Interprofessional Education in Medical School: Applying Motivational Interviewing Skills as a Model

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INTRODUCTION

- The Interprofessional Education Collaborative (IPEC) was established in 2009 and included 6 professional schools.
- The aim of IPEC is to “Prepare future health professional for enhance team-based care of patients and improved population health outcomes.”
- Interprofessional education is defined by WHO as “When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.”
- Motivational Interviewing is a counseling style that helps patients recognize and overcome ambivalence to change.
- Brief training can create effective skills even in novice providers and can increase their self-efficacy.

COURSE DEVELOPMENT

- SER week education course
  - Monday through Thursday at noon
  - 2 days of instruction and role-playing
  - 1.5 days in ED with patient care interactions
- Students included 2 professional schools
  - 6 M1 or M2 students
  - 1-2 Advanced Psychology Practicum Trainees
- Instructors included 3 professional schools
  - 1 Medical Doctor
  - 3 Psychologists
  - 1 Social Worker
- Instructors received Motivational Interviewing (MI) Training from a licensed psychologist MI trainer

ASSESSMENT TOOLS

- Quantitative Assessments
  - Students
    - Motivational Interviewing Counseling Supervision Form
    - Pre and Post Assessments of self and by supervisor
    - Likert Scale 1-7
    - Student ratings of the course
  - Patients
    - Communication Assessment Scale
    - Post student interview in the Emergency Department
    - 30 Day follow up assessment
- Qualitative outcomes
  - Student reflection statements

RESULTS

- Barriers
  - Sustainability
    - Use of faculty time in education setting became a sustainability factor with still maintaining clinical work.
    - Use of psychology advanced practicum trainees was limiting sustainability because they are small in numbers and have difficulty with taking a whole week off from graduate school.
  - Physical space
    - Patient to medical student ratio in the Emergency Department became a limiting factor.
- Strengths
  - Growth measurement
  - Data can be measured in both quantitative and qualitative ways.
  - Data is both immediate and has long term outcomes that can be assessed.
  - Interprofessional education at both learner and instructor levels.
  - Implementation with patients.
  - Junior supervisors gain valuable feedback experience.
  - Building confidence in trainees.

RESULTS CONTINUED

- Expansion of learners
  - We will be utilizing psychology interns (6) and potentially adding post-doctoral fellows to increase the number of psychology trainee supervisors.
  - We hope to expand enrollment from 6 to 18 medical students per session.
- Expansion in locations
  - Collaborating to expand the location from beyond the Emergency Department.
  - Spine Center and chronic pain.
  - Family medicine and behavioral management approaches.
  - Psychiatry.
- Expansion of assessments
  - Focus on quadruple threat.
- Assess more long-term outcomes with course.

CONCLUSIONS

- Limited based on only 3 sessions (due to COVID)
- Teaching MI Skills to M1 & M2 students in the SER week context works.
- Motivational Interviewing is a great tool to use with IPE.
- Patients, Learners, & Faculty all benefit now, with anticipated long-term benefits.

ASSESSMENT TOOLS

- Improved Provider Experience
- Improved Patient Experience
- Improved Cost of Care
- QUADRUPLE AIM

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