FH CAMPUS WIEN
UNIVERSITY OF APPLIED SCIENCES

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für Hochschuldidaktik

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Wien | 26. April 2019

Symposium:
Interprofessional Education in Health Sciences

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Austrian Society for Higher Didactics (ÖGHD)

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Austrian Society for Higher Didactics (ÖGHD)

1 Contents

2 Welcome

Dear guests

Welcome to the International Symposium: *Interprofessional Education in Health Sciences: Learn with, from and about one another*, hosted by the FH Campus Wien University of Applied Sciences.
It is our great honour to host this conference.

With more than 6500 students, FH Campus Wien is the largest university of applied sciences in Austria. Students can choose from more than 60 bachelor's and master's degree programs and master courses in the departments of Applied Life Sciences, Building and Design, Health Sciences, Applied Nursing Science, Administration, Economics, Security, Politics, Social Work and Engineering.

As a University our aim is to provide students with a professional and interprofessional environment in which they can study successfully. Student-centred teaching and interprofessional learning is thus a particular priority of the university, and one that we are continually striving to enhance.

This international symposium will focus on interprofessional learning and teaching - topics that will be discussed from different disciplinary and applied perspectives. The merging of diverse knowledge and the discussion of scientific and occupational expertise on the basis of current research results, innovative projects and interventions, will help to discover and develop new perspectives.

The conference team wishes you an enjoyable and educative stay at our institution. May this conference lead to many new ideas, cooperations and benefits for our students.

Angelika Eder, MSc,
Physiotherapist, Academic Staff, FH Campus Wien

Mag.a Eva Jöchtl,
Event and Communication Management, Department Health Sciences, FH Campus Wien

3 Program Overview

Friday 26 April 2019		
8:15	Registration	
9:00	Welcome	Mériaux-Kratochvila, Mettinger, März, Stein
9:15	Lecture	Huber
10:00	Lecture	Grasl, Denk
10:45	Coffee	
11:15	Workshops	
12:30	Lunch	onsite
13:30	Lecture	Petriş
14:15	Workshops	
15:30	Coffee	
16:00	Fireplace Talk	Eder, Kremser (Moderation)
16:30	Round Table	Stein, März (Moderation)
17:00	Posterparty	Stein, März, Eder (Moderation)

4 Workshops

Workshop	Facilitator	Location	Page
Friday 11:15			
1a	Huber	A-1.04	12
1b	Eder	A-1.01	13
1c	Petris	B.E.03	14
1d	Grasl, Kremser	B.E.02	15
Friday 14:15			
2a	Huber	A-1.04	12
2b	Eder	C.E.20	13
2c	Petris	B.E.03	14
2d	Kremser, Grasl	B.E.02	15

Die workshops vom Vormittag, werden am Nachmittag wiederholt.
Morning sessions will be repeated in the afternoon.

Workshop 1a, 2a: 26. 4. 2019, 11:15, 14:15

How to: Implementation of an interprofessional module

Marion Huber

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The main focus of this work shop should be developing a common answer on the questions: What is interprofessional collaboration and what are the most important competencies for 1. interprofessional collaboration on the one hand for the students, and 2. on the other hand for teaching?

The second step of the work shop should give us answers on the following questions:
"What is necessary to implement interprofessional education at my working place?"
"What challenges have to be mastered at my working place?"
"What are the requirements?"

At least we want to collect all mutual experiences and answers to create a common tool box for implementing interprofessional education.

Workshop 1b, 2b: 26. 4. 2019, 11:15, 14:15

Anamnesis: a possibility to learn with, from and about one another

Angelika Eder

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Today's patients have complex health needs and require more than one discipline to address issues regarding their health status. An interprofessional approach may allow sharing of expertise and perspectives to form a common goal of restoring or maintaining an individual's health and improving outcomes while combining resources. Interprofessional collaborative practice has been defined as a process, which includes communication and decision-making, enabling a synergistic influence of grouped knowledge and skills. IPE provides an ability to share skills and knowledge between professions and to get to know something about the competences of the other team members. A key ingredient in medical education of all health professionals is the development of clinical reasoning expertise. The anamnesis is the first contact with our patients. It represents the start of each therapy process and at this moment the clinical reasoning process begins. Different professionals need different information for their procedure, this means to generate hypotheses, to plan the examination and to make a diagnosis. During the workshop the participants discuss in small groups on the basis of a „papercase patient" the following question: Which important information does each professional for his or her specific clinical reasoning process need? Moreover, why do the professionals need this information?

Learning Outcome:

Participants

- Will know the competences of other health professionals
- Will have an idea about the working process of other health professionals

Workshop 1c, 2c: 26. 4. 2019, 11:15, 14:15

Why and how interprofessional education can be implemented?

Ovidiu Petriş

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Any practitioner knows that in real life health care cannot function in the patient's best interest and with good results without collaboration between the different specialties involved in her/his treatment. And collaborative skills should not be left to be acquired after graduating, but during academic training.
This is the reason why the concept of interprofessional education is now so important in the debates that concern academic education. And, especially how this concept might be taught. From our experience, practical aspects are better acquired through practical, direct work. For this to be safe, simulation learning is the solution. Clinical simulated cases can be used and scenarios can be build to train and educate students.
An example could be an activity in which learning participants are asked to form teams of healthcare givers with tasks that place them out of their comfort zone. Working in teams, tasks that represent the expertise of other allied professions are steps that must be undertaken in order to advance in the completion of the simulated case. Failure jeopardizes the whole outcome, as is generally the situation in real life.
Let's take a scenario in which a 65-year-old man, who can be played by a collaborator, simulates chest pain typical for coronary heart disease. First the trainee could be invited to obtain a anamnesis and to examine the patient. Then the team establishes the next step to be done in the scenario. In this case it is to record an electrocardiogram (ecg) in order to analyze presence or absence of ischemia / lesion signs. For this to be properly done, a quality ecg must be recorded. And the ecg is generally performed by nurses. This is an excellent opportunity to understand and value expertise of other professions that are partners in this health care effort. And in case of failure, difficulties arise. After the ecg, the usual pathway is to asses myocardial enzymes. For this, blood specimens have to be collected. Once again the team must get out from their comfort zone and be obliged to puncture a vein, working on the arm of a dummy that allows simulated training. Failure in obtaining blood generates a blockage for further medical reasoning, again an opportunity for understanding and valuation of a nurse's expertise. After the blood is collected, it requires laboratory work. An analyzer, used in simulation purposes, can create good interprofessional activity, trainees understanding the partnership they must have with colleagues from the Lab. In the evolution of the case, a cardio-respiratory arrest could be simulated, in which all members of the team, no matter of their assigned professions, must cooperate. Another opportunity in the interprofessional education goal.
The whole activity could be filmed and discussed afterwards. Then training sessions in the procedures that were experienced in the scenario could be arranged, using a system of three postures (performing, receiving, evaluating) and a didactic tool (a specially conceived training book of procedures).

Workshop 1d, 2d: 26. 4. 2019, 11:15, 14:15

Interprofessional collaboration in an outpatient clinic under the aspect of teaching and learning.

Karl Kremser[1,3], Matthäus Grasl[2,3]

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Background: Interprofessional education (IPE) brings different professionals closer together to learn with, from, and about one another to collaborate more efficiently for a high quality and safe medical care for patients. IPE‘s aim is to promote knowledge, skills attitudes and behaviors for collaborative work to improve clinical practice. Participants contribute with a unique input about themselves and others into any IPE event which then interacts in a complex way with the educational event. Authenticity and accordance are requirements of IPE so that it represents a suitable and important setting for a favorable experience for all participants. Faculty development is crucial to allow a proficient and confident enabling of IPE.

Activities: The participants will be asked in small groups to share their experience of interprofessional activities in any context, and to describe the learning and teaching methods used for it in their own institution. They will then be asked to discuss possible pros and cons. The results are presented and discussed with all participants of the workshop. Finally, the participants will be asked to write recommendations or tips for the implementation of interprofessional working and teaching and learning.

Structure of the workshop: The workshop comprises inputs and discussions. The participants will have the opportunity to gain insight into the field of IPE in small groups and in the plenum.

Intended outcome: Recommendations /tips for an IPE

Who should attend? The workshop will be of interest for teachers and students, who are or will be involved in interprofessional working.

References:

1. Reeves S, Fletcher S, Barr H, Birch I, Boet S, Davies N, McFayden A, Rivera J, Kitto S. 2016. A BEME systematic review of the effects of interprofessional education: BEME Guide No. 39. Med Teach. 38:656-668.

5 Lectures, Round Table

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Petriş	13:30	20
Fireplace Talk	16:00	21
Round Table	16:30	21

Alle Veranstaltungen/All events: Festsaal (B.E.01 - B.E.03)

Lecture, 26. 4. 2019, 9:15

Experiences with Interprofessional Education in Winterthur

A field report about the implementation of interprofessional education

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The Department of Health of the Zurich University of Applied Sciences was founded 13 years ago with Occupational Therapy, Nursing and Physiotherapy. One year later, the midwifery course was launched. The opportunity arose to define common educational contents. The contents were originally selected on the basis of seemingly suitable subject areas. There were common time slots in after-work hours. A common time block of 2 weeks was defined for one module. The main topics were ethics, scientific working and health economics.

As part of a first curriculum revision in 2012, agreement was reached on an interprofessional day per week over all semesters as a common time slot. In addition, further subject areas were assigned to interprofessional teaching. Overall, interprofessional teaching was increased to 27 CPs as part of the Bachelor's programme. A second four-week practice-oriented IP block with five different elective subject areas was added in the fifth semester. The Winterschool is affiliated to this module. Students have to attend three of the five subjects, unless they have specific previous achievements in a particular course. The topics are Crisis & Coping, Consulting, Diversity, Interprofessional Cooperation and Professional Identity. Diversity and Professional Identity are offered in English so that international students from all over the world can also participate.

In 2015, the foundation of the Interprofessional Teaching and Practice Centre was added. This was due to the fact that for the interprofessional modules, teachers were specially employed within a team, this team was originally assigned to occupational therapy, but was mainly concerned with the development of interprofessional teaching. In addition, the center of interprofessional learning and practice was affiliated to a newly founded Institute for Health Sciences. The IP-team currently consists of 10 people.

In the current curriculum revision for 2020, a further 3 CPs were achieved. This was due to the fact that a common interpretation order of all issues revealed a clear thematic overlap between the professions-specific offers. Two main themes are currently being pursued in interprofessional teaching: Scientific working as one thematic thread and communication and interprofessional cooperation as the second thread. Both thematic threads are developed longitudinally throughout the entire course. Colleagues from all degree programmes are integrated into the module development, including those from the new health promotion and prevention programme, which was added in 2017. The aim is now to strengthen networking with the profession-specific study programmes and their teaching staff, as room for improvements were identified. In addition, compulsory elective courses on overlapping topics from at least two professions with a clear practical relevance are planned. A clear separation between multi-professional and interprofessional courses is being sought according to the motto: Where it says "interprofessional", it must also include "interprofessional".

Lecture, 26. 4. 2019, 10:00

The Department of Phoniatrics and Logopedics at the Medical University of Vienna. A prime example of interprofessional collaboration.

Matthäus Grasl[1], Doris-Maria Denk-Linnert[2]

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[2] Department of Phoniatrics and Logopedics
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Introduction: The Clinical Devision of Phoniatrics and Logopedics in Vienna is one of the most significant in Austria in terms of space, technical equipment and staff. Depending on the broad spectrum of clinical and scientific tasks an interprofessional and also interdisciplinary setting is indispensable.

Methods: Starting with a narrative situational report about the present setup, the history, difficulties and anticipated developments and implementations are presented with special regards to aspects of learning and teaching. The responsible person of the teaching staff at the Department of Otorhinolaryngology at the Medical University of Vienna refers.

Results: Physicians (Head of Department, senior doctors, assistants, students in the Clinical Practical year and students in the 5 th year of the medical school), medical assistants (speech language pathologists/voice therapy, audiologists, dietitians), nursing staff, administration staff, psychologists, social workers, companies and technician are working in close cooperation at the Devision or are called for patient‘s management.
Teaching and learning occures in all professions. The teaching process is based upon the order of: theoretical knowledge – demonstration – performing under observation supported by lectures.
If necessary, other specialists from the departments of: radiology, neurology, oncology, neurosurgery, oral and maxillofacial surgery, geriatrics, intensive care and medical assistants (curative education, vocal pedagogy) work together within the multiprofessional team.

Discussion: Over time, teaching and learning in the Devision of Phoniatrics and Logopedics have changed not only because of the medical progress but also due to implementation of new praxis-based curricula for medical students and medical assistants. In former times medical students did not touch topics of Phoniatrics and Logopedics and Pedaudiology - in these days the possibility is given. Logopedic students could complete their practical training of 12 months in one piece – in the actual curriculum it is subdivided into several blocks. In our opinion this partition a disadvantage which is compensated by peer-teaching and lectures. Both groups benefit from learning and working in the interprofessional and also interdisciplinary subject area.

Conclusions: Diseases of patients diagnosed and treated at the Devision of Phoniatrics Logopedics show a high grade of complexity which requires interprofessional and interdisciplinary collaboration. In this work area interprofessional teaching and learning is of high impact.

Lecture, 26. 4. 2019, 13:30

Interprofessionality at an Internal Medicine Department in Iasi (Romania)

Ovidiu Petriş

2nd Medical Clinic, Sf. Spiridon Emergency Hospital, University of Medicine and Pharmacy "Gr. T. Popa", Iasi, Romania

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Patient best interest is generally obtained through added inputs from various different health specialties involved in the management of a health problem. For added inputs to generate synergic results quality collaboration between health specialties is necessary and this cannot be expected to happen if it has not been previous educated.

Our aim is to promote Interprofessional education, highlighting a four years experience at the University of Medicine and Pharmacy "Grigore T. Popa" Iași in generating standardized, systematic opportunities for students of different health care educational programs, to interact in a collaborative manner.

This was possible with the use of nursing fundamental skills as cornerstone for different health professional education and with the use of a innovative special teaching system, a book used as didactic tool and the pedagogic concept of collegial guidance, tutoring. Professionals, experienced actively working nurses, students that have proved high level of knowledge and skills acquisition during their own previous training period, both from medical and nursing specialization were brought together to guide younger colleagues in basic skills acquisition. Extraprofessional activities were possible between tutors. That strengthens even more the collaboration among nurses, physicians, students in medicine or nursing specialty. A three weeks summer program of hospital practice, selectively available for students with A or B qualification results, have allowed a better acquisition of fundamental health care skills but also a reset in physician –nurse relationship. The White coat ceremony, that was functional in the reminded period, with the tutoring nurse to invest young first year graduating students as a symbol of his acceptance in the family of health care professionals, has shifted nurse position from a subordinate to a more like a school-ma'am. And this redesign in physician – nurse relationship we consider to represent the seed for future better interprofessional collaboration.

This educational model has generated interproffesional interaction between tutors, as well between them and students from nursing, medicine and kinetotherapy specialization. It was a good experience in which all the involved partners have learn to value each other expertise and profession.

Discussions, 26. 4. 2019

16:00 **Fireplace Talk**

Participants discuss the outcome of the workshops

Moderation: Angelika Eder, Karl Kremser

16:30 **Round Table**

Topic: How do you see interprofessional teaching?

Students and teachers discuss their experience
Moderation: Jörg Stein, Richard März

6 Posters

Posterparty: Freitag/Friday, 26. 4. 2019, 17:00

Die Poster können Freitag zwischen 09:00 und 12:45 Uhr aufgehängt werden und müssen bis zum Ende der Posterparty entfernt werden!

Please mount your posters on Friday between 09:00 and 12:45 and remove them at the latest after the posterparty

Satisfaction of Medical Students with *Conventional* and *Virtual Teaching* by Means of the Study Module "Musculoskeletal System"

Medical University of Graz

Florian Amerstorfer[1], Lukas Leitner[1], Magdalena Gilg[1], Patrick Sadoghi[1], Andreas Leithner[1], Gerhard Bratschitsch[1]

[1] Department of Orthopedics and Trauma; Medical University of Graz, Austria

INTRODUCTION: At the Medical University of Graz, students have to successfully complete subsequent study modules. One of these modules covers fundamentals of the musculoskeletal system, biomechanics and consecutive knowledge on orthopedics and traumatology. Recently, conventional teaching lessons have been replaced by virtual lessons which can be accessed via a Virtual Medical Campus (VMC). Didactic quality and satisfaction are evaluated by the students at the end of every module. Aim of this study was a retrospective analysis to evaluate results with special focus on VMC.

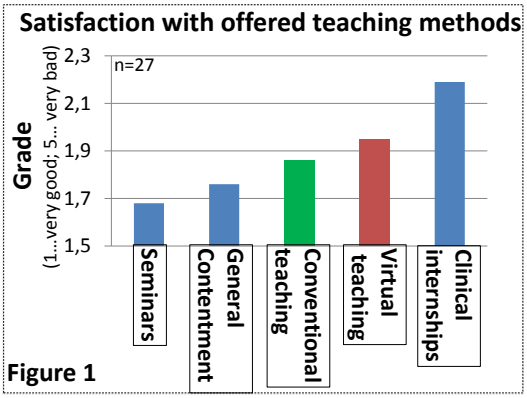

Figure 1

METHODS: At the end of the module, a standardized questionnaire was electronically received by the students. The following parameters were defined: achievement, motivation, general contentment, satisfaction with the virtual medical campus (VMC), contentment with respect to lectures, seminars and internships. The scale was ranging from 1 to 6, whereby 1 had been determined "that's totally true" and 6 "does not apply at all". Evaluation results were retrospectively evaluated and compared.

RESULTS: In total data from 27 students resubmitted their forms. The target parameters were as followed: achievement, motivation and general contentment were at a mean of 1.76 amongst the students. Whilst satisfaction with the VMC was at a mean value of 1.95, contentment with lectures had been rated on a similar level with 1.86. Seminars received the best evaluation with 1.68 and clinical internships the least with 2.19 (Figure 1).

DISCUSSION: Medical students have high interest and good learning outcome on the topic of the study module "Musculoskeletal System". The satisfaction with virtual contents on VMC was on a similar level compared to conventional teaching of contents, suggesting that VMC represents a feasible additional teaching method in this module. Only seminars, where smaller group teaching and hands on teaching is offered, reach an even higher level of student's satisfaction. Quality of clinical internships might mainly depend on teachers' and students' motivation to become active.

Further Aims:

- Evaluation of possible positive motivators of virtual teaching (e.g. permanent availability of presentation an material)
- Inclusion of testing of skill teaching via virtual tutorial videos.
- Inclusion of seminar character (best evaluation results) into other teaching methods.

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Poster 1

Satisfaction of Medical Students with *Conventional* and *Virtual Teaching* by Means of the Study Module "Musculoskeletal System"

Florian Amerstorfer, Lukas Leitner, Magdalena Gilg, Patrick Sadoghi,
Andreas Leithner, Gerhard Bratschitsch

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Methods: At the end of the module, a standardized questionnaire was electronically received by the students. The following parameters were defined: achievement, motivation, general contentment, satisfaction with the virtual medical campus (VMC), contentment with respect to lectures, seminars and internships. The scale was ranging from 1 to 6, whereby 1 had been determined "that's totally true" and 6 "does not apply at all". Evaluation results were retrospectively evaluated and compared.

Results: In total data from 27 students resubmitted their forms. The target parameters were as followed: achievement, motivation and general contentment were at a mean of 1.76 amongst the students. Whilst satisfaction with the VMC was at a mean value of 1.95, contentment with lectures had been rated on a similar level with 1.86. Seminars received the best evaluation with 1.68 and clinical internships the least with 2.19.

Discussion: Medical students have high interest and good learning outcome on the topic of the study module "Musculoskeletal System". The satisfaction with virtual contents on VMC was on a similar level compared to conventional teaching of contents, suggesting that VMC represents a feasible additional teaching method in this module. Only seminars, where smaller group teaching and hands on teaching is offered, reach an even higher level of student's satisfaction. Quality of clinical internships might mainly depend on teachers' and students' motivation to become active.

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"IN-CAFÉ for Students"

Interdisciplinary Workshop of the Departments Health Sciences and Nursing Sciences at the University of Applied Sciences 'FH Campus Wien'

Authors: Eder A., Ertelt-Bach V., Schume C.
Members of the interdisciplinary working group: Bauer-Rupprecht S., Eder A., Ertelt-Bach V, Hauss S., Huber A., Richter S., Riess Ch,, Rohnke G., Schume C., Schweiger S., Visontai S.

Background

"Today, interdisciplinary education is a topic of important interest in regard to challenges our health system currently faces." [1]

„IN-CAFÉ" is a workshop series created especially for the FH Campus Wien. „IN" stands for „integrated, informed, interactive". Its main feature is the focus on interprofessional work and interdisciplinary thinking. The aim is the innovative expansion of competence to increase professional requirements, new projects and cooperation. "IN-CAFÉ" is offered optionally for teachers, internship instructors, alumni and students of the FH Campus Wien.

Since 2015 an "IN-CAFÈ for students" has been held annually. This workshop is the result of an interdisciplinary working group of the Departments of Health Sciences and Nursing Sciences.

Fifth semester students of all bachelor programs of the departments of Health Sciences and Nursing Sciences may participate, i.e. Biomedical Science, Dietetics, Occupational Therapy, Healthcare and Nursing, Midwifery, Speech Therapy - Phoniatrics - Audiology, Orthoptics, Physiotherapy and Radiological Technology.

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Didactic Approach

By bringing the disciplines together and working on a question together, learners develop sophisticated cognitive skills. At the same time, metacognition is strengthened and a reflexive approach to disciplinary origin, its possibilities and limitations, is opened up. [2]

The aim of the one-day workshop comprising nine teaching units is to identify one's own professional role in interdisciplinary cooperation through professional exchange with students from other degree programs. In addition, the workshop focuses on getting to know the competence profiles of other professional groups as well as recognizing differences and similarities, and promoting and inhibiting factors in interdisciplinary teamwork.

The students work in small groups of 8 to 10 people each. They receive brief information about the medical history of a particular patient, exchange their own core competencies, define interfaces between the individual professional groups and jointly develop an interdisciplinary question or problem, which they subsequently process. The students are supported by the lecturers of the participating degree programs. The results of the group work will be presented and discussed at the end of the workshop using posters, role-playing games, short videos, elevator pitch or storytelling.

The case histories relate to the clinical areas of neurology (e.g. stroke, Parkinson's disease) and neuropediatrics (e.g. traumatic brain injury), traumatology (e.g. sports injury), obstetrics, and health promotion.

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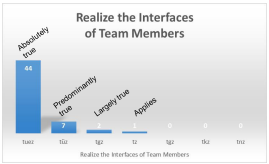
Outcomes

Due to the positive feedback, this interdisciplinary workshop has been conducted every year (4 times) and is now counted as a credit towards the curricula of several degree programs. In some cases, students and lecturers of the degree programs Social Work and Elementary Education have also been involved.

2018 a questionnaire survey concerning the gain of competences was conducted for the first time. The aim of the questionnaire was to gather information on how the attending students estimate their learning outcomes. These items were rated particularly high: "patient-centered cooperation", "promotion of shared decision-making among team members" and "awareness of one's own professional role".

„We found out, that all professional groups can contribute to the goal." [3]



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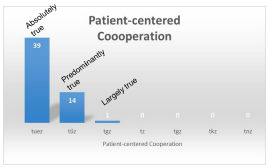

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References:
1 Thonnes, A. Bühnemann, C.& Lorenz, F. (2018). An interdisciplinary project week demonstrating learning levels, organization and an evaluation of interdisciplinary formats for student of health professions. *Pädagogik der Gesundheitsberufe,* 5(3), 198-204.
2 Ivanitskaya, L., Clark, D., Montgomery, G.& Primeau, R. (2002). Interdisciplinary Learning: Process and Outcomes. *Innovative Higher Education,* 27(2), 95-111
3 Statement of a participanting student

Poster 2

“IN-CAFÉ for Students”
Interdisciplinary Workshop of the Departments Health Sciences and Nursing Sciences at the University of Applied Sciences ‘FH Campus Wien’

Angelika Eder, Veronika Ertelt-Bach, Claudia Schume
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Since autumn 2015 an annual interdisciplinary workshop for students at FH Campus Wien has been held. Fifth semester students of all bachelor programs of the departments of Health Sciences and Nursing Sciences may participate, i.e. Biomedical Science, Dietetics, Occupational Therapy, Healthcare and Nursing, Midwifery, Logopedics - Phoniatrics - Audiology, Orthoptics, Physiotherapy and Radiological Technology.

The aim of the one-day workshop is to identify one‘s own professional role in interdisciplinary cooperation through professional exchange with students from other degree programs. In addition, the workshop focuses on getting to know the competence profiles of other professional groups as well as recognizing differences and similarities, and promoting and inhibiting factors in interdisciplinary teamwork.

This year (Jan – Feb 2019) these objectives will be evaluated for the first time.
The students work in small groups of 8 people each (2 students each from 4 different degree programs). They receive brief information about the medical history of a particular patient, exchange their own core competencies, define interfaces between the individual professional groups and jointly develop an interdisciplinary question or problem, which they subsequently process. The students are supported by the lecturers of the participating degree programs. The results of the group work will be presented and discussed at the end of the workshop using posters, role-playing games, short videos, Power Point or other creative tools, such as elevator pitch.
The case histories relate to the clinical areas of neurology (e.g. stroke, Parkinson‘s disease) and neuropediatrics (e.g. traumatic brain injury), traumatology (e.g. sports injury), obstetrics, and health promotion.

Due to the positive feedback, this interdisciplinary workshop has been conducted every year (4 times) and is now counted as a credit towards the curricula of several degree programs. In some cases, students and lecturers of the degree programs Social Work and Elementary Education have also been involved.

This workshop is the result of an interdisciplinary working group of the Departments of Health Sciences and Nursing Sciences.

Future prospects of PhD students

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INTRODUCTION

In our study we wanted to evaluate the state, life and satisfaction of the PhD students at the University of Szeged. PhD students are the next generation of scientists and we believe that their motivation and prospects are crucial and should be improved and supported.

METHODS AND PARTICIPANTS

We surveyed 50 PhD students working in life sciences at the University of Szeged. Half of the students graduated at the Faculty of Science and Informatics (52%), two smaller groups at the Faculty of Medicine (24%) and the Faculty of Pharmacy (20%), and 2 students from other universities. The survey comprised of 20 questions (simple and multiple choice) concerning three main topics: how PhD students are involved in education, how satisfied they are with the financial and professional support and how they can maintain the balance between work and private life. For statistical analysis we used descriptive statistics. 35 women and 15 men answered the questions, the average age of the women was 28,94 ± 0,73, and 29,23 ± 0,80 age of the men.

RESULTS

I. Opportunities during PhD

80% of students chose PhD because they are interested in science, whereas 42% was motivated by career development. Only 6% participate in doctorate programme for other reasons, such as scholarship, to seek after delayed entry into the workforce and private life decision (Fig.1.).

Fig. 1. Participation in doctorate programme

80% of the respondents have the opportunity to attend national and international conferences and 44% to participate in foreign collaborations. Nearly 20% of students do not have the opportunity but would like to participate and try themselves in foreign research institutions (Fig.2.).

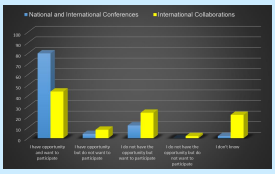

Fig. 2. Participation in national and international conferences and collaborations

The professional support was considered good, but nearly 30% of respondent would require more help in their projects. The financial support was assessed as moderate. The students need more support to achieve their goals, travel to conferences, workshops (Fig3A and B).

A

B

Fig. 3.. Satisfaction with professional support (A) and financial support (B)

II. Opportunities after PhD

Majority of the students want to join to education system and stay and teach at the University after finishing their doctorate studies. Merely 30% want to find a position in other fields such as healthcare, pharmaceutical industry and commercial firm. Our survey is also concerned with the factors influencing the career choice. 70% of the students considered the working atmosphere, project theme and the payment essential, half of the respondents appraised the necessity to build a career, research opportunities abroad and flexible working time (Fig. 4A-C).

A B C

Fig. 4 .Opportunities for staying (A) and teaching (B) at the University and the factors of working choice (C)

III. Balance between PhD and private life

The other main issue of our study was to investigate the compatibility of the PhD programme and family/private life. Merely 20% of the students are married and the majority of them have at least one child (Fig.5.).

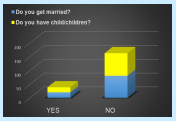

Fig. 5. Marital status of the respondents

Half of the respondents think there could be a balance between working and private / family life, although this would require family-friendly work environment. They highlighted the lack of local nurseries, kindergartens to be the most critical. The teleworking, financial support were considered the most suitable solutions (Fig. 6A-and B).

A B

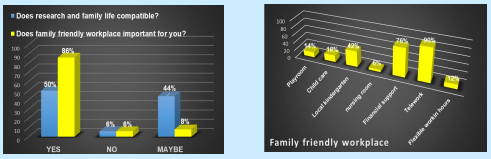

Fig. 6. The balance between PhD and family life (A) and it's condition (B)

IV. Discrimination

One of the most important part was about the discrimination in our survey, 12% of the students have been discriminated in certain ways because of professional jealousy, private life issues and refusing working overtime.

CONCLUSION

In conclusion we can say that the professional support and the opportunities for participating in conferences and foreign collaborations are working well in our university. According to the respondents their involvement in education, financial support and family-friendly atmosphere should be improved.

SUPPORTED BY

This study was supported by the National Research, Development and Innovation Office, by the Ministry of Human Capacities (EFOP 3.6.2-16-2017-00006)

Poster 3

Future prospects of PhD students

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Introduction: In our study we wanted to evaluate the state, life and satisfaction of PhD students at the University in Szeged. PhD students are the next scientist generation and we believe that their state, motivation and prospects are important issues that should be improved and supported in order to becoming healthy and motivated scientists and lecturers.

Methods and participants: We surveyed 50 PhD students working in life sciences at University of Szeged. Half of the students graduated at Faculty of Science and Informatics (52%), two smaller groups at Faculty of Medicine (24%) and Faculty of Pharmacy (20%), and 2 students from other Universities. The survey comprised of 20 questions (simple and multiple choice) concerning three main topics: how PhD students are involved in the education, how satisfied they are with the financial and professional support and how they can maintain the balance between working and private life. For statistical analysis we used descriptive statistics. 35 women and 15 men answered the questions, the average age of women was 28,94 ± 0.73, and 29.23 ±0.80 of the men.

Results: 80% of students chose PhD because they are interested in science whereas 42% was motivated by carrier construction. Most of them answered that they want and also have opportunity to participate in conferences, summer schools or workshops. Only 12% said they have no opportunities. 44% of students have the possibility to work with collaborators from foreign countries. The professional support was considered good, but the financial support was assessed as moderate by the students. Majority of the PhD students want to join to the education system and stay and teach at the University after finishing the PhD Training Programme. The rest of them want to find job in other fields such as medical care, pharmaceutical industry and commercial firm. The other main issue of our study was to investigate the compatibility of the PhD and the family/ private life. Merely, 20% of the students are married and almost all of them have at least one child. Half of the respondents think that working get on with family life, but they would require family-friendly workplaces. The teleworking, financial support and local nursery and kindergarten were considered the most suitable solutions. Our last question was about the discrimination in our survey. Nearly, 15% of the students have been discriminated in certain ways because of their opinion-forming, private life problems and refusing working overtime.

Conclusion: As a conclusion we can say that professional support and the opportunities for participating in conferences and foreign collaborations are working well in our university. According to the respondents financial support, their involvement in education and family-friendly atmosphere should be improved.

This study was supported by the National Research, Development and Innovation Office, by the Ministry of Human Capacities (EFOP 3.6.2-16-2017-00006).

"It gave me motivation to continue the University, and may influence my profession of choice" The interprofessional education of premature neonatal situations

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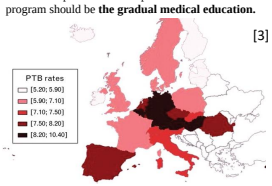
Background

- **In Hungary the preterm birth rate is among the highest in EU [1,2].**
- To change this unfavourable data would need widespread collaboration.
- One of the possible corner points of the interventional program should be **the gradual medical education.**

[3]



Goal

- to **develop an educational program** where the importance of the team work and the preterm birth problem is highlighted
- to **sensitize the medical students**
- to **measure the need and the importance**

Results

- Our preconception about the importance of this interprofessional session was supported by the positive narratives of the students.
- The feedbacks highlight the importance of communication (91%) within the health care system, the significance of emotional learning and empathic understanding (85%). Many students also mentioned that they really appreciated the honest attitude (62%) and communication of the affected mothers.
- Besides, we got some feedbacks regarding the importance of the team work, and that these experts became a model figure for them and might help to choose their profession (31%).

Conclusion

- We feel encouraged to continue our program
- To sensitize our students it is helpful to involve the patients and relatives
- Round table sessions are useful to present the essence and importance of the interprofessional work

Future plans

- Planning a complex program in which our students can practise both the possible interventions and the communicational situations
- Improving the skills of medical students the vertical integration and the portfolio evaluation method would be recommended. [5]

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- As a pilot study during our ongoing thanatology course, we implanted a complex interprofessional educational session [4] focusing on preterm complications.

Thanatology Course

1) Lectures: on loss, grief, bereavement in medicine	2) Round-table sessions with experts

- During the previous year one hundred and twenty students has participated in the thanatology program
- Qualitative evaluation: essay
- 35 (29%) feedbacks focused specifically on these preterm round-table **sessions**
- **Three independent raters classified the feedbacks**

Graphic: András Simon

COMMUNICATION

"[…]It was great to hear, how much the positive attitude and the empathy of the doctors and nurses help them (mothers)" /5

"During the course I was touched by the lecture when the mothers were invited. It was revealing and emphasized the importance of communication. One of the mothers shared her experience about when the labour was started much earlier, and she though she would lose her baby. Finally she could take home her premature "kitten". I remember she asked us to give the mother enough time for discussion in similar future situations. It is very important to handle these situations with care and great empathy and to communicate clearly and understandably. The words and phrases we use in these situations might have lifelong consequences. Opportunity is in our hands to help them work through the trauma" /18

HONEST ATTITUDE

"My greatest appreciation is for those mothers participating in the perinatal round table lecture. They were brave to stay at the podium in front of the young and strange audiece, and they could talk to us honestly, sometimes even overcame by emotions" /11

"For me the lectures on perinatal loss were the most interesting, where the mothers shared their experiences honestly and openly." …. I think we would benefit from meeting more people- patients, relatives and also professionals- who would share their experiences with us." /23

EMPATHY

"[…]this course helped me to put myself in the shoes of the relatives and helpers. So I think these sessions developed my empathy skills a lot." /9

"The most significant lecture was the one when the 4 mothers came, and told us their stories. Some were really shocking, but that helped me a lot to accept death. Before the course the fading of life was such a taboo for me, I did not feel that I could talk about it to anyone, anytime and I did change the channel when the news were coming. But now I dare to talk about it."/13

PROFESSION / MODEL / TEAM WORK

"It gave me motivation to continue the University, and may influence my chosen profession. Up until now I have rejected the idea to become a gynaecologist, but now I am thinking about it. I feel I want to help to these mothers. Learning from the mistakes in medical communication they mentioned, I realized I must allow enough time for my patients and I want to enhance my skills to be a better doctor." /6

"I will never forget when the 4 mothers arrived to "keep the lecture". I think I can speak on behalf of others that never in our life were we in such silence. […] That was really shocking emotionally, and I had to realize that soon as a doctor I would face cases like this day by day" /11

"I liked it very much that it was possible to make cooperation possible within the health care system , where different professionals (not only physicians from different fields) could work together. The perspectives of the physicians, nurses, psychologists were quite different and that's why I find the real team work very important"/14

Poster 4

"It gave me motivation to continue the University, and may influence my chosen profession." The interprofessional education of premature neonal situations

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In Hungary the preterm birth rate is almost double the average of the EU. To change this unfavourable data would need widespread collaboration. One of the possible corner points of the interventional program should be the gradual medical education. We would like to present our educational developmental program.

Goal: to measure the need and the importance of such a complex program in our university within a pilot study.

As a pilot study during our ongoing thanatology course, we implanted a complex interprofessional educational session focusing on preterm complications. The team contains physicians, nurses, health visitors, psychologists, and early developmental professionals. All of them were involved to shape the perspectives and skills of the medical students of this elective course. Besides the interprofessional specialists the highlight of the program was another session in which the students could meet with some volunteer mothers of premature babies who would share their experiences and stories.

During the previous year 120 students has participated in this program. We collected their feedbacks and evaluations through an essay about the course. Out of these thirty-five feedbacks focused on these preterm round-table sessions. Our preconception about the importance of this interprofessional session was supported by the positive narratives of the students. The feedbacks highlight the importance of communication within the health care system, the significance of emotional learning and empathic understanding. Many students also mentioned that they really appreciated the honest attitude and communication of the affected mothers.

Besides, we got some feedbacks regarding the importance of the team work, and that these experts became a model figure for them and might help to choose their profession. Based on the results of this qualitative pilot study, we feel encouraged to continue our program. With support from the University, we are planning a complex program to improve the skills of the students with up-to-date simulation methods, to practise both the possible interventions and the communicational situations. For later evaluation we would suggest the portfolio and the video analysed feedback methods.

Challenges of Thesis Supervision in Medicine: How Candidates grade Organization and Didactics and what should be improved.

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[2] Department of Internal Medicine; Medical University of Graz, Austria

INTRODUCTION: Writing their diploma thesis is the major and final step of medical students when achieving their academic degree. Thesis quality and acquired experiences are highly dependent on their supervision. In many cases writing their thesis presents the students last active contribution to medical science. The experience during this process might even influence motivation for continuation of a scientific career. Our study is aimed at identifying the challenges and annoyances in thesis supervision from students' point of view.

METHODS: 15 students (44% female) performing their diploma thesis at our Department of Orthopedics and Trauma received an anonymous questionnaire with 5 major categories "supervisory knowledge and skills", "atmosphere", "didactic quality", "gain of knowledge" and "monitoring and evaluation" divided in 28 subcategories concerning their experience with their supervision. Free formulation of feedback was also possible in this questionnaire. Data was evaluated calculating the average grade (Grading from 1-5 possible) for all subcategories and qualitative summary of formulated feedback.

RESULTS: Two thirds of students are writing their diploma thesis in their preferred specialty, 40% want to become scientifically active in this field. 72% acquired their thesis projects via direct interaction with their later supervisor (alternative: public free project database). 67% hope that their thesis will open the doors for a later specialization, which correlates with their interest in the field. Whilst satisfaction with the supervisors in general (Grade 1-5: 1.3 ± 0.4) and on a similar level their expert status and technical support was high amongst the students, time spent for supervision was graded worst amongst all subcategories (Grade 2.1 ± 1.1). Most common number of Interaction between student and supervisor was 1-2 times a week. Significant improvement possibilities were seen in preparation for their work on the diploma thesis by med school (Grade 2.9 ± 1.2) especially concerning specific courses (free feedback: better preparation in statistics). More time and feedback from supervisors was desired, increased availability per email was not demanded (Figure 1).

DISCUSSION: Students often generate their thesis project via direct interaction with a supervisor in a desired specialty. This may result in high satisfaction with the clinical and scientific skills of their supervisor. Improved training of students' scientific skills prior starting a thesis project and increased time capacity for discussion and feedback could improve satisfaction, and increase motivation for continuation of scientific work.

Which factor should be improved during thesis supervison

(**1**…no improval needed to **5**… improval urgently needed)

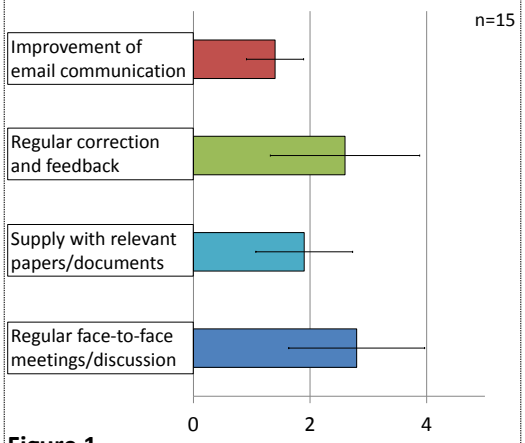

Figure 1

Take home massage:

- Students mainly choose their diploma thesis in the field of their preferred speciality.
- They are often highly satisfied by their supervisors clinical and scientific skills.
- Their most important desire is more time and feedback from their supervisor.

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Poster 5

Challenges of Thesis Supervision in Medicine: How Candidates grade Organization and Didactics and what should be improved

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Logopädie goes interprofessional:

Interprofessionelle Kompetenz im interdisziplinären Kontext - Ein innovativer Lernaktivitätencluster zur Förderung von Querschnittskompetenzen

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Beschreibung

Die WHO erkennt interprofessionelle Zusammenarbeit als eine innovative Strategie zur Minderung der globalen Gesundheitskrise (WHO, 2010)[1]. Im National Interprofessional Competency Framework (2010) werden als Teilkompetenzen „interprofessioneller Kompetenz" Rollenklarheit, patienten*innen- und gemeindezentrierte Versorgung, interprofessionelle Kommunikation, Teamarbeit, kooperative Führungseigenschaften und interprofessionelle Konfliktfähigkeit beschrieben (CIHC, 2010)[2]. Diese wurden als Basis für die konzeptionelle didaktische Planung für den Lernaktivitätencluster mit interprofessionellem Focus herangezogen.

Methoden

Im vorliegenden lehrveranstaltungsübergreifenden Konzept werden Lernaktivitäten zur Förderung von Querschnittskompetenzen in drei Dimensionen vorgestellt. Diese finden kompetenzorientiert analog zu Bausteinen des logopädischen Prozesses (2. Dimension) statt und begleiten kontinuierlich intra- und extracurricular den Erwerb interprofessioneller Kompetenz (3. Dimension) in Verzahnung zum Erwerb logopädisch-methodischer Kernkompetenz (1. Dimension) durch die gesamte Ausbildung von sechs Semestern. Die Lernzielebene fokussiert den logopädisch-methodischen Kompetenzerwerb gemäß der Lernzielstufen nach der Bloom'schen Taxonomie und verknüpft diesen mit dem Erwerb interprofessioneller Teilkompetenzen und beruflicher Handlungskompetenz.

Lernaktivität und Lehrmethode	Logopädischer Prozess	Lernziel und Bereich der interprofessionellen Kompetenz
Educational Movie Morning (ILV) Interprofessionelle Video- bzw. Filmanalyse TN: Ergo, Logo, Physio Curriculare Lage: 1. Semester	Logopädische Begutachtung	Beobachten, analysieren, beschreiben, erklären, Fragen stellen, den eigenen Standpunkt vertreten Rollenklarheit/Interprofessionelle Kommunikation
Diagnostik- Marktplatz im Bereich der Pädiatrie (ILV) Wissensmarkt zu interprofessioneller Diagnostik TN: Ergo, Logo Curriculare Lage: 3. Semester	Logopädische Diagnose	Erklären, Fragen stellen, gesammelte Informationen einordnen, andere Professionen wertschätzen Rollenklarheit/Interprofessionelle Kommunikation
Nahtstellen im logopädischen Kontext (ILV) Interprofessionelle Fallanalyse mit Experten*inneninterviews TN: Orthoptik, Ergo, Physio, Diät, Hebammen, GuK, Logo Curriculare Lage: 5. Semester	Behandlungsziel Therapie(plan)	Erklären, gesammelte Informationen einordnen und analysieren, Abläufe entwickeln, vermitteln und koordinieren vor dem Hintergrund komplexer interprofessioneller Fragestellungen, den eigenen Standpunkt vertreten, andere Professionen wertschätzen Rollenklarheit/ patienten*innenzentrierte Versorgung/ Teamarbeit/ interprofessionelle Konfliktfähigkeit
Vertiefender Schwerpunkt (Wahlbereich) Interprofessionelles Praktikum TN: Logo im multiprofessionellen Bereich Curriculare Lage: 5. Semester	Durchführung des gesamten logopädischen Prozesses inkl. Phasenübergreifender Prozesse	Die oben genannten Lernziele führen zum praktischen Anwenden und Umsetzen des logopädischen Prozesses im interdisziplinären Kontext im Praktikum Rollenklarheit/patienten*innenzentrierte Versorgung/ Teamarbeit/ interprofessionelle Kommunikation/ interprofessionelle Konfliktfähigkeit
Tagesworkshop In-Café (Außercurriculares Angebot) Interprofessionelles Casemanagement (Problem based Learning) TN: Dept. Gesundheitswissenschaften u. Soziales Curriculare Lage: 5. Semester		Eigenen Standpunkt vertreten, Grenzen und Gemeinsamkeiten kennen, Hindernisse und fördernde Faktoren identifizieren, andere Professionen wertschätzen Rollenklarheit/patienten*innenzentrierte Versorgung/ Teamarbeit/ interprofessionelle Kommunikation/kooperative Führungseigenschaften /interprofessionelle Konfliktfähigkeit

Nachhaltige Auswirkungen

Die curriculare Förderung von Rollenklarheit, interprofessioneller Kommunikation und Teamarbeit entwickelt ein frühzeitiges interprofessionelles Selbstverständnis und ein übergreifendes eigenständig-kooperatives Arbeiten auf Augenhöhe. Der Einsatz didaktischer Methodenvielfalt in der Fallarbeit unterstützt die Entwicklung interprofessioneller patienten*innenzentrierter Problemlösekompetenz.

Erkenntnisse und Herausforderungen

Die didaktische Verzahnung der 3 Kompetenzdimensionen gewährleistet eine Verknüpfung von Kern- und Querschnittskompetenzen mit interprofessioneller Kompetenz zur Integration in die berufsspezifische Handlungskompetenz.
Die organisatorische Aufbereitung der Lernaktivitäten stellt hinsichtlich der Koordination für Stundenplan, Raumverteilung und personeller Ressourcen eine Herausforderung dar.

„Interprofessional Education occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care" (CAIPE 2002)[3]

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Poster 6

Logopädie goes interprofessional:
Interprofessionelle Kompetenz im interdisziplinären Kontext -
Ein innovativer Lernaktivitätencluster zur Förderung von Querschnittskompetenzen

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Im vorliegenden lehrveranstaltungsübergreifenden Konzept werden Lernaktivitäten zur Förderung von Querschnittskompetenzen in drei Dimensionen vorgestellt. Diese finden kompetenzorientiert analog zu Bausteinen des logopädischen Prozesses (2. Dimension) statt und begleiten kontinuierlich inner- und extracurricular den Erwerb interprofessioneller Kompetenz (3. Dimension) in Verzahnung zum Erwerb logopädisch-methodischer Kernkompetenz (1. Dimension) durch die gesamte Ausbildung von sechs Semestern.

Methoden:
Educational Movie Morning (Curriculare Lage: erstes Semester):
In Zusammenarbeit mit Lehrenden der Logopädie, Ergo- und Physiotherapie findet ein „Educational Movie Morning“ als interdisziplinäre Lernaktivität mit der Lehrmethode „Filmanalyse” statt. Nach einer theoretischen Einführung zum Thema „Interprofessioneller Blick” auf die kindliche Entwicklung wird der Kinofilm „Babies“ angesehen. Dabei bearbeiten Studierende Fragestellungen zur frühkindlichen Entwicklung, analysieren die Ergebnisse der Beobachtungen in interprofessionellen Teams und diskutieren diese im Plenum.

Diagnostik im Bereich der Pädiatrie- Marktplatz (Curriculare Lage: drittes Semester):
Bei der Lernaktivität „Diagnostik-Marktplatz im Bereich der Pädiatrie” stellen Studierende der Ergotherapie und Logopädie einander in Teams unterschiedliche Diagnostikmaterialien aus dem eigenen Fachbereich vor. Jedes Team betreut dabei einen der „Marktstände” nach der zu Grunde liegenden hochschuldidaktischen aktivierenden Methode „Infomarkt des Wissens”. Dabei werden thematische Unterschiede, Gemeinsamkeiten und mögliche Synergieeffekte entdeckt.

Nahtstellen im logopädischen Kontext (Curriculare Lage: fünftes Semester):
Im Rahmen der Lehrveranstaltung „Nahtstellen im logopädischen Kontext (ILV)" werden nach einer Einführung in „Interprofessionalität und Interdisziplinarität" fallgruppenspezifische Teams gebildet. Diese bearbeiten einen Paper Case, identifizieren relevante Nahtstellen und legen interprofessionelle Zielstellungen zur Behandlungsplanung fest. Im Anschluss an eine Literaturrecherche werden nach Erstellung eines Kurzinterviewleitfadens Gespräche mit Experten/Expertinnen der relevanten Professionen zur Ableitung interprofessioneller Ziel- und Aufgabenstellungen geführt. Abschließend erfolgt die Präsentation, Diskussion und Reflexion der Ergebnisse mit den interviewten Experten/Expertinnen im Plenum.

Vertiefender Schwerpunkt – Praktikum (Curriculare Lage: fünftes Semester):
In diesem Praktikum verbinden Studierende ihre bereits erworbenen logopädisch-methodischen Kompetenzen mit den interprofessionellen Kompetenzen in der praktischen Anwendung. Den Schwerpunkt dieses Praktikums wählen die Studierenden aus den Bereichen: Spezieller klinischer Bereich, multiprofessioneller Bereich sowie Gesundheitsförderung und Prävention. Dabei werden das Nahstellenmanagement im interdisziplinären Kontext und die Arbeit in interprofessionellen Netzwerken im Besonderen beachtet und im angeschlossenen Begleitseminar multidimensional reflektiert.

IN-Café – ein interdisziplinärer Workshop (Außercurriculare Lage: fünftes Semester):
In diesem ganztägigen „Interprofessionelle Lehre-Workshop: IN-Cafe" entwickeln Studierende in interprofessionellen Teams Lösungen für interdisziplinäre Fallvignetten. Aus 10 entsendenden Studiengängen werden nach den 7 Schritten des „Problem Based Learning" zugeteilte Papercases bearbeitet, die aktuelle Datenlage recherchiert, kooperative Lösungsansätze entwickelt und im Anschluss präsentiert, diskutiert, reflektiert, verfilmt und den nicht teilnehmenden Studierenden via Moodle zugängig gemacht.

Nachhaltige Auswirkungen
- Die curriculare Förderung von Rollenklarheit, interprofessioneller Kommunikation und Teamarbeit entwickelt ein frühzeitiges interprofessionelles Selbstverständnis und ein übergreifendes eigenständig-kooperatives Arbeiten auf Augenhöhe.

Erkenntnisse bzw. Herausforderungen
- Die didaktische Verzahnung der 3 Kompetenzdimensionen gewährleistet eine Verknüpfung von Kern- und Querschnittskompetenzen mit interprofessioneller Kompetenz zur Integration in die berufsspezifische Handlungskompetenz.
- Die organisatorische Aufbereitung der Lernaktivitäten stellt hinsichtlich der Koordination für Stundenplan, Raumverteilung und personeller Ressourcen eine Herausforderung dar.

„Interprofessional Education occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care" (CAIPE 2002)[3]

Literatur:

1 WHO (2010): Framework for Action on Interprofessional Education & Collaborative Practice (WHO/HRH/HPN/10.3). Geneva: World Health Organization.
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Maastricht University Leading in Learning!

School of Health Professions Education

When teachers meet in interdisciplinary teams: hangouts, distribution centers and melting pots

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Background

Prepare professionals for complex, interdisciplinary health care systems:[1]
- integrated learning approaches
- interdisciplinary teacher collaboration [2]

Team success or failure depends on the level of interaction
→ **Team learning** [3]

Team learning processes variables:
✓ sharing
✓ co-construction
✓ constructive conflict [4]

Research questions

1 How do interdisciplinary teacher team members work together on integrated curricula?

2 How does interdisciplinary teamwork influence the quality of these curricula?

Summary of Methods

Context
- Undergraduate healthcare curricula, Maastricht University (UM)
- Problem-based learning setting with thematic curricula
- Teacher teams with different social, biomedical and medical backgrounds

Methodology
- Mixed-methods study
- Vignettes on team learning

Data collection & analysis
Qualitative:
- Purposive sampling methods
- 17 Semi-structured interviews with teachers
- Iterative process
- Template analysis

Quantitative:
- Institutional student evaluation questionnaires
- Items: course organization, structure, learning effect (scores 1-10) and alignment of lectures with other educational activities (scores 1-5).

Summary of Results

Characteristics of participants
- 4 clinicians, 7 biomedical scientists, 6 social/health scientists
- 8 women, 9 men; average age of 48 years old (31 - 62)

Outcomes

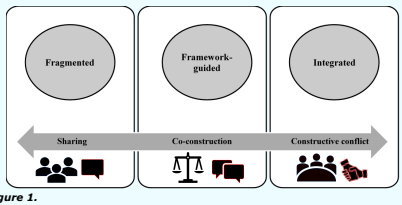

Figure 1.
Conceptual model regarding interdisciplinary team approaches and teacher team learning.

These approaches are characterised by:
a. focus of work
b. feeling of responsibility
c. commitment
d. identity
e. psychological safety
f. boundary setting
g. team learning
h. teacher satisfaction

Table 1. *Students' perceptions of course quality. The different courses are grouped according to the teacher team approaches: fragmented teams (n=2), framework-guided teams (n=4), and integrated teams (n=11).*

Quality indicator[a]	Team approach	Mean	Minimum	Maximum	SD
Organization[b]	Fragmented	6,85	6,5	7,2	0,49
	Framework-guided	6,95	5,9	8,0	1,00
	Integrated	7,50	6,8	8,0	0,36
Structure[b]	Fragmented	6,10	5,8	6,4	0,42
	Framework-guided	6,58	5,6	7,4	0,83
	Integrated	7,16	6,7	7,6	0,36
Learning effect[b]	Fragmented	7,25	7,1	7,4	0,21
	Framework-guided	7,32	6,3	8,3	0,97
	Integrated	7,76	7,1	8,3	0,14
Alignment[c]	Fragmented	3,50	3,4	3,6	0,14
	Framework-guided	3,38	2,6	4,1	0,66
	Integrated	3,86	3,6	4,2	0,21

Discussion and conclusion

Important insights into:
- current practices of interdisciplinary teacher teams
- drivers of teacher team learning behaviour
- which teamwork leads to better quality of education

Limitations:
- single-center study within a problem-based learning setting

Recommendations:
- Interdisciplinary teacher teams benefit from mutual respect, equity and a student-centred vision;

- Achieving integrative team practices requires new faculty development approaches;

Keywords: team learning, interdisciplinary, health care education

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Poster 7

When teachers meet in interdisciplinary teams: hangouts, distribution centers and melting pots

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Introduction: Modern health care systems call for medical doctors who have learned to understand the interdependence of multiple disciplines when working with individual patients. However, teachers' teaching experiences often rely on offering course units strictly organized by distinct disciplines. Little research is conducted on interdisciplinary teachers' team processes in development of integrated health professions education. In management sciences, it is shown that team performance increases with high-level team learning processes, ranging from sharing and co-construction to constructive conflict. We set out to explore team learning processes and outcomes among interdisciplinary teacher teams in the development of integrated health professions education.

Methods: We conducted an exploratory study, using a sequential mixed-methods design. We used maximum variation sampling and conducted 17 vignette-guided, semi-structured interviews with teachers originating from diverse disciplines. These teachers worked in 17 different courses of the integrated, undergraduate health profession programs at Maastricht University. The interview guide, vignettes and template analysis were based on team learning concepts. Sequentially, institutional evaluation data were used to provide a descriptive analysis of students' perspectives on course quality (course organization, quality, learning effect and alignment).

Results: Three interdisciplinary teacher team approaches were identified and characterized by the team learning behavior, focus of work, feeling of responsibility, teachers' commitment, feeling of identity, psychological safety, boundary setting, and teachers' perspectives on both teamwork and the produced course. 1) In fragmented teams, characterized as 'hangouts', teachers worked individually on tasks that they were interested in, leaving their disciplinary mark. 2) Framework-guided teams, functioning like 'distribution centers', aimed to work within the given frameworks and organizational expectations, striving for disciplinary balance. 3) Integrated teacher teams, imaginary 'melting pots', worked interdisciplinary on all topics and put students at the center. Integrated teams reflected high-level team learning processes and were most satisfied with their (team)work. In contrast, fragmented and framework-guided teams mainly

reflected low-level team learning processes. Students evaluated courses of integrated teacher teams highest on all investigated course quality items.

Discussion & conclusions: Our results show that successful interdisciplinary teacher teams are represented by integrated teams with high-level team learning behavior and the best course evaluations. Framework-guided teams showed that a strong task cohesion could work protective in order to cover the intended learning outcomes. Teachers need to get the experience how to exchange knowledge with colleagues from different disciplinary backgrounds, and understand that just sharing tasks among the different disciplines does not result in interdisciplinary, integrated teamwork.

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Maastricht University Leading in Learning!

School of Health Professions Education

Silence for the sake of peace. How speaking up enables interdisciplinary teacher team learning in health professions education

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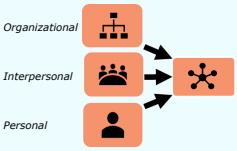
Background

Traditional teaching per discipline [1]

Integrated education [2,3]

Integrated education;
Interdisciplinary teams;
Team learning processes.

Team learning is about building mutual understanding and shared cognition through interaction.[3]



Research questions

1 What individual, team and organizational factors influence interdisciplinary teacher team learning processes?

2. Do teachers perceive these factors to enable or inhibit team learning?

Summary of Methods

Context
- Undergraduate healthcare curricula, Maastricht University
- Problem-based learning setting with thematic curricula
- Teachers with different social and (bio)medical backgrounds

Methodology
- Qualitative study

Data collection & analysis
- Purposive, maximum variation sampling
- Interviews with 17 teachers from 17 courses
- Iterative process
- Template analysis

Summary of Results

Outcomes

Core influencing factors were recognized & categorized under the individual – team – organizational level:

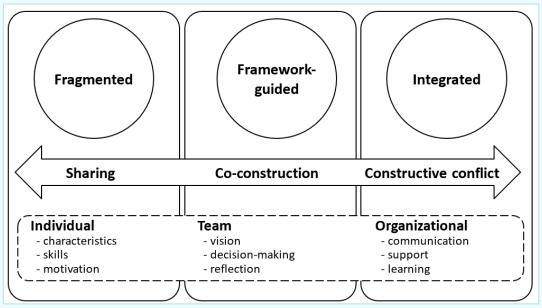


Figure 1.
Conceptual Framework of Interdisciplinary Teacher Team Learning

Discussion and conclusion

Important insights into:
- the complexity of interdisciplinary teacher teamwork;
- importance of learning cultures;
- the role of leadership.

Take-home messages:
- team members should be encouraged to embrace student-centered mindsets;
- team leaders should focus on shared decision-making and a learning culture in which reflection, speaking up, and questioning another are key;
- organizations should invest in continuous communication & support for learning.

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Poster 8

Silence for the sake of peace. How speaking up enables interdisciplinary teacher team learning in health professions education

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Introduction: Integrated education forces teachers from different scientific and clinical disciplines to collaborate. Interdisciplinary teacher teamwork, necessary for the successful development of integrated education, has appeared to be not self-evident.1,2 In management sciences, it is shown that team performance increases with high-level team learning processes, ranging from sharing and co-construction to constructive conflict.3-5 In this study, we aimed to explore teachers' perspectives on what and how individual, team, and organizational factors influence interdisciplinary team learning processes.

Method: We conducted a qualitative exploratory study. A purposive, maximum variation sample of 17 members of different interdisciplinary teacher teams in the Maastricht University undergraduate health profession programs were interviewed. Sensitizing concepts of team learning informed both the interview guide and template analysis. Data were collected iteratively until template development was sufficient.

Results: Core influencing factors were recognized and categorized under the individual, team or organizational level. These factors concerned: 1) individual characteristics, skills and motivation, 2) teams' vision, decision-making and reflection, and 3) organizational communication, support and learning. Team learning opportunities were facilitated by creative, education-minded individuals who worked through shared task understanding and shared decision-making, within cultures allowing constructive reflection, questioning and speaking-up. Continuous organizational communication and support, and attention for a sustainable workforce needs encouragement to overcome possible problems in teamwork.

Conclusions: Interdisciplinary teacher teamwork is essential to address the complexity of health professions education and develop integrated education. Past research has found that multiple barriers inhibit interdisciplinary teamwork. This study however shows barriers and some of the ways that teams can do to overcome them, alongside enablers related to interdisciplinary teamwork. If health professions education aims to change its traditional, mono-disciplinary education and facilitate successful interdisciplinary teams, it should focus on the creation of learning cultures in which people

routinely reflect upon team processes and dare to speak-up. Team leaders could play a central role here. The obtained knowledge can be used to evaluate and improve current teacher teams and to facilitate new collaborations. Although the barriers traditionally built between disciplines are high, they certainly are not insurmountable.

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University of Applied Sciences for Health Professions Upper Austria

KID'S UNIVERSITY – COOKING EXPERIENCE

Johanna Picker, Karin Lettner | University of Applied Sciences for Health Professions Upper Austria

The Childhood Obesity Surveillance Initiative has shown a prevalence of overweight and obesity up to 30% among Austria's children aged 8-9 years. Due to Austria's nutritional report, kids consume too much calories and saturated fat but too less fibre and fat-soluble vitamins. These facts lead to a risk for metabolic syndrome and other diseases, therefore it's important to educate kids in nutrition. Occupational therapy aims to support children in their independence in everyday life. This also includes supporting motor demands and planning requirements that are needed when cooking.

An interprofessional cooking-workshop has been offered to kids (age 7-9 years) by the departments of Occupational Therapy and Dietetics of the University of Applied Sciences for Health Professions Upper Austria. The children learned about nutrition and cooking playfully while they were supported by Dietetics and Occupational Therapy students. They had the chance to experience how to prepare a pizza dough, how to peel, cut and season diverse foods and how to use different kitchen utensils and also to interact in a social group. The recipes were developed specifically for children and fulfilled their nutritional requirements. The Occupational Therapy students supported the kids in enabling them to cut and peel food and in organizing themselves while cooking.

Some children already had previous knowledge, but a few seemed to have problems to identify certain foods or kitchen items. In this case Dietetic students explained foods and how to prepare them. Occupational Therapy students assisted when the children were in need of support concerning motor demands and concerning cooking activities themselves. The whole group enjoyed the workshop and nearly all children tasted the different dishes.

The project is beneficial for students to develop their interdisciplinary skills and to learn how to assist children. Children are able to acquire social competences and expand their nutritional knowledge and motor and planning skills. One point of discussion is if there is a sustainable effect if such events are just offered once a year and if there is a need for such workshops on a regular basis.

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Poster 9

Kid's University – cooking experience

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The Childhood Obesity Surveillance Initiative has shown a prevalence of overweight and obesity up to 30% among Austria's children aged 8-9 years. Due to Austria's nutritional report, kids consume too much energy and saturated fat but too less fibre and fat-soluble vitamins. These facts lead to a risk for metabolic syndrome and other diseases, therefore it's important to educate kids in nutrition. Occupational therapy aims to support children in their independence in everyday life. This also includes supporting the motor requirements that are needed when cooking.

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Some children already had previous knowledge, but a few seemed to have problems to identify certain foods or kitchen items, maybe it was their first-time cooking. In this case Dietetic students explained foods and how to prepare them. Occupational Therapy students assisted when the children were in need of support concerning motor demands. The whole group enjoyed the workshop and all children tasted the different dishes.

The project is beneficial for students to develop their interdisciplinary skills and to learn how to assist children. Children are able to acquire social competence and expand their nutritional knowledge and motor skills. One point of discussion is if there is a sustainable effect if such events are just offered once and if there is a need for such workshops on a regular basis.

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(accessed 22.03.2019)

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SOFTVETS

Pan-European soft skills curriculum for undergraduate veterinary education - "SOFTVETS"

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Introduction

Challenges for veterinary students to

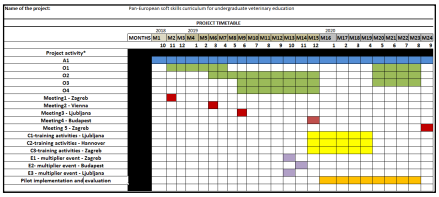
- cope with challenges by the ever changing world
- deal with the enormous strain the profession puts on them

Goals of project www.softvets.eu to

- create a framework to prepare veterinary students for real-life challenges in their future working environment
- produce an ideal version of a life skills curriculum:
  - applicable in veterinary higher education throughout Europe
  - three competence areas: communication, entrepreneurship and digital skills

Methods

1. Development of a set of recommendations of life competences (O1)
2. Development of a curriculum (O2)
3. Development of a training concept for education of teachers (03)
4. Pilot implementation of selected modules at three partners' institutions and evaluation (04)



The intellectual outcomes are developed in coordination with educators, students' association (IVSA), professional associations of veterinarians and an accreditation authority for veterinary education establishments within Europe (EAEVE) to make sure they are feasible and respond correctly to the needs of both students and labor market.

Results

- First project phase "Development of a set of recommendations of life competences (O1)" is finished
- Recommendations for competences of all three areas exist
  - Communication Competences (10 competences)
  - Entrepreneurship Competences (9 competences)
  - Digital Competences (8 competences)

Competence Area	Number of competence	Long name of Competence	Short name of Competence	Aspect	Competence Level: Students at the end of SOFTVETS Training	Competence Level: Students at the end of their undergraduate veterinary study
Communication Competence	C1	Use non-verbal and para-verbal communication principles within veterinary profession deliberately	Non-verbal communication	Cognitive	Advanced	Advanced
				Practical	Advanced	Advanced
	C2	Show empathy in veterinary profession situations (attune into, understand, and relate to client's perspective and express empathic concern)	Empathy	Cognitive	Intermediate	Advanced
				Practical	Intermediate	Intermediate
	C3	Reflect own communication behavior, skills and limitations in veterinary profession as well as communication situations in general	Reflection	Cognitive	Advanced	Advanced
				Practical	Intermediate	Intermediate
	C4	Actively regulate own's emotion, behaviour and cognition in veterinary profession as well as in stressful communication situations	Self-regulation and self-care	Cognitive	Foundation	Foundation
				Practical	Foundation	Foundation
	C5	Check and ensure accurate understanding by active listening (receiving, of sending, and assigning meaning) and react accordingly in veterinary profession	Active listening	Cognitive	Advanced	Advanced
				Practical	Advanced	Advanced
	C6	Communicate veterinary profession topics clearly and in a structured way with clients (gathering and giving information, consultation)	Structured communication	Cognitive	Advanced	Advanced
				Practical	Intermediate	Intermediate
	C7	Recognise sensitive topics in veterinary profession and communicate appropriately in difficult or challenging situations	Difficult interactions	Cognitive	Intermediate	Intermediate
				Practical	Foundation	Foundation
	C8	Communicate veterinary profession topics clearly and appropriately within an interprofessional and/or intercultural team	Communication in teams	Cognitive	Foundation	Intermediate
				Practical	Foundation	Foundation
	C9	Communicate veterinary profession topics clearly and appropriately with veterinarians as well as external stakeholders (e.g. professional colleagues, responsible authorities)	Networking and communication with stakeholders	Cognitive	Foundation	Foundation
				Practical	Foundation	Foundation
	C10	Communicate veterinary profession topics effectively and using appropriate language to the public	Public communication	Cognitive	Foundation	Foundation
				Practical	Foundation	Foundation

Discussion & Conclusion

- project promotes the standardized teaching of life skills in veterinary undergraduate studies
- life skills are not acquired as a "collateral effect" of teaching basic sciences or clinical subjects
- formal teaching of life skills will prepare students with Day One Competencies for veterinary profession
- including life skills explicitly in veterinary curricula is also a demand from the side of students as well as from society

References

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Poster 10

Pan-European soft skills curriculum for undergraduate veterinary education - “SOFTVETS”

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Introduction: The goal of this project (www.softvets.eu) is to create a framework that will enable veterinary students with skills to cope with challenges by the ever changing world and the enormous strain the profession puts on them. That way, they will be well prepared for real-life challenges in their future working environment. Our teams’ idea is to create a framework, and produce an ideal version of the soft (or recently called life) skills curriculum that would be applicable in veterinary higher education throughout Europe. As it should cover a wide range of life skills to address all aspects of modern day challenges it is organized in three sections: communication, entrepreneurship and digital skills.

Methods: The project team firstly develops a set of recommendations of life skills competences, then a curriculum and training concept for education of teachers, and finally carries out a pilot implementation of selected modules at 3 partners’ institutions. The intellectual outcomes are developed in coordination with educators, students’ association (IVSA), professional associations of veterinarians and an accreditation authority for veterinary education establishments within Europe (EAEVE) to make sure they are feasible and respond correctly to the needs of both students and labor market.

Results: After 6 months of the project the first phase, the "intellectual output 1" (IO) is finished. We developed a set of 8 to 10 recommendations for competences of all three sections aimed in the project. The next IO, number 2 has started with the goal of defining learning outcomes of the curriculum. IO3 aims at training teachers involved in life skill teaching. Soon we will implement pilot modules of the new life skills curriculum at partnering veterinary universities.

Discussion Veterinary educators teach all the aspects of veterinary profession and might think that communication and other life skills will be acquired as a collateral effect of teaching basic sciences or clinical subjects. This project promotes the standardized teaching of life skills in veterinary undergraduate studies.

Conclusions: Besides teaching professional subjects it is important to educate students in life skills as well to prepare them with Day One Competences for veterinary

profession. Including life skills explicitly in veterinary curricula is also a demand from the side of students as well as from society. Taking into account the perspectives of learners, educators, and veterinary practitioners the curriculum continuously needs innovative advancement.

References:

1. FVE (2017). VETFUTURES – shaping the future of Veterinary profession. Retrieved from *https://www.fve.org/publications/vet-futures-brochure-action-plan/*
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Klinische Abteilung für Nuklearmedizin

Medical University of Graz

Application of problem-based learning (PBL) and ward operation exercises in teaching at the Division of Nuclear Medicine of the Medical University of Graz

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Introduction

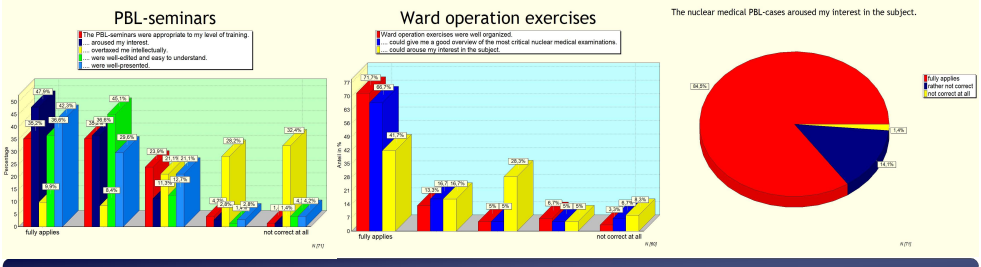
Since the winter term 2017/2018 the new curriculum for students of human medicine at the Medical University of Graz is implemented. All students had to complete successfully in their third academic year the "compulsory module XVII – imaging and biostatistics". As a result, at the Division of Nuclear Medicine PBL and ward operation exercises (WOE) were introduced. This study aimed to evaluate the satisfaction of the students with the new teaching methods using questionnaires.

Methods

In total, 116 questionnaires were handed out. The questionnaire, which was developed with the software GrafStat (version 4.440) comprised 12 partly closed, partly open questions for evaluating the satisfaction with the nuclear medical PBL cases and the WOE. Within the PBL seminars, students had to work out themselves a nuclear medical PBL case presented by teachers. Within the WOE small groups of students (maximal two students) were demonstrated the most critical nuclear medical examinations with illustrative case studies at five workplaces by the assigned physician.

Results

The response rate was 61% (71). The PBL seminars were assessed as good and the WOE as very good by the students. The WOE could provide 83% of the students a good overview of the most critical nuclear medical examinations. Furthermore, 72% of the students assessed the organization of the WOE with the top mark. The nuclear medical PBL cases were assessed as well-edited and easy to understand by 82% of the students and were able to arouse interest in the subject in 85% of the students. Desirable would be more time for the individual workplaces within the WOE.



Discussion/Conclusions

The well-edited and easy to understand and well-presented nuclear medical PBL cases, as well as the excellent organization of the WOE, could arouse interest in the subject in the majority of students. Therefore, PBL and WOE will be maintained in teaching at the Division of Nuclear Medicine.

Poster 11

Application of problem-based learning (PBL) and ward operation exercises in teaching at the Division of Nuclear Medicine of the Medical University of Graz

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