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FACULTY OF MEDICINE AND HEALTH



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IPE Evaluation Report

MDT Placement Workshops

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IPE Evaluation Report: MDT Workshops

Summary

The workplace MDT workshops are open to final year health and social care students on placement in Yorkshire and Humber and aim to develop understandings about professional roles and team working. Since 2005, 335 workshops have been delivered at local authority and NHS sites involving 2506 students from 13 different professions (involving the Universities of Bradford, Huddersfield, Leeds and Leeds Beckett University).

Student feedback continues to be positive with workshop format and content still regarded highly (see full report and appendices for further details). Student feedback has been consistently positive across all 10 years of the programme, 99% would recommend attendance to their peers, 98% felt the teaching and learning methods were entirely or mostly effective, and 95% felt the workshop was entirely or mostly relevant to their work.

The 2014/15 academic year raised a couple of issues in relation to administration and management (due to personnel changes) which have been resolved for the 2015/16 academic year. One of the largest challenges continues to be recruiting sufficient numbers of students to the workshops (numbers from medicine and physiotherapy dropped significantly during the 2014/15 academic year). The team will be working with programme leads at local HEIs and placement mentors at NHS and local authority sites to strengthen networks with a view to increasing registration and attendance rates in the future.

We ask that programme leads and placement mentors continue to support interprofessional education in the workplace and ask that you encourage final year health and social care students to attend workshops where placement commitments allow. If you wish to contribute to the development or delivery of the MDT workshop programme please get in touch. The team is developing a new workshop on dementia and we are particularly keen to hear from colleagues with expertise in this area. The full evaluation report detailing evaluation data from the past 10 years is detailed in the following pages. Data for specific programmes and HEIs is available on request.

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Background to IPE

Interprofessional education (IPE) is a requirement of medical and healthcare professional curricula (National Midwifery Council, 2008; General Medical Council, 2009; Health Professionals Council, 2009) and several factors have contributed to its importance (see appendix 1). Consequently IPE is now a component against which all health and social programmes are judged when audited by their respective regulators.

In 2001 the University of Leeds received a series of small grants to develop and research IPE. The focus of these projects was to consider if there was a demonstrable value to learning together, what types of IPE, under what circumstances, produce what types of outcomes and finally, was learning dependent on students working in interprofessional groups. These projects indicated that IPE did offer 'demonstrable value' to learning together and was well received by students because it was clinically relevant (Kilminster et al. 2003, 2004). Since this pilot project IPE initiatives have grown across the Faculty with students undertaking IPE at numerous sites of learning (both campus and placement sites), at different points in their training and with students from outside their own HEI.

This evaluation report focuses on IPE in the workplace, and specifically a programme of multi-disciplinary training (MDT) workshops targeted at health and social care students undertaking their final year of training.

IPE in the workplace: MDT workshops

The workplace MDT workshops are open to final year health and social care students on placement in Yorkshire and Humber and aim to develop understandings about professional roles and team working. Since 2005, 335 workshops have been delivered at local authority and NHS sites involving 2506 students from 13 different professions. Students from the following professions have attended: audiology, clinical psychology, nutrition and dietetics, health visiting, medicine, midwifery, nursing (adult, child, learning disability and mental health branches), occupational therapy, pharmacy, physiotherapy, radiography, social work and speech and language therapy.

Workshop Content

The workshops are intended to develop participants' understanding about each other's professional roles, to enhance team working and to develop communication skills. A case scenario is presented to the group and one or more participants work with a simulated patient (SP) to explore the situation. Participants are directed to behave as they would in that clinical situation and are not expected to act or undertake tasks beyond their capabilities and level of training. The facilitator or participant periodically stops the process and the participants discuss what has happened beginning with the perceptions of the participant who had worked with the SP. Workshops focus on specific case scenarios – topics include asking difficult questions, autism and child health, breaking bad news (palliative care), diabetes, post natal depression and stroke. Each workshop adopts an experiential learning approach and is restricted to 12 final year students.

The development of workshop content has been informed by a series of action research projects which showed that the success of interprofessional education is determined by the clinical realism and relevance of the content (Kilminster et al. 2003, 2004). This realism has been established and maintained by including the perspectives of patients and carers, as well as different health care professionals, at all stages of development and delivery of the project (Kilminster and Fielden 2009).

Student Feedback

Student feedback has been consistently positive, 99% would recommend attendance to their peers, 98% felt the teaching and learning methods were entirely or mostly effective, and 95% felt the workshop was entirely or mostly relevant to their work – these perceptions are shared equally across the professions and figures have remained stable each year since the project began in 2005 (see appendix 2 for further details).

“Really valuable learning experience – thank you.”

Health Visitor student

“Fantastic experience both volunteering and taking part in discussions. Extremely valuable.”

Nursing student

“An excellent experience and felt I have learnt a lot, certainly recommend for others.”

Physiotherapy student

Approximately 10% of students have attended more than 1 workshop. Where students have attended more than 1 workshop they continue to rate the workshops highly, with 96% rating the second workshop as entirely or mostly relevant. This suggests that students continue to benefit from repeated opportunities to work and learn with students from other professions.

Student feedback has focused on working with SPs, working with other professionals and perceived impact on practice, further detail is provided below.

Working with Simulated Patients

Working with simulated patients is a challenging and powerful experience. Students valued the opportunity to receive feedback from a range of perspectives and to try out new strategies. Students with no prior experience of working with simulated patients (e.g. allied health professionals) were more likely to highlight this opportunity positively than students who regularly worked with simulated patients (e.g. medical students):

“The SPs were excellent at making us think about how we would respond appropriately.”

Dietetics student

“The simulated patients were excellent and made for a very convincing scenario. This allowed us to place ourselves in the situation easily.”

Nursing student

“The inclusion of simulated patients – I have not experienced this before and although was nervous it was really enjoyable experience.”

Occupational Therapy student

“Simulated patients gave very practical examples of how good communication can occur & how to ask difficult questions.”

Physiotherapy student

“Very good workshop. I liked being able to role-play a session with a simulated client and gain useful feedback.”

Speech & Language Therapy student

Working with other Professionals

The opportunity to work with students from different professional groups was a very positive experience for students. This was surprising given all students had attended IPE sessions within their own HEI and had significant placement experience of working with others by this stage of their training. Students valued the opportunity to work with other professions and learn from different perspectives and experiences about each others' professional roles and responsibilities:

“Learning more about the role / impacts other professionals can have on a patient's care. Increased awareness means I would know how to refer to them in the future, if needed.”

Pharmacy student

“Getting the opportunity to see how other professionals work.”

Medical student

“It was an eye opener, learning things that professionals take for granted.”

Midwifery student

Impact on Practice

A number of students commented on the realism of the workshop and expected the workshop to be relevant to future clinical practice:

“Very useful workshop! Will definitely improve my practice.”

Midwifery student

“The whole workshop was very good. Scenario was realistic and appropriate to our practice.”

Nursing student

“This was a fabulous workshop and will be invaluable for my practice.”

Social Work student

When analysing data across all 10 years of the programme those professions who have attended each year (medicine, midwifery, nursing, physiotherapy and social work) have consistently rated the workshop as over 90% mostly or entirely relevant to their work for each year the workshops have run.

Areas for Further Development

Attendance

The involvement of 4 institutions in the project and such a large group of health and social care programmes has presented a number of challenges as well as opportunities. It has ensured that a good range of health and social care students are available to attend workshops at all times of the year across the region. However, the demands of each training programme and different placement commitments has meant that it has been easier to engage with some groups than others. For example, medical students have established placement timetables, committing students to teaching sessions and ward rounds whilst on placements. Speech and language therapy students are on placement for half a day a week so attendance at a work-based learning workshop can prevent them attending their clinical placement for that week. A large number of students enrolled on community practitioner courses such as health visiting and community nursing are part-time and require a minimum of 6 weeks' notice to organise placement and personal commitments in order to attend a workshop. There is variation in the involvement both of different professions and different institutions and sometimes the level of involvement has changed meaning that workshops often run under capacity with an average of 7 students attending each workshop (workshops have a capacity for 12 students, non-attendance remains an issue). There are many reasons for this but, as would be expected, they include both inter and intra departmental, professional and institutional issues, constraints and so on. Consequently attendance across the professions fluctuates and we continue to work with programme leads and placement mentors to ensure workshops remain relevant and that students have the opportunity to attend where placement commitments allow.

Marketing

In response to rates of student registration, non-attendance and feedback the marketing of workshops is currently under review. In previous years details have been circulated to programme leads at HEI sites and distributed locally to virtual learning environments and/or emailed directly to students. In the future the team intend to engage directly with placement mentor networks to ensure workshops remain relevant and support clinical activities related to IPE. The team are also reviewing the content of the workshop flyer and tailoring advertising material to specific professions (e.g. using profession specific language). It is hoped that these changes will improve understanding about workshop content, registration and attendance rates amongst students and placement mentors.

Workshop Content

A small number of students offered suggestions for how the workshops could be improved on, or developed in the future. Comments included making the workshops aims and objectives explicit prior to attendance and ensuring a wider mix of professions at each workshop – as detailed above these comments will inform how we communicate and market workshops in the future to students, programme leads and placement mentors. In relation to the workshop format students were keen to extend the duration of each workshop beyond the 3 hour session to allow more students the opportunity to take part in the simulated consultation, and/or to include some discussion on the clinical aspects of the case scenario.

Programme leads have suggested a number of alternative workshop topics for development in the future. These include dementia, safe prescribing and dealing with professional dilemmas. This feedback will be considered by the team when developing workshops ahead of the 2015/16 academic year and deciding what is possible within resource constraints.

Acknowledgements

A number of organisations provide support for the development and delivery of this IPE programme. These include Health Education England Yorkshire & Humber, the Universities of Bradford, Huddersfield, Leeds and Leeds Beckett University, the Leeds Institute of Medical Education, the Patient and Carer Community at the Leeds School of Medicine and practice based staff at local authority, NHS and voluntary sector partners.

Further Information

For more detailed evaluation data about the MDT workshops or further information about IPE more generally please contact Shelley Fielden at mdtworkshops@leeds.ac.uk

Appendix 1

Background & Context

Several factors have contributed to the importance of interprofessional education (IPE) in healthcare professional curricula. High profile public inquiries into the abuse and death of children exposed failings in team-work and communication skills that had tragic and fatal consequences (Department of Health 2001, Laming 2003). National and international policy documents (WHO 1998, Department of Health 2000a, 2000b) contain a shared assumption that improved team working can reduce duplication, make better use of resources and better meet the complex needs of patients.

However, IPE is time consuming both to design and sustain and presents many logistical, practical and socio-cultural problems that need to be addressed in order to take forward initiatives. These include timetabling problems; different working practices between the professions; institutional constraints; variations in the learners' ages, educational level and experiences; differences in accreditation and validation requirements between healthcare professions; disparities in student numbers across professions, the power of the medical profession and effects of power imbalances and historical rivalries between professions, issues around professional identities and boundaries, and, of course, funding problems (Kilminster et al., 2003; 2004; Jinks et al., 2009).

Despite these problems, students are required to understand the work of other professionals and learn how to work in teams with other professionals as part of their undergraduate training (National Midwifery Council, 2008; General Medical Council, 2009; Health Professionals Council, 2009).

Whilst it is required that students undertake IPE, there are no stipulations about the form of the IPE, which professions should be involved, for how long, whether and how this should be assessed or what the content should be. Consequently, there is pressure to provide IPE opportunities, to show they are effective and to provide solutions to the difficulties outlined above.

Appendix 2: All Professions

Attendance

The data below illustrates evaluation data based on student attendance. Data is provided by academic year and profession to illustrate how attendance rates have changed since the programme began in 2005.

Academic Year	Average attendance at each workshop (max. capacity of 12 students)
2005-06	8.5 students
2006-07	7.4 students
2007-08	7.7 students
2008-09	7.3 students
2009-10	7.5 students
2010-11	7.3 students
2011-12	8.2 students
2012-13	6.9 students
2013-14	9.0 students
2014-15	7.9 students

Profession	No. students attending / academic year									
	05-06	06-07	07-08	08-09	09-10	10-11	11-12	12-13	13-14	14-15
Audiology	0	0	0	3	2	0	0	0	0	0
Clinical Psychology	0	2	0	0	0	2	0	0	0	0
Dietetics	10	24	16	16	13	9	16	2	0	15
Health Visiting	0	7	9	4	16	5	5	25	0	8
Medicine	51	54	23	28	13	26	10	22	14	3
Midwifery	5	21	25	19	46	47	22	21	36	24
Nursing	64	99	113	122	101	68	69	74	56	63
Occupational Therapy	0	3	24	16	16	11	14	7	7	5
Pharmacy	42	21	15	17	6	20	23	5	17	19
Physiotherapy	45	38	54	49	49	36	18	30	23	1
Radiography	0	2	5	0	2	1	3	1	1	1
Social Work	8	18	25	36	27	22	16	19	33	23
SaLT	2	14	1	7	1	1	5	2	0	3

Relevance

The data below illustrates evaluation data based on the extent to which students found the workshop useful / relevant to their work. Data is provided by profession, figures for overall feedback are included for comparative purposes.

Profession	How useful / relevant was the workshop to your work?			
	Entirely %	Mostly %	Partially %	Not at all %
All data	69.7	24.8	5.3	0.2
Audiology	66.7	33.3	-	-
Clinical Psychology	75	25	-	-
Dietetics	58.9	32.1	8.9	-
Health Visiting	78.1	18.8	3.1	-
Medicine	46.6	43.6	9.3	0.4
Midwifery	82.8	13.0	4.2	-
Nursing	75.9	20.5	3.5	0.1
Occupational Therapy	71.6	21.6	5.7	1.1
Pharmacy	56.4	30.2	13.4	-
Physiotherapy	71.6	24.9	3.5	-
Radiography	71.4	28.6	-	-
Social Work	68.5	29.6	1.9	-
Speech & Language Therapy	77.1	20.0	2.9	-

Evaluation of Method

The data below illustrates evaluation data based on the extent to which students felt the teaching and learning methods (experiential learning approach, working with simulated patients) were effective in supporting their learning. Data is provided by profession, figures for overall feedback are included for comparative purposes.

Profession	How useful / relevant was the workshop to your work?			
	Entirely %	Mostly %	Partially %	Not at all %
All data	73.1	25.2	1.7	-
Audiology	60.0	40.0	-	-
Clinical Psychology	50.0	50.0	-	-
Dietetics	65.3	32.2	2.5	-
Health Visiting	65.8	32.9	1.3	-
Medicine	52.3	42.8	4.5	0.4
Midwifery	85.3	12.8	1.9	-
Nursing	79.1	19.8	1.1	-
Occupational Therapy	64.1	34.0	1.9	-
Pharmacy	67.6	30.3	2.2	-
Physiotherapy	76.0	23.7	0.3	-
Radiography	75.0	25.0	-	-
Social Work	73.6	24.7	1.8	-
Speech & Language Therapy	75.0	25.0	-	-

Overall perceptions

The data below illustrates evaluation data based on how students rated the workshop overall. Data is provided by profession and by workshop title, figures for overall feedback are included for comparative purposes.

Profession	What was your overall rating of the workshop?				
	Excellent	Very Good	Good	Fair	Poor
All data	64.3	29.1	5.8	0.8	0.1
Audiology	60.0	40.0	-	-	-
Clinical Psychology	50.0	-	50.0	-	-
Dietetics	50.0	40.8	7.5	1.7	-
Health Visiting	59.5	38.0	2.5	-	-
Medicine	39.9	44.9	11.1	3.7	0.4
Midwifery	77.8	19.5	2.6	-	-
Nursing	70.3	25.6	3.7	-	-
Occupational Therapy	63.1	26.2	9.7	-	-
Pharmacy	62.7	28.6	8.6	-	-
Physiotherapy	67.0	27.2	5.8	-	-
Radiography	62.5	37.5	-	-	-
Social Work	64.2	28.8	5.3	1.8	-
Speech & Language Therapy	50.0	41.7	8.3	-	-

Workshop	What was your overall rating of the workshop?				
	Excellent	Very Good	Good	Fair	Poor
All data	64.3	29.1	5.8	0.8	0.1
Asking Difficult Questions	69.7	24.8	5.1	0.5	-
Autism & Child Health	73.6	23.4	3.0	-	-
Breaking Bad News	61.3	31.6	6.5	0.7	-
Living with Diabetes	63.7	32.0	3.7	0.7	-
Living with Stroke	56.4	32.5	9.4	1.3	-
Post Natal Depression	65.6	26.9	5.8	1.5	0.2
Nursing	70.3	25.6	3.7	-	-
Occupational Therapy	63.1	26.2	9.7	-	-
Pharmacy	62.7	28.6	8.6	-	-
Physiotherapy	67.0	27.2	5.8	-	-
Radiography	62.5	37.5	-	-	-
Social Work	64.2	28.8	5.3	1.8	-
Speech & Language Therapy	50.0	41.7	8.3	-	-

Appendix 3: Medicine Evaluation Data

The evaluation data presented focuses on medical student (University of Leeds) feedback. Where available and relevant, comparable data for all professions is also included as a benchmark. All data is from valid responses only, no missing data has been included.

Overall perceptions

The data below illustrates evaluation data based on how medical students rated the workshop overall.

Profession	What was your overall rating of the workshop?				
	Excellent	Very Good	Good	Fair	Poor
All data	64.3	29.1	5.8	0.8	0.1
Medicine	39.9	44.9	11.1	3.7	0.4

Workshop	What was your overall rating of the workshop?				
	Excellent	Very Good	Good	Fair	Poor
All data	64.3	29.1	5.8	0.8	0.1
Asking Difficult Questions	34.2	60.5	5.3	-	-
Autism & Child Health	50.0	25.0	25.0	-	-
Breaking Bad News	48.7	38.1	10.5	2.6	-
Living with Diabetes	40.0	49.1	5.5	5.5	-
Living with Stroke	27.3	42.4	30.3	-	-
Post Natal Depression	43.8	46.9	9.3	-	-
Occupational Therapy	63.1	26.2	9.7	-	-
Pharmacy	62.7	28.6	8.6	-	-
Physiotherapy	67.0	27.2	5.8	-	-
Radiography	62.5	37.5	-	-	-
Social Work	64.2	28.8	5.3	1.8	-
Speech & Language Therapy	50.0	41.7	8.3	-	-

Workshop	Would you recommend this workshop to others? (%)	
	Yes	no
All data	99.1	0.9
Medicine	96.7	3.3

Attendance

The data below illustrates evaluation data based on medical student attendance by academic year and by workshop title. The number of workshops held varies year on year.

Academic Year	No. medical students who attended
2005-06 (27 Workshops)	51
2006-07 (41 Workshops)	54
2007-08 (41 Workshops)	23
2008-09 (45 Workshops)	28
2009-10 (40 Workshops)	13
2010-11 (34 Workshops)	26
2011-12 (25 Workshops)	10
2012-13 (31 Workshops)	22
2013-14 (21 Workshops)	14
2014-15 (21 Workshops)	3

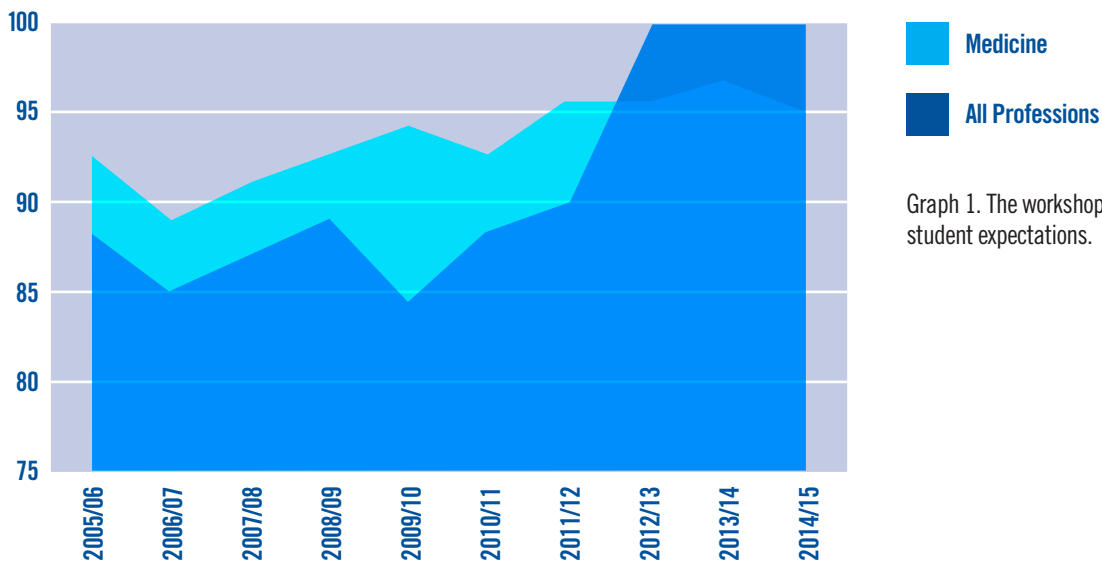
Workshop	No. medical students who attended
Asking Difficult Questions	38
Autism & Child Health	4
Breaking Bad News	76
Living with Diabetes	55
Living with Stroke	33
Post Natal Depression	32

Expectations

The data below illustrates evaluation data based on the extent to which medical students felt the workshop met their expectations.

Profession	How well did the content of today's workshop meet your expectations? (%)				
	Entirely	Mostly	Partially	Not at all	Poor
All data	69.7	24.8	5.3	0.2	0.1
Medicine	46.6	43.6	9.3	0.4	0.4

The graph below illustrates evaluation data based on the extent to which medical students felt the workshop entirely or mostly met their expectations (%) by academic year. The graph also includes figures for all professions who attended for comparative purposes.



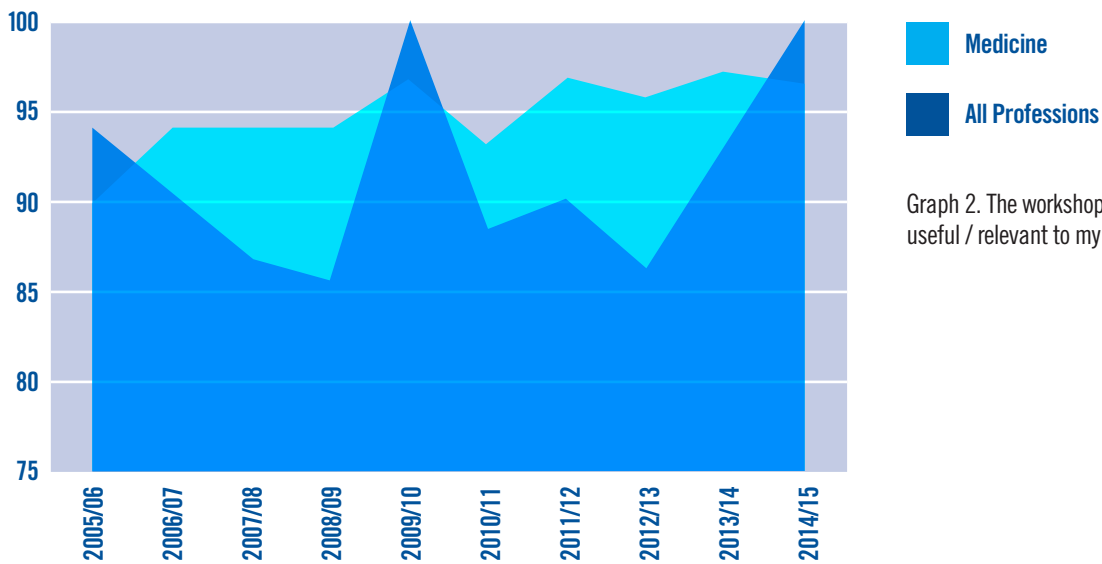
Graph 1. The workshop entirely or mostly met student expectations.

Relevance

The data below illustrates evaluation data based on the extent to which medical students found the workshop useful / relevant to their work.

Profession	How useful / relevant was the workshop to your work? (%)				
	Entirely	Mostly	Partially	Not at all	Poor
All data	69.7	24.8	5.3	0.2	0.1
Medicine	46.6	43.6	9.3	0.4	0.4

The graph below illustrates evaluation data based on the extent to which medical students felt the workshop was entirely or mostly relevant to their work (%) by academic year. The graph also includes figures for all professions who attended for comparative purposes.



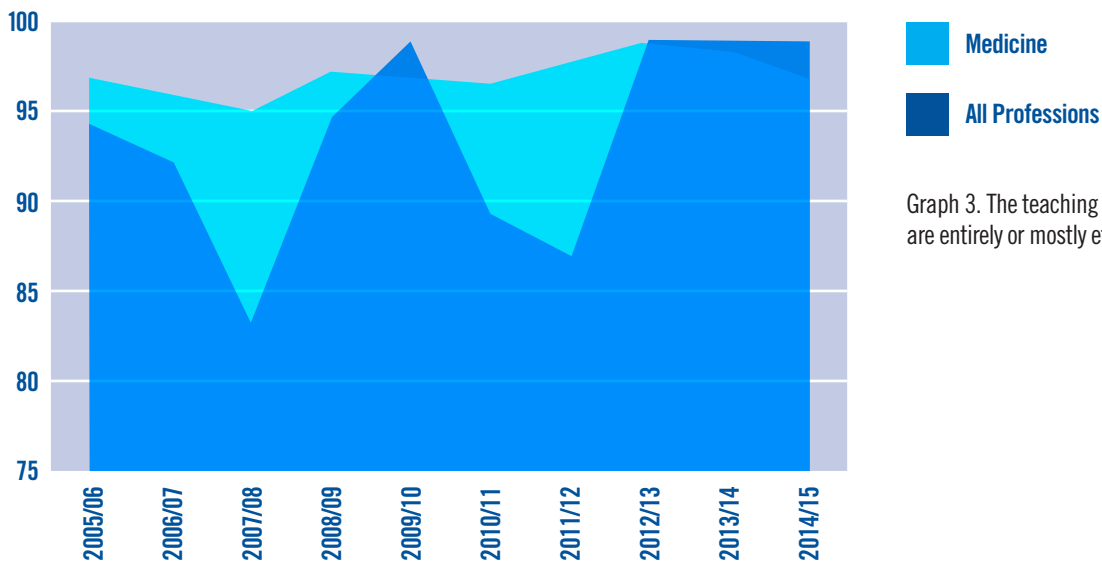
Graph 2. The workshop is entirely or mostly useful / relevant to my work.

Evaluation of Method

The data below illustrates evaluation data based on the extent to which medical students felt the teaching and learning methods were effective in supporting their learning.

Profession	How effective were the teaching and learning methods? (%)				
	Entirely	Mostly	Partially	Not at all	Poor
All data	73.1	25.2	1.7	-	0.1
Medicine	52.3	42.8	4.5	0.4	0.4

The graph below illustrates evaluation data based on the extent to which medical students felt the teaching and learning methods are entirely or mostly effective (%) by academic year. The graph also includes figures for all professions who attended for comparative purposes.



Graph 3. The teaching and learning methods are entirely or mostly effective.

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