

Health professional students' perceptions of Interprofessional Education (IPE) in a student-led
clinic: A pilot study

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Abstract

Student-led clinics are becoming more prominent as educators seek alternate models of clinical education for health professionals. The purpose of this study was to evaluate undergraduate health professional students' experiences of working within an interprofessional student-led clinic. A total of 13 students representing occupational therapy, physiotherapy and speech pathology were recruited for the study. A mixed methods study evaluation was employed and the results from the Interprofessional Education Scale (IEPS) and focus group demonstrated that the students experienced positive perceptions of working collaboratively with other professions, forming good relationships with others, as well as an increased respect for the roles of other professions. The findings suggest that providing an opportunity, where students can work as part of an interprofessional team with a real client, in a format they may come across in future clinical practice, may be beneficial in providing them with essential interprofessional skills as new graduate health professionals.

Introduction

Interprofessional student-led clinics, provide an important context for health professional students to understand the effectiveness of interprofessional practice while simultaneously learning about the roles of other health professions and providing experiential learning in the context of direct client care (Hughes et al., 2002). Sheu et al. (2011) undertook a cross-sectional study with 207 medical, nursing and pharmacy students in a student-led Hepatitis B clinic in the US. They found that students valued working with, and felt that they had gained insight into the roles, of the other health professions. However, this cross-sectional study did not assess impressions before and after participation in the clinic. Existing literature investigates the changes in health professional students' perceptions of IPE following interprofessional experiences (Hayward, Kochniuk, Powell, Peterson, 2005; Pinto et al., 2012; Ruebling et al., 2013), however few studies have aimed to specifically explore perceptions of IPE following participation in an interprofessional student-led clinic nor for allied health students (Sheu et al., 2011; Shrader, Thompson & Gonsalves, 2010). Further research is required to capture the perceptions of health professional students both prior to and following participation in a student led clinic setting, utilising validated data collection tools and methods.

The purpose of this study was to evaluate student experiences of working within an interprofessional student-led clinic, providing a community-based Interprofessional Neurorehabilitation Program (IPNRP).

Methods

Quantitative and qualitative data were collected during a trial of the student-led IPNRP for clients with complex issues from a neurological diagnosis in the second half of 2012. The study received ethical approval from the participating university and written consent was gained from all participants. The clinical educator (CE) team (n = 3) included one speech pathologist, one occupational therapist and one physiotherapist. Three clients attended the clinic for five weeks:

weeks one and five were an interprofessional assessment and weeks two to four included three mornings of interprofessional intervention.

Participants

Thirteen allied health students (six occupational therapy, six speech pathology and one physiotherapy student) worked in the clinic during their final semester of studies and were eligible to participate. All students (one male and 12 females) consented to participate and ranged in age from 21 to 28 years.

Data collection tools and procedures

Pre- and post- data were gathered with the Interdisciplinary Education Scale (IEPS) questionnaire (McFadyen, Maclaren, & Webster, 2007). The IEPS measures the perceptions of students about their own profession and other health professions using a six-point likert scale. Responses to 18 items are summarized into three subscales: Competency and Autonomy, Perceived Need for Cooperation, and Perceptions of Actual Cooperation. The validity and reliability of the IEPS has been established (McFadyen et al., 2007).

Qualitative data were collected one week after the clinic with a semi-structured 50-minute focus group that was facilitated by one researcher (LG) and audio recorded. Open-ended questioning focused on students' expectations and experiences of the clinic.

Data analysis

Wilcoxon signed-rank test examined changes in IEPS scores within the group for each subscale. A significance level of 0.05 was applied. The focus group was transcribed verbatim. The transcript was repeatedly read by one researcher (LG) who independently highlighted key phrases and then engaged in inductive analysis to identify six emergent codes. The emergent codes were grouped into two preliminary themes and two researchers (LG and LD) coded the transcript using the preliminary themes and through discussion reached consensus on two final themes and their descriptions. Theme descriptions were condensed and checked by a third researcher (LH) to ensure each was transparent and defensible.

Results

The outcomes of the pre- and post- IEPS are presented in Table 1.

[Insert Table 1]

Focus group

Learning about ourselves and learning about each other. The development of profession specific skills and role was considered essential prior to the clinic. Students reported that the clinic allowed them to validate their own role within the team while considering other discipline's perspectives and approaches to achieving combined therapy goals. The students reflected that having a CE from a different professional background each day, was helpful as it "*.... really encouraged us to think how are we going to phrase things, what kind of language are we going to use, to let them know what we were doing....*". However, the interprofessional sessions were not always experienced positively, with participants reflecting that sometimes "*occupational therapy [students] decided what they were doing and speech pathology students] decided what they were doing and then on the day....it was half-half rather than together.*"

Building blocks to professional development. Students reflected that the clinic had increased their confidence, specifically in the areas of asking questions and assurance of their own role and scope within the team.

I feel a lot more comfortable in my own role as a speechie [speech pathologist]. I think I really consolidated my skills because I had to explain and really communicate what I was doing....So I think I feel more confident than I would had I not done this.

Participants had difficulty identifying the best timing for the clinic to occur in their training. Some participants spoke of how it might be too challenging or "*disheartening*" as a first placement, due to both the complexity of the caseload, and the challenges of learning how to work effectively in an interprofessional manner. Other participants described how it would be beneficial as a first placement as they felt the experience would increase competence and confidence in communicating and collaborating within a team before going onto other clinical placements. Participants discussed looking forward to being new graduates and how this experience had contributed to their

professional growth and development e.g., feeling more confident to communicate with other professionals as a new graduate.

Discussion

Students in a five-week interprofessional student-led clinic demonstrated an increased understanding of and respect for each other's professional role and contribution within the team as well as awareness of the need for interprofessional collaboration in their practice. Students additionally reported improved confidence working within a team and communicating with other health professionals. This was consistent with previous literature which has shown improvements in students' perceptions of the benefits of IPE, a stronger sense of clinical self-confidence, and a better understanding of other professions following participation in IPE experiences (Anderson et al., 2006; O'Neill & Wyness, 2005). Providing an opportunity such as this, where students can work as part of an interprofessional team with a real client, in a format they may come across in future clinical practice, may be beneficial in preparing them for interprofessional practice as new graduate allied health professionals.

Declarations of Interest

The author reports no declarations of interest.

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Table 1

Interdisciplinary Education Perception Scale (IEPS) results (n = 9)

	Pre-clinic	Post-clinic	<i>p</i> value
	mean (range)	mean (range)	
Competency and Autonomy	25.33 (21-28)	26.67 (23-30)	0.19
Perceived Need for Cooperation	10 (9-12)	9 (8-12)	0.12
Perception of Actual Cooperation	25.67 (19-30)	27.78 (23-30)	0.05