprofessional groups.

Findings

Analysis was carried out on questionnaires filled in by 121 students who completed the pre- and post-test using the same pseudo (18.64% of the 649 students).

A primary descriptive analysis suggests that there are few differences between the pre and post-score for each subscale. Indeed, the dominant values for each subscale are very close (Table 3).

				Subscale	Pre-test	Post-test	t-test	ddl	P-value
Discipline	Students involved in IPE Programme	Percentage of participation	Number of students	1. Teamwork and collaboration	Possible max: 45	34.76	-0.915		0.362
Medicine (FBM)*	140	28%	34	Mean SD	34.37 4.38	5.97 37			
Midwifery (HESAV)*	27	9%	11	Mode	34	37			
Nursing (HESAV & ELS)*	366	31%	37	2. Negative Professional Identity Mean SD	Possible max: 15 7.02 2.05	Possible max: 15 6.88 2.32	0.780	120	0.437
Occupational therapy (EESP)*	48	12%	15						
Physiotherapy (HESAV)	39	13%	16	Mode	7	6			
Radiologic technology (HESAV)	29	7%	8	3. Positive Professional Identity	Possible max: 20	Possible max: 20	-0.513	120	0.609
TOTAL	649	100%	121	Mean SD Mode	14.5 3.13 16	14.62 3.13 16			
<i>Table 1 : Percentage of students per discipline participating in the pre- and post-test (N=121)</i> * <i>FBM= Faculté de Biologie et de Médecine HESAV = Haute Ecole de Santé Vaud ELS = Institut et Haute</i> Ecole de Santé La Source Lausanne EESP = École d'étude sociales et pédagogique, Lausanne				<mark>4. Roles and Responsibilities</mark> Mean SD Mode	Possible max:15 6.83 1.77 6-7	Possible max:15 6.41 2.17 7	2.567	120	0.011*
RIPLS's subscales				Total RIPLS Mean	Possible max: 95 62.72	, Possible max: 95 62.67			
The student's readiness for IPE, using the RIPLS, can be assessed by four sub-factors, or subscales, which involve several items (Table 2).				SD	10.78	12.99			
Subscale	Involved items	s Conte	nt	Table 3: RIPLS Subscales for Students Completing pre and post-test RIPLS. *significant					
Teamwork and Collaboration 1,4,7,11,13,14,15,17,19 Evaluates the attitude regarding the effect of shared learning with other healthcare students around clinical and communication issues.				The subscale Roles and Responsibilities shows a significant difference (t-test: 2.567, p- value: 0.011). This result indicates that participating to this IPE Programme is significant- ly relevant on how students evaluate their own roles and those of the other healthcare students.					
Negative Professional Identity	2,10,18	regardi	es the negative statements ng the value of interpro- al working.						
Positive Professional le	dentity 3,6,9,16	blem-so	es communication, pro- olving and team skills by learning experiences.						
Roles and Responsibil	ity 5,8,12		es the student's own roles se of the other healthcare s.	The dominant score for subscale 2 is located in the middle ("undecided"). The items' wor- ding for this subscale compares interprofessional work with intraprofessional work. In our study, we hypothesise that the students' identity is still under construction. Therefore the					
Table 2 : RIPLS Subscales, involved items and content.				study, we hypothesise that the students identity is still under construction. Therefore the students are not able to position themselves yet.					

Discussion and conclusion

The significant results with the subscale Roles and Responsibilities confirm that participating to the IPE programme allows undergraduate students to modify their perception of their own professional roles and those of the other healthcare students. Based on the items from this subscale, we hypothesise that the students:

- assert themselves in understanding their future professional role.
- think that each profession has specific learnings.
- distinguish the roles and the responsibilities from each profession better.

Clarifying one's own role and the role of the others as well as collaborative leadership belong to the specific competencies needed in an interprofessional approach; our results reveal that the IPE Programme at HESAV takes these competencies into account.

Bibliography

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