



## Developing student interprofessional competence through a support group assignment



Shannon Wall Mangum<sup>a,\*</sup>, Jessica L. Johnson<sup>b</sup>, Tina Patel Gunaldo<sup>c</sup>, Erica Casanova<sup>a</sup>, Alaina DeKerlegand<sup>d</sup>

<sup>a</sup> Louisiana State University Health – New Orleans, School of Allied Health Professions, 1900 Gravier Street, 8th Floor AH, New Orleans, LA 70112, USA

<sup>b</sup> Xavier University of Louisiana College of Pharmacy, Louisiana State University Health – New Orleans, School of Medicine, 1 Drexel Drive, New Orleans, LA 70125, USA

<sup>c</sup> Louisiana State University Health – New Orleans, Center for Interprofessional Education and Collaborative Practice, 1900 Gravier Street, 6B14, New Orleans, LA 70112, USA

<sup>d</sup> Xavier University of Louisiana College of Pharmacy, 1 Drexel Drive, New Orleans, LA 70125, USA

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### ABSTRACT

Support groups provide individuals the opportunity to interact and build a network of support for the betterment of health. A support group assignment was developed and integrated into an interprofessional education (IPPE) elective course that exposed students to community resources focused on improving health.

After attending a support group session, students representing 14 health professional programs were asked to answer guided reflection questions. A total of 240 reflection assignments were analyzed to determine if student learning objectives based on Interprofessional Education Collaborative (IPEC) sub-competencies were met. Targeted IPEC sub-competencies included Values and Ethics 2 and 5, and Roles and Responsibilities 3 and 4. Assessment of assignments also reflected student learning of Values and Ethics 4 and 6. Student attendance of a support group session is a valuable IPE learning experience that can broaden student perception of a health team and expose students to community resources that support health.

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### 1. Format

An assignment was embedded into a classroom-based IPE elective that required students to identify and attend a community- or web-based support group. Students completed a written reflection and participated in a large group, in-class moderated debriefing to assist with interpretation and internalization of their learning experience. All documents related to the support group assignment were provided to students through the university's e-learning platform system, and an oral explanation of the assignment was provided during the first class session of the course.

### 2. Target audience

This assignment was required of all students enrolled in IPEC 281, a two credit-hour interprofessional education elective. The elective course was offered from 2013 through 2015 to all students within the six schools of the Louisiana State University Health-New Orleans (Allied Health, Dentistry, Graduate Studies, Medicine, Nursing and Public Health) regardless of their experience or training level. However, there were three student groups who enrolled by their respective years of training: fourth year dentistry students, second year medical students, and first year clinical laboratory students. Third year students from Xavier University of Louisiana College of Pharmacy students also participated. Students from the following programs enrolled in the course over the past four years: audiology (8), behavioral and community health (3), cardiopulmonary sciences (7), clinical laboratory sciences (16), dentistry (65), environmental and occupational health (1), epidemiology (1), health policy and systems management (1), medicine (58), occupational therapy (28), pharmacy (21), physical therapy

\* Corresponding author.

E-mail addresses: [smangu@lsuhsc.edu](mailto:smangu@lsuhsc.edu) (S.W. Mangum), [jjohns46@xula.edu](mailto:jjohns46@xula.edu) (J.L. Johnson), [tgunal@lsuhsc.edu](mailto:tgunal@lsuhsc.edu) (T.P. Gunaldo), [ecasan@lsuhsc.edu](mailto:ecasan@lsuhsc.edu) (E. Casanova), [adekerle@xula.edu](mailto:adekerle@xula.edu) (A. DeKerlegand).

(5), physician assistant (4), rehabilitation counseling (4), speech-language pathology (13), and undergraduate nursing (10).

### 3. Objectives

The following four 2011 Interprofessional Education Collaborative (IPEC) sub-competencies served as student learning objectives for the support group assignment:

1. Values and Ethics (VE2) - Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care.
2. Values and Ethics (VE5) - Work in cooperation with those who receive care, those who provide care, and others who contribute to or support the delivery of prevention and health services.
3. Roles and Responsibilities (RR3) - Engage diverse healthcare professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs.
4. Roles and Responsibilities (RR4) - Explain the roles and responsibilities of other care providers and how the team works together to provide care.

### 4. Activity description

Support groups are a recognized form of self-management practice offering patients and clients supportive interactions with others. Support groups can activate healthy physiological responses and improve mental health.<sup>1</sup> Thus, patients with a high quality and quantity of engagement in social networks may have a decreased risk of all-cause mortality.<sup>2</sup> These social ties may decrease stress and anxiety, providing a plausible and a biologic mechanism for decreased morbidity and mortality.<sup>3</sup> Social support can also influence health behaviors through positive peer pressure.<sup>1</sup>

Support groups can augment services provided by the traditional healthcare team through broadening the patient or client's connections to other resources within the community.<sup>4</sup> Utilizing face-to-face support or phone and/or internet-based options are all considered cost-effective and web-based communities negate issues of transportation and physical barriers.<sup>2</sup>

Despite the prevalence of support groups for a large range of conditions and issues, evidence-based use and effectiveness of support groups as IPE tools for health professions students does not exist in the healthcare literature. All four IPEC competencies (VE, RR, Interprofessional Communication, and Team and Teamwork) promote interaction with all team members, including traditional healthcare providers, professionals external to the healthcare industry, and community organizations. The support group assignment provided an opportunity for students to observe services that promoted overall health and well-being outside the typical healthcare delivery system. Students observed interactions occurring within support groups and developed an awareness of the impact support groups can have on clients and families.

The framework for this learning activity was designed to provide guidance and the option for independent personalized choice in addition to engaging in a novel experience outside of the traditional academic setting. Observation of a support group session offered students an impactful lived experience and gave meaning to the "doing".<sup>5</sup> The written post-reflection encouraged students to explore a resource outside of the traditional healthcare team, internally review their experience, and assess the role and usefulness of support groups in improving an individual's health.

Students were provided a list of more than 70 support groups available within the greater New Orleans region from which to

choose, or they could find one independently. Students were instructed to contact the support group leader to confirm the meeting time and location and obtain approval to join the support group session as an observer. By the third week of the course, students were expected to have identified and contacted the support group they would attend. By the seventh week of the course, students were expected to have observed a support group session and completed a written reflection assignment.

The written reflection assignment followed the Driscoll "What? So What? Now What?" model of reflection.<sup>6</sup> The first set of questions in the written assignment guided students in describing the setup of the support group session. There was some variation in the questions between community- or web-based groups, but generally students were asked questions such as 1) Why did you choose this type of group? 2) How did the facilitator make the group work? 3) Was the meeting format formal or informal? 4) Were other healthcare disciplines present? 5) Was accurate health information shared? Was inaccurate information corrected or responded to?

All students, whether they attended a community- or web-based group then responded to the following reflection questions to guide their interpretation of the experience: 1) What are your thoughts about your group experience? 2) What didn't work during the meeting? 3) What benefits/limitations did you observe during the support session? 4) What is the role of a support group leader on a patient's interprofessional healthcare team?

Finally, students were asked to reflect on how they might utilize support groups in their future practice: 1) How will this experience inform your decision to refer or not refer a client to support group? 2) Who on the treatment team do you think should suggest/inform clients regarding support groups?

During a class period following the student's support group attendance, students were encouraged to verbally share their own experience and insights during a presentation covering the basics of support group function and purpose. This debriefing session provided an avenue for students to share reflections and compare experiences. The large group session fostered interprofessional skills, such as listening and communication, as students from various disciplines reflected on personal and professional opinions about the impact support groups can have on an individual's overall well-being.

### 5. Evaluation

A total of 240 de-identified reflections were analyzed over three cohorts between 2013 and 2015. The reflections were de-identified by a course director. Seventy-four percent of students chose to attend a traditional in-person community based support group, while twenty-six percent of students attended a web-based or online support group. The support group categories with the greatest frequency of attendance were those related to neurological disorders, addiction, and mental health (Table 1).

Each written reflection submission was analyzed for themes that illustrated the student's observation and awareness of the four primary IPEC sub-competencies. Two authors analyzed all assignments for themes. A consensus between the two authors was reached. Two additional authors confirmed the themes. Qualitative examples of sub-competencies noted within reflections demonstrated a wide range of variations of how these competencies were actualized. (Table 2).

Student learning occurred beyond the targeted IPEC sub-competencies. The students reflected upon multiple IPEC sub-competencies through this single experience. Additionally, through analysis, evidence emerged supporting the post-hoc inclusion of two additional learning outcomes, VE4 and VE6.

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