

# Evaluating the Outcomes for Interprofessional Education Programs in Residential Aged Care



## Acknowledgements

Generous support and contribution was provided by Brightwater Care Group (Western Australia) and Helping Hand (South Australia), who both facilitate interprofessional student placements as part of their interprofessional education programs. We would like to express thanks to the residents, staff and family members at the participating facilities who thoroughly enjoyed the students' presence and experience and made the program a success. Additionally, we would like to acknowledge the students who undertook placements at the aged care facilities and their representative universities for bringing their enthusiasm and joy into the residents' homes.

The success of the program was guided by the expertise and dedication of the Steering Group and Project Working Group.

### Steering Group Members

- Jane Harrup-Gregory (Brightwater Care Group)
- Jennifer Lawrence (Brightwater Care Group)
- Karla Seaman (Brightwater Care Group)
- Kathy Williams (Alzheimer's Australia Consumer Dementia Research Network)
- Fiona Lake (The University of Western Australia)
- Rosemary Saunders (The University of Western Australia)
- Jan Van Emden (Helping Hand)
- Helen Loffler (Helping Hand)
- Megan Corlis (Helping Hand)
- Esther May (University of South Australia)
- Caroline Bulsara (Brightwater Care Group)

### Project Working Group Members

- Kay Macdonald (Site Care Manager)
- Donna Petersen (Deputy Care Manager)
- Maxine Zimbulis (Consumer Representative)
- Karla Seaman (Senior Research Officer)
- Karen Gall (Allied Health)
- Kylie Pratt (IPE Facilitator)
- Aimee Hallsworth (IPE Facilitator)
- Debbie Nobre (Allied Health Team Leader)
- Wendy Hudson (Dementia and Wellbeing Coordinator)
- Jane Harrup-Gregory (Project Manager)

This project was funded by the National Health and Medical Research (NHMRC) Partnership Centre for dealing with cognitive and functional related decline in older people (CDPC). The CDPC received funding from the NHMRC and funding partners including Hammond Care, Helping Hand, Brightwater Care Group and Alzheimer's Australia.

**Copyright © 2016 Brightwater**

**Report developed by Karla Seaman and Elly Williams of the Brightwater Research Centre, Brightwater Care Group.**

## Overview

Interprofessional Education programs have been evaluated at Brightwater Care Group from 2013-2015 and at Helping Hand Aged Care in 2015. This report provides a brief background to interprofessional education and the project before outlining the four key outcomes of the interprofessional education programs in the two residential aged care organisations. In short residential aged care provided an optimal environment for interprofessional student placements, residents received additional care improving their physical and emotional wellbeing, students changed their views on residential aged care following the placement and became more likely to work in aged care in the future and current facility staff improved their skills and knowledge during the programs.

### Report Outline:

- About Interprofessional Education
- About this Project
- Summary of Key Findings:
- Interprofessional Education in Residential Aged Care
- Outcomes for Residents with Cognitive and Functional Decline
- Preparing the Future Workforce
- Strengthening the Current Workforce
- What's Next?
- References





# About Interprofessional Education

## What is interprofessional education?

Interprofessional education is 'When two or more professionals learn with from and about each other to improve collaboration and the quality of care' (Centre For the Advancement of Interprofessional Education (CAIPE), 2002).

Interprofessional Education is sometimes referred to as 'IPE'.

## Why is interprofessional education important?

Increased collaboration between health professionals leads to an improved quality of care for patients/clients. When health professionals with differing skill sets work together and understand where their scope ends and other professionals' begins care needs of patients are better attended to through appropriate referral processes and collaborative care. This also reduces unnecessary medical costs (Coleman, 2003).

The healthcare system is becoming increasingly complex so it is important that interprofessional learning and education occurs from the foundation of a healthcare professional's education (Wicker, 2011). This ensures that future healthcare professionals embed and maintain best practice throughout their career.

## What is interprofessional education in residential aged care?

Residential aged care facilities provide an optimal environment for learning for university student placements as they allow students to work with the complex needs of the elderly (Halcomb, Sheperd, & Griffiths, 2009; Johnson, 2010; Kanter, 2012; Lucas et al., 2013a, 2013b).

Allied Health, nursing, medicine, care workers and pharmacy staff all contribute to the care needs of the elderly and so collaboration between these disciplines in supporting clinical placements in residential aged care facilities provides many interprofessional learning opportunities.



# About this Project

## What was the purpose of this project?

The main aim of this project was to evaluate the outcomes of two interprofessional education programs in residential aged care, notably outcomes related to students, facility staff and facility residents. This project aimed to answer the following questions:

- What are the benefits of interprofessional education programs in residential aged care?
- How does the program alter students' perceptions of aged care and influence career decisions?
- How does the program impact on the learning and involvement of existing facility staff?
- What are the positive effects of the program on residents with cognitive decline?

## Where did we conduct the interprofessional education programs?

The interprofessional education programs were conducted at one Brightwater Care Group aged care facility in Western Australia and nine Helping Hand aged care facilities in South Australia.

## When did we conduct the evaluation?

The interprofessional education program was evaluated at Brightwater Care Group from 2013 to 2015, whilst data was also collected from Helping Hand in 2015.

## What did the interprofessional education program involve?

Students participated in care delivery within their scope of practice to meet their curriculum requirements as they would on a normal practical placement. In addition to this, students participated in a range of interprofessional teaching and learning activities under the direction of an interprofessional education facilitator that included:

- Facilitating group activity programs for residents
- Delivering staff education sessions
- Case study discussions with the interprofessional student team and staff
- Participating in general practitioner (doctor) visits
- Receiving education on residential aged care related topics
- Participating in interprofessional learning activities
- Supervision from professionals from other disciplines

## Who were the students?

The students involved in the project were studying one of 11 groups outlined in Figure 1 and most students were undertaking their final year practical placements. Students were studying at universities in Western Australia and university or vocational education and training centres in South Australia.

### Student Group (n=453)

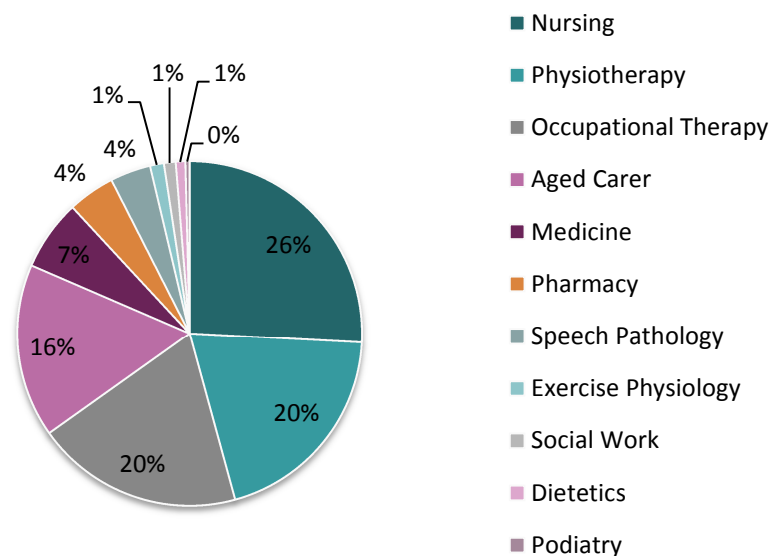
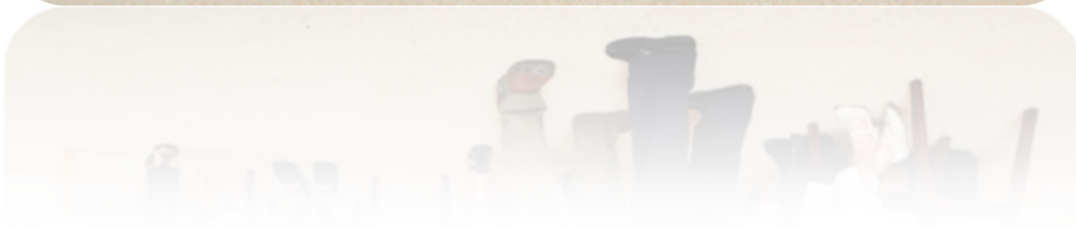


Figure 1. Students undertaking interprofessional education placements between 2013 and 2015.

## How were the residents involved?

Along with one on one interactions with students, residents participated in wellbeing and therapy programs facilitated by interprofessional groups of students. These included:

- Balance group
- Paro group
- Pulmonary rehabilitation
- Men's group
- Ladies group
- Wii group
- Voice group



## How was the project evaluated?

A mixed methods study design was used for this project which involved collecting qualitative and quantitative data from students, staff, residents and family of residents. This allowed a triangulation of perspectives on the interprofessional education program. Data collection tools are outlined below in Figure 2. Student and staff results are combined for the two organisations whilst resident and family data were collected from one site.

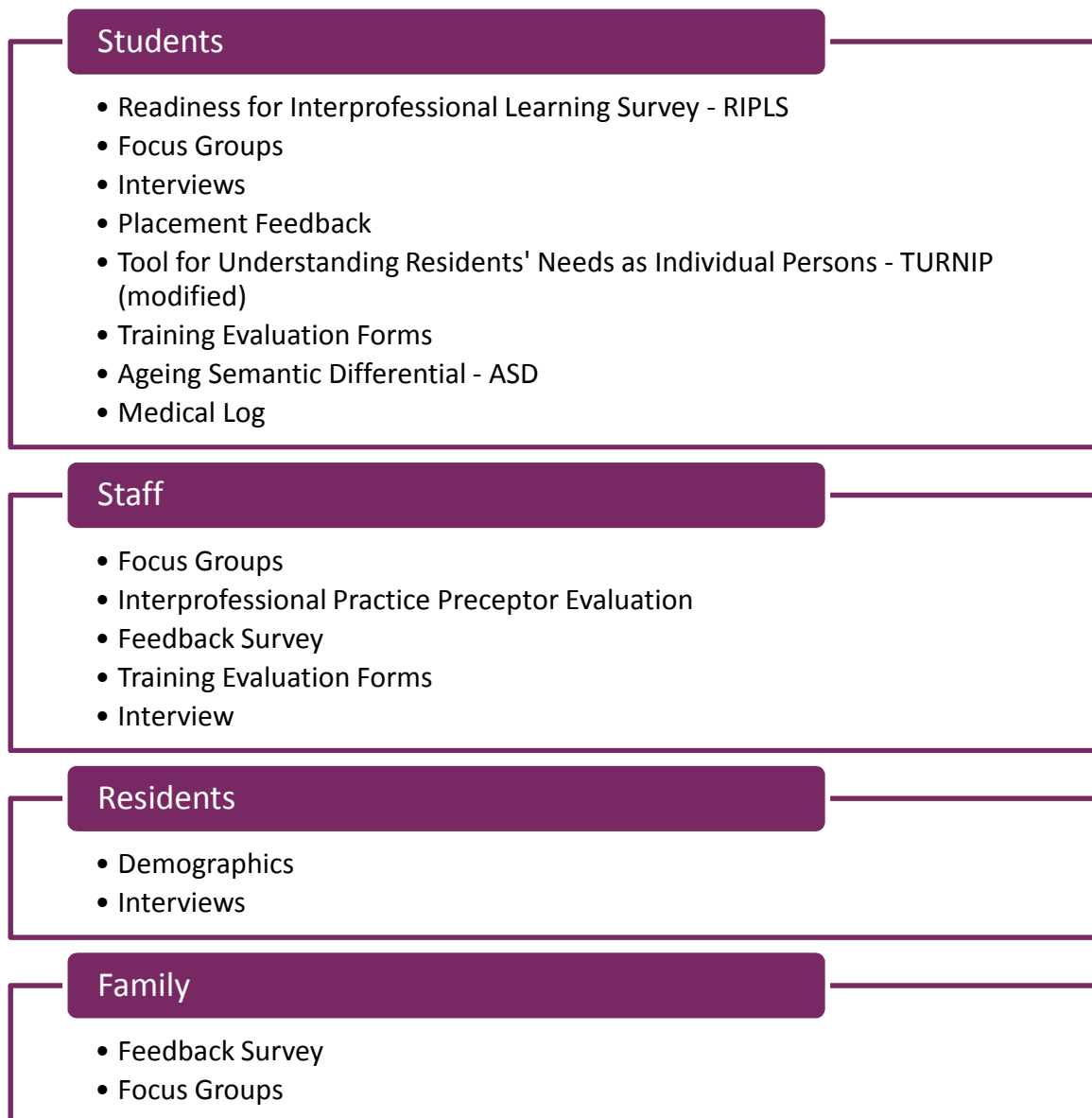


Figure 2. Data collection tools used to collect information from students, staff, residents and family members from 2013 – 2015.



## Key Findings

Outcomes from the interprofessional education programs have been summarised into four key areas outlined in Figure 3.

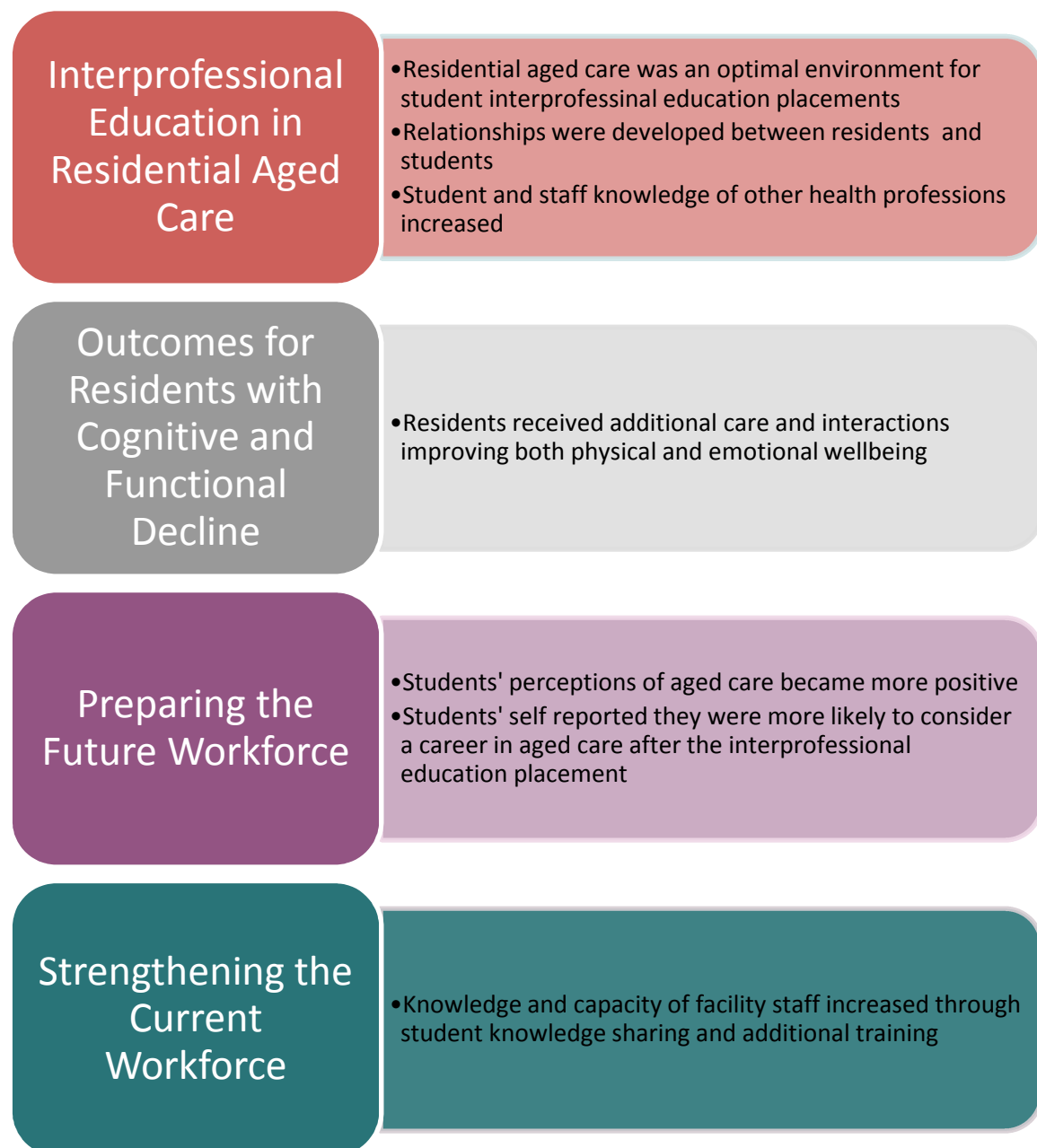


Figure 3. Summary of the key findings from research into the impact of interprofessional education programs in residential aged care.



## Interprofessional Education in Residential Aged Care

Residential aged care provided an optimal environment for student placements and led to aged care facilities developing a more vibrant and interactive atmosphere.

*'Then they [the students] realise at the end it's not boring, and they've got a lot to offer and we have got a lot to offer them.'* – Staff Member

*'We really enjoy their company and I hope, it looks like to me they enjoy ours.'* – Resident

The aged care facility staff were provided with increased resources and students experienced a practical placement that allowed them to develop relationships with residents while increasing their knowledge of other professions.

*'Being able to interact one on one with residents and it not just being that turnover in a hospital or a client um doctor referral or something. I like that this is their home and you get to be a part of it'* – Student

*'I really loved it here because you really become sort of part of their lives... And so you can integrate your care into sort of their likes and dislikes. You really get to know them'* – Student

The integration of students and facility staff members into the program was vital to running an optimal interprofessional student placement. This ensured site consistency and continuity of care as well as providing students with maximum opportunities for learning and practical experience. Students were treated as part of the staff team whilst

on site, contributing to their increased confidence and skill levels. This was an opportunity previous practical placements had not presented students with.

***'I'm sure their confidence has increased and that sort of gives me a lot of pleasure when I see them' – Resident***

***'I feel so much more confident now.' – Student***

Students were provided with additional training and personal development, encouraging collaboration with students from other disciplines on topics/case studies specific to aged care. Many students enjoyed this training and believed it made them more aware of other healthcare disciplines as well as their own role as a healthcare professional.

***'It definitely helped make me better, a better professional rather than just a better physio student' – Student***

***'...the IPE program gave us a chance to really appreciate the role within an aged care facility but um, more broadly as well' – Student***

Overall 93% of students said training sessions increased their clinical knowledge. These sessions were delivered by professionals or students and included topics such as 'medication in aged care', 'pressure care management' and 'chronic disease management'.

Students displayed an increase in readiness for interprofessional learning following their interprofessional placement in a residential aged care facility, with a greater understanding of teamwork and collaboration as well as of their roles and responsibilities. This indicates that students became increasingly aware of the importance of collaboration with other health professionals to provide holistic care as well as more aware of their own role within a healthcare team and the role of others.

***'It was really good to know all about the other disciplines and when to refer as well like when I was studying at uni, to go and, especially just to know what they do, like because you never really see what they do in a hospital, you just hear about them so it was good to work alongside them and watch what they do' – Student***

Communication with residents, family, staff and students was a key element in ensuring the program ran effectively. The majority of family members felt comfortable with the students' involvement and all of the staff agreed that interprofessional practice is important in aged care and that the students' ability to work effectively with residents improved during their placement.

The program granted the aged care facilities access to university resources such as the library and training, allowing development of knowledge and skills for clinical supervision and interprofessional education and practice.





# Outcomes for Residents with Cognitive and Functional Decline

Following interprofessional placement students demonstrated an increased understanding of cognitive decline and how to communicate with residents with cognitive decline. This was reflected by an increase in students' knowledge and awareness of the care needs of residents with dementia.

*'You talk a lot about their past and you acknowledge them as a person rather than the disease or the condition' – Student*

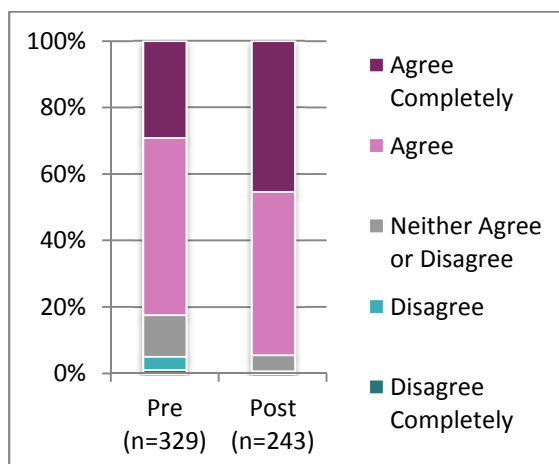


Figure 4. Student responses to the statement 'People with dementia have ways of communicating what they want and don't want'.

Students became more aware of treating residents as individuals and providing holistic care.

*'Like how important it is still to be advocating for them and keeping that quality of life to what they've had before and just like little things, like if that person needs to put on their lipstick and things, like making sure that that's still a priority for them' – Student*

*'That's what I came to realise as well, is that it helped me to become more of a holistic practitioner because we were incorporating a lot more of the social activities and things into our care' – Student*

Additionally, students felt more confident to work with older adults with cognitive decline after their interprofessional placements (see Figure 5).

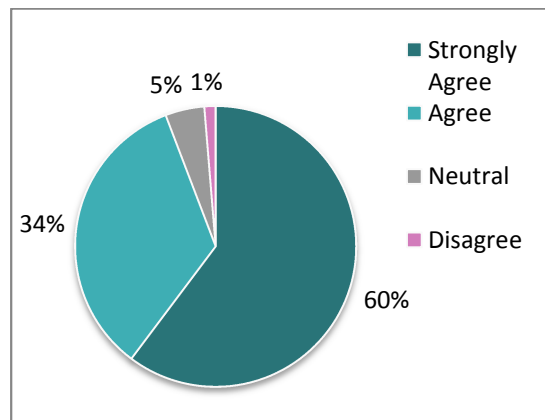


Figure 5. Student responses to the statement 'I feel more confident to work with the elderly and people with cognitive decline in any setting' (n=269).

The program had positive effects on the physical health, emotional wellbeing and social interaction of residents at the facility. Students provided additional physical care as well as a new and unique interaction with residents that allowed them to develop relationships outside of their normal routine.

*'It seems like the residents are really looking forward to the day when they are going to be with the students.'* – Staff Member

Sixth year medical students in 2013 provided an increased amount of primary care to residents and recorded the reason the resident was attended and the outcomes of the visit. Ninety percent of student visits were believed to have prevented further escalation of a medical issue. This provided residents with an increased quality of care and service.

Along with the medical students, all students undertaking interprofessional placement were able to increase the intensity of care delivered to residents in a capacity that facility staff were not able to deliver.

*'The residents have been able to get more rehab from having that extra contact with students which has been great outcomes for the residents.'* – Staff Member

Residents appreciated the increased interactions they had with students and with each other as a result of the program. This was revealed in interviews/focus groups with all parties:

*'Well I think that the residents usually relate very positively to young people and it's extra stimulation for them outside of their normal environment that they have.'* – Resident's Family Member

*'We look forward to having them here, because they have been extremely helpful and provided us quite a degree of social outlet with their assistance in various ways.'* – Resident

Residents self-reported that their physical health had improved as a result of the additional exercise and therapy sessions provided by students in the program, family members appreciated the extra support students provided and staff also recognised the physical benefits to residents:

*'In the balance exercises we do... it's improved my balance one hell of a lot. In fact I haven't had a fall since I've been doing the balance exercises'* – Resident

*'It wasn't harmful or anything but he was determined that he was going to achieve me walking which I did'* – Resident



Additional data collected from 10 residents over the course of the program in 2015 using the Pool Activity Level (PAL) tool (Pool, 2011) displayed an increase in resident engagement levels during student led exercise classes suggesting that the longer residents attended student led sessions the higher their levels of engagement in the sessions became (see Figure 6). Peaks and troughs are seen in engagement levels from week to week and comments recorded by students suggest residents were highly influenced by the state of their health prior to attending sessions.

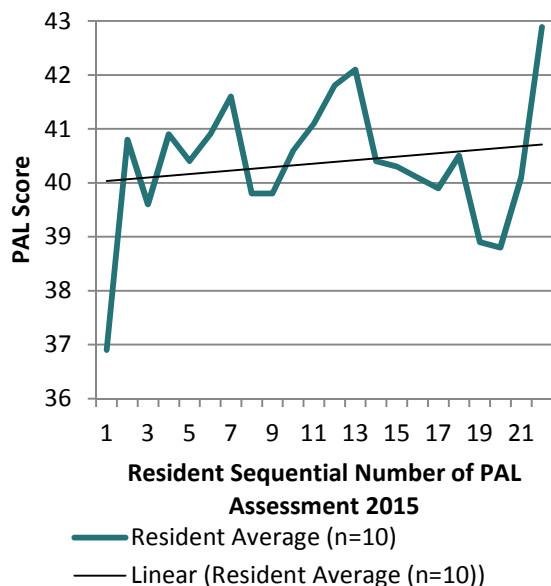


Figure 6. Resident levels of engagement in student led programs.

Being a part of the program gave residents a sense of importance and belonging from assisting the students in gaining their qualifications, and this improved residents' emotional wellbeing:

*'When you are teaching the students things the residents really do feel like they're helping with the teaching process and it empowers them a bit so. I know they really do enjoy it. You ask them if they mind if students can come in and they sort of puff up their chests and they enjoy it' – Staff Member*

*'They give you that sort of sense of family, somehow or other, and that's not, when you've got the busy staff buzzing around and that sort of thing, but they just seem to make that extra element' – Resident*

*'I think they also feel like really privileged to help us with our study' – Student*

Fluctuation in student numbers throughout the program caused disruptions for residents, impacting the exercise schedule that had been developed for them.

*'In fact when we do have a few dry periods when we can't get any students and that and everybody's lost.' – Resident*

*'If you miss a couple of classes, you've got to, it takes a couple of weeks to catch up again' – Resident*

Family members of residents revealed they were very supportive of student involvement at the facility and in the care of their loved ones, believing it added an extra element to their days:

*'Father in law very happy having students as a change of faces and ideas.' – Resident's Family Member*

*'Lovely to see the young people interacting with a happy manner and smiling faces' – Resident's Family Member*



## Preparing the Future Workforce

During the interprofessional education program students' perceptions of aged care and of working with the elderly following placement changed, assisting with increasing recruitment opportunities of graduate healthcare professionals to the aged care workforce and providing students with skills that are transferable to many healthcare settings.

***'With an ageing population the more students in all branches of medicine and social services that have training in dealing with ageing and the elderly, the better.'* – Resident's Family Member**

Students also became more ready to practice in an interprofessional manner, further strengthening the capacity of the future healthcare workforce and were given the opportunity to be more autonomous under the supervision of staff.

Treating students as a part of the staff team and providing them with greater autonomy than previous placements contributed to

increased confidence levels and skill development for students undertaking an interprofessional placement.

***'We've had to fill our days and we're not shadowed as much as I have been on other placements which has been really beneficial I think' – Student***

***'The only thing that makes me feel like a student is putting on the uniform, that's kind of it' – Student***

Students spoke of their changing views on aged care following their interprofessional placement in focus groups, with some mentioning they would now consider a career in aged care:

***'I was a bit hesitant, but after being placed here I grew to really love it and it is probably my best placement, and I'm hoping to take my career in the direction of aged care now. So, completely changed my idea' – Student***

*'I found it a lot more rewarding than I thought. I thought it would be like so boring, same thing over and over, but there's like actually quite a wide range of variety between like treating residents who have had a stroke and got neurological deficits and then there's dementia...'* – Student

*'... if the opportunity came up I could easily work in aged care or children'* – Student

Complimentary to this 55% of students also 'strongly agreed' and 37% 'agreed' that working in aged care had positively changed their view of working with the elderly and people with cognitive decline as seen in Figure 7.

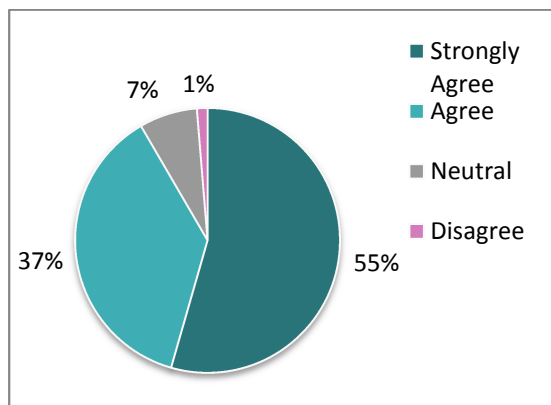


Figure 7. Student responses to the statement 'Working in aged care has positively changed my view of working with the elderly and people with cognitive decline' (n=156).

Residents' family members also believed students would learn a lot from their loved ones and that this would ultimately benefit the future care of older adults.

*'...the students would learn a lot from being here from the residents.... it's an experience which is outside their normal, probably normal family and university life and that can only be beneficial both for the resident and the student'* – Resident's Family Member

Students completing the Ageing Semantic Differential (Rosencranz & McNevin, 1969) to assess their attitudes towards older adults pre and post interprofessional placement had mostly positive changes in attitudes towards older adults, and 60% of students had an overall positive change in attitudes.

The benefit to the future workforce was also observed by staff with 86% agreeing that working in aged care is a good future carer option for students and 77% of staff agreed that they would recommend aged care as a career choice to new graduates.

Staff further supported the importance of students learning to work with older adults and those with cognitive decline.

*'You get the feedback from the students that they had no idea what aged care was or what was involved until they actually came into a nursing home, and that they were quite surprised at how much work was actually involved.'* – Staff Member





## Strengthening the Current Workforce

The knowledge and capacity of staff was increased during the interprofessional education program due to the extra training and resources provided and the staffs' interactions with students. The program provided mutual benefits and knowledge sharing between staff and students which in turn gave improvements to the care of residents at the facility during the program and beyond as the existing facility staff can now carry their new found knowledge forward.

*'It's a long time since I have trained so the students are coming with fresh ideas and experiences and knowledge that I probably didn't have and they are quite happy to share.'* – Staff Member

The program built capacity within site staff members through a number of avenues. Students provided staff with current and new information they otherwise would not have accessed. Students also challenged staff to be aware of new practices, as one staff member spoke of:

*'They also question everything that you do, so you've got to be on the ball and know the answer ... If there's something I'm going to teach them I research it first so I know what I am teaching them is true.'* – Staff Member

Staff members expressed pride in contributing to the education and training of students in a collaborative environment and were provided the opportunity to be involved in this process.

*'I believe the most positive aspect of the IPE program is watching the students' knowledge base and skill level increase.'* – Staff Member

Staff attended training sessions with students that were delivered by students or professionals on topics relevant to aged care such as 'mealtime positioning', 'positioning post stroke' and 'medication in palliative

care'. Staff providing feedback on training often 'agreed' or 'slightly agreed' they had increased their professional knowledge (79%).

***'It gives me access and knowledge that I otherwise wouldn't have.'* – Staff Member**

Some staff noted that following training sessions they changed their practice to be in accordance with their new knowledge such as 'check position of residents more' following seating and positioning training. Staff also expressed their increased awareness of topics such as medication and commented they would be more mindful of these in future practice.

***'Students bring 'fresh' ideas/knowledge - keep staff up to date with current trends' – Staff Member***

Ninety-two percent of staff surveyed in 2014 believed the program was beneficial to themselves and their colleagues (see Figure 8).

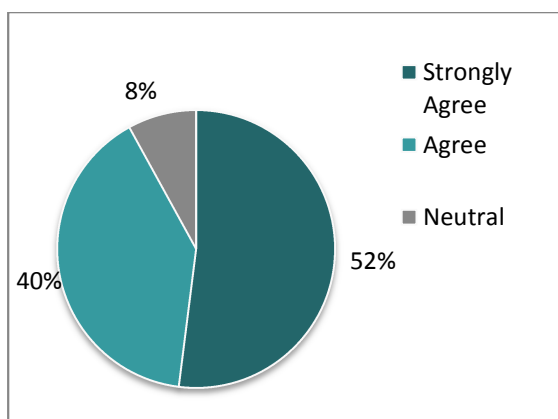


Figure 8. Facility staff members' responses to the statement 'Overall the IPE project is beneficial to facility staff' (n=25).

Over half of staff surveyed in 2015 believed their knowledge and skills had improved as a result of working with students at their facility (see Figure 9).

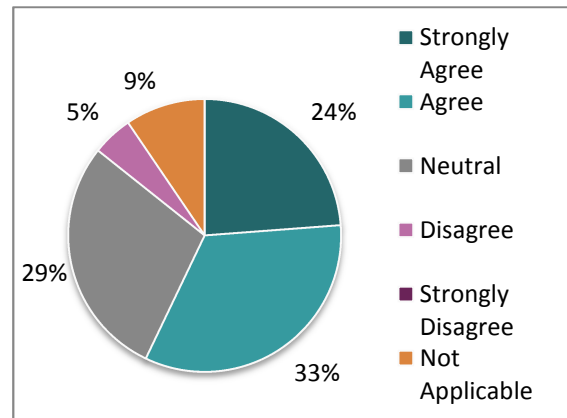


Figure 9. Facility staff members' responses to the statement 'My knowledge and skills have improved as a result of working with the students at my facility' (n=21).

Staff were appreciative of the knowledge that students undertaking interprofessional placement provided them with both formally and informally, ultimately improving the care of residents by increasing capacity of existing staff:

***'I have found it really helpful. They have been amazing with the information they've given us, as far as looking after the residents is concerned' – Staff Member***



## What's next?

The findings from this project are now forming the base to embed interprofessional education across aged care organisations. Brightwater Care Group and Helping Hand are applying knowledge from this project to create an interprofessional education toolkit for residential aged care staff. The development of this toolkit will enable aged care staff to support interprofessional education and practice and to facilitate interprofessional student placements.

## References

- Centre For the Advancement of Interprofessional Education (CAIPE). (2002). Defining IPE. Retrieved from <http://caipe.org.uk/resources/defining-ipe/>
- Coleman, E. A. (2003). Falling through the cracks: challenges and opportunities for improving transitional care for persons with continuous complex care needs. *Journal of the American Geriatrics Society*, 51(4), 549-555. doi:10.1046/j.1532-5415.2003.51185.x
- Edvardsson, D., Fetherstonhaugh, D., & Nay, R. (2011). The Tool for Understanding Residents' Needs as Individual Persons (TURNIP): construction and initial testing. *Journal of Clinical Nursing*, 20(19-20), 2890-2896.
- Halcomb, E. J., Sheperd, B. M., & Griffiths, R. (2009). Perceptions of multidisciplinary case conferencing in residential aged care facilities. *Australian Health Review*, 33(4), 566-571.
- Johnson, M. (2010). Changing the Culture of Nursing Homes: The Physician's Role. *Archives of Internal Medicine*, 170(5), 407-409.
- Kanter, S. L. (2012). The nursing home as a core site for educating residents and medical students. *Academic medicine : journal of the Association of American Medical Colleges*, 87(5), 547-548.
- Lucas, P., McCall, M., Lea, E., Eccleston, C., Crisp, E., Andrews, S., & Robinson, A. (2013a). Clinical placements in residential care facilities part 1: positive experiences. *Journal of Paramedic Practice*, 5(7), 400-406.
- Lucas, P., McCall, M., Lea, E., Eccleston, C., Crisp, E., Andrews, S., & Robinson, A. (2013b). Clinical placements in residential care facilities part 2: negative experiences. *Journal of Paramedic Practice*, 5(8), 462-468.
- McFadyen, A. K., Webster, V., Strachan, K., Figgins, E., Brown, H., & McKechnie, J. (2005). The Readiness for interprofessional learning scale: A possible more stable sub-scale model for the original version of RIPLS. *Journal of Interprofessional Care*, 19(6), 595-603. doi:10.1080/13561820500430157
- Pool, J. (2011). *The Pool Activity Level (PAL) Instrument for Occupational Profiling A Practical Resource for Carers of People with Cognitive Impairment* (4th ed. ed.). London: London : Jessica Kingsley Publishers.
- Rosencranz, H. A., & McNevin, T. E. (1969). A factor analysis of attitudes toward the aged. *The Gerontologist*, 9(1), 55.
- Wicker, P. (2011). Interprofessional learning. *Journal of perioperative practice*, 21(3), 83.



For more information contact:

Brightwater Care Group

P (08) 9202 2800

E [welcome@brightwatergroup.com](mailto:welcome@brightwatergroup.com)

W <https://www.brightwatergroup.com>