

## 5CC Posters: Interprofessional Education 1

Location:

#5CCo1 (132962)

**Design and evaluation of an inter-professional module to introduce medical students to the clinical environment**

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**Background:** 'Foundations for Care' is a module designed for second year medical students at our institution, integrating holistic patient care and multidisciplinary team learning into early clinical attachments. These areas are priorities identified by the UK National Care Certificate framework and correlates to GMC domains and the HEE mandate.

**Summary of Work:** The module was integrated into a three-week clinical attachment for 270 students across nine hospital teaching sites. Students attended two days of campus-based teaching delivered by nurses and allied health professionals, shadowed a healthcare assistant/nurse for two shifts and attended a semi-structured debrief session. A sample of five debriefing sessions were observed and field notes recorded. Facilitators asked students to record their key take-home messages at the end of the debrief sessions - these free-text responses (n=129) were collated and coded.

**Summary of Results:** Students appreciated the role of the nursing team better and had increased awareness of the patient experience. Facilitators addressed challenges, in particular preparation of ward staff and students' confidence. 67% of student learning was directly aligned to module objectives (multidisciplinary team-working n=41, holistic patient care n=30, clinical skills n=16). Other responses corresponded to overall aims of the clinical attachment (understanding of clinical environment, learning strategy). Only six responses were not directly relevant.

**Discussion:** The debrief sessions were important in exploring student perceptions of the learning gained from shadowing shifts. In particular, challenging experiences could be discussed and put into context. As healthcare professionals, some facilitators were observed to use their experience to 'frame' student attitudes towards the value of inter-professional learning and holistic patient care.

**Conclusion:** Evaluation methods demonstrate the module design delivered good constructive alignment.

**Take Home Messages:** • Inter-professional learning and holistic patient care are important learning concepts for medical students • Learning from multi-professional ward staff is desirable and feasible •

Supporting experiential learning with a preparation and debrief phase can assist constructive alignment

#5CCo2 (132170)

**Does Continuous Contacts Using Interprofessional Education Device (iPED) Have Educational Effects on Medical, Nursing, and Pharmacy Students?**

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**Background:** International attention has been paid to Interprofessional Education (IPE) and relevant outcomes have been reported. However, its diffusion to fields of education is limited due to space, temporal, and psychological barriers. Therefore our aim is to use the iPED, and report its educational effects on healthcare students. iPED is a tablet which is installed the original SNS App to overcome these barriers.

**Summary of Work:** We made two groups, each consisted of one medical, nursing, and pharmacy student, and also one type II diabetic patient. They communicated with one another on iPED. Students supported their patients' recuperation through iPED communication for a year. After that, we had semi-structured interview to students, and analyzed their transcript qualitatively.

**Summary of Results:** Following four effects were revealed. First, Acquisition of developmental guide; students broadened their view to studying. Second, Ricochet effect; nursing students' emic remark to patients evoked disease-only viewpoint of medical and pharmacy students. Third, Mirror effect; because of communication style's propagation to students in other faculties, they re-confirmed own major role reflectively. Last, Removing psychological barrier; students perceived that there was less of a psychological barrier using the iPED compared to previous experiences.

**Discussion:** Addition to previously reported effects of IPE, we revealed following two suggestions. First, Ricochet effect reflected communication (Awareness of difference in professionals' language) affects understanding patients and improvement of ethics and attitudes. Second, Mirror effect reflected propagation of communication style to the students in other faculties affects roles and responsibilities recursively. These imply importance of communication on IPE.

**Conclusion:** In IPE design, how to make chance to deepen relationship between interprofessional

students becomes the key and the means that doesn't make relationship finish like iPED can be said one of effective way. The use of iPED had four educational effects, including Ricochet effect and Mirror effect.

**Take Home Messages:** Continuity deepens relationship, and iPED can contribute to that.

#### #5CC03 (135777)

##### Small group of Interprofessional education in home care

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**Background:** In the coming "Super-aging society", collaboration between medical professionals and health workers in home-care setting will be critical. Thus, undergraduate interprofessional education is important for the improvement of a collaborative mind and attitude. The purpose of this preliminary study is to investigate the effect of 2 professionals IPE for patients.

**Summary of Work:** We ran a 2 days IPE program for a 6th year medical student (Med) and a 2nd year rehabilitation student (PT) focused on collaboration for patients. We chose patients who have chronic diseases and problems in Activity in Daily Life (ADL). Two women aged 89 and 90 were recruited. Four times of groups discussion and 2 times of patient visits were occurred, They shared information and made the patient-centered care plan with recommendations. A month later, patients and families were interviewed and house condition was assessed. Then students home care plan was assessed.

**Summary of Results:** Students listened to patient and her families respectively with warm attitudes. Med student conducted physical examination and checked medicine adherence. PT student assessed housing condition and patient's movements to make their ADL better. They realized the differences among other professional roles and perceptions. For patient A, students lead patient to walk supportively and finally she could walked again. On the other hand, patient B's daughter considered for better patient care so that students' suggestion were not accepted.

**Discussion:** As a result, patient A showed marked improvement in ADL with listening attitude and empathy. However patient B did not. Students learned not only roles and perceptions of other professionals but also a sense of worth and an appreciation of the difficulty of patient-centered home-care.

**Conclusion:** Patient-need based IPE is very effective on patients, even though participants are 2 students.

**Take Home Messages:** IPE with small group can increase patients ADL remarkably.

#### #5CC04 (135256)

##### The Educational Effect of an One Day Interprofessional Workshop Course "Mie-IPE": Final Reports of 7 Departments at 7 Universities.

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**Background:** We conducted a one day workshop (WS) course "Mie-Interprofessional Education (IPE)". The WS used an interdisciplinary team approach where student were given the opportunity to interact with health care students for making patient's care plan. As we only have two health care departments at Mie University, we collaborated with six universities to include seven kinds of health care students.

**Summary of Work:** WS were performed five times from 2013 to 2015, using three kinds of scenarios.

Students were surveyed using two types of questionnaires: the Trait Emotional Intelligence (TEIQue) and the Readiness for Interprofessional Learning Scale (RIPLS) before the WS, immediately after the WS and six months post WS. Survey responses were analyzed using paired-t-tests. Students were further interviewed about what they had learnt in these WS and their responses were analyzed qualitatively.

**Summary of Results:** The TEIQue showed significant differences in nursing students before and immediately after the WS ( $P=0.03$ ) and in medical students before and 6 months post the WS ( $P=0.05$ ). The RIPLS showed significant differences in nursing students ( $P=0.00$ ), pharmacy ( $P=0.00$ ), social work ( $P=0.05$ ), psychology ( $P=0.02$ ) students before and immediately after the WS. The effects of the WS continued for at least 6 month for them. We divided the interviews into eight categories: "Leadership styles", "Attitude toward team members", and others.

**Discussion:** These WS had a long term effect on nursing, pharmacy and social work students as preparatory education, and could be used to maintain the empathy of medical students. These students were able to learn a lot of skills necessary to collaboration. We showed that it is possible to implement IPE in collaboration with other universities, even if your university does not have many health care departments.

**Conclusion:** "Mie-IPE" was appropriate as preparatory education for IPE.

**Take Home Messages:** It is possible to make an one day WS course to improve IPE-related attitudes.

#5CC05 (133859)

**Learning about Delirium in a Simulated Clinical Environment: An Interprofessional Learning Intervention for Final Year Medical & Nursing Students**

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**Background:** Delirium is a common, poorly recognised clinical problem. Effective management of delirium is contingent upon an interprofessional approach necessitating among other things, clear communication, effective teamwork, an understanding of the respective health care team members' roles and content that addresses practice-related gaps

**Summary of Work:** To address these objectives a Delirium Knowledge Test, an Interprofessional Learning Rating Scale (IPLRS) and a modified Reading for Interprofessional Learning Scale (M-RIPLS) were used. Post-test questionnaires determined the perceptions of the students about the intervention. Individual interviews were used to further explore students' perceptions of the experience.

**Summary of Results:** Results indicated that the IPL approach increased students' knowledge of delirium ( $p < 0.01$ ), increased students' ratings of how IPL influences effective interprofessional collaborative practice ( $p < 0.01$ ); improved nursing and medical students' knowledge and appreciation of each other's roles; developed attitudes of appreciation, trust and respect amongst the two professions; and increased students' confidence and perceptions of their personal development in interprofessional collaborative competencies.

**Discussion:** Five themes emerged; 1) development of interprofessional collaborative competencies, 2) improved clarity about the profile of an effective interprofessional learner 3) the equal value students place in learning about a clinical topic and learning about teamwork, 4) an authentic blended learning approach works best, and 5) large group IPL is possible but it takes a lot of work.

**Conclusion:** An IPL approach enhances learning about the collaborative management of delirium, where clear communication, effective teamwork and a mutual understanding of the respective health care team members' roles can enhance knowledge and practice gaps.

**Take Home Messages:** A change in attitude toward interprofessional collaborative practices prior to graduation is a good step towards improving the safety and quality of patient care.

#5CC06 (135107)

**Clinical IPE: Interprofessional education in a point-of-care setting**

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**Background:** Since 2007, the medical, pharmaceutical and nursing departments of Chiba University have conducted a compulsory four-step, structured interprofessional education (IPE) program delivered throughout 4 years of preclinical education. In 2013, we reported that the preclinical IPE program promotes students' interprofessional readiness and performance during clinical clerkships. To promote further interprofessional competence, we initiated an advanced IPE program in a point-of-care setting, Clinical IPE, aimed towards students who completed the preclinical IPE program.

**Summary of Work:** IPE teams ( $n=4$ ) consisting of a medical, a pharmaceutical and a nursing student, were assigned to the intensive care unit ( $n=2$ ) and the pediatric ward ( $n=2$ ). Interviews were conducted to evaluate students' perceptions of team collaboration and professional competence. Teachers and instructors were interviewed to evaluate the effects of the clinical IPE implementation.

**Summary of Results:** Initially, students noticed deficiencies in their professional knowledge and skills, which lead them to actively engage instructors and increased their overall effort to learn. Teachers and instructors expressed concern for students failing to achieve the traditional goals of the clerkship, but found that students collaborated well and had a positive impact on patient care.

**Discussion:** An important factor to facilitate point-of-care IPE was previous preclinical simulation-based IPE experience, yet the preparation and implementation a clinical IPE program in a traditional clinical clerkship system is complex and challenging.

**Conclusion:** Clinical IPE had a larger positive impact on students' contributions to patient care and professional role expectations than in non-interprofessional clerkships. Teachers and instructors felt increased student engagement in patient care and more active self-directed learning.

**Take Home Messages:** Clinical IPE promotes professional identity formation and more active involvement in patient care among students of the health professions students.

#5CC07 (134834)

**An interprofessional Virtual Patient model for students in primary health care**

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**Background:** How can students learn with, from and about each other by working with interprofessional virtual patients (VPs)? Learning in diverse structures as primary health care (PHC) may be facilitated by e-learning. The aim of the project was to create an interprofessional VP model for students in PHC.

**Summary of Work:** Our interprofessional VP case was placed in an authentic setting, based on a real patient who needs care in his home. Health care students from five different programmes contribute with their competences and skills in a safe environment. The system used for construction of the Vp cases was BSA<sub>sim</sub>. The system gave the students possibility to formulate their own learning goals in free text. They could go backwards and forwards in the system. Short films where different care providers visited the patient at home were produced.

**Summary of Results:** The interprofessional VP model had repeated learning cycles with inventories of students' own learning needs, concrete experiences such as films, teachers' comments and students' reflections and clinical reasoning. In every part of the learning cycle, the students interacted with students from the other professions. The students received as feedback pre-formulated comments from teachers. At the end, the students planned together for the future care of the patient.

**Discussion:** This interprofessional VP model was based on a VP model for PHC by Salminen et al. The iterated learning cycles were easy to adapt to an interprofessional VP model where students can interact with each other interprofessionally and learn from a complex patient case in PHC.

**Conclusion:** Interprofessional VPs seem to be a promising way to support students' learning from with and about each other in diverse structures such as PHC.

**Take Home Messages:** Interprofessional VPs may contribute to solve some of the logistic problems with IPE in PHC.

#5CC08 (134072)

**Promoting interprofessional education with health-care matrix curriculum through accurate problem list of electronic health records**

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**Background:** Interprofessional collaborative patient-centered care is naturally important for optimal healthcare outcomes under a digital uprising. To assess the utility of electronic health records (EHR) carrying active problem list in health-care matrix (HCM), these provide a frame for clinicians and teams to improve care of patients and core competencies for interprofessional education (IPE).

**Summary of Work:** HCM conference is held monthly as part of interprofessional education. Residents choose cases and develop a flow matrix under faculty supervision and multidisciplinary group discussion. The matrix is presented after reviewing accurate problem list specially designed by Mr Hsu (Microsoft Certified Professional Developer), and consensus action proposal is produced after discussion. Approximately two years after initiation of the program, 148 participants completed an identified survey of efficient and effective primary care.

**Summary of Results:** Among the 148 participant students in IPE during HCM curriculum, 20 of them (15%) were graduate students; 51 of them (34%) are clinical doctors; 77 of them (49%) are clinical nurses. Mean score of satisfaction ( $P < 0.005$ ) and intention to applying accurate problem list ( $P < 0.001$ ) in graduate students were significantly higher than clinical doctors and nurses. The majority of graduate students were very satisfied (56.2%) and willing to use active problem list (79%) with an overall mean of 4.47/5.0 and 4.79/5.0 respectively. Most participants declared that using the problem list in HCM curriculum through IPE could improve participant performance ( $P < 0.001$ ).

**Discussion:** This report highlights the importance of EHRs, which provides easier problem list maintenance and accessible online medical records to gain a updated information of diagnosis and treatment strategies in HCM for IPE.

**Conclusion:** We propose that accurate problem list form the natural continuation of learning, teaching and service with a hope to stimulate the development of IPE as part of HCM.

**Take Home Messages:** Our results show that integration of IPE with online accurate problem list can be an effective innovation in HCM curriculum including the best clinical decision making available and

guarantees that our patients receive the best level of care.

**#5CC09 (133003)**

**An inter-professional e-learning tool preparing students for the operating room ward**

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**Background:** Every semester the Operating room (OR) ward receives several students from different medical education programs (nurse-, OR nurses-, anesthetic nurses- and medical students). The OR is different from other hospital wards and often students have no OR experience before their clinical training at the OR. Our aim was to develop an inter-professional learning artifact that can be used to improve student preparedness for clinical practices at the OR.

**Summary of Work:** Faculty members from the specialist nurse- and the medical programs were set to identify which learning objectives (knowledge and skills) that were needed to prepare students for the OR and common for the different programs. An e-learning tool was developed using Articulate Storyline® software.

**Summary of Results:** An inter-professional interactive e-learning course was created. All essential learning objectives, for the different student categories, could be covered by the course. Most objectives were concluded to be general why only a few were specified for a specific student category within the program. The course, given through the learning platform Ping-Pong, consisted of both theoretical and practical learning elements; recorded lectures of how the OR is organized and knowledge about the different professions represented at the OR, and movies aiming to prepare the students how they should perform practical skills e.g. preoperative hand hygiene.

**Discussion:** Although preparedness for clinical practice at the OR is considered an important factor for student learning ways to enhance preparedness is poorly described. Student categories are commonly prepared separately, due to tradition and logistics. Our inter-professional e-learning program may be an effective way to increase preparedness to the OR, at the same time enlarging student awareness about the professionals responsibilities at the ward.

**Conclusion:** Inter-professional interactive e-learning tools preparing students for the clinical training at the OR can be created.

**Take Home Messages:** An inter-professional approach should be considered when developing learning tools for clinical practice.

**#5CC10 (135195)**

**Lasting impact of final-year interprofessional education (IPE) on medical students after two years of clinical experience**

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**Background:** Interprofessional education (IPE) is essential for providing good health care service to patients.

**Summary of Work:** Using a case with systemic, oral, and social issues, 241 final year students from schools of medicine, nursing science, medical technology, dentistry and oral health care, 73 of them medical students, participated in a two-day-long case-based IPE program. This multifaceted case was prepared to promote and require active participation of all students during the mixed-small-group discussions, and lectures that were included in the program. Questionnaires were administered pre- and post-program to analyze students' impressions, and a focus group interview was performed with five students after completion of two years of clinical experience. The results were analyzed quantitatively and qualitatively.

**Summary of Results:** According to questionnaire results, students felt that going into the program they already had an understanding of the importance of inter-professional collaboration, but did not fully comprehend the roles or views of other professionals. From the post-course interview, it became obvious their impressions concerning this were strong enough to persist over two years. Some doctors mentioned learning the importance of discussing a patient case with several different kinds of health care professional to achieve a broader understanding of patient care from a social and well as medical viewpoint.

**Discussion:** Through this program they were able to learn about the roles or views of other professionals, and were impressed by the differences among the professions. In addition, through such a discussion they experienced how to combine information from each field, and use this during clinical practice.

**Conclusion:** A two-day-long IPE program affected the views and attitudes of medical doctors. Case based discussion is thought to be the most useful program in order to understand the differences between professions.

**Take Home Messages:** An IPE case based discussion is useful to broaden the attitudes and views of medical doctors.

#5CC11 (135798)

**Interprofessional Learning in the Clinical Setting**

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**Background:** Interprofessional Learning in the Clinical Setting Interprofessional learning (IPL) activities are often logistically time and resource consuming. In the Swedish medical education system with short (in general 1 week/ward) clinical rotations it is difficult to provide an optimum setting for IPL in clinical settings. This creates a gap in opportunities for a more imperative competency-based training. As the educational learning environment at our surgical ward was unsatisfying a new concept was necessary.

**Summary of Work:** In order to provide an IPL learning environment, medical students during their seventh semester (surgical) were placed in a student team together with student nurses, working with junior and senior consultants and nurses in the ordinary ward-team constellation. The students were to function as junior doctors under supervision. This includes preparing for and leading the rounds, being responsible for all contacts with other consultants, referrals etc. The weekly schedule also included preparing for clinical seminars.

**Summary of Results:** The students perceived the learning environment as highly interactive and provided a sense of medical care professional ownership that facilitated medical education.

**Discussion:** The benefit of this project is that the students are naturally included and are important participants in a community of practice which facilitates professional development and clinical skills training.

**Conclusion:** The change of structure was generated at a very low cost – in comparison with traditional student run clinics. The concept is planned for implementation at other wards and is continuously evaluated.

**Take Home Messages:** Integration and participation in community of practice facilitates interprofessional learning and professional development in authentic clinical settings at a low cost.

#5CC12 (133205)

**Innovating curricula with interprofessional teamwork in medical education- Interprofessional Summerschool 2014**

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**Background:** Interprofessional teamwork is one of the most important whereas most difficult challenges in our daily clinical routine. A good working interprofessional faculty reduces medical errors throughout communication, support and complementation and therefore improves health care. At our Interdisciplinary Training Center for Medical Education (AIXTRA) we initiated an interprofessional summerschool as pilot project for interprofessional teamwork right at the beginning of their medical careers.

**Summary of Work:** The interprofessional summerschool took one week and was provided for 23 students from different health professions including students from the departments of medicine, nursery, logopedics and physical therapy. The curriculum was focused on communication, teamwork and skill training, likewise giving an understanding for the various professional roles. We set our project into the clinical scenario of an intensive care unit where all health professionals encounter each other and supported the scenery with simulating, standardized patients and video feedback.

**Summary of Results:** To evaluate our project we conducted a demand analysis pre and post evaluation. The results indicated great interest in interprofessional education (91.9%) and only sparse contact to other health professions in prior academic education: 56.1% had at least one experience in working with another profession. The students graded our project with high impact for their future carriers (see figure I.) and interest in continued projects (100%). Subjectively they profited from our sessions (see figure II.).

**Discussion:** We need to solve problems like addressing a larger audience and coordinating their schedules which was already a problem in our small cohort. Also we should think about different types of evaluation for our modules.

**Conclusion:** Our Summerschool has been a first step to implement interprofessional teamwork and education into the academic curricula and has to be extended.

**Take Home Messages:** Interprofessional teamwork improves health care and patient security and creates a higher satisfaction in each team member. Therefore it should be implemented into the different medical curricula.

#5CC13 (134701)

**Nurse shadowing program for 6th year medical students in a training ward**

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**Background:** Collaboration between various healthcare professionals (HCP) is important for better patient outcomes. Among all, physicians and nurses are the central members of the healthcare provider team. However, studies have shown that the interaction between medical students and nurses to be suboptimal. Most interprofessional education for medical students is implemented during the early years of undergraduate curricula. In order to address this gap in medical education, our department initiated a nurse shadowing program for 6th year medical students in a training ward in Taiwan.

**Summary of Work:** During the four weeks rotation in a training ward in internal general medicine, 6th year medical students were assigned to nurse facilitators where they were required to shadow assigned nurses for one day. They were exempted from their clinical rotation for one day. While the medical students joined the nursing routine, they were also instructed to actively observe clinical interaction with patients, physicians and other HCPs. Pre and postprogram survey on medical students' attitudes, knowledge and reaction were collected. In addition, a semi-structured interview was conducted followed by thematic content analysis.

**Summary of Results:** Students rated highly of the program and recommended implementation of the program at different wards such as surgery and intensive care unit. Themes emerged from the interviews included roles of the nurses, teamwork, and empathy.

**Discussion:** Although medical students were aware of the roles and responsibility of the nurses during interaction in the ward, their view on the perception of the roles of nurses changed after the program. They witnessed the contribution of nursing in patient care. Students' empathy towards nurses and patients also increased after having more time and exposure for interaction.

**Conclusion:** Implementation of the nurse shadowing program for medical students has received positive feedback when delivered in the clinical setting

**Take Home Messages:** Nurse shadowing program could be a start in implementation of interprofessional education in the clinical setting.

#5CC14 (135198)

**Exploring medical students' early experiences with the multidisciplinary team (MDT) at Barts and the London Medical School**

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**Background:** Part of a doctor's professional role requires an understanding and respect for the multiple professions involved in patient care (1, 2, 3). Interprofessional collaboration is an essential aspect of a doctor's role, and medical schools seek to prepare students for this (4). At Barts and the London year 2 MBBS students shadow a number of healthcare professionals on their Medicine in Society (MedSoc) clinical attachment, they write a brief reflective report on three of these encounters.

**Summary of Work:** The initial phase of this project involved a thematic analysis of 50 reflective reports. Key themes were identified and these themes were explored further in focus groups. The focus group data was transcribed and analysed using Nvivo software to code and organise.

**Summary of Results:** Students interacted with a wide variety of health professionals, developing awareness of interprofessional teamwork, and of the different roles involved in patient care. They lacked confidence in approaching other members of the team.

**Discussion:** Year 2 students gain more benefit when they are given some help in organising/setting up shadowing experiences. Where students see the MDT working closely together they feel more comfortable approaching and learning from other members within the team.

**Conclusion:** Students feel more comfortable approaching and learning from those who are actively involved in working and communicating with them and their team throughout their placement. It is important that opportunities for the students to shadow other professions are encouraged and supported as students find it challenging approaching and initiating these encounters themselves.

**Take Home Messages:** Students can find it challenging to set up meetings with members within the MDT and learning is enhanced when it is organised for them. Doctors need to role model good interprofessional communication and collaboration within the workplace, good interprofessional team-working enhances students learning.

#5CC15 (135286)

**Interdisciplinary team based learning for medical students**

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**Background:** Interdisciplinary team approach to patient care improves safety and outcomes for patient. The World Health Organization emphasized the need for medical student to learn how to deliver safe care. Meaningful method is learning by “doing” in clinical care supported by health care team.

**Summary of Work:** The curriculum was integrated into routine interdisciplinary round which takes place every Tuesday noon at trauma ward. The interdisciplinary team includes neurosurgeons, trauma surgeons, ward nurses, rehabilitation team and social workers. After orientation, medical students play an active role by 1. Studying one designed multiple injuries patient, 2. Students presented patient’s problems and lead team to discuss. 3. Team members discussed and responded the problems. 4. Students reflect on their learning and implications for their future practice 5. Team and student summarize their learning.

**Summary of Results:** During July 2015 to January 2016, 11 groups of 65 students joined the activities. Students learnt how team responded to patients’ needs, how to prevent risks and how collaboration the team did for the benefit of patients. Other students’ perspectives on team activity were : 1. Team understand patient need 81% 2. Good collaboration among team member 89% 3. Each discipline understand their role 88% 4. Team concerns patient safety 89% 5. Patients and relatives are part of the team 88%.

**Discussion:** Medical students will get insight the role of interdisciplinary team in providing quality and safety in patient care.

**Conclusion:** Effective interdisciplinary team will help students learn how to collaboratively approach for quality and safe care.

**Take Home Messages:** Future doctors can be “collaboration practice ready” by interdisciplinary team based learning.

#5CC16 (132473)

**The use of an educational model for structured demonstration of interprofessional practice in outpatients clinics**

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**Background:** The lack of formal clinical roles and relatively peripheral involvement of clinical students in outpatients centers have lead to insufficient opportunities for learning of interprofessional interaction. We developed a student centered educational model based on transversal teaching, continuing education and social responsibility to help in the developing of interprofessional skills.

**Summary of Work:** Experiential learning within the presented model allows students to experience diversity of health care demands, and promote a model of interprofessional service delivery in communities where health care professions are underrepresented. Person centered care, health promotion, principles of collaboration and teamwork were our frame work.

**Summary of Results:** A range of evaluation strategies seek to investigate outcomes and refine the model exploring perspectives from the student, educators and in-country partners. An analysis of outcomes with respect to interprofessional learning, cultural competence and impact in local communities will be presented.

**Discussion:** This study forms part of an ongoing multi-phase pilot project. Results on appropriateness of the interprofessional interaction will be included in the poster presentation.

**Conclusion:** Experiential learning within the presented model allows students to experience diversity of health care demands, and promote a model of interprofessional service.

**Take Home Messages:** Interprofessional learning can be challenging. Success requires students and educators preparation an ongoing facilitation.

#5CC17 (133713)

**Evaluation of multidisciplinary InterProfessional Education (IPE) workshop for final-year students - Lack of self-affirmation could be a limiting factor for IPE**

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**Background:** An aging society requires coordinated and collaborative care between nurses, doctors, dentists and other health care professionals. Consequently, undergraduate curricula of those professions should provide opportunities for students to acquire the competencies necessary for provision of such care. In 2012, we started a multidisciplinary IPE workshop for final-year students across health professions. The present study was undertaken to investigate factors, which influence student satisfaction of IPE workshops.

**Summary of Work:** A total of 315 final-year students from seven schools for health professions participated in a two-day-long case-based IPE workshop. A case that had systemic, oral, and social issues was prepared in order to promote and require active participation of all students in mixed-small-group discussions. All students answered the post-participation questionnaires. The results were analyzed quantitatively and qualitatively.

**Summary of Results:** Two hundred ninety six students (93.9%) answered that the learning content was appropriate and useful. However, 18 students answered in the negative. The ratio varied among the professionals. Fourteen students of medicine (17.3%), two students of medical technology (5%), and two students of health engineering (14.3%) rated this workshop negatively. Analysis of their comments revealed a main theme of "lack of self-affirmation".

**Discussion:** Some student felt a shortage of knowledge in their profession, other students felt a shortage of leadership to be able to advance the discussion. In addition, a few students thought their profession could not make a contribution to the patients' care.

**Conclusion:** Final-year case-based multidisciplinary IPE workshops may effectively help students acquire the IPE competencies. Cultivating self-affirmation within a profession prior to the IPE workshop would be necessary for better learning.

**Take Home Messages:** Self-affirmation as a professional would be necessary for better learning at IPE workshops.