

# Critical Care Interprofessional Education: Perceptions among Nursing and Medical Students: A Mixed-Methods Pilot Study



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## Introduction

The purpose of this poster is to describe pilot study findings related to the first IPE critical care co-enrolled elective for fourth and fifth semester baccalaureate nursing students and third and fourth year medical students at U.A.

- Nurses and physicians are primarily educated in isolation from one another, and as a result may be unable to overcome stereotypical ideas, to explore interprofessional conflict, and to effectively decrease disruptive behaviors in the health care setting (Karimi, Pelham-Foster, Scott, & Aamodt, 2012).

- Potential negative effects of hostile relations include increased patient mortality, wrong- site surgery, medication errors and decreased patient safety(Rosenstein & O'Daniel, 2008).

- Younger less experienced nurses are more likely to report being affected by negative physician behaviors than older nurses with more experience and 55% of these nurses reported physician's behavior impacted nursing decisions (Siedlecki & Hixson, 2015).

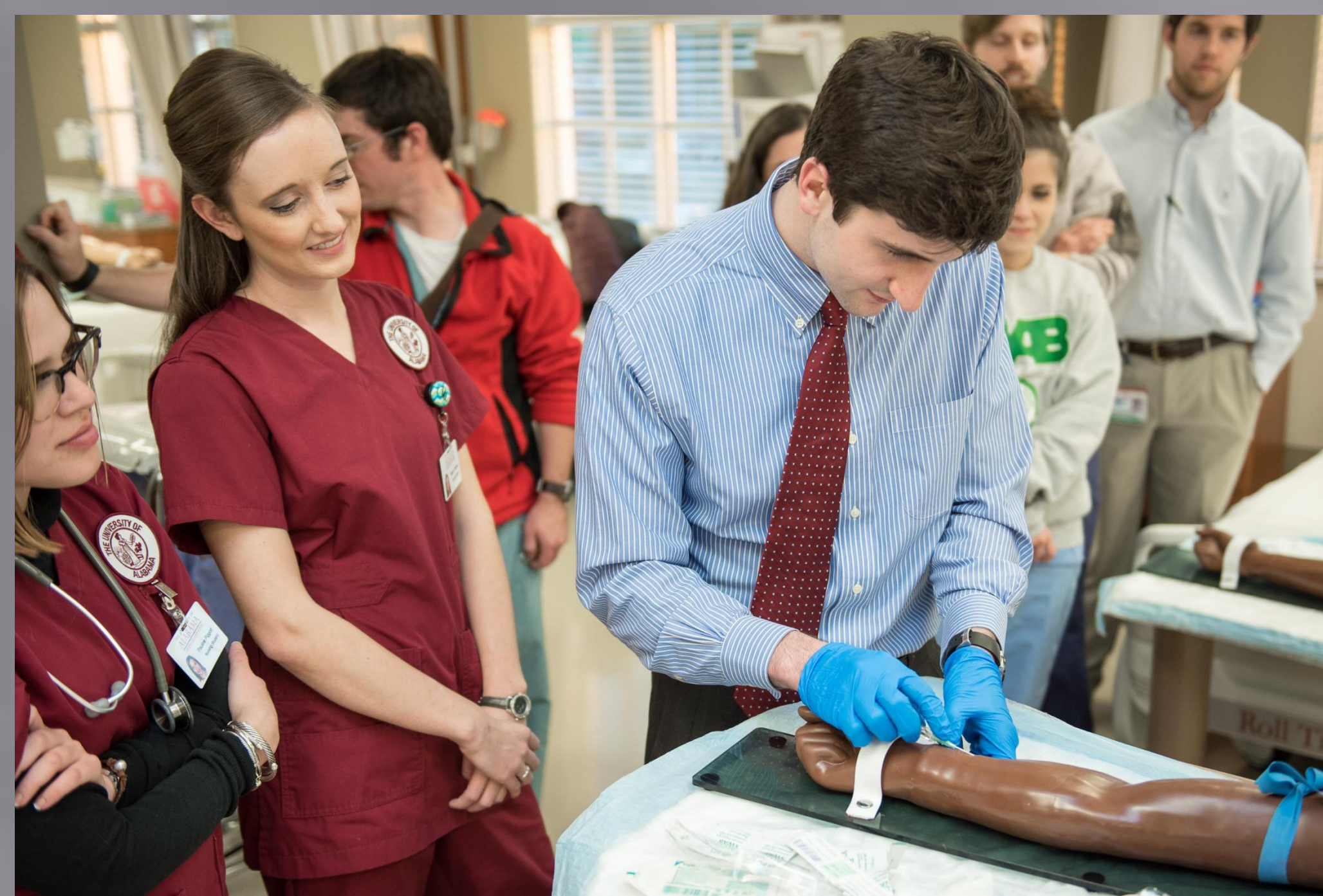
## Description

- The students met face to face for two hours where they learned how to perform common critical care procedures as team members in the clinical practice skills lab.
- Problem-based learning and role-playing were utilized to practice conflict resolution skills. The course ended with a high acuity simulation where students cared for a gunshot wound victim as teams.

- Sample Topics Included: Central Line Insertions
- Intubation and Airway management
- Chest Tube Insertion
- Conflict Management
- Root Cause Analysis
- Assessment and Management of Shock

## Research Design

- Mixed Methods using pretest/ posttest and focus groups.



## Results

The groups were not found to be significantly different from one another except for the perception subscale of the IEPS. In both instances those in the control group had significantly higher scores on the perception scale than did the experimental group.

## Qualitative Data Analysis

Data analyses identified four themes:  
"Learning in a non- judgmental, relaxed environment"  
"Changes in preconceived perceptions"  
"Camaraderie"  
"Increased awareness of interprofessional conflict and limited collaboration".

## Conclusion

Student feedback suggested changes in student knowledge and attitudes occurred over the semester. Of particular note was the recurring theme that medical students were surprised by the nursing students' depth of knowledge. Many students openly described either being the direct victim of, or witness to conflict in the health care setting.

## Research Questions

- 1.What are the attitudes of fourth semester undergraduate nursing students and third and fourth year medical students regarding critical care healthcare teams and IPE, and knowledge of roles and scope of practice of healthcare members before and after a psychosocial intervention?
- 2.What changes did the students experience as a result of the course, and what were their suggestions for future courses?

## Data Collection

- University institutional review board (IRB) approval was obtained prior to data collection in spring semester 2015.
- The experimental group (N=21) was a convenience sample of students who self-elected to take the course. Surveys were electronically sent via Qualtrics (Qualtrics, Provo, UT) during the first and last two weeks of the semester.
- Surveys utilized included an adapted 14-item version of the Attitudes toward Interprofessional Healthcare Teams Scale (ATHCT; Curran, Heath, Kearney, & Button, 2010), the 17-item Team Skills Scale (TSS; Hepburn, Tsukuda, & Fasser, 1998), and the 18- item Interdisciplinary Education Perception Scale (IEPS; Luecht, Madsen, Taugher & Petterson, 1989).

## Future Research

- Seek larger samples with more diverse students.
- Measure student confidence to practice collaboratively before and after the course.

## References

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