

**McGill University – Faculty of Medicine  
Interprofessional Education Series**

**IPEA-502 - Patient-Centred Care in Action: An Interprofessional Approach**

Arnold and Blema Steinberg Medical Simulation Centre McGill University

**Guidelines & Learning Objectives for Students**

Welcome to the IPE Seminar on Patient-Centred Care in Action: An Interprofessional Approach. This IPE Seminar involves students from 4 Schools within the Faculty of Medicine: Communication Sciences & Disorders, Nursing, Physical and Occupational Therapy, Medicine.

This innovative session consists of 4 related scenarios where you will be given the unique opportunity work together in an interprofessional team to address an actual patient-family situation that has been prepared as a simulation activity. Twenty-four actors have prepared to play the various roles and create a realistic situation. There will be opportunities for students to debrief with facilitators and plan next steps after each encounter. We hope that you will take full advantage to actively participate in this experience and to share your feedback and suggestions with us in the online survey after the event.

Please note that if you are absent or unable to take part in this important learning activity will be required to complete a supplemental assignment.

**LEARNING ACTIVITIES:**

Individual preparatory readings, plenary, four simulation experiences and small group discussions, and debriefs.

**LEARNING OBJECTIVES:**

1. Enhance your experience of learning with, from and about other healthcare professionals in a simulated environment using a standardized patient approach.
  - Clarify and respect the roles, responsibilities and scope of practice of your own profession and of other healthcare professions in order to determine how to work together in this patient-family scenario.

2. Understand the processes of interprofessional communication and teamwork to best address the needs and goals for patient and family-centred care.
  - Communicate role expectations of each healthcare profession within the interprofessional team and the contribution of each in this scenario
  - Engage in a collective approach to explore and understand the patient–family in a respectful and comprehensive way
  
3. Collaborate as a team in your interactions with the patient, family and health care provider to gather clinical information that is pertinent to the situation and relevant to formulating a plan of care
  - Develop problem-solving skills together to respond to the evolving complexity of the clinical situation
  - Set collective goals including the patient-family’s point of view and circumstances in the decision-making process
  - Plan and execute their interactions in ways that are most responsive to patient and family needs
  
4. Engage in an open dialogue of the case-based simulated learning activity with team members and the standardized actors (reflection in action)
  - Appraise the attributes of effective interprofessional team functioning and their impact on effective patient and family centred practice
  - Critically analyze your team’s actions (Attitudes & Behaviors) to build a better understanding of collaborative practice.
  
5. Reflect on the knowledge and skills that are needed to provide patient-centred care within an interprofessional team

**Evaluation of Seminar:**

**All students** will complete an on-line **Student survey at the end of the Seminar** to evaluate the IPE Seminar- individual work. Please ensure that you **include the name of your facilitator(s)** in the appropriate section(s) on the evaluation form.

**General Information upon arrival at Simulation Centre**

- There will be a sign up sheet at the reception desk. You must sign in to be considered present
- Please take note of your Small Group number
- A name tag will be provided when you sign in. You will need to store your belongings in the locker room, you must bring your own lock.
- **Please arrive 10-15 minutes early to settle in .**

## **Agenda:**

*Note that the same Agenda will be repeated for the 4:00-6:00 session*

- 1:30 – 1:40 pm: Welcome, Introduction and learning objectives; introduction to case and activity
- 1:40 – 1:55 pm: Ice breaker exercise - Triz
- 1:55 – 2:00 pm: Small groups move to their stations
- 2:00 – 2:05 pm: Student & facilitator introductions
- 2:05 – 2:13 pm: Small group meeting with social worker
- 2:13 – 2:20 pm: Small group debrief of encounter
- 2:20 – 2:28 pm: Small group meeting with patient, Pat Boudreau
- 2:28 – 2:35 pm: Small group debrief of encounter
- 2:35 – 2:43 pm: Small group meeting with family member, John Boudreau
- 2:43 – 2:50 pm: Small group debrief of encounter
- 2:50 – 3:05 pm: Team meeting to discuss a plan of care/recommendations
- 3:05 – 3:15 pm: Team meets with patient and family member to share/discuss recommendations and ask for their input
- 3:15 – 3:30 pm: Small group debrief with their facilitator(s)
- 3:30 pm: Session ends for students
- 3:30 – 3:45 pm: Facilitators return to conference room for debrief session

### **Small Group Simulation Activity**

**Focus on the ‘process’ of interprofessional communication and collaboration to best address the rehabilitation goals for Pat and his family member and to enhance your experience of learning with, from and about other healthcare professionals.**

#### **Ground Rules for Simulation Activity (please review prior to the Seminar):**

- Understand the context of the simulation and how it will be conducted
- Respect the perspectives and contributions of all team members and standardized actors
- Do not interrupt the scenario while it is in progress
- Address each role player within his/her role play character
- Actively participate in the group debriefing whether you were taking part in the encounter or observing the session
- Should you experience role confusion, conflict or an emotional response during the role play, it will be discussed during the debriefing.

***The Simulation is based on the case of Pat Boudreau.***

**1. Pat's Case Description:**

Pat is 35 years old born with Cerebral Palsy. Pat has Spastic Diplegia\* and Spastic Dysarthria\*. Pat's speech problems make it difficult for him/her to be understood by others. Pat was brought to the hospital Emergency Room by his/her brother, John who found Pat at home, ill and confused.

Pat is aware that s/he is on an acute care medical unit, recovering from an episode of pneumonia and dehydration. The patient has an intravenous running (IV) and an oxygen mask to be used as needed.

Three weeks ago Pat's adoptive mother passed away.

**Note\***

**Spastic Diplegia** occurs when there is a lack of oxygen to the brain during birth. Both legs are tensed, and muscle contractures (shortening of the muscles) are present at the hips and knees.

**Spastic Dysarthria** occurs when there is neurological damage (e.g. lack of oxygen to the brain) that impacts the motor component of speech. The main speech characteristics of spastic dysarthria are strained/strangled voice quality, slow speech, and imprecise (slurred) speech.

**2. Family Member Case Description:**

John is Pat's younger brother. He is 31 years old and is a bank manager in Toronto. Since the death of their mother, John has been coming to Montreal more regularly to check in on Pat and has been insisting that he consider an assisted living or long term care facility. This last visit John found Pat to be quite ill and confused. John brought him/her to the emergency and Pat was admitted to a medical unit and is being treated for pneumonia and dehydration. John has concerns for his brother/sister's safety living alone, and questions his/her ability to care for himself/herself.

**3. Social Worker Case Description:**

A social worker is involved in Pat's case during his/her hospitalization and has met with Pat and John. The social worker has organized a meeting with the team because she requires the team's assessment of Pat's situation and to know if there are any additional supports/services that could be offered to improve his/her safety and quality of life.

## **Simulation Activities:**

- ✚ Prior to the start of the first simulation, students and facilitator(s) will introduce themselves (Name/Profession).
  - ✚ Each team will consist of 8-9 students from the various professions. Each team will work through 4 different simulations (Social worker, Patient, Family member, & Patient and Family meeting). All students will participate, either as an active participant in the simulation, assuming the role of their respected profession, or as an observer.
  - ✚ Each simulation is 8 minutes in length followed by 7 minutes for the team to debrief and plan for the next simulation.
  - ✚ As a team, you will select four students to participate in the first interview. The remaining students will observe the interaction. A new group of four students will be selected for each subsequent interview.
  - ✚ Following the first three simulations, (social worker, patient, and family member) facilitator(s) will join your team in a short debrief. As a team, you will have **7 minutes** to discuss the encounter and to plan for next session. For the final simulation with the patient and sibling, your entire team will be present in the room, however the team may choose to select one or two representatives to lead the discussion.
- a. **Simulation with the Social Worker:** Four members of the team (students decide) will meet with the social worker to gather information about Pat and his/her brother's situation. Information gained from the social worker will help your team to plan the upcoming encounter with the patient and family member and to gain some ideas about what are the important aspects to consider in the treatment plan. The four students involved in the simulation will play their own profession. The student observers should note the information that was gathered and how they might use this to inform the future encounters with the patient and family member. As an observer you should also note the strengths and challenges of interprofessional teamwork and each professional's role and contribution in the simulation. At the conclusion of the simulation your team will have **7 minutes** to debrief together with their facilitator and plan for the next encounter with Pat.
- b. **Simulation with the Patient, Pat Boudreau:** Four different members of your team (students decide) will meet with the patient to assess his/her current health status and gather information from the patient's perspective in order to better plan for his/her care in hospital and eventual discharge. The four students involved in the simulation will play their own profession. The student observers should note the information that was gathered and how they might use this to inform their next encounter with the family member. As an observer you should also note the strengths and challenges of interprofessional teamwork and each professional's role

and contribution in the simulation. At the conclusion of the simulation your entire student team will have **7 minutes** to debrief together with their facilitator and plan for the next encounter with John.

**c. Simulation with Brother, John Boudreau:** All remaining students who have not taken part in a simulation will participate in the family member scenario. If additional students are needed to create a four member team, students may decide which professionals should take part. The team will meet with the family member to gather information from John's perspective in order to better plan for Pat's care in hospital and eventual discharge. The students involved in the simulation will play their own profession. The student observers should note the information that was gathered and how they might use this to inform the team planning meeting. As an observer you should also note the strengths and challenges of interprofessional teamwork and each professional's role and contribution in the simulation. At the conclusion of this simulation your team will have **7 minutes** to debrief the family member encounter together with their facilitator. An additional **15** minutes is then available for the team to develop a plan of care/recommendations for Pat's situation, and decide how they will approach the meeting with Pat and John.

**d. Simulation with Pat and his Brother:** Students decide who will be present in the simulation and who will observe. The goal of the encounter is to 1) present and discuss the plan of care and recommendations of the team regarding Pat's eventual discharge, and 2) encourage feedback/questions from Pat and his/her brother.

The students involved in the simulation will play their own profession. The student observers should note the information that was gathered and the strengths and challenges of interprofessional teamwork and each professional's role and contribution in the simulation.

**e. Final Guided Debrief of Simulation:** At the conclusion of the simulation each small group will debrief separately with their facilitator(s) for **15** minutes. Strengths and challenges of interprofessional teamwork will be highlighted.

**Possible questions to consider: You will be asked to reflect on 3 key learning experiences that they would like to discuss**

- What did I learn about working in a team from this encounter?
- What team work and communication strategies were effective?
- What team work and communication strategies were less effective?
- What new understanding did I gain about the other professions?
- What did our team do to ensure a patient-centred approach to care?
- What did I bring to the process?

## Glossary of Terms and concept map of interprofessional practice

**Collaborative Practice:** An interprofessional process for communication and decision making that enables the knowledge and skills of care providers to synergistically influence the client/patient care provided. (Way, Jones, & Busing 2000) Collaborative practice is interlinked to the concept of teamwork.

**Collaborative Patient-Centred Practice:** Promotes the active participation of each health care discipline in patient care. It enhances patient and family-centred goals and values, provides mechanisms for continuous communication among caregivers, optimizes staff participation in clinical decision-making within and across disciplines and fosters respect for disciplinary contributions made by all professionals. (Health Canada 2003).

**Teamwork:** Describes an interdependent relationship that exists between members of a team. It is an application of collaboration. “Collaboration” deals with the type of relationships and interactions that take place between coworkers. Effective health care teamwork applies to caregivers who practice collaboration within their work settings.

(D’Amour, Ferrada-Videla San Martin Rodriguez 2005). Figure 1:

[www.cihc.ca/files/CIHC\\_IPCompetencies\\_Feb1210.pdf](http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf)

Figure 1: The National Competency Framework

