

PIPE

Psychosocial InterProfessional Education

Professor Virginia Schmied Western Sydney University



Western Sydney University PIPE Development Team

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- Associate Professor Virginia Stultz, School of Nursing and Midwifery, Centre for Nursing Research and Practice Development, Nepean Blue Mountains Local Health District
- Professor Tanya Meade, Professor of Clinical Psychology, School of Social Sciences and Psychology, Western Sydney University
- Ms Rosemary Qummouh, Lecturer - Bachelor of Social Work, School of Social Sciences and Psychology, Western Sydney University
- Dr Janet Conti, Lecturer in Clinical Psychology, School of Social Sciences and Psychology, Western Sydney University
- Professor Phillipa Hay, Professor of Mental Health, School of Medicine, Western Sydney University

Consultants: Workshop Development

- Ms Louise Everett, Clinical Midwifery Consultant, Complex Pregnancy Care, St George Hospital, Sydney, NSW
- Ms Susan Harvey, Child and Family Health Nurse and Doctoral candidate, Griffith University
- Dr Mellanie Rollans, Whole Families Centre PTY LTD, Mental Health Nurse Consultant - Perinatal and Infant Mental Health Private Practice - Sydney NSW Australia
- Ms Kathy Solanki, Clinical Nurse Specialist Safe Start /Child, Adolescent & Youth Mental Health Service, Illawarra Local health District
- Ms Karen Willcocks, Clinical Nurse Educator / Nurse Educator, Karitane, NSW.

Purpose

- Outline the development and implementation of a one-day workshop designed to enhance the interprofessional collaboration skills of midwifery, medicine, social work and psychology students in relation to supporting with women psychosocial issues in the perinatal period; and
 - Report the evaluation of student experience and outcomes of participation in the PIPE stimulated learning experience.
- **Rationale**
 - **Vision**
 - **Collaborative working**
 - **Teaching strategies & resources**
 - **Workshop program**
 - **Evaluation**

PIPE



WHY PIPE

Well coordinated, integrated care for women & families with complex psychosocial needs

WHY: WSU BMid study 2 units Collaborative Care – 3rd year)



The aim of PIPE was to increase health professional students' awareness and skills in interprofessional collaboration in the perinatal period.

Interprofessional Education

- Interprofessional education (IPE) is essential to the development of a “collaborative practice-ready” health workforce. (WHO 2008)
- IPE occurs when two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2008)
- Benefits identified - enhancing collaboration, improves reflective practice, reducing service fragmentation, promotion of high quality patient care



Design & Development

- Six months planning & Preparation commenced November 2017
- Partnership pedagogy
 - Collaborative team: WSU academics midwifery, psychology, medicine, social work
 - clinicians from local health services
 - filmmakers WSU Rich Media
 - Student perspectives
- Logistics for extracurricular opportunities
- Simulate a MDT - role-play different, complex scenarios, based on real life situations; students working in small team with all disciplines represented



Simulation

Practising clinical or emergency skills regularly (e.g. resuscitation) creates a safe space in scenarios for staff to practice or respond to improve competence & confidence

- A different skill set is needed to support women and families with complex needs
 - Introducing sensitive questions
 - Learning the right thing to say next
 - Knowing the referral options
 - Cultural specific/sensitive
 - Interprofessional collaboration



Scenario development

Workshop with five clinicians who helped us identify the key issues that students needed to address – (stillbirth, domestic violence, and mental health issues) and to develop the scenarios for the workshop including the roles of various professional groups.

- simulated multidisciplinary team meetings;
- joint care planning;
- using decision algorithms and referral pathways;
- role play of interactions between women and professionals including healthcare interpreters
- using diverse modes including face to face, telephone interactions and referral letters to health professionals



Resource development

Short videos of interactions were prepared in advance and embedded into scenarios capturing the nuanced complexities



GP & Sarah

<https://youtu.be/fbr2BUwyNkw>

Interpreter

<https://youtu.be/xmb-OKZY-BE>

Home visit 1

<https://youtu.be/-KDDAkaggZg>

Home visit 2

<https://youtu.be/odmmUi3AEus>

Preparation

introductory
video; youtube
of psychosocial
assessment;
reading.

Workshop The
students
worked in
multidisciplinary
teams of 8 to
10 members
with facilitator
guided
scenarios

Workshop Program

0900 to 0915	Introductions and overview of day
0915 to 0940	Move into groups and rooms Fill in pre-workshop survey Introductions
0940 to 1030	Working on scenarios
1030 to 1100	Morning tea provided
1100 to 1245	Working on scenarios
1245 to 1330	Lunch – not provided
1330 to 1420	Reflective practice discussion
1430 to 1545	Panel discussion with clinicians
1545 to 1600	Summing up and evaluations

Reflection and feedback and panel discussion

The students were able to reflect and present their scenario back to the whole group in front of a panel of experts in the field that they could further refine their approach to the scenario and gain a greater understanding from the clinician's on the panel.



Evaluation

Pre and Post workshop

ambivalent annoyed anticipating **anxious** appreciative arranged calm
confused **curious** eager encouraged engaged
enthusiastic **excited** experience focused
forward frustrated happy hesitant initiative inquisitive insightful
interested intrigued involved **keen**
learning looking minded **motivated**
nervous ok open open-minded optimistic
positive real-life resistant slightly somewhat **tired** unaware uncertain
uncertainty understanding **unknown** **unsure** willing workshop

Pre workshop

n=62

Post workshop

n=48

Readiness for Interprofessional learning RIPLS

All 10 of the questions showed an increase in their responses from pre to post. The percentage increase range was from 3% to 17%.

- 1. Learning with other students will help me become a more effective member of a health care team**
- 2. Patients would ultimately benefit if health care students worked together to solve patient problems**
- 3. Shared learning with other health care students will increase my ability to understand clinical problems**
- 4. Learning with health care students before qualification would improve relationships after qualification**

On average, students from all disciplines experienced significantly greater confidence in working with a multidisciplinary team ($M = 4.697$, $SE = 0.67$), than prior to the workshop ($M = 4.337$, $SE = 0.99$, $t(9) = -5.738$, $p < .001$, $r = .88$

Student comments

“Invaluable A wonderful experience. These types of multi-disciplinary sessions should be more frequent especially across medicine and midwifery surrounding pregnancy, birth and postnatal management”. (Medical student)

Super useful. I felt I knew almost nothing about other professional's roles at the start of the day. I also felt I knew little about my own role as a social worker in a MDT. But I understand a lot more about those roles as a result of today's workshop.(social work student)

We were all on a levelled playing field (as students). There was no fear/ hierarchy. We broke down the barriers/ misconceptions Midwifery student)

Thank you for inviting medical students to be a part of this. It is very hard to engage with other elements of a hospital team due to various role stereotypes. (medical student)

Student comments

“I really gained a lot from role playing, particularly observing how skilled the psychologists and social workers were in communicating with the woman” (midwifery student)

“Watching interpreters was a great learning experience, you can see how just a very slight change of word can make a real difference to meaning and actions”. (psychology student)

I hear lots of bad things about working in MDT's But by working together while we are students we'll be more open to and capable of working together better after graduation (Medical student)

Achievements & Next steps

- Won 2 WSU VC Excellence and learning and teaching awards - 2018
- Won ACM award for outstanding midwifery educator - 2019
- Unit repeated in 2019 / One more video produced (Aboriginal & Torres Strait Islander scenario)
- PhD student – Louise Everitt – continuing work
- Submit a paper about the project
- Investigate options to embed in other courses
- **Sustainability:** opportunities for online components modules for postgrad students
- Translation to other areas eg early childhood; disability
- Accepted case study for Australian Collaboration Education Network (ACEN) published on website -
- <http://acen.edu.au/resources/psychosocial-inter-professional-education-pipe-project-a-multidisciplinary-student-collaboration/>

