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An interprofessional clinical education model serving students, faculty, and the community

Jennifer R. Timm and Lisa L. Schnepfer
Winona State University, USA

Statement of the Problem: The clinical learning environment significantly impacts students' preparedness to enter practice. Nursing programs struggle securing clinical sites necessary for student learning and meeting accreditation standards. Programs must be creative in development of community experiences that facilitate students' learning. However, authentic interprofessional practice is often missing. The purpose of this work is to evaluate how a community-based interprofessional clinical education model effectively provides a setting for interprofessional practice among various health profession students.

Methodology: This pilot project evaluates how an interprofessional clinical education model, providing preventive health services through a faculty-guided student-led clinic, delivers an effective avenue to educate health profession students, while serving the community. The model was implemented as a pilot project over the course of one semester. Disciplines participating included students and faculty from undergraduate nursing (pre-licensure, and current registered nurses seeking a baccalaureate degree), social work, exercise science and graduate nursing (nurse practitioner, nursing and organizational leadership students), and counselor education. The project used mixed-methods to analyze data from pre/post-instruments and focus groups to gain comprehensive understanding of the effect of the model on students, faculty, and the community.

Findings: Student growth in interprofessional competencies, measured with the Interprofessional Education Collaborative Self-Assessment Tool and Interprofessional Socialization and Valuing Scale, indicates significant difference pre/post-participation (p-value .0022 and .0029, respectively). Four themes emerged from the focus groups, highlighting the impact of the clinical education model: interprofessional teamwork, an unorthodox learning environment, delivery of primary and secondary prevention in community, and reaching underserved populations.

Conclusion and Significance: Providing a clinical setting engaging health profession students in interprofessional practice demonstrates growth in interprofessional competencies. Competency in interprofessional practice is imperative in today's complex health care environments. This clinical education model has promising utility in providing an interprofessional clinical learning environment whilst serving the community.