



Feasibility Testing of an Interprofessional Assessment of Medical Students' Teamwork Skills in a Longitudinal Integrated Clerkship



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Background

Interprofessional Feedback in Medical Education:

- Interprofessional (IP) teamwork is key to healthcare delivery and a required competency for physician training
- Little has been published on collecting data from interprofessional team members to assess students

Clinical Integrations Interprofessional Professionalism Student Assessment (CI-IPSA):

- An online assessment of interprofessional behavior that has been previously used to assess interprofessional students at CU

CUSOM Curriculum Reform:

- A criterion based grading system, including IP behavior
- An all-LIC clerkship model supporting longitudinal relationships between students, faculty, and IP team members

Aims

- To gather direct and formative feedback from interprofessional staff to help students improve their teamwork skills and assess their IP teamwork ability
- To pilot feasibility for collection of IP feedback in an LIC program

Methods

Creation of QR codes linked to CI-IPSA survey

- Modified with inclusion of student photos and questions related to collection of survey itself

Assessment pilot by integration in the Denver Health LIC (DH-LIC) Collection Mechanisms in 3 arms:

A: Student Initiated

- Students solicited individual IP team members to fill out surveys

B: IP Team member initiated (Novel)

- Allows IP team members to fill out a survey on students without students solicitation
- >200 flyers with QR codes to the survey placed at DH sites

C: Preceptor Initiated (Novel)

- Preceptors in select specialties asked to solicit surveys from IP team members
- Quarterly outreach to preceptors with reminders
 - Individual preceptors by email
 - Clinic managers, staff meetings

Student Expectations:

- Students were asked to gather minimum of six assessments
- Surveys were batched and reviewed with LIC director quarterly

Results

Assessor and Survey Characteristics:

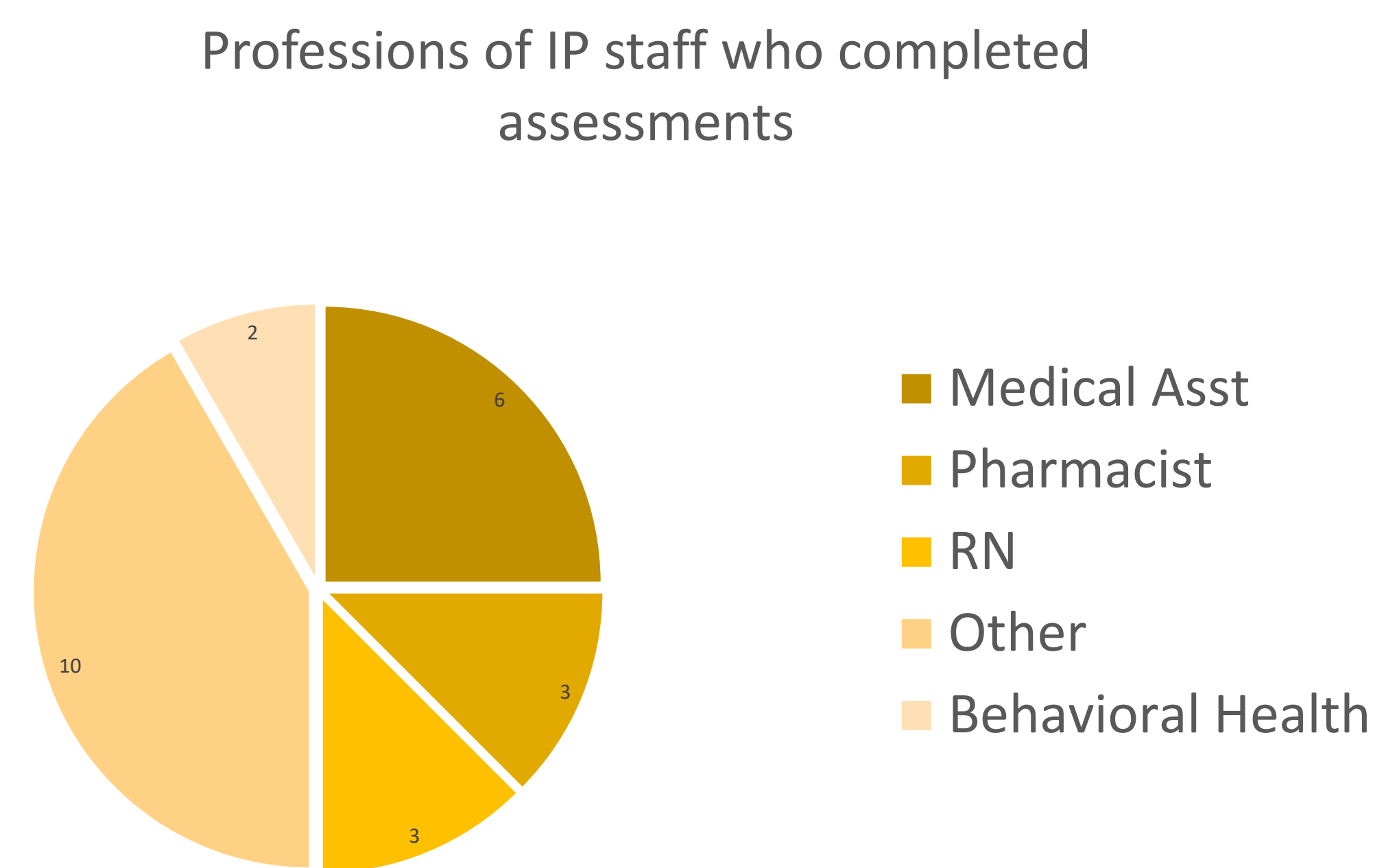


Fig 1. Members from 15 different professions from 12 different sites filled out this survey. A break down of the most common professions is above.

Who prompted completion of survey

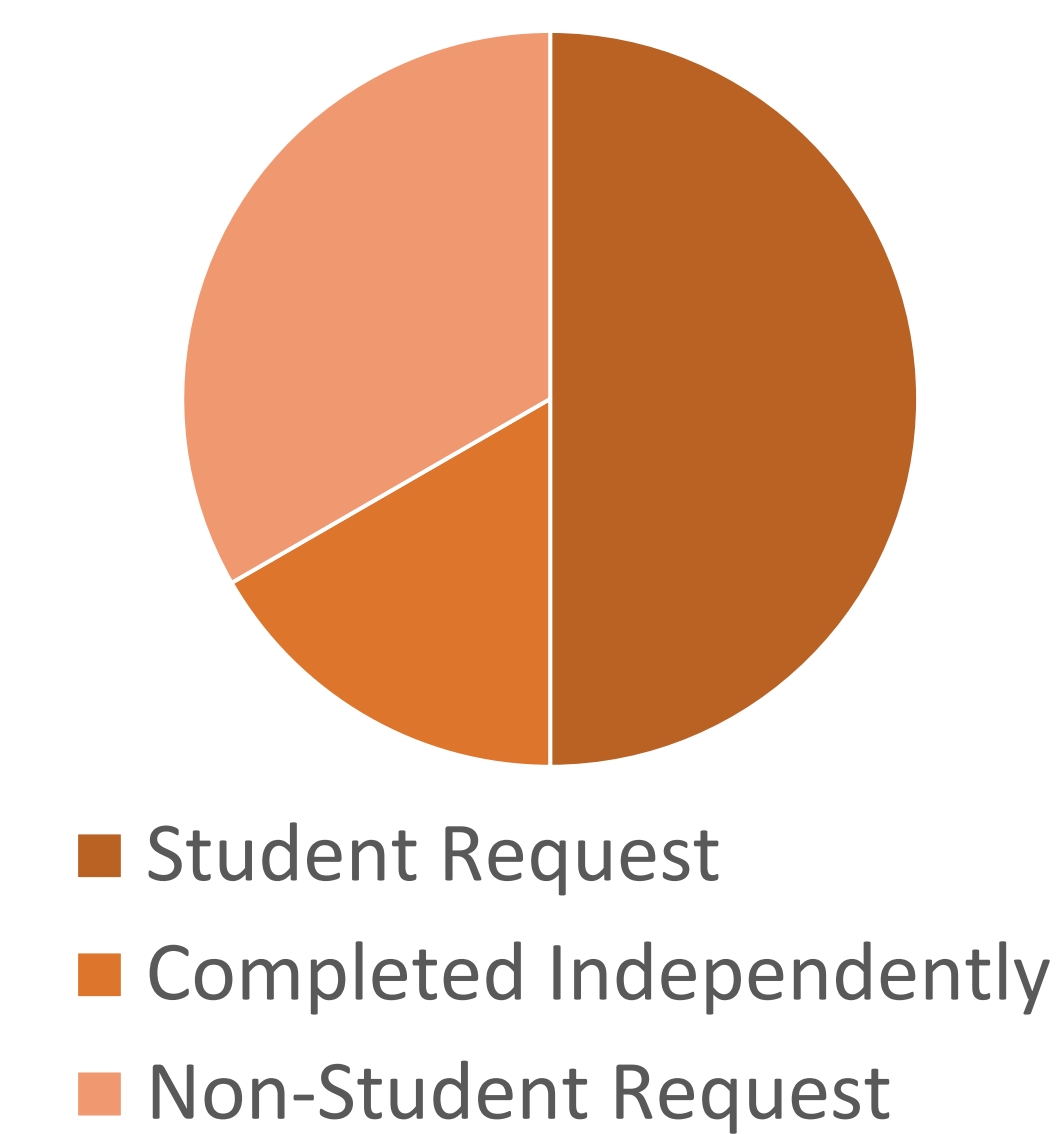


Fig 2. The majority of surveys were prompted by students or by preceptors/clinic staff

33% of surveys were submitted the month after introduction of the project, another 33% the month after a reminder email

Survey Results:

Range of number of surveys per student: 1 - 4

Do you trust this student to be on your interprofessional team?	Percentage of Responses (N=24)
All of the time	83.3%
Most of the time	16.7%
Some of the time	0%
None of the time	0%

Percent of Individual Responses

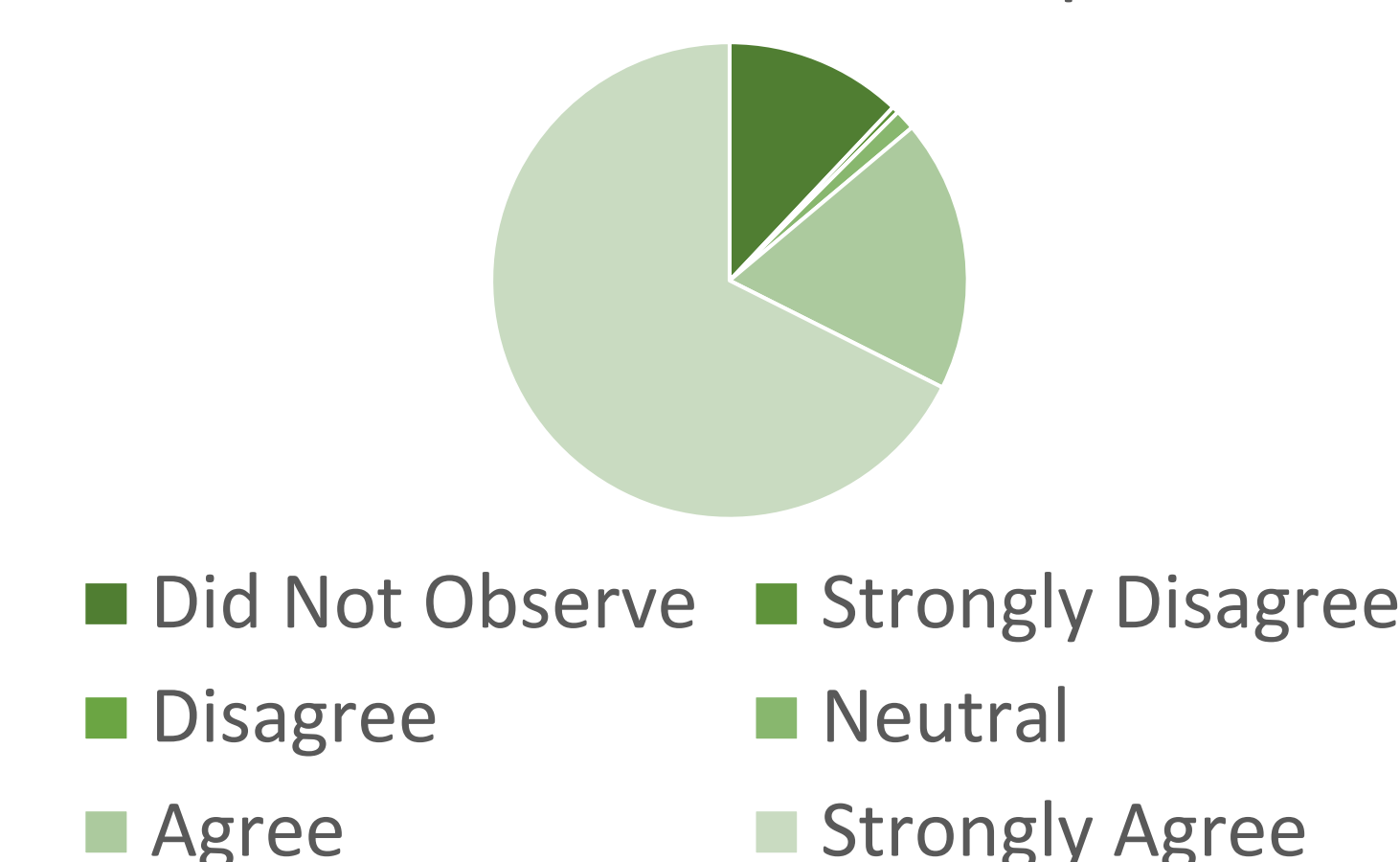


Fig 3. 86% of responses to individual questions were strongly agree or agree.

Narrative Comment Characteristics:

Comment Characteristic	Percent of surveys
Surveys that included a comment	70.1% (17/24)
Included positive feedback	100% (17/17)
Included constructive feedback	5.8% (1/17)
Described Specific Behaviors	46.7% (7/15)

Fig 4. Summary of narrative comments. Most left at least one comment. When asking for feedback, most feedback was positive. When asking to describe specific behaviors, a minority of comments described specific behaviors of students

Implications and Limitations

Implications:

- This tool was gathered multiple data points on each student from many different professionals in many settings
- The LIC model allowed students to get longitudinal and repeated feedback directly from IP team members
- Gathering the data required significant outreach
- Gathering sufficiently meaningful comments to assess students will likely require more training of assessors
- Each collection mechanism collected surveys, though each had its own challenges and benefits

Limitations:

- Single site, so barriers and effective outreach may differ in other systems
- COVID provided a disruption to the clinic workflow
- Small number of students and surveys collected

Next Steps:

- Focus groups to understand the student, preceptor, and IP team members' perspectives related to barriers and opportunities to improve
- Expanding the survey to other sites
- Piloting of novel methods to gather feedback and increased incentives to participate in the survey
- Staff development on providing feedback

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References

1. The Interprofessional Education Collaborative (IPEC). Core competencies for interprofessional collaborative practice: 2016 update. Washington DC 2016
2. Frost J, Hammer D, Nunez L, et al. The intersection of professionalism and interprofessional care: development and initial testing of the interprofessional professionalism assessment (IPA). *Journal of Interprofessional Care* 2018;1-15