

Got Milk? An Interprofessional Approach to Lactation Care

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Presenter: Paige Blumer

Co-Presenter: Sandy Chen

Time: 10:00 – 10:15am

Health professional students need comprehensive lactation education and practice so that they can gain confidence to counsel families. In addition, a diverse representation and inclusive language in health care learning tools is needed to make this educational approach more representative of the diverse population these health care professionals interact with. This project aims to meet these needs and promote body neutrality and normalize breast/ chestfeeding through deliberate narrative and visual approaches.

In this interdisciplinary project, we brought together the knowledge of an array of subject matter experts, instructors and students in midwifery, nursing, physiotherapy, anatomy, and instructional design. Together we created engaging, inclusive, and accessible open educational resources (OER) modules that provide a holistic foundational knowledge of lactation and how to support breast/chestfeeding parents. These modules offer in-depth case studies, model trauma-informed care, and normalize body neutrality, breast/chestfeeding, and LGBTQIA+ and BIPOC representation. The modules span a range of topics from the basic physiology of lactation to various scenarios typically encountered by health professionals supporting families in lactation care. Through an interprofessional lens we were mindful of including the roles that everyone plays in supporting lactation in the community. These resources are available freely on the web to give access to all learners around the world - a contribution to global education that is particularly important during the transition to online learning during Covid19.

Patient Participation in Workplace-Based Assessment of Health Professional Trainees: A Scoping Review

Authors: Arwa Nemir, Marion Pearson, Vanessa Kitchin, and Kerry Wilbur

Presenter: Arwa Nemir

Time: 10:15 – 10:30am

Background: Health professions programs train students to develop patient-centred competencies, including providing care that respects patients' values and needs. Hence, patients' perspectives are crucial to enrich students' knowledge and skill development. However, evidence of formal patient roles in health professional trainee feedback and assessment is scarce. We will outline the existing landscape of the ways patients participate in workplace-based assessment of trainees across diverse health professions.

Methods: We searched MEDLINE, EMBASE, CINAHL, PsycINFO, ERIC, and Web of Science databases for studies that included descriptions of systems or experiences whereby patients received care from a health professional trainee in a workplace-based setting and participated in performance assessment of the trainee. We are including full-text articles published in English from 2009 to 2020, irrespective of study location or design, for inductive content analysis.

Findings: This review is underway. Database screening conducted to date has revealed that there is more proliferation in the literature of medicine and nursing educational contexts. Preliminary analysis suggests these professions have more diverse and concrete means for patient assessment of trainees compared to other health professions.

Implications: Formal patient participation in workplace-based assessment of health professional trainees appears heterogenous across health professions. Gaps in the literature are evident and we anticipate calling for a more inclusive approach to competency assessment by ensuring that patients' voices are well represented.

Keywords: patient involvement, competency-oriented feedback, and workplace-based learning

Patients' Experience as Mentors in an Interprofessional Education Program

Authors: Paula Riganti, Ashley Moller-Hansen, Cathy Kline, Angela Towle, William Godolphin

Presenter: Paula Riganti

Co-Presenter: Ashley Moller-Hansen

Time: 10:30 – 10:45am

Patient involvement in medical education is a promising approach to promote the learning of patient centred-care and interprofessional collaboration. However, examples in the literature describing activities led by patients as teachers without direct faculty involvement are scarce. For ten years, the UBC Interprofessional Health Mentors Program has granted autonomy to chronically ill individuals as they use their lived experiences as experts, mentors, and leaders in health education. Many have committed to multiple years of teaching but have not raised concerns about patient vulnerability as mentioned in the literature. Therefore, this study aims to describe patient experiences and outcomes from participating in our program.

We used a conceptual framework developed by Lauckner et al. and collected 276 responses from mentors about the benefits and challenges of participating in the program. We used semi-structured questionnaires and developed main themes using an inductive analysis.

Mentors feel that they create social connections, experience personal growth and make valued contributions by telling their story. They also think the program is beneficial for students, encouraging a patient-centred approach to practice and helping them develop interprofessional collaboration skills. Challenges were predominantly logistical (ie. scheduling) and rarely a lack of student engagement.

The majority of mentors reported high satisfaction with the program and vulnerability was not an issue. We hypothesize this is related to our program design. Involving patients as active partners in teaching and learning by allowing their authentic and autonomous voices to be heard may overcome issues of vulnerability.

Key words: patient, mentor, experience

Interprofessional Competency Development in Clinical Learning Environments

Authors: Kerry Wilbur, Janice Yeung, George Pachev

Presenter: Kerry Wilbur

Time: 10:45 – 11:00am

Background: Interprofessional education programming aims to promote early understanding of roles and expertise among health professional trainees. How such early and structured campus-based exposure to shared-care translates into tangible cooperation between disciplines in the clinical learning environments of the experiential curriculum is not well characterized. We report how pharmacy students describe interprofessional experiences during workplace-based learning in hospital settings.

Methods: As part of a larger project, twenty-five participants in a longitudinal diary study kept records during their fourth-year pharmacy clerkships. At pre-determined intervals during the 8-week inpatient clerkships, participants submitted written reflections in response to specific diary prompts. These included descriptions of how they were performing collaborator and communicator competency roles. Authors mapped experiences described in these diary records to relevant domains in national pharmacy and interprofessional competency frameworks.

Findings: We screened and analyzed 96 diary entries. Students did not always distinguish collaborator from communicator competency roles in their recorded experiences. Communication with physicians and nurses predominated interprofessional exchanges. Other disciplinary interactions seemed opportunistic without evidence of incorporation into routine work; it is largely unclear from student diaries when they established relationships or shared care with non-physicians. Reflected instances of addressing interprofessional disagreement was confined to resolving errors or discrepancies with prescribed medications.

Implications: Pharmacy students practiced many interprofessional communicator and collaborator roles in hospital settings but with a limited range of disciplinary team members. Documented experiences with team conflict was restricted to correcting prescribers. Opportunities to exercise and more broadly develop interprofessional competencies in the clinical learning environment are needed.

Keywords: interprofessional competencies; clinical learning environment; pharmacy

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