

# Interprofessional Education (IPE) International Collaboration Preceptorships: Physicians and FNP Students

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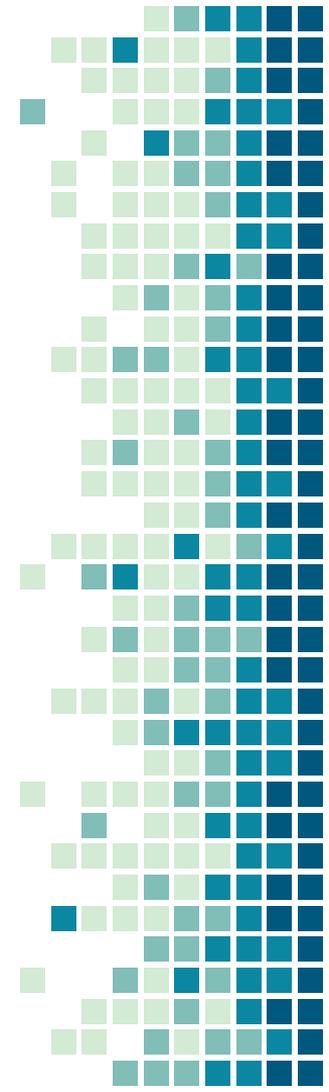
# Dr. Caryn Andrews



✗	No (potential) conflict of interests	
✓	1. Relations that could be relevant for the meeting	Consultant funded by EGL Charitable Foundation. Conference attendance supported by foundation
✓	2. Sponsorship or research funds	EGL Charitable Foundation
✓	3. Payment or other (financial) remuneration	funded by EGL Charitable Foundation. Conference attendance supported by foundation
✗	4. Shareholder	None
✗	5. Other relation	None

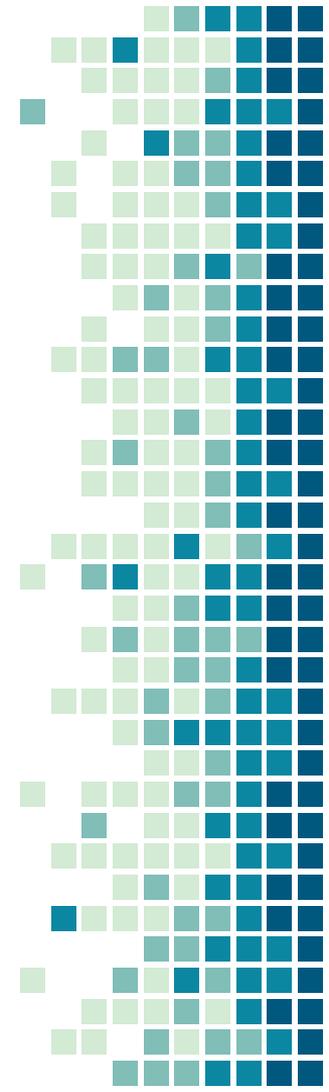
# Faculty Disclosures

Criteria	Information
Faculty Name	Caryn Andrews, PhD, FNP-BC, RN
Conflict of Interest	Consultant – paid by EGL Scholarship Foundation Funds
Employer	Simmons College; Henrietta Szold School of Nursing at Hebrew University at Hadassah
Sponsorship/Commercial Support	Consultant, EGL Scholarship Foundation
Faculty Name	Julie Vosit-Steller, DNP, FNPC, ACHPN, AOCN
Conflict of Interest	None
Employer	Brigham and Women’s Hospital
Sponsorship/Commercial Interest	None
Faculty Name	Barbara Cohen, PhD, JD, RN
Conflict of Interest	None
Employer	Berkeley College
Sponsorship/Commercial Interest	None



# Faculty Disclosures 2

Criteria	Information
Faculty Name	Abby Kra Friedman, MSN, CNM, WHNP, RN
Conflict of Interest	Consultant – paid by EGL Scholarship Foundation Funds,
Employer	Simmons College; Henrietta Szold School of Nursing at Hebrew University at Hadassah
Sponsorship/Commercial Support	Consultant, EGL Scholarship Foundation, trip to ICN NP/APN sponsored by Simmons College and The Rabinowitz Fund at Hadassah SON at Hebrew University
Faculty Name	Tamar Fishman
Conflict of Interest	Advanced Practice Nurse Coordinator at Meuhedet Health Services
Employer	Meuhedet Health Services, Tel Aviv, Israel
Sponsorship/Commercial Interest	none
Faculty Name	Judy A. Beal, DNSc, RN, FNAP, FAAN
Conflict of Interest	Administrator, EGL Scholar Foundation Funds Dean School of Nursing & Health Sciences
Employer	Simmons College
Sponsorship/Commercial Interest	EGL Scholar Foundation (501-3c) 2U, Inc as technology partner for Simmons



# Session Goal & Learning Objectives

## Session Goal:

The purpose of this presentation is to describe Israeli physicians' experience in providing family nurse practitioner (FNP) students with clinical education in an international US academic program and to highlight mutual learning

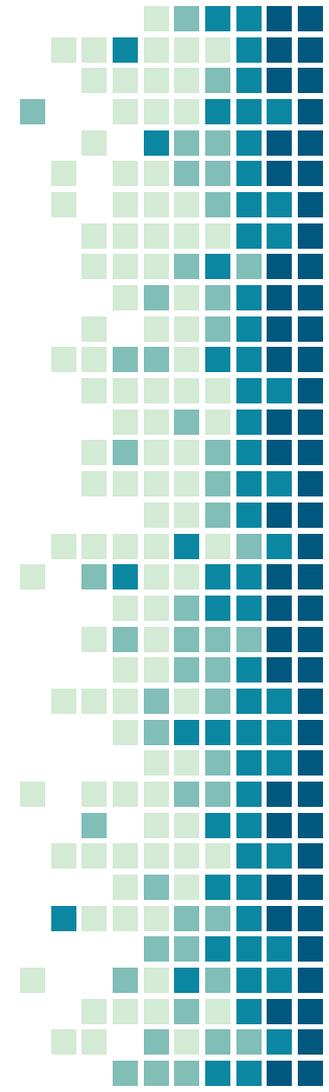
To illustrate how critical ethnographic analysis can identify factors that promote policy or program changes necessary for implementation of the APN role in Israel

## Session Objectives:

Define Israeli physicians' experiences while providing FNP students clinical education in an international US academic program

Explore the process of IPE or mutual learning between physicians and nurses to establish the role of the FNP together

Explain adaptation process utilized in translating bi-national online global nursing education to the point of care throughout Israel



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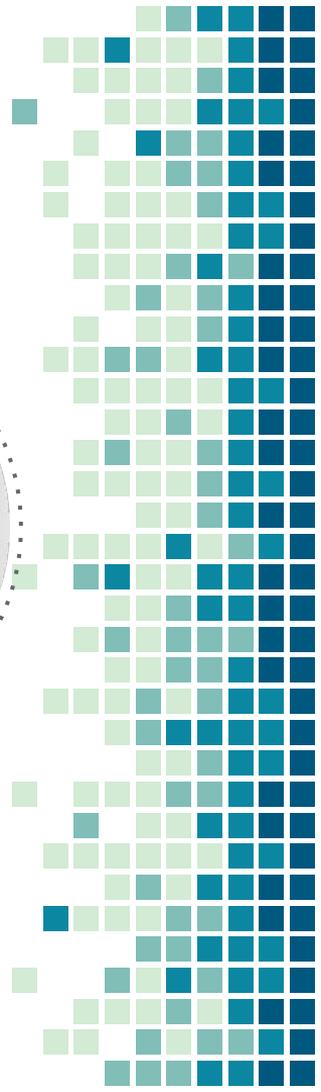
# Study background: Why IPE?

Reported to be the most successful educational model<sup>1</sup>

In a system with no NP's we needed clinical preceptors.

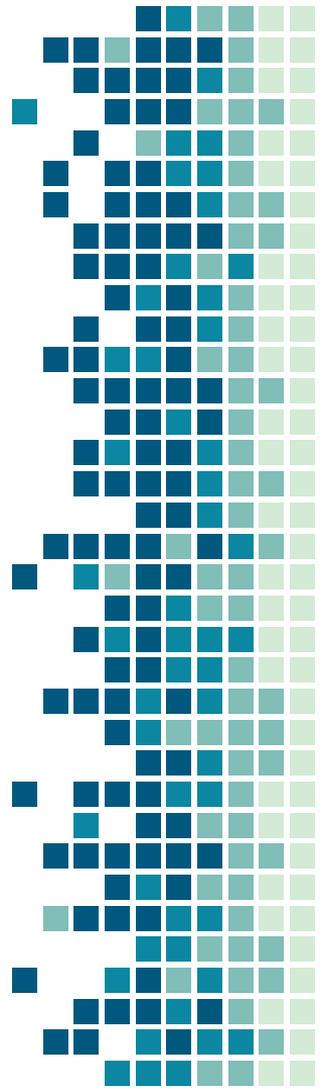
Introduces a collaborative approach for students as future interprofessional team members

Promotes understanding of the roles within shared resources or settings<sup>2</sup>



# Research Question:

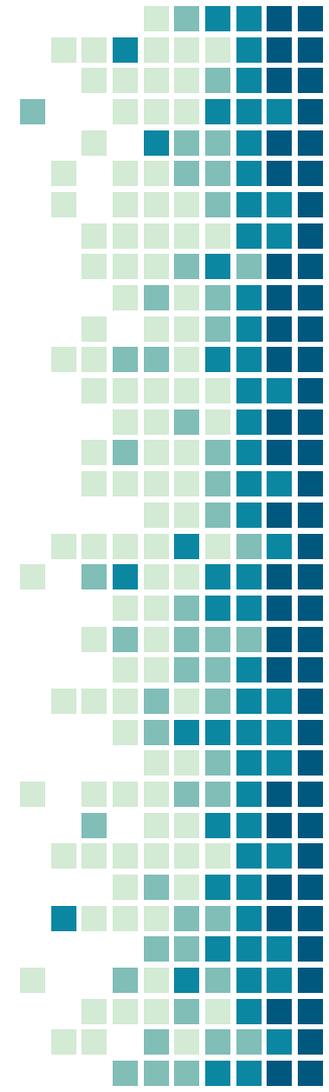
What is the experience of the physician preceptors in educating family nurse practitioners in an international academic program?



# Research Methods

## **Critical Ethnography:**

*Used to identify issues within a culture and advance ideas for social justice or change*

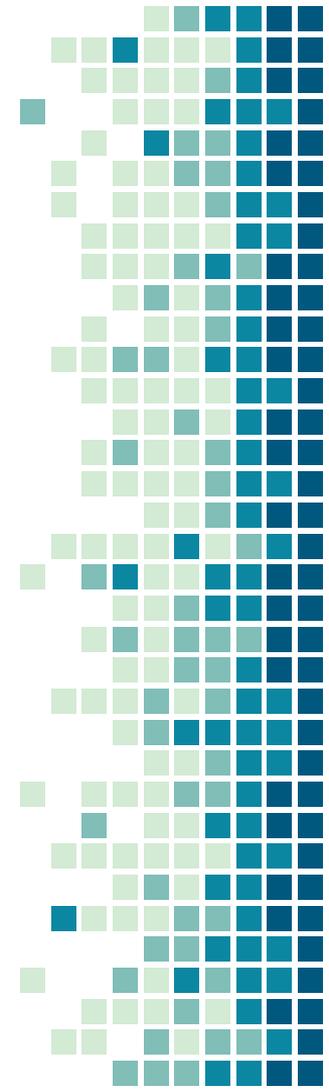


# Methods

Qualitative focus on physicians' experiences of precepting FNP students

Appropriate IRB approval of both institutions was obtained

Physicians were asked open-ended questions about precepting FNP students and integration of future partnerships with FNPs



# Open ended interview questions

1) I am very interested in hearing what it has been like for you to participate as a preceptor for an FNP student.

2) Please describe from your perspective as an Israeli physician the level of competency in the clinical skills the students have learned thus far (skills of clinical assessment, differential diagnoses, clinical decision making, treatment, follow-up and processing of the patient within the healthcare system).

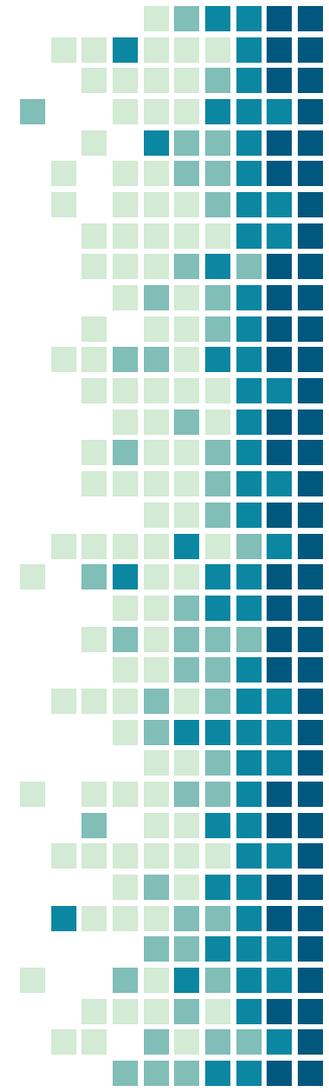
3) Please describe any benefits you experienced while participating in IPE or changes you've made in your practice while educating NPs.

4) Please describe your overall perspective of the acceptance of the NP student among your patient population and in your clinic.

5) Please describe any barriers you experienced in your practice or in your clinic while teaching an NP student.

6) Please share your overall perspective on the future integrative process for new NPs into your clinic as well as your geographical area.

7) Is there anything else you want to share about your experience that hasn't come up in the interview?



# Results

11 interviews

8 hours of digital recordings

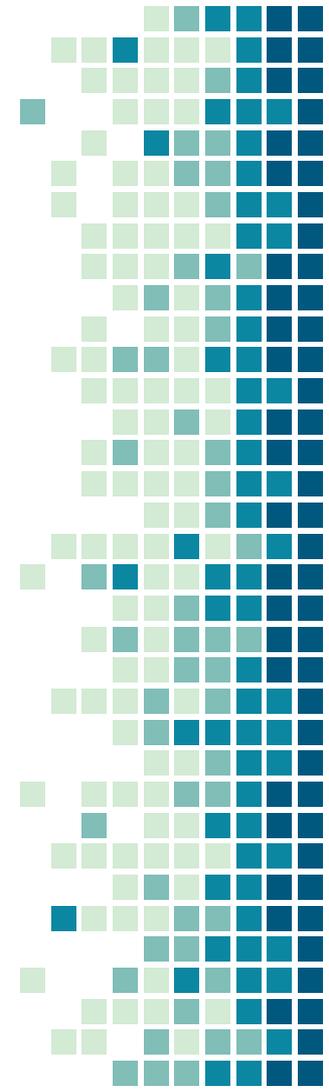
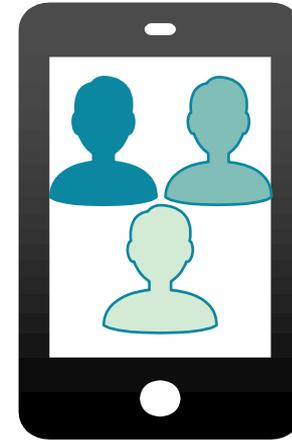
3 way international phone calls

Interviewing continued until thematic saturation was reached (11)

Conducted in Hebrew/English with live translation

Transcribed

Data analysis was done in English to assess for themes



# Results: Sample Demographics

N=11 (recruited from a larger pool of 50 preceptors)

Men=5

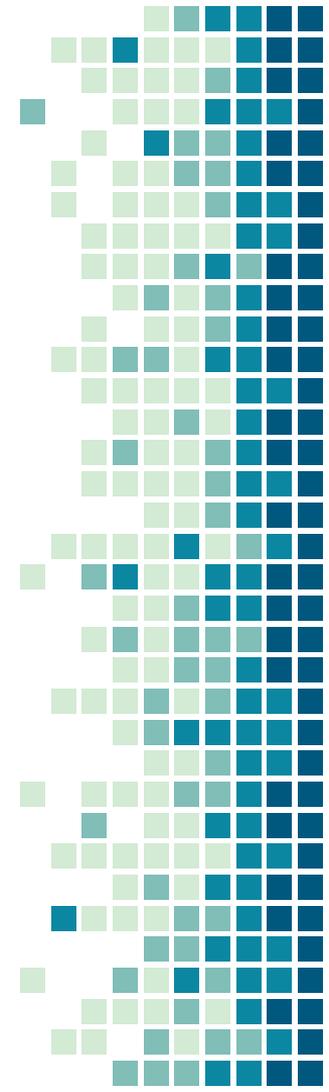
Women= 6

Age Range- 39-64

Birthplace- Holland, Belarus, Israel (2), UK, Estonia, US (3), South Africa, Australia

Origin of MD license- same

Years practicing in Israel- 6-30 years ( mean= 21)



# Results: Common themes from literature<sup>2,3</sup>



# Themes from Interviews



## **(R) Role Issues**

1. Role clarification
2. Reflective Practitioner
3. Collaboration vs Competition

## **(A) Administration, Economics, Politics**

4. Economics/politics will determine acceptance
5. Need for Influential MD/NP administrative Leadership and Pioneering
6. Developing a Shared Perspective and Expanded Vision

## **(E) Education**

7. Nurturing the novice and the need for residency program post-graduation

(R)Role Issues:  
Role clarification



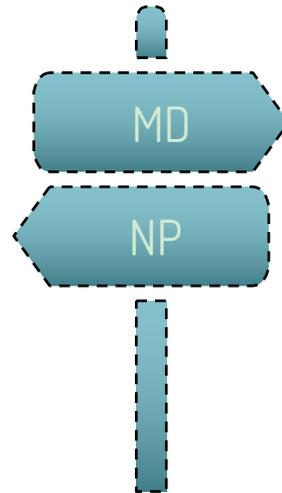
# Role Issues: Role clarification



*"They're all wondering exactly how they're going to be working and where/how they're going to develop enough experience to be completely independent nurse practitioners"*

*"Actually I didn't really know what they wanted from me and what a nurse practitioner was until she actually started doing it, and explained to me what she was going to be doing."*

# (R)Role Issues: Reflective Practitioner

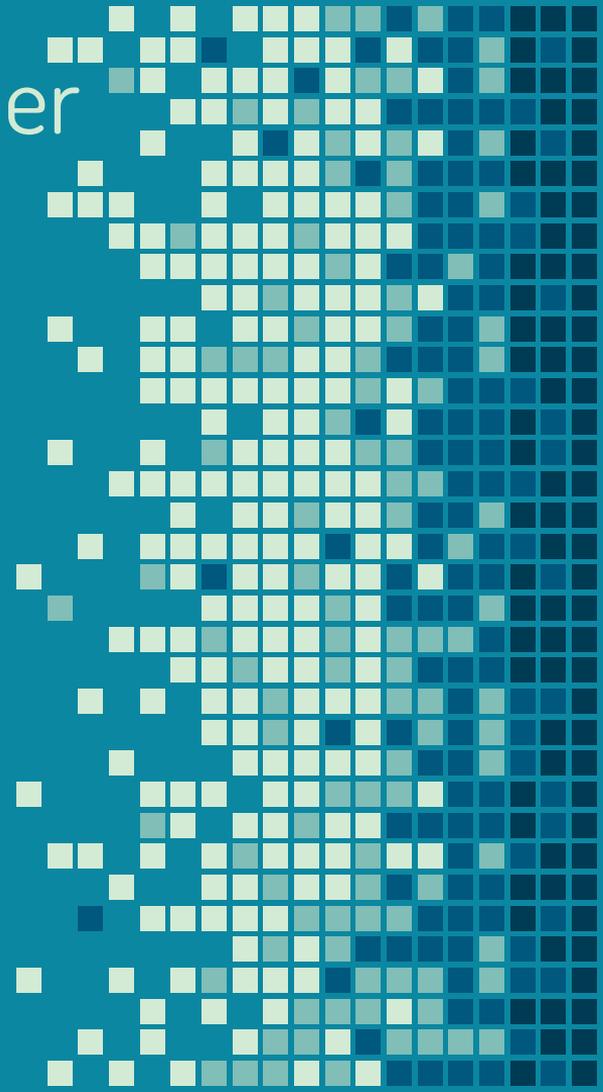


# (R) Role Issues: Reflective Practitioner

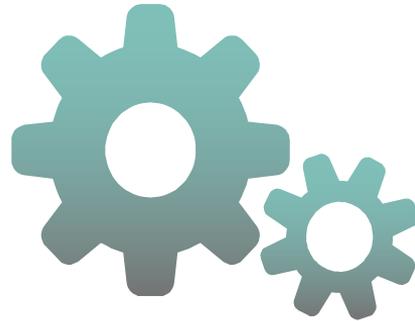


*"...trying to direct my teaching that way and to think about how to think it out ...sometimes [about] the way I'm practicing myself because I'm practicing in order to teach, which is different from practicing just without having take the time for teaching."*

*" made me reconsider the way I work"*



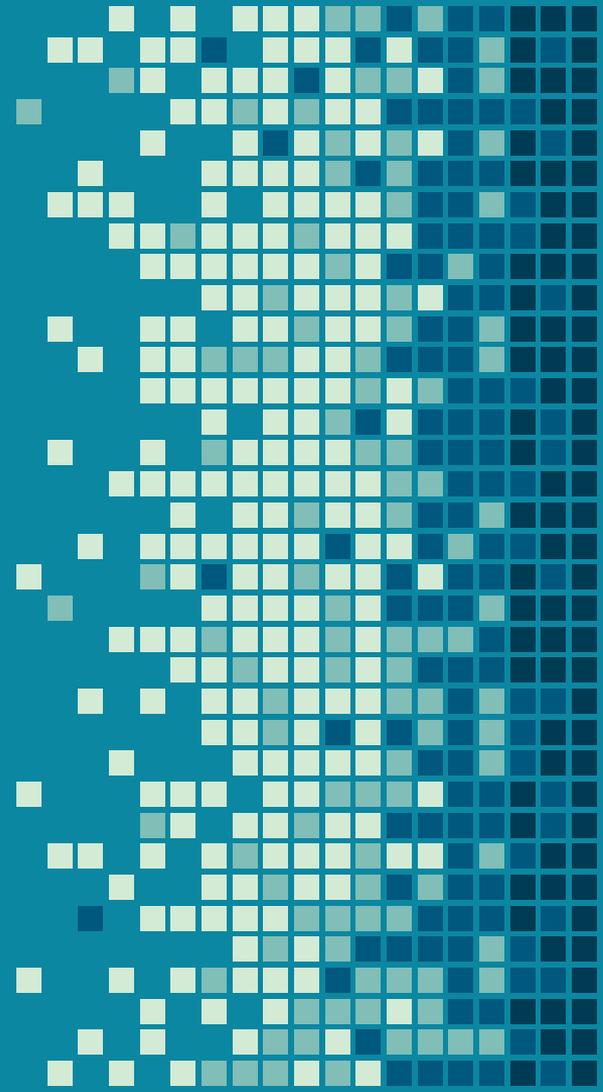
(R)Role Issues:  
Collaboration  
vs  
Competition



# (R) Role Issues: Collaboration



*"A second head in the room to sometimes bring up things...which I didn't think about when I was seeing the patient..[makes me] look at it from another angle or something else I could have asked"*



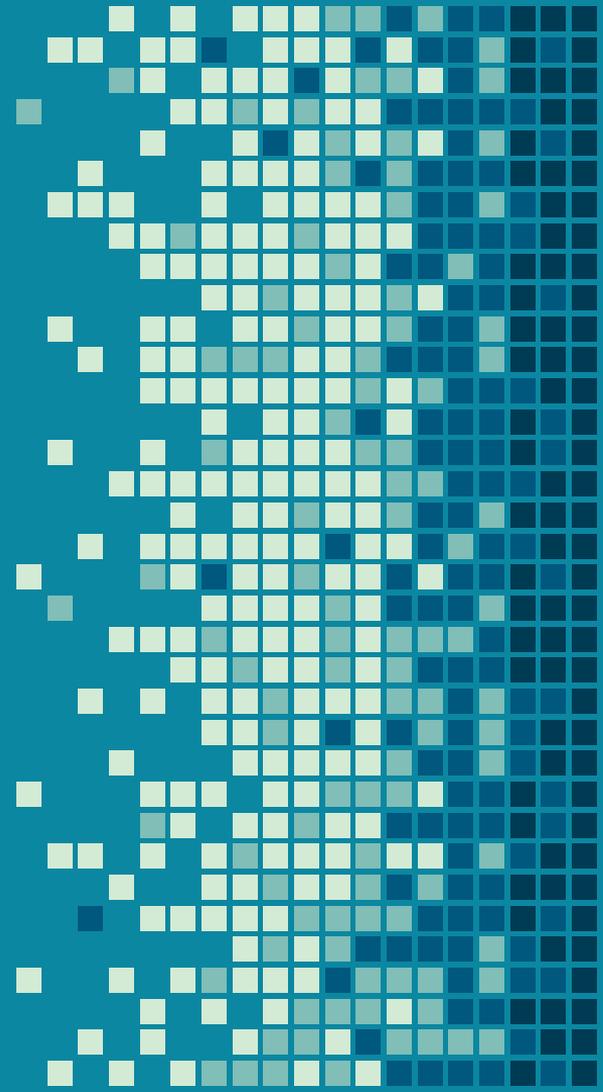
(A) Administration,  
Economics, Politics  
will determine  
acceptance



# (A) Economics



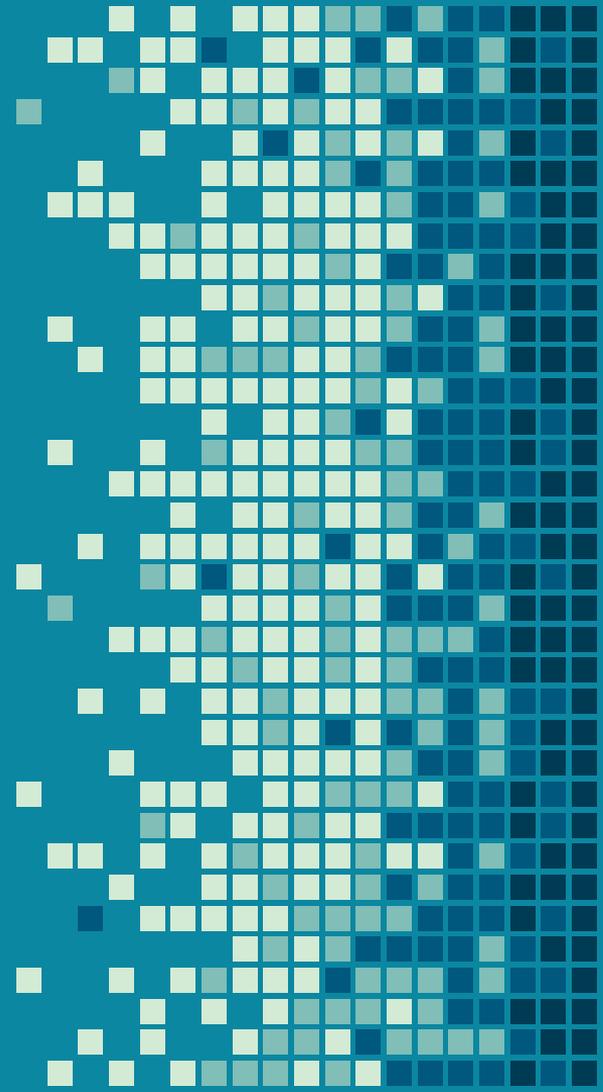
*"I think that the physicians have to see the nurse practitioners not as a mechanism where they will be reducing their salary, but as something that can actually enhance their efficiency and financial growth."*



# (A) Politics



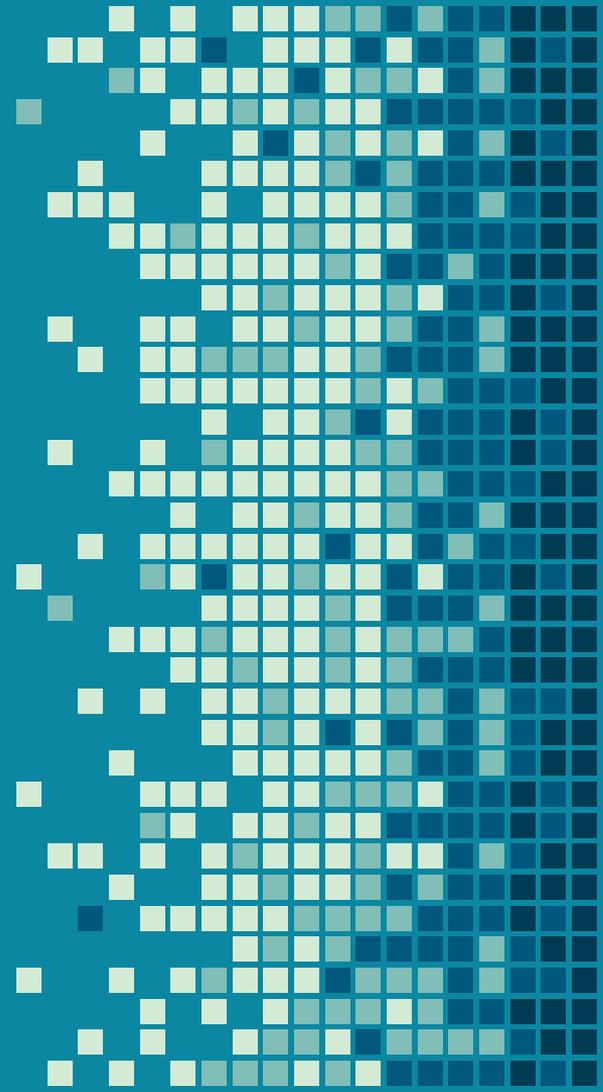
*“People don’t know the logistics. Even the people who are in charge don’t necessarily know the logistics ...but the authorizations are how they’re going to get the right to have prescriptions filled in a pharmacy. ”*



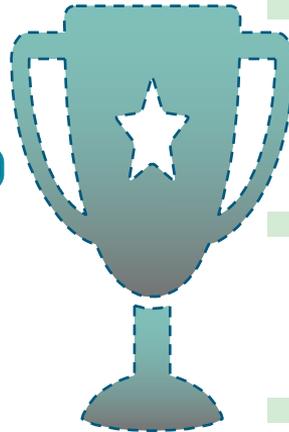
## (A) Administration



*"I get nervous when I started seeing e-mails and memos from some of the medical organizations threatening anybody who cooperates with the nurse practitioner program. I got nervous about it because I'm interested in teaching, I'm interested in teaching and learning and giving and taking from the teaching role. I don't want to be a decision maker on the overall decisions."*



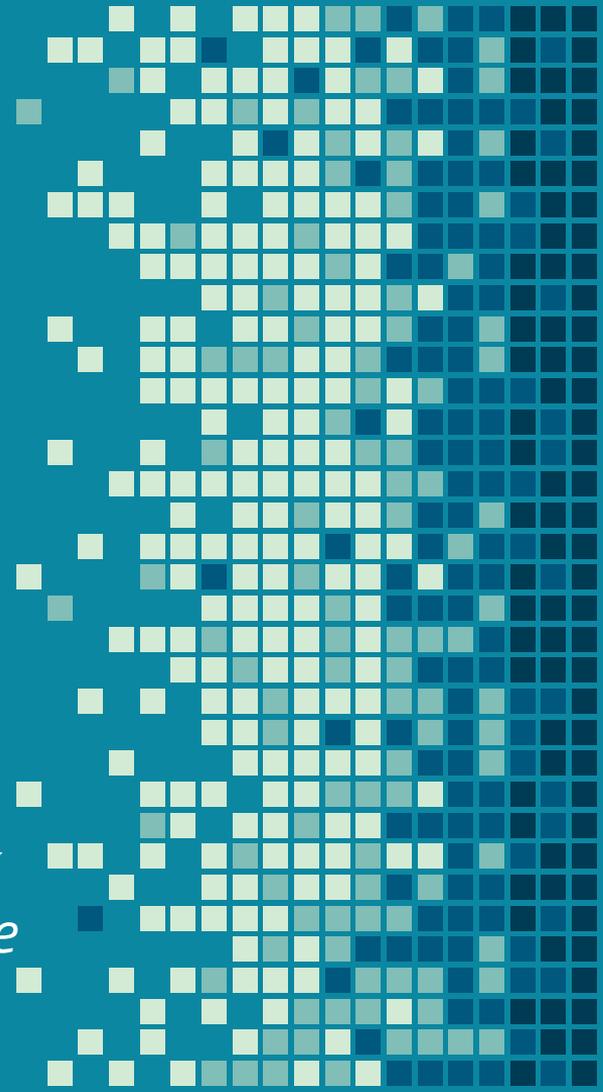
(A) Need for Influential  
Administrative Leadership  
and Pioneering NP  
Leadership



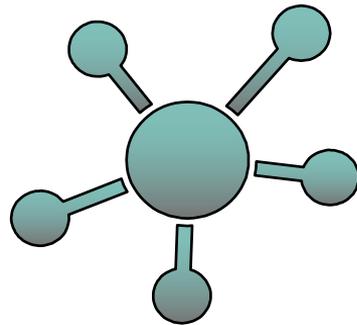
# (A) Need for Influential leadership



*"In the areas where they're really lacking primary care physicians, and the volume of patients is large, I think the way I saw things in my practice, I can spend a third of the amount of time with the patient because of the nurse practitioner. It means we can really double the volume and triple the volume of patients being seen using nurse practitioners...clearly the need is rising...I think it will fill a tremendous void that is going to be needed."*



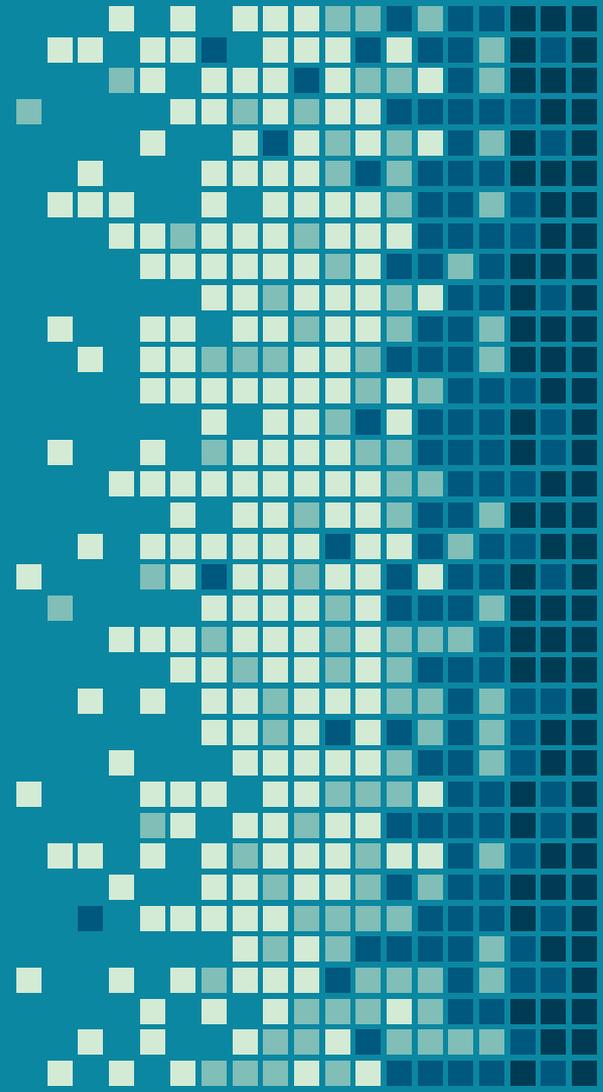
(A) The Essence of IPE:  
Developing a  
Shared Perspective  
and Expanded Vision



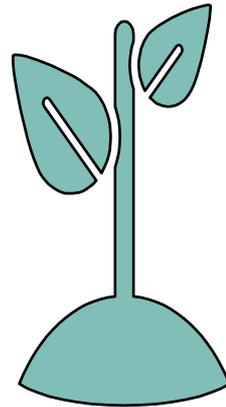
# (A) Shared Expanded vision



*"I think that there were areas that they were clearly very comfortable with, I thought that there was a little more from a nurses angle as opposed to strict medical aspect. I think it added a very good dimension to patient care. They were much more attentive, sympathetic, understanding. They added a component that is often lacking with the physician's exchange."*



(E)Nurturing the Novice:  
the need for residency  
program post-  
graduation



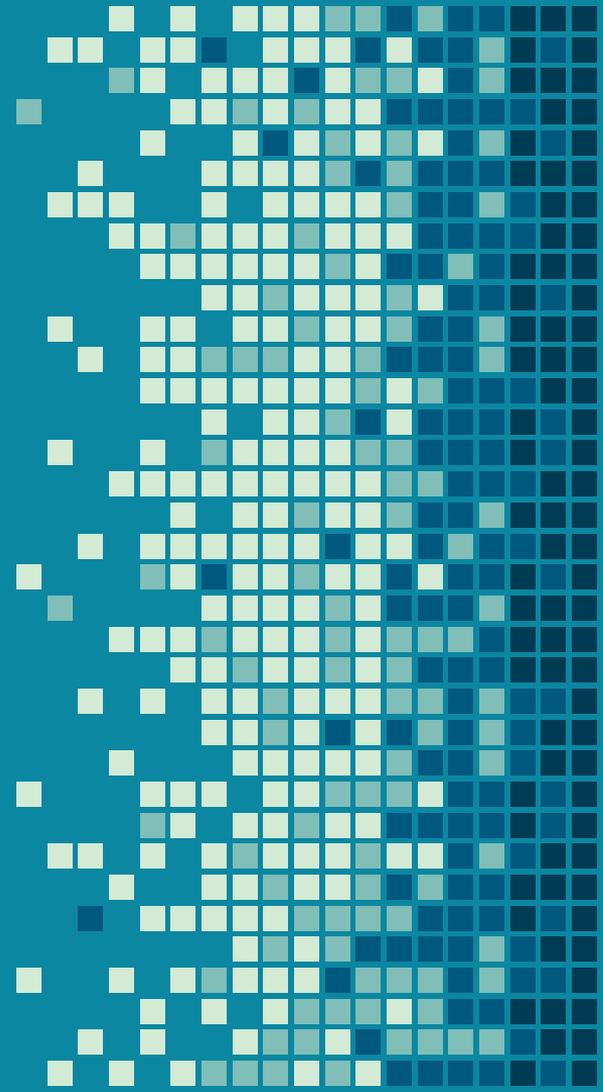
# (E) Nurturing the novice



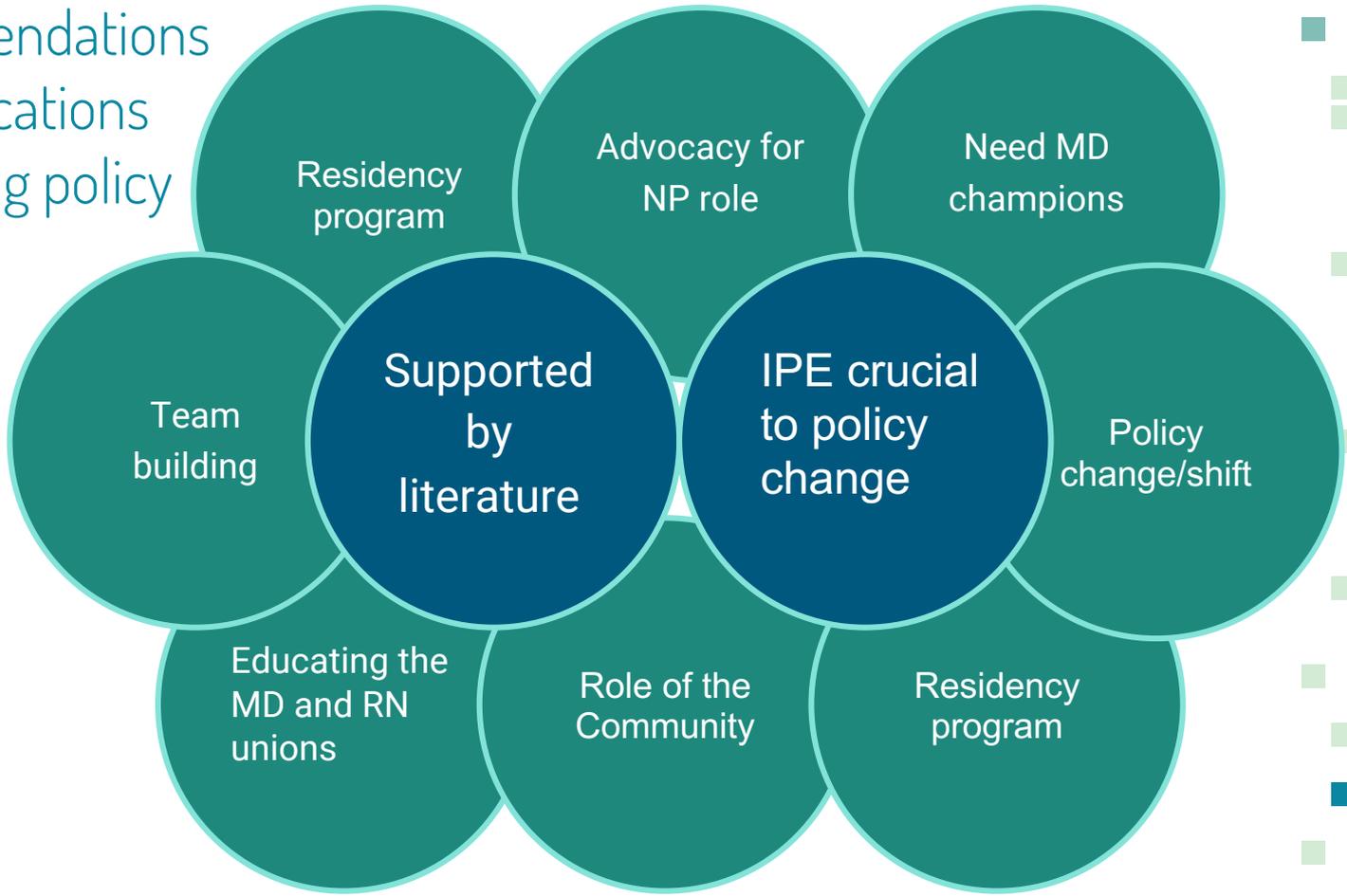
*“Good learning and mentoring and subsequently a period of more independent mentorship, which parallels what doctors do...I think is how every medical training system functions in a similar way or has the same elements because it’s an essential element of the training...”*

*“More towards the end I kind of understand I think what could have helped her more and what would be better and what would enrich it ”*

*“I wasn’t finished teaching her everything I want to”*



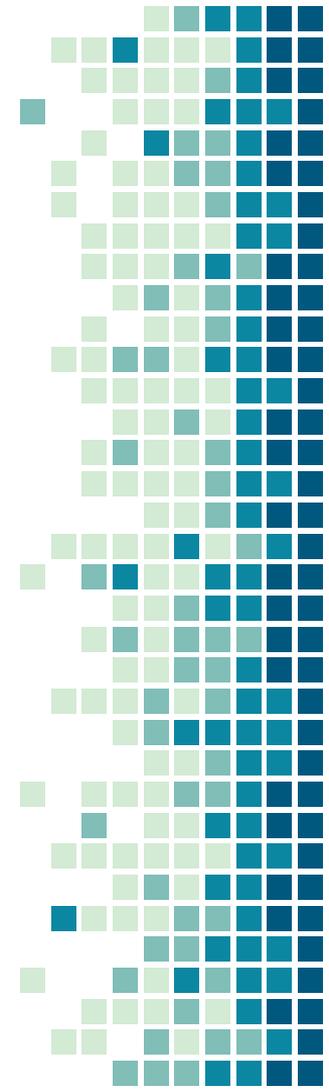
Recommendations  
and implications  
for existing policy



# Conclusion

IPE is an iterative process in which the student also teaches the mentor

Using an IPE model, physicians are engaged in teaching students through “shadowing” and “mentoring” techniques  
The students bring their academic evidence-based knowledge and application to the preceptor’s’ practices at the point of care



# Conclusion

The FNP is a new role in the Israeli HMO

Limited physician knowledge of FNP practice challenges the process

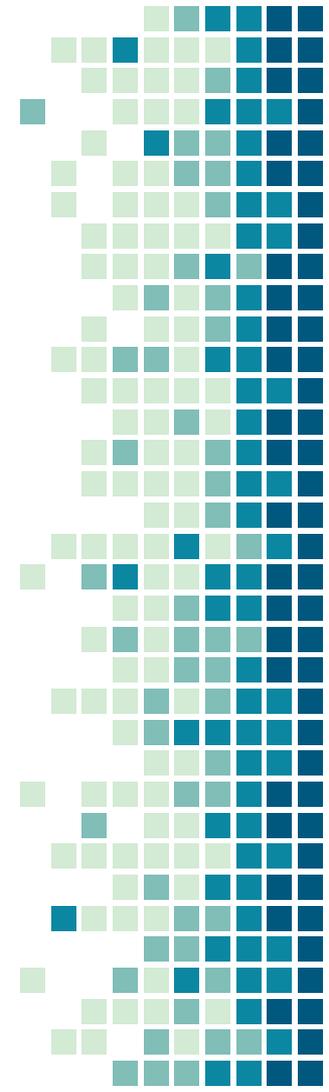
The team needs to be comprised of all disciplines:

- Administration

- Physician

- Nurse Practitioner

Critical ethnographic analysis of the transcripts showed that the preceptors as a group were able to come up with many ways in which to promote the process of NP role implementation in Israel

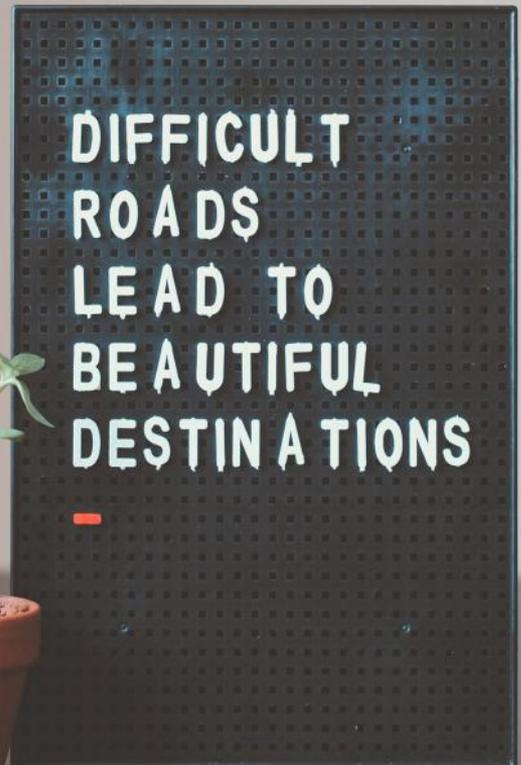


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- <sup>5</sup> Mahoney, J.S., Mulder, C. Hardesty, S. & Madan, A. (2017). Integrating caring into patient-centered care through interprofessional education and ethics: The Caring Project. *Bulletin of the Menninger Clinic*, 81(3), 233-246. doi:10.1521/bumc\_2017\_81\_02
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- <sup>7</sup> Hopkins, D. (ED) (2010). *Framework for Action on Interprofessional Education & Collaborative Practice*. (WHO/HRH/HPN/10.3) (2010). Health Professions Network Nursing and Midwifery Office within the Department of Human Resources for Health. Geneva: WHO Press.
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