THE INTERPROFESSIONAL SKILL LAB IN THE SIMULATION CENTRE: AN EXPERIENCE OF COMMUNICATION BETWEEN THE MEDICAL-NURSING TEAM AND FAMILY MEMBERS

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ABSTRACT

During daily clinical practice, health professionals spend most of their time interacting with each other. Nevertheless, at university they are educated and trained separately and rarely have the opportunity to learn how to work as a team. In our center of simulation we organized an interdisciplinary education session with nursing and medical students to improve their interprofessional team behaviours and competences.

The students became more aware of the four domains of interprofessional competence (values/ethics, role and responsibility, interprofessional communication, teams and teamwork) and about the need to learn how to integrate with each other to work in synergy as an interprofessional team to meet people's healthcare needs, which are becoming increasingly complex.

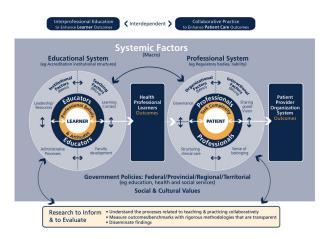
Keywords: Center of Simulation, Interprofessional competence, behaviours, skills, teamwork, added value.

1. INTRODUCTION

Several studies have shown that care provided by interprofessional teams produce better outcomes for patients, compared to traditional methods. In 2002, interprofessional education was defined by the Centre for the Advancement of Interprofessional Education (CAIPE) a "occasions in which two or more professions learn with, from and about one another, in order to improve collaboration and the quality of care". In 2009, the American Association of Colleges of Pharmacy (AACP) expanded this definition: "Interprofessional education includes educators and students belonging to two or more healthcare professions and jointly taught collaborative disciplines promote а learning environment. The purpose of this endeavour is to develop knowledge, skills, and attitudes that translate interprofessional team behaviours into and competences.

Ideally, interprofessional education is vertically and horizontally embedded throughout the curriculum." Figure 1.

Figure 1. The relevance of interprofessional education



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Jean-Jacques Gilbert (2002) stated that being a collaborative worker requires both the transformation of the personal perspective and of the professional identity. Interprofessional competency or capability, consists of 4 domains: values/ethics, role and responsibility, interprofessional communication, teams and teamwork.

2. AIM

To implement and test the effectiveness of an interdisciplinary educational session with nursing and medical students in a centre of simulation at the University of Genoa.

3. METHODS

To build the contents of the interprofessional educational session, we adopted the Integrated course design methods, which included:

- Role play (to develop relational competences);
- Briefing & debriefing (to share information about the event);
- Semi-structured interview including 6 questions based on the literature and the roleplay script;
- Guided reflection (to analyse the contents of this experience).

The title of the interprofessional educational event was: "Family and child centred care: The role of communication". The educational session was recorded and verbatim transcribed to extract the main concepts and constructs from what the students said. Informed consent was obtained and anonymity ensured.

The setting was the Centre of Simulation of The School of Medical and Pharmaceutical Sciences at the University of Genoa.

The sample was a non-probabilistic convenience sample including 11 nursing students and 8 medical students.

4. **RESULTS**

After analysing the data collected through the modified evaluation grid called "Clinical skill laboratory questionnaire", we can affirm that the interprofessional educational event was rated positively in terms of a) teaching method; b) educational materials; and c) educators.

The main concepts and constructs drawn from the questions the students asked and the aggregated response data were:

- Meaning of interprofessional team;
- Different and reciprocally-completing roles; physician/nurse *primus inter pares*;
- Things done at different moments;
- Feeling of 'loss' in terms of quality of care for patients when interventions are not jointly agreed;
- Recognise that there is the need for specific training in terms of interprofessional teamwork;
- Need to be educated for integration: knowing one another, share, and cooperate;
- Having a common vision that is centred on the patient.

These concepts confirmed that the interprofessional educational session was correctly designed and conducted.

5. CONCLUSIONS

On the basis of our results, the purpose of this study was achieved. The mix of teaching methods selected for out interprofessional education session in the Centre of Simulation were effective in launching a course of interprofessional education, which will enable to implement knowledge and awareness about the competences required to work in an interprofessional team, as well as the need to reflect on this topic.

The students became more aware of the four domains of interprofessional competence (values/ethics, role and responsibility, interprofessional communication, teams and teamwork) and about the need to learn how to integrate with each other to be able to work as an interprofessional team in the future, and in synergy meet people's healthcare needs and improve their outcomes. In addition, good interprofessional teamwork can produce a very positive impact in terms of quality of care, patient safety, healthcare outcomes, and better satisfaction both for patients and health professionals themselves.

It would be important to conduct further investigations to understand how to better integrate interprofessional education throughout the students' curricula, through practical joint learning sessions, as the students themselves suggested. Therefore, as Aristotle said: "The whole is greater than the sum of its parts", which in our case is the added value for the patient.

REFERENCES

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