RURAL IPE: A STUDY OF STUDENT PERSPECTIVES

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Today's Objectives

- Describe the challenges and barriers to IPE in the clinical environment
- Explore the context of a rural IPE experience on students' perspectives of interprofessional practice
- Explain the importance of social interaction (*Social-IPE*) in achieving the goals of IPE
- Discuss the implications of a rural IPE program on the future of IPE and collaborative team-based care

Background

- Rural communities need health care professionals [1,2,3,4]
- Health of the rural community suffers [5,6,7,8]
- Collaborative team-based care is needed in rural [1,9,10,11,12,13]
- Providers that are team-based practice ready are needed in rural [10, 14]

Background

- IPE is a way to prepare health care professionals for collaborative team-based practice [1,15]
- IPE is moving into the clinical realm [15,18,19]
- Social learning during experiential training is an important element [16,17]
- Rural IPE influences perception of team and rural [1,11,20,21]
- Rural training impacts post-graduation decisions [1,22,23,24]

Background

- Multiple factors influence future practice decisions [7,22,23,25,26,27,28,29,30,31]
  - Personal
  - Professional
  - Social
  - Community

Background

Important to explore (rural IPE):

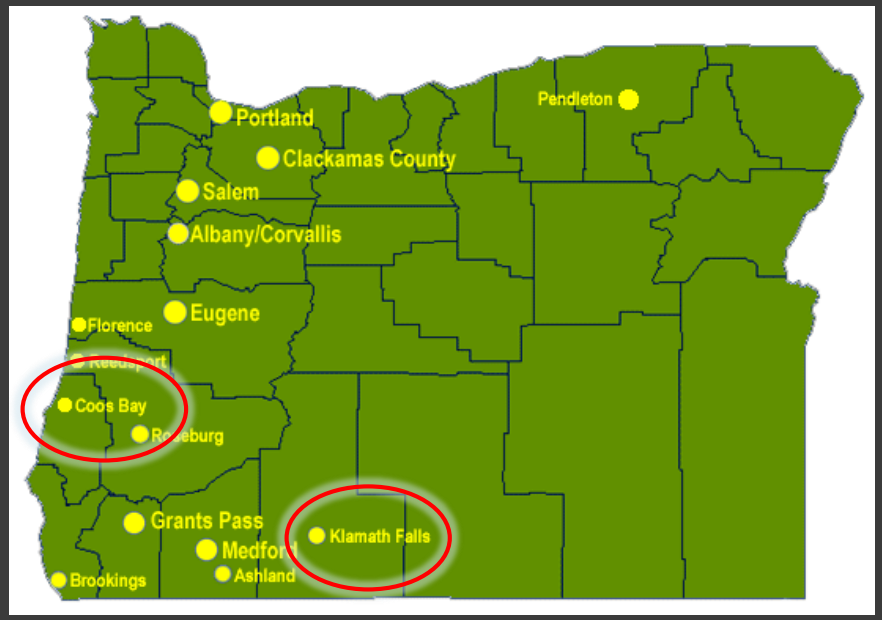
- What factors go into making practice decisions [22,23,25]
- What experiential elements (curricular & non-curricular) shape students perspectives of rural, team, IPE [1, 32]

Research Questions

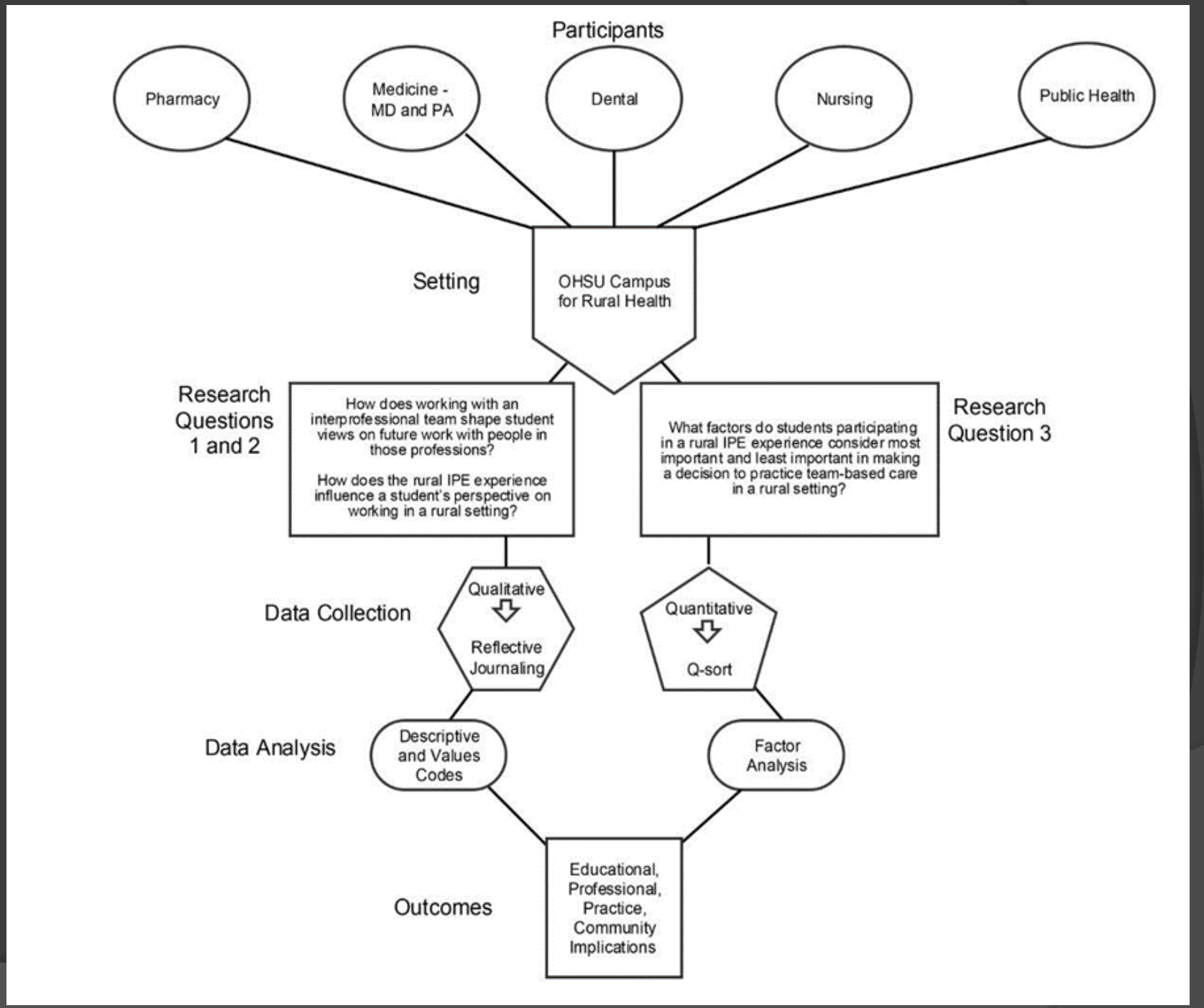
1. How does working with an interprofessional team shape student views on future work with people in those professions?
2. How does the rural IPE experience influence a student's perspective on working in a rural setting?
3. What factors do students participating in a rural IPE experience consider most important and least important in making a decision to practice team-based care in a rural setting?

Study Setting

- Two Campus for Rural Health locations
  - Coos Bay
  - Klamath Falls



- Shared university-provided housing
- 5 health care professions
- IPE (curriculum) – community-based project course


Participants
Pharmacy
Medicine - MD and PA
Dental
Nursing
Public Health
Setting
OHSU Campus for Rural Health
Research Questions 1 and 2
How does working with an interprofessional team shape student views on future work with people in those professions?
How does the rural IPE experience influence a student's perspective on working in a rural setting?
What factors do students participating in a rural IPE experience consider most important and least important in making a decision to practice team-based care in a rural setting?
Research Question 3
Data Collection
Qualitative
Reflective Journaling
Quantitative
Q-sort
Data Analysis
Descriptive and Values Codes
Factor Analysis
Outcomes
Educational, Professional, Practice, Community Implications

Data Collection

- June 2016 – June 2017
- Qualitative: Reflection journal collected
- Quantitative: Q sort administered by independent Research Assistant

Data Collection – Participants

- 51 participants – Quantitative
- 30 participants – Qualitative
- 5 health care professions (MD, PA, DMD, PharmD, FNP)
- Other demographics collected – Quantitative

Data Analysis

- Qualitative – Reflections centered on 2 prompts (research questions 1 and 2)
  - Descriptive Coding – themes
  - Values Coding – themes
- Quantitative – Q method/sort
  - Factor Analysis

Journal Analysis

- Descriptive coding
  - Descriptive words – experience or environment
  - Themes – similar words, phrases, or descriptions

Major Themes	**Humanistic Perspective**			**Health Care Provider Perspective**
Subthemes	**Cold**	**Neutral**	**Warm**	**Inter-professional**
Descriptive Codes	Small Remote Isolated In-adequate Outsider Struggle	Nature Inter-connected Vast Informative	Earnest Wel-coming Tight-knit Sincere Resolute Beautiful	Silos Absent Collaborative Supportive Freedom

Journal Analysis

- Values coding
  - Words or phrases representing a value, attitude, or belief about rural, team, rural IPE
  - Grouped together (value, attitude, belief)
  - Similarities within and among the groups – themes developed

Values Coding
Values
Fresh perspectives Social interactions Whole group contribution Making a difference Holistic care Feedback Learning opportunities
Attitudes
Appreciation of differences Enjoyed the setting Gratefulness for the experience Respect for other professions Can work with others Anticipate the future Open to rural
Beliefs
Medicine is a team effort Rural is great for IPE Professional familiarity Generalist providers Large scope of practice Local hospital is needed Rural hospitals are more adaptable

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Beliefs
Medicine is a team effort Rural is great for IPE Professional familiarity Shared housing is the best for of IPE Large scope of practice Local hospital is needed Rural hospitals are more adaptable

Journal Analysis

- Values coding
  - Seven themes
    1. Social Connectedness
    2. Role Appreciation
    3. Collegiality
    4. Rural Appeal
    5. Patient Centered
    6. Education
    7. Challenges

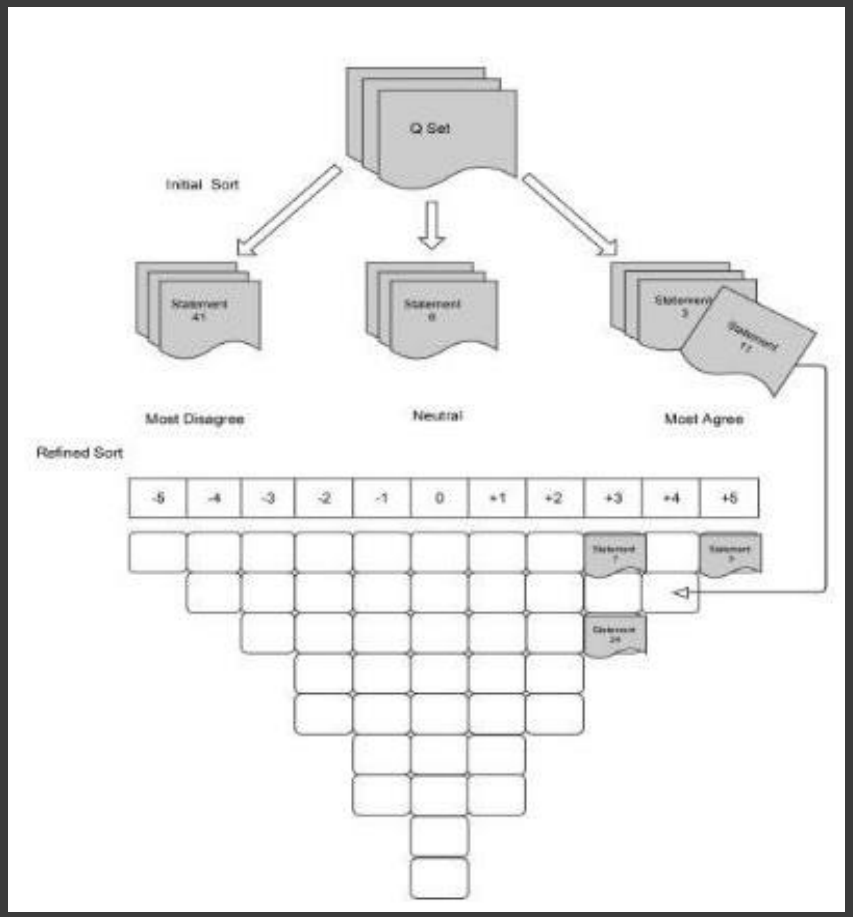
Values Coding Category			
Theme	**Values**	**Attitude**	**Belief**
Role Appreciation	Working with other professionals Learn about other professions Fresh perspectives	Expanded mindset Appreciation of differences Respect for other professions	IPE increases understanding The different professions are needed PAs and MDs are very similar
Collegiality	Whole group contribution Learn about other professions Holistic care	Expanded mindset Appreciation of differences Can work with others	IPE increases understanding The different professions are needed Medicine is a team effort
Rural Appeal	Making a difference Learning opportunities Rural learning environment	Jumping in with both feet Open to rural Enjoy the setting	Large scope of practice Rural hospitals are more adaptable Greater impact in rural

Journal Interpretation

- Enjoyed the rural IPE experience
- Limited clinical IPE
- High-value on non-clinical IPE/social time
- Community engagement is key
- Gained an appreciation for the hardships rural communities and providers face
  - Future practice decisions
  - Need for team
- Understanding for how the different roles fit into the team (see themselves in the team)
- Barriers exist

Q Methodology

Q sort



- Objectively measure subjectivity
- Measures the byproduct of a person's internal dialogue
- Explored with a group who underwent a similar experience
- Sort statements related to the experience in relation to the other statements
- Completed Q sort represents the student's vantage point on that topic
- Shared perspectives
- What elements make up those perspectives (focus on the extremes of the Q sort)

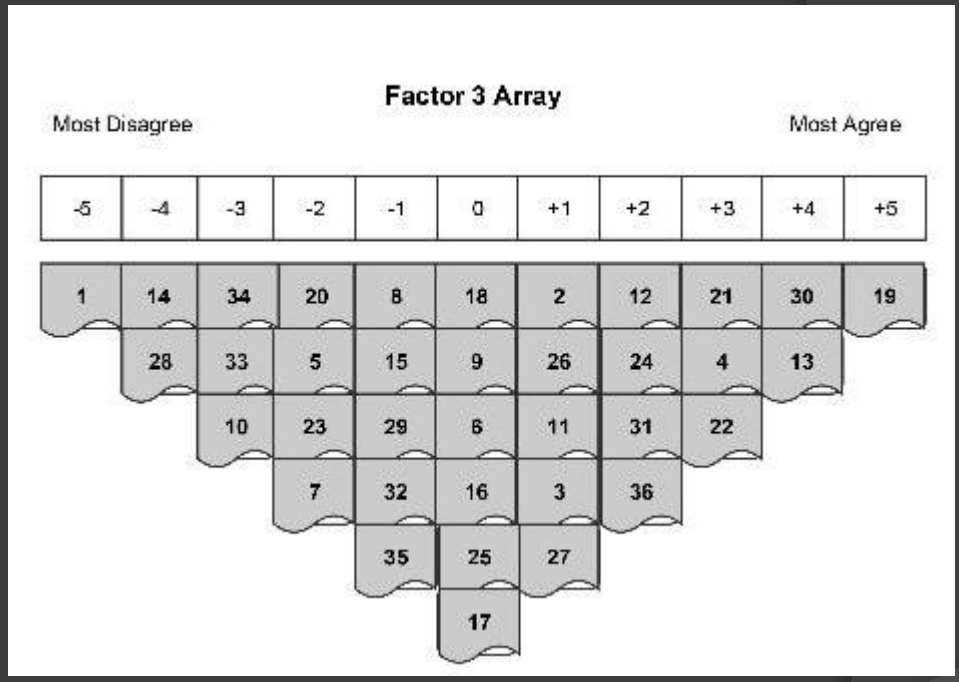
Q Set

- 35 total statements
  - 17 - student journals
  - 18 - literature
  - 4 – 5 from each category

Statement	Category	Source
Time and sustained presence in a community helped build trust and familiarity.	Social	Henry & Hooker, 2007
Working together in the clinic serves as great “peer” support that is needed.	Team	Student reflection journal
Rural communities have limited funds which restrict what care can be provided.	Community	Student reflection journal
IPE leads to a greater understanding of my own role on the health care team.	Team	Ponzer et al., 2004
The availability of outdoor activities attracts me to the rural setting.	Personal	Student reflection journal
The most effective rural IPE allows for engagement in the community.	Education	Deutchman et al., 2012

Q sort Analysis

- Demographics
  - Age
  - Rural background
  - Children
  - Married/partnered
  - Health care profession
  - Location of experience
- Factor analysis
  - Factor array
    - Representative sort for each shared perspective



Q sort Demographics

- Age range 24-52 (mean 29.2)
- 24 – PA
- 15 – MD
- 7 – DMD
- 3 – FNP
- 1 – MD/DMD
- 1 – did not specify
- Near even split – female (26) and male (25)
- Majority married/partnered without children (48)
- Majority not from a rural background (32)
- Majority were in Coos Bay (32)

Q sort Interpretation

- Four Shared Perspectives
  1. Team Impartial Rural Optimists
     - Most – time spent in rural, IPE
     - Least – prior knowledge of rural, team-based care
  2. Team-Willing Rural Skeptic
     - Most – raising kids in urban setting, isolation, no familiarity
     - Least – challenges facing rural providers, value of community

Q sort Interpretation

- Four Shared Perspectives
  3. Independent Rural Inclined
     - Most – outdoor lifestyle, rural area
     - Least – team, community engagement, IPE, raising a family, familiarity with rural
  4. Team-Oriented Rural Neutral
     - Most – Team, social connection, time, community
     - Least – familiarity with rural, IPE, outdoor lifestyle

Q sort Interpretation

- Four Shared Perspectives
  - All 4 viewed sustained time and presence in rural community was useful for making future practice decisions
  - All 4 did not feel overly positive or negative about the combined knowledge and strength to provide care

Study Conclusions

- Clinic is not where IPE (from, with, about) took place
- *"Social-IPE"* is an important piece to the success of rural IPE
- Rural IPE is useful for making post-graduation practice decisions
  - Motivation for rural
  - Developing understanding and familiarity
  - Team-based model
- Rural IPE has its challenges
  - Clinical
  - Educational

Recommendations

- Continue Rural IPE
- Support/recognize Social-IPE
- Team-based clinical environment
- Address scheduling differences
  - Clinical specific cohorts
- Provide opportunities for reflection

Limitations

- No correlation between qualitative and quantitative
- No educational sequence data
- No qualitative demographics

Small Group Discussion*

- Future IPE (urban and rural)
  - Curricular implications
  - Geography
- Existing team-based care
  - Clinical practice implications
- Motivation for:
  - Rural
  - Team

* Focus on the non-curricular aspects

Debrief

- Future IPE (urban and rural)
  - Curricular implications
  - Geography
- Existing team-based care
  - Clinical practice implications
- Motivation for:
  - Rural
  - Team

Final Task

- Describe the ideal experiential community-based IPE program

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Questions?