THE NURSING SHIFT: MEASURING THE EFFECT OF INTER-PROFESSIONAL EDUCATION (IPE) ON MEDICAL STUDENTS IN THE EMERGENCY DEPARTMENT

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Description of the Innovation

Introduction/Innovative Concept
Inter-professional education (IPE) involves “occasions when two or more professions learn with, from and about each other to improve collaboration and the quality of care” (1). Current literature has found IPE to increase knowledge and skills (2), improve attitudes towards other professions (3), and to promote superior clinical outcomes (4). Health Canada has collaborated to form accreditation standards to support IPE in Canadian medical schools (5). The proposed educational innovation termed the ‘nursing shift,’ based out of Kelowna General Hospital’s Department of Emergency Medicine, in partnership with UBC’s Southern and Island Medical Programs, endeavors to enhance IPE in our institutions.

Methods
This nursing shift pilot was first trialed with 32 third year medical students from Feb 2016 until May 2017. Students were asked to evaluate the educational intervention by providing narrative feedback including the pros, cons, and overall impression of the shift. Narrative feedback was then assessed using an informal thematic analysis.

Curriculum, Tool, or Material
The innovative educational concept consists of an 8-hour nursing shift with a 30-minute break. Medical students spent 4 hours at triage with a nurse learning about patient intake. The remaining 3.5 hours were spent in the
emergency department collaborating with a nurse on several tasks including preparing and administering medications, starting intravenous lines, and inserting Foley catheters.

Results
Students provided overwhelmingly positive narrative feedback in response to the nursing shifts. Some quotes included: “I think that this shift will help me to more successfully move into the ER rotation with a greater understanding and appreciation of the members of the healthcare team other than physicians and for the organization of the ER,” “This shift was very humbling. The nurses I worked with were kind and competent – Can’t really imagine a better combination,” and “The chance to work with nursing staff directly is unique and extremely valuable.”

Future Directions
A formal rotation will be implemented in the form of a prospective cohort study with 24 medical students from two UBC sites including Kelowna and Victoria. The Kelowna group will attend a nursing shift, while the Victoria group will complete the standard emergency medicine rotation without the nursing shift. Impact will be measured over two years using a mixed-methods analysis.

Conclusion
Healthcare systems are shifting to a more collaborative team oriented approach, and IPE has been shown to prepare students for this changing workplace (7). Building upon the early success with a nursing shift pilot, we seek to understand third year medical students’ experience of the 8-hour nursing shift integrated into a standard emergency medicine rotation, and to evaluate any changes in attitudes towards inter-professional collaboration after engaging in this intervention. Evaluation of this novel implementation will enable further assessment and optimization of the nursing shift, and if it is well received, encourage widespread adoption.

BOTTOM LINE:
Current literature shows multiple benefits of IPE (5), so it is imperative that medical schools structure their curriculums to maximize collaborative education. We are building on a successful pilot project to further study the impact of the educational intervention termed the ‘nursing shift.’ This study will not only assess this unique educational opportunity for continued application at our institution, but it will also inform educators and other professionals if other medical schools would benefit from a similar nursing shift. Furthermore, this project will add to the growing literature on how novel educational approaches can positively influence team-based practice in healthcare settings.
References