This report includes data from the student pre-activity and post-activity survey. Unlike 2019, the 2020 Patient Safety activity was virtual and did not involve faculty facilitators in the small group discussions. The activity was offered at 1pm and 3pm on September 18, 2020. There were 202 students in the 1:00 pm session and 191 students in the 3:00 pm session. There were 15 students who did not identify their session and could not be tracked.

# 2020 Patient Safety Pre and Post Student Evaluation



THE UNIVERSITY OF ARIZONA HEALTH SCIENCES Center for Transformative Interprofessional Healthcare

> Data Analysis and Report Lynne Tomasa, PhD, MSW, FAAIDD

# 2020 Patient Safety Questionnaire (# of Items)

#### **PRE: Final N = 424**

- Definition of terms/behaviors (5)
- Impact of interprofessional activities (14)
- Demographics (5)
- Education (5)
- Interprofessional participation (2)

#### POST: Final N = 403

- Definition of terms/behaviors (5)
- Usefulness of tools/activity (16)
- Retro pre-post (4)
- Scope of practice (6)
- Effectiveness/ engagement/ satisfaction (3)
- Use of Technology (6)
- IPAS (20)
- Demographics (5)
- Education (3)
- Interprofessional participation (2)
- Comments: Opinion, Liked, Changes to improve (3)

#### Educational Training: University, Degree Program, Year in Training

#### In which university are you enrolled?

	Pre-Survey N=424	Post-Survey N=400
University of Arizona	423	398
Northern Arizona University	0	0
Arizona State University	1	2

#### What is your degree program? (only in pre-survey)

	Pre-Survey N = 399
MD	107
MD/PhD	4
BSN	52
MEPN (Phoenix)	52
MEPN (Tuson)	60
PharmD	114
PharmD/MBA	2
PharmD/PhD	3
BS	4
Graduate degree	1

#### What is your degree program?

	Pre-Survey N=424	Post-Survey N=401
BSN	54	52
MEPN	121	118
MD	114	102
PharmD	127	121
MPH	0	0
Other:	8	8
Other (text)	Biology and PH, BSPH (3),	Biology and undergrad in PH,
	MD/PhD (4)	BSPH (3), MD/PhD (4)

#### What year are you in your current degree program?

	Pre-Survey N=422	Post-Survey N=400		
Year 1	360	339		
Year 2	26	26		
Year 3	1	6		
Year 4	33	28		
Year 5	1	1		
Year 6	1	0		

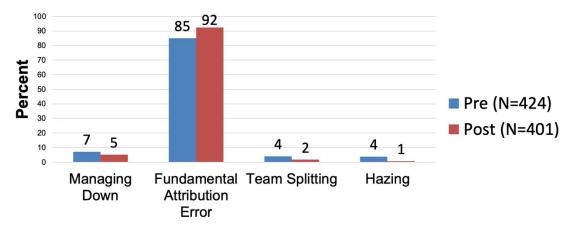
#### What is your college?

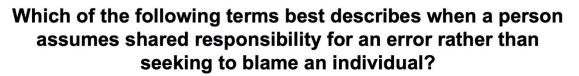
	Pre-Survey Only N=421
UA College of Medicine – Phoenix	4
UA College of Medicine – Tucson	119
UA College of Nursing	168
UA College of Pharmacy – Phoenix	60
UA College of Pharmacy - Tucson	65
UA Zuckerman College of Public Health	4
Other UA College	1

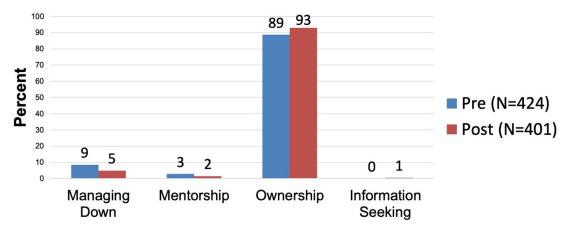
#### Definition of Team Behaviors (5 questions in pre and post survey)

Responses were similar in pre and post for fundamental attribution error, ownership, and managing up. Students had the most difficulty defining a) deliberate attack, b) team splitting, c) managing down, and d) leadership shift.

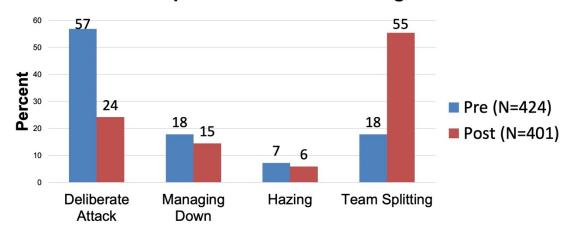
### Which of the following terms best describes when a person assigns the cause of a mistake made by another person to their character rather than to situational variables?



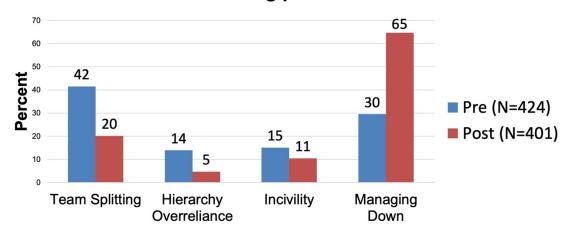




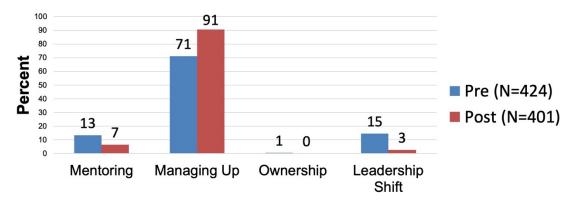
Which of the following terms best describes when a person communicates negative things about others in order to improve their own standing?



Which of the following terms best describes when a person is critical of other team members in front of patients, thereby undermining patient trust?



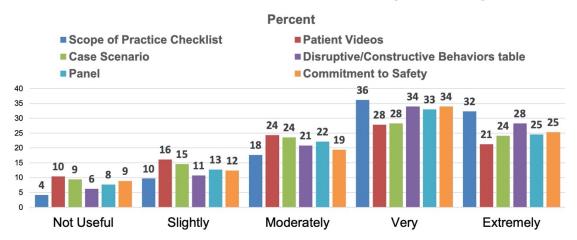
Which of the following terms best describes when a person is publicly supporting or praising their team members in front of patients in order to inspire confidence in their healthcare team and site?



# Usefulness of Activities to Learn about Professions, Scope of Practice, Team Behaviors (16 items)

Students found the scope of practice checklist the most useful. The disruptive/constructive behaviors, panel discussion, and commitment to safety were also useful.

# How useful were the following in learning ABOUT each other's professions? (N = 403)

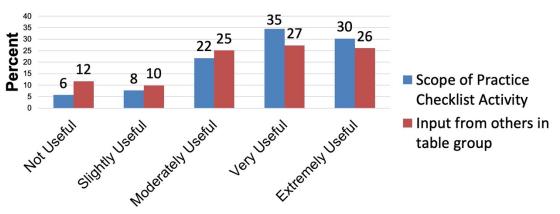


#### How useful were the following in learning ABOUT each other's professions? (Table format)

N = 403	Not Useful	Slightly	Moderately	Very Useful	Extremely			
		Useful	Useful		Useful			
Scope of Practice Checklist								
	4% (17)	10% (39)	18% (71)	36% (146)	32% (130)			
Patient Videos								
	10% (42)	16% (65)	24% (98)	28% (112)	21% (86)			
Case Scenario (R	ole playing illust	trating team bel	naviors)	· · · · · · · · · · · · · · · · · · ·				
	9% (38)	15% (59)	24% (95)	28% (114)	24% (97)			
Disruptive/Cons	tructive Behavio	rs table	·					
	6% (25)	11% (43)	21% (84)	34% (137)	28% (114)			
Panel Discussion	1		•	· · · · · · · · · · · · · · · · · · ·				
	8% (31)	13% (51)	22% (89)	33% (133)	25% (99)			
Commitment to	Commitment to Safety							
	9% (36)	12% (50)	19% (78)	34% (137)	25% (102)			

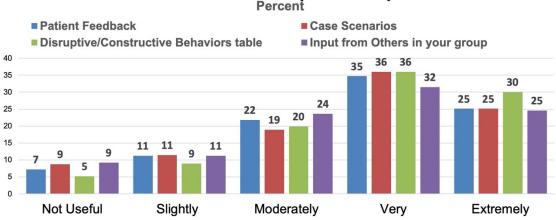
Students found the scope of practice checklist activity more useful than the input from others in their group (graph below).

# How useful were the following in DEVELOPING your understanding ABOUT the 'scope of practice' for various healthcare professions? N = 403



Students found the disruptive/constructive behaviors table the most useful. The case scenarios, patient feedback, and input from others were also useful teaching tools.

# How useful were the following in teaching you to recognize disruptive and constructive team behaviors? (N = 403)

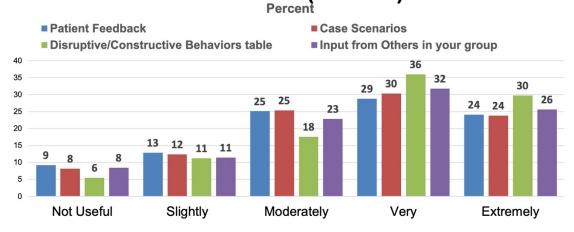


How useful were the following in teaching you to recognize disruptive and constructive team behaviors? (Table format)

N = 403	Not Useful	Slightly Useful	Moderately Useful	Very Useful	Extremely Useful	
Patient Feedbac	k					
	7% (29)	11% (45)	22% (88)	35% (140)	25% (101)	
Case Scenarios (	role-play illustra	ting team behav	viors)			
	9% (35)	11% (46)	19% (76)	36% (145)	25% (101)	
Disruptive/Cons	tructive Behavic	ors table				
	5% (21)	9% (36)	20% (80)	36% (145)	30% (121)	
Input from others in your group						
	9% (37)	11% (45)	24% (95)	32% (127)	25% (99)	

*Like the previous graph and table, the disruptive/constructive behaviors table was the most useful. This was following closely by input from others, case scenarios, and patient feedback.* 

# How useful were the following in teaching you to identify constructive alternatives to disruptive behaviors? (N = 403)



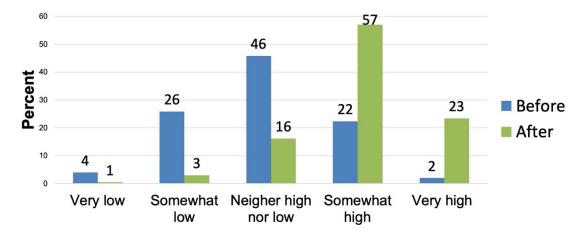
N = 403	Not Useful	Slightly Useful	Moderately Useful	Very Useful	Extremely Useful		
Patient Feedbac	k						
	9% (37)	13% (52)	25% (101)	29% (116)	24% (97)		
Case scenarios (	role play – illust	rating team beha	aviors)				
	8% (33)	12% (50)	25% (102)	30% (122)	24% (96)		
Disruptive/Cons	tructive Behavic	ors table					
	6% (22)	11% (45)	18% (71)	36% (145)	30% (120)		
Input from others in your table group							
	8% (34)	11% (46)	23% (92)	32% (128)	26% (103)		

How useful were the following in teaching you to identify constructive alternatives, to disruptive behaviors? (Table format)

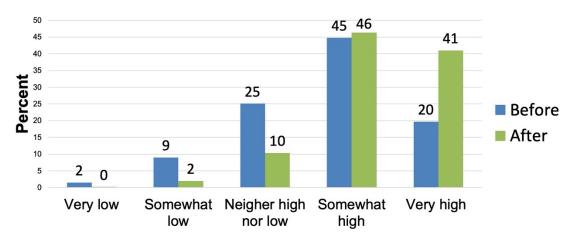
#### **Retrospective Pre/Post: Scope of Practice, Stereotypes, Disruptive Behaviors**

- 1. My knowledge of professional scope of practice and roles of health care professionals (student knowledge increased significantly pre and post)
- 2. My awareness of the existence of stereotypes among health care professional groups (students started with a high level of awareness of existing stereotypes and this increased after the activity)
- 3. My understanding of disruptive behaviors and the impact on teamwork (*students started with a high level of understanding and this increased after the activity*)
- 4. My ability to identify the broad range of disruptive behaviors from subtle/passive to overt/aggressive (students significantly increased their ability to identify the broad range of disruptive behaviors)

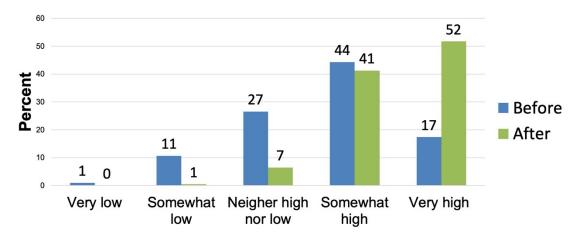
# My knowledge of professional scope of practice and roles of health care professionals (N=402)



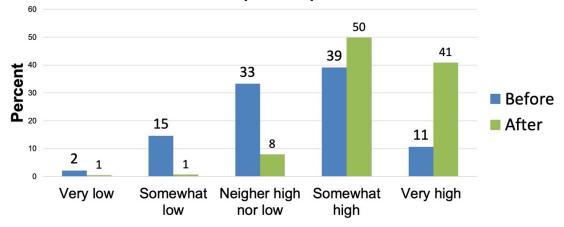
My awareness of the existence of stereotypes among health care professional groups (N=402)







My ability to identify the broad range of disruptive behaviors from subtle/passive to overt/aggressive (N=402)



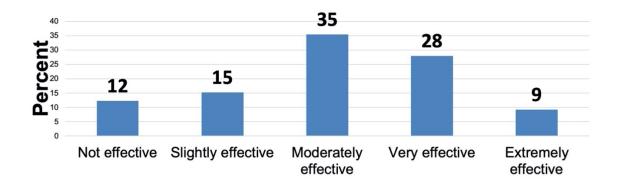
#### **Scope of Practice**

For each item, indicate whether you think the activity falls within the scope of practice of a newly licensed pharmacist (PharmD), nurse (RN), and/or physician (MD or DO). You may check none or more than one box for an item.

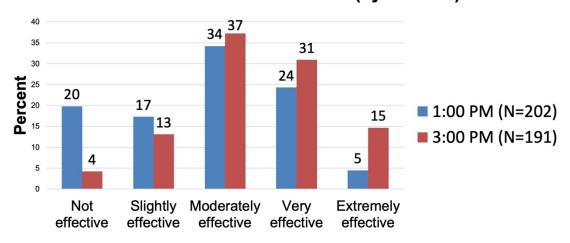
	Pharmacist	Nurse (RN)	Physician (MD/DO)				
	(PharmD)						
Prescribe medications	for a patient with metab	olic syndrome at an urb	an community clinic				
	333	54	395				
Oversee the purchasing and institution wide supply of medications at a community hospital							
	395	70	118				
Carry out physical exar	n maneuvers at an urbar	n community health clin	ic				
	351	389	399				
Act as the team leader							
	357	362	396				
Act as a bedside managed	ger to coordinate resour	ces and timelines within	daily care of the				
patient at a large urbar	n hospital						
	76	392	126				
Assign a medical diagn	osis in a university hospi	tal					
	49	33	397				

Overall, the student responses from the 3pm session were more positive.

# How effective was student-led-facilitation in breakout activities? N = 401

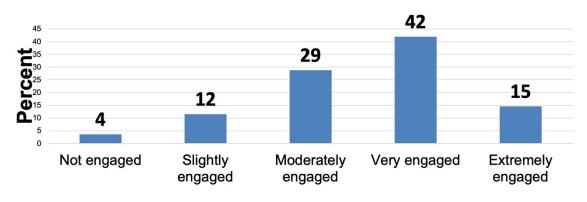


How effective was student-led facilitation in breakout activities? (by session)

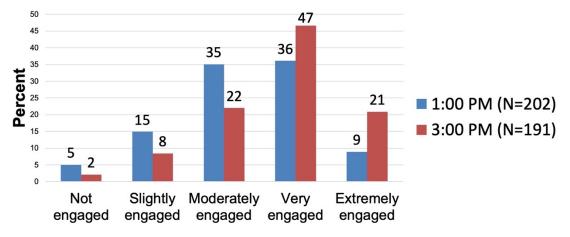


Note: Not all students identified their time

# To what degree were you engaged in the online activity and/or discussion? N = 401

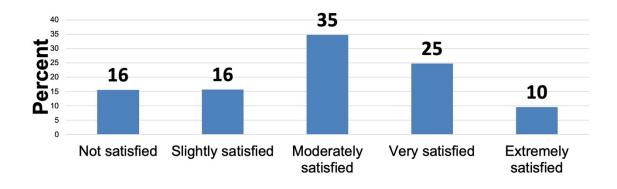


To what degree were you engaged in the online activity and/or discussion? (by session)

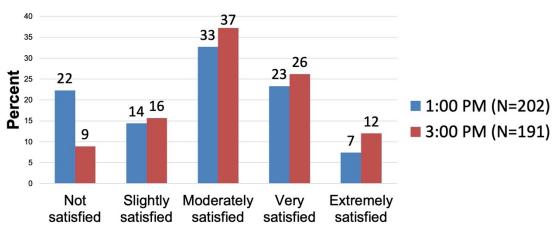


Note: Not all students identified their time

Overall, how satisfied were you with this IPE? N = 401



Overall, how satisfied were you with this IPE? (by session)

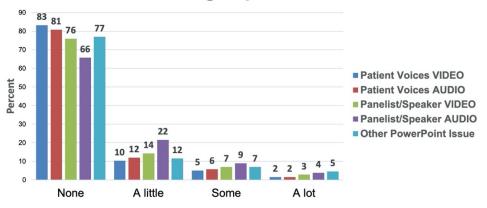


Note: Not all students identified their time

#### **Device and Technical Difficulties**

Technical difficulties were minimal for most students.

What type of device did you use during the event?Mac = 262PC = 128Phone or other device = 11Missing = 7

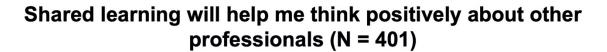


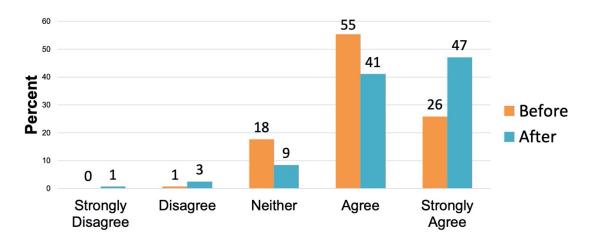
# Did any technical difficulty interfere with your learning experience?

As a group, more than 65% of students did not experience any technical difficulties. The following table shows that students who used a Mac or PC experienced little to no technical difficulties. The small number of students who used a phone experienced some technical difficulty especially when it came to the panelist/speaker audio issue.

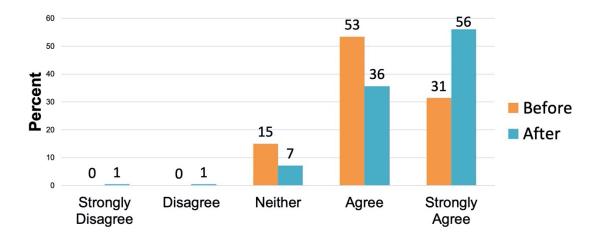
Percentages (rounded)	None	A Little	Some	A Lot
Mac (N=261)				
Patient Voices Video	85	9	5	2
Patient Voices Audio	83	9	6	2
Panelist/Speaker Video	76	13	8	3
Panelist/Speaker Audio	66	21	10	3
Other PowerPoint Issue	76	12	7	5
PC (N=128)				
Patient Voices Video	82	13	4	2
Patient Voices Audio	79	16	3	2
Panelist/Speaker Video	78	16	3	3
Panelist/Speaker Audio	66	23	8	3
Other PowerPoint Issue	80	11	6	3
Phone or Other Device (N=11)				
Patient Voices Video	64	18	18	0
Patient Voices Audio	46	27	27	0
Panelist/Speaker Video	64	18	18	0
Panelist/Speaker Audio	46	27	9	18
Other PowerPoint Issue	73	18	9	0

#### The following table presents results by DEVICE used

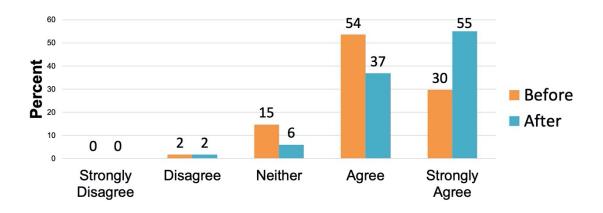




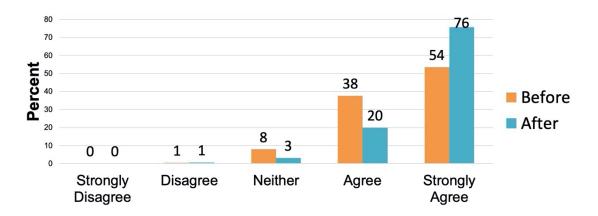
## Learning with other students will help me become a more effective member of a health care team (N = 401)



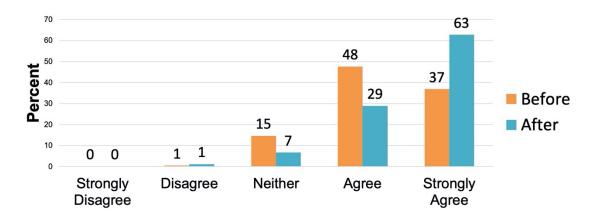
Shared learning experiences with other health care students will increase my ability to understand clinical problems (N = 401)



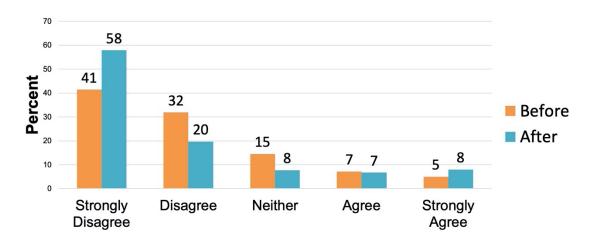
Patients would ultimately benefit if health science students worked together to solve patient problems (N = 401)

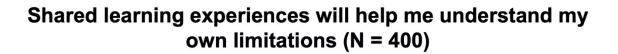


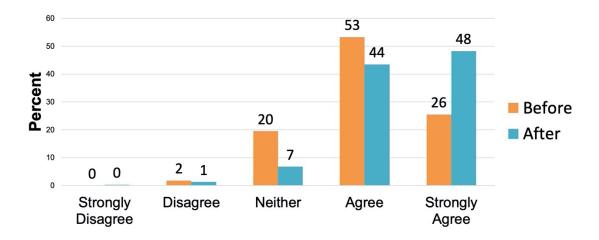
Shared learning experiences with other health care trainees will help me communicate better with patients and other professionals (N = 401)



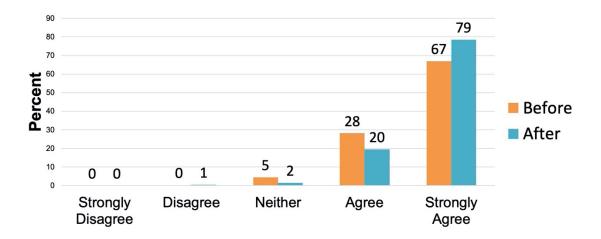
It is not necessary for health care trainees to learn together (N = 401)

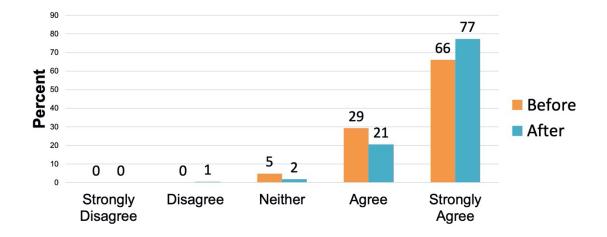






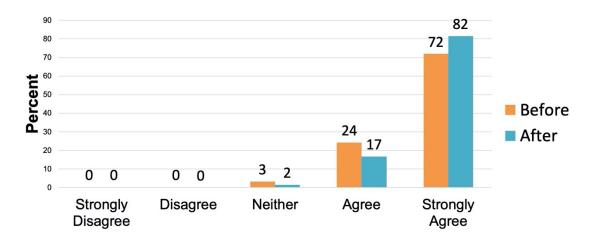
It is important for me to communicate compassion to my patients (N = 400)



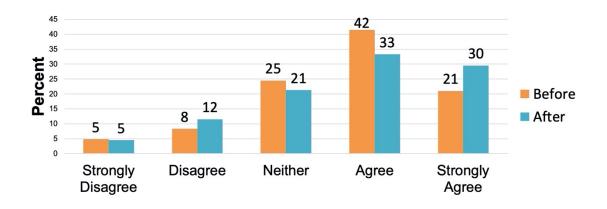


In my profession one needs skills in interacting and cooperating with patients (N = 400)

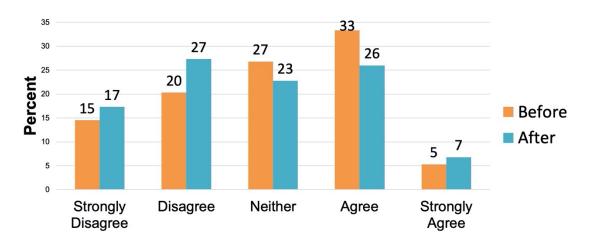
It is important to me to understand the patient's side of the problem (N = 400)



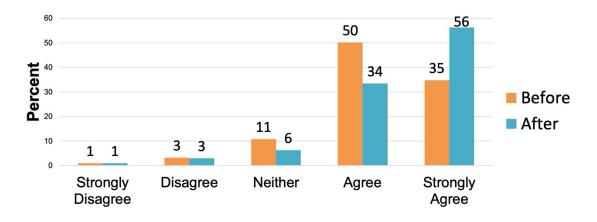
Health professionals/students from other disciplines have prejudices or make assumptions about me because of the discipline I am studying (N = 400)



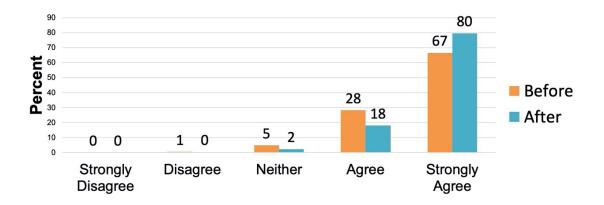
# I have prejudices or make assumptions about health professionals/students from other disciplines (N = 400)



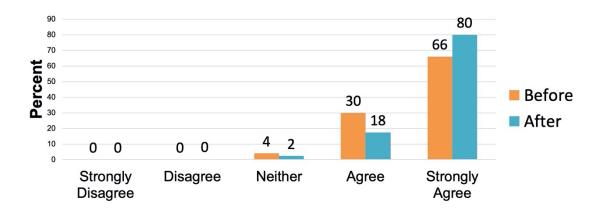
# Prejudices and assumptions about health professionals from other disciplines get in the way of delivery of health care (N = 400)



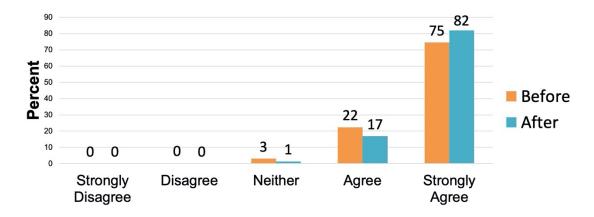
It is important for health professionals to respect the unique cultures, values, roles/responsibilities, and expertise of other health professions (N = 400)



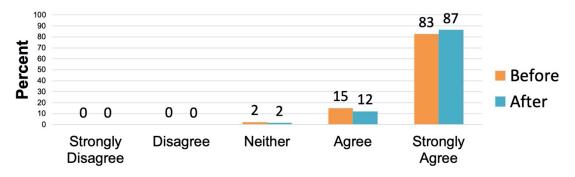
## It is important for health professionals to understand what it takes to effectively communicate across cultures (N = 400)



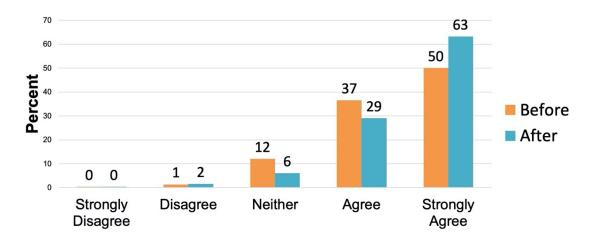
It is important for health professionals to respect the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care (N = 400)



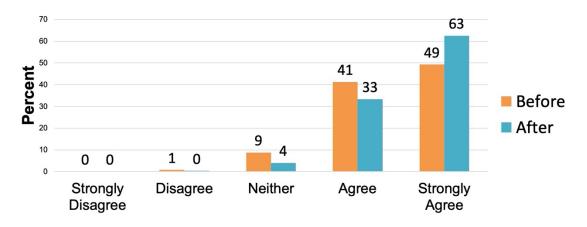
It is important for health professionals to provide excellent treatment to patients regardless of their background, e.g., race, ethnicity, gender, sexual orientation, religion, class, national origin, immigration status, or ability (N = 400)



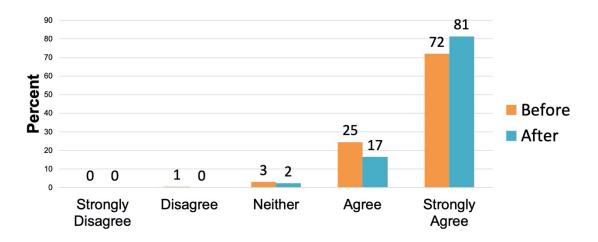
# It is important for health professionals to work with nonclinicians to deliver more effective health care (N = 400)



It is important for health professionals to work with public health administrators and policy makers to improve delivery of health care (N = 400)



It is important for health professionals to be advocates for the health of patients and communities (N = 400)



#### Interprofessional Attitudes Scale (IPAS) 2020 Patient Safety Paired T with Means

	estion/Item	N	Pre	Post	t	Sig (2-
	ong Disagree to Strongly Agree (values of 1 to 5)		Mean Mean		tailed)	
1.	Shared learning experiences will help me think	401	4.06	4.31	-6.27	.000
-	positively about other health care professionals.					
2.	Learning with other students will help me become a	401	4.16	4.46	-8.93	.000
-	more effective member of a health care team.					
3.	Shared learning experiences with other health care	101			10.10	
	students will increase my ability to understand clinical	401	4.11	4.45	-10.19	.000
4	problems.					
4.	Patients ultimately benefit if health science students	401	4.44	4.70	-8.89	.000
	worked together to solve patient problems.				0.00	
5.	Shared learning experiences with other health care					
	trainees will help me communicate better with	401	4.20	4.53	-9.47	.000
	patients and other professionals.					
6.	It is not necessary for health care trainees to learn	401	2.02	1.87	4.68	.000
	together.	401	2.02	1.07	4.00	.000
7.	Shared learning experiences will help me understand	400	4.03	4.38	-10.89	.000
	my own limitations.	400	4.05	4.50	10.05	.000
8.	It is important for me to communicate compassion to	400	4.62	4.76	-7.21	.000
	my patients.	400	4.02	4.70	/.21	.000
9.	In my profession one needs skills in interacting and	400	4.61	4.75	-6.72	.000
	co-operating with patients.	400	4.01	4.75	0.72	.000
10	It is important for me to understand the patient's side	400	4.68	4.79	-6.67	.000
	of the problem.	400	4.00	4.75	0.07	.000
11	Health professionals/students from other disciplines					
	have prejudices or make assumptions about me	400	3.66	3.72	-1.41	.000
	because of the discipline I am studying.					
12	I have prejudices or make assumptions about health	400	2.95	2.78	4.73	.000
	professionals/students from other disciplines.	400	2.55	2.70	ч.75	.000
13	Prejudices and assumptions about health					
	professionals from other disciplines get in the way of	400	4.14	4.41	-8.95	.000
	delivery of health care.					
14	. It is important for health professionals to respect the					
	unique cultures, values, roles/responsibilities, and	400	4.61	4.77	-7.88	.000
	expertise of other health professions.					
15	It is important for health professional to understand					
	what it takes to effectively communicate across	400	4.62	4.77	-6.82	.000
	cultures.					

Question/Item	N	Pre	Post	t	Sig (2-
Strong Disagree to Strongly Agree (values of 1 to 5)		Mean	Mean	·	tailed)
16. It is important for health professionals to respect the					
dignity and privacy of patients while maintaining	400	4.71	4.81	-5.79	.000
confidentiality in the delivery of team-based care.					
17. It is important for health professionals to provide					
excellent treatment to patients regardless of their					
background, e.g., race, ethnicity, gender, sexual	400	4.80	4.85	-3.97	.000
orientation, religion, class, national origin,					
immigration status, or ability.					
18. It is important for health professionals to work with	400	4.35	4.54	-7.94	.000
non-clinicians to deliver more effective health care.	400	4.55	4.54	-7.94	.000
19. It is important for health professionals to work with					
public health administrators and policy makers to	400	4.39	4.58	-7.93	.000
improve delivery of health care.					
20. It is important for health professionals to be	400	4.68	4.79	-5.81	.000
advocates for the health of patients and communities	400	4.00	4.79	-3.81	.000
The following questions were not included in t	the Pati	ent Safe	ty Post S	Survey	-
21. Establishing trust with my patients is important to					
me.					
22. Thinking about the patient as a person is important in					
getting treatment right.					
23. It is important for health professionals to work on					
projects to promote community and public health.					
24. I welcome the opportunity to work on small-group					
projects with other health care professions.					
25. Shared learning before graduation will help me					
become a better team player.					
26. It is important for health professionals to work with					
legislators to develop laws, regulations, and policies					
that improve health care.					
27. It is important for health professionals to focus on					
populations and communities, in addition to					
individual patients, to deliver effective health care.					

## **Interprofessional Activities**

Have you participated in ar	y other interprofession	al education (IPE) activities?

	Pre-Survey N=424	Post-Survey N=400
Yes	71 (17%)	67 (17%)
No	353 (83%)	333 (83%)

In what other interprofessional education (IPE) activity or activities did you previously participate? Select all that apply.

Activity	Pre-Survey	Post-Survey
UAHS Patient Safety	1	10
UAHS Pandemic Flu	2	3
UAHS Disabilities	49	46
UAHS CPR Team Behavior	2	2
UAHS CLARION Case	2	1
Competition		
UAHS Opioid	6	6
UA Milagro	0	0
UA Poverty Simulation	0	0
IP Rural Health Professions	2	1
Conference		
Other IPE at UArizona	9	5
IPE at another institution	3	6
Text responses:	CPR, disabilities, disaster	Communication and
	preparedness,	education, disaster
	introductory, patient	training, not sure, this is
	safety while studying	the first IPE, this same
	dietetics, team learning,	event
	same event	

# Personal Demographics – Included in Pre and Post

Age:			
Age Range	Pre-Survey N=424	Post Survey N=408	
19 – 29	370	354	
30 – 39	49	49	
40 – 49	5	5	
50 – 59	0	0	

#### Gender:

	Pre-Survey N=424	Post-Survey N=401
Male	119	106
Female	303	292
Non-binary, not exclusively male or female	1	0
Transgender Male/Trans male	0	0
Transgender Female/Trans Woman	0	0
Additional gender category you prefer	0	1
I don't want to say	1	2

#### Ethnicity:

	Pre-Survey N=418	Post-Survey N=408
Hispanic or Latino	98	95
Non-Hispanic or Non-Latino	320	304

#### Which best describes how you identify or see yourself (you may select more than one)

	Pre-Survey	Post-Survey
American Indian or Alaska Native	13	15
Asian	87	85
Black or African American	20	16
Native Hawaiian or Other Pacific Islander	3	3
Hispanic or Latinx/o/a or Chicano/a	79	78
White or European	249	236
Other:	22	22
Other Categories: Assyrian, beautiful - race doesn't exist, Brazilian, Egyptian, Indian, Middle Eastern, mixed, Pakistani American, Syrian Knanaya		

#### **Military Service:**

	Pre-Survey N=420	Post-Survey N=399
No military service	412	391
Current active duty	0	2
Current active reserve	2	6

Prior military service-veteran status	6	0
Retired-non-combat	0	0

Post-Survey open-ended questions are included in a separate document. The comments are separated by the session with degree and year in program identified (1:00 pm and 3:00 pm). Questions included:

- 1. Please provide your opinions about the event.
- 2. Briefly explain what you LIKED about the Interprofessionalism for Patient Safety event.
- 3. What changes do you feel would most improve interprofessional learning in the Interprofessionalism for Patient Safety event?