Health Literacy and Interprofessional Telehealth Considerations
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Introduction

- The ARC-PA 5th edition Accreditation Standards for Physician Assistant Education states that programs must prepare students to provide medical care with consideration for social determinants of health and work collaboratively in interprofessional patient-centered teams.
- With the onset of COVID-19, there has been a decline in the ability of patients to access health care in traditional ways. Telehealth is one way to improve access to care.
- The goal of this project is to create an opportunity for students to analyze the impact of social determinants of health and to consider how telehealth can improve the continuity of care and a patient’s ability to make and implement health-related decisions.

![Standardized patient with therapy dog completing telehealth visit.](image)

Methods

- Students from seven care disciplines (PA, FNP, PharmD, DO, DMV, OT, SW) previewed three virtual simulation sessions.
- The progressive sessions simulated realistic patient care using telehealth modalities to follow the patient throughout their healthcare journey.
- Students observed the various healthcare professionals (PA, FNP, PharmD, DMV, DPT, Social Work, OTD, RN) interact with each other and the patient in these settings.
- Students and facilitators came together for a 90-minute collaborative session where they were placed into smaller groups, using breakout rooms, to discuss and answer questions regarding the case.
- Interprofessional Education Collaborative (IPEC) core competencies were assessed pre- and post-program using the Interprofessional Socialization and Valuing Scale (ISVS).

![Simulation Modules](image)

Simulation Modules

- First Simulation
  - Objective – Develop a plan to facilitate continuity of care during care transition to prevent errors
  - Setting – Interdisciplinary team meeting in the hospital

- Second Simulation
  - Objective – Differentiate benefits and limitations of telehealth strategies to provide patient-centered care and ensure appropriate referrals as needed
  - Setting – Skilled Nursing Facility

- Third Simulation
  - Objective – Identify the role social determinants of health and health literacy have on the patient’s ability to make and implement health-related decisions
  - Setting – Patient’s home

- Debrief
  - Panel Discussion with at least one faculty member from each of the eight different health professional programs

Results

- Completion of the program (n= 587) led to an increase in knowledge of all educational learning objectives.
- Student’s debrief feedback was positive regarding format, faculty team engagement, and integration of a therapy animal.
- The student’s self-assessed readiness to participate in collaborative care increased in all four IPEC domains as depicted in the graph below.

![Mean in IPE Readiness Compared Pre- and Post-Intervention](image)

Students’ Professional Course of Study

- B.S.W. (4th year, voluntary) 8
- D.V.M. (2nd year, voluntary) 3
- O.T.D.. (1st year, voluntary) 10
- Pharm.D. (2nd year, mandatory) 48
- P.A. (1st year, mandatory) 91
- F.N.P. (2nd year, voluntary) 21
- D.O. (2nd year, mandatory) 405

![Implications](image)

Implications

- The greatest improvement in the Teams and Team-based Care IPEC domain aligned well with the interdisciplinary team design of this program.
- The interdisciplinary team simulations and small group discussions modeled how effective collaborative care can improve continuity of care and the patient’s engagement in decision-making.
- Students were able to visualize and reflect on how healthcare professionals collaborate during transitions of care and utilize telehealth to provide patient-centered care and address any social determinants of health.
- The variety of faculty, students, standardized patients, and a therapy animal participating in this simulation provided students with reinforcement of the importance of all members of the healthcare team.

![References](image)

References