

Module 5 – Fostering Interprofessional Learning

What is interprofessional education?

What competencies are involved in interprofessional, collaborative practice?

How can you create interprofessional learning experiences for your students?

Interprofessional education (IPE) is about preparing students to engage in interprofessional, collaborative practice (IPCP) in a variety of team-based health care delivery contexts. The goal of IPE is for students to acquire the knowledge, skills, attitudes, and values that foster and support patient/client/family/community-centred care, an appreciation and respect for the roles of other health professionals, and an ability to participate effectively as a member or leader of teams.

Some IPE takes place in the classroom and lab, including through simulation experiences, but what really brings IPE to life for students is relevant and meaningful teamwork experiences in the practice setting. As a preceptor, you can play a critical role in fostering interprofessional learning in your student.

This module will assist you to:

1. Understand the differences between In Interprofessional Education(IPE) and Interprofessional Collaborative Practice (IPCP)
2. Understand the benefits of IPE and IPCP and their function in a clinical/fieldwork placement
3. Identify and apply the competencies of collaborative practice
4. Identify and create opportunities for your student(s) to engage in IPE
5. Develop an IPE experience for students in your setting
6. Understand options for evaluating students' achievement of interprofessional competencies

References

1. Canadian Interprofessional Health Collaborative (2010). *A national interprofessional competency framework*. Retrieved from http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf.
2. World Health Organization (2010). *Framework for action on interprofessional education and collaborative practice*. Retrieved from http://www.who.int/hrh/resources/framework_action/en/.

Video Introduction

Chris Power, current CEO of the Canadian Patient Safety Institute and former CEO of Capital Health in Nova Scotia, discusses the importance of interprofessional education in preparing the workforce for collaborative practice - <https://www.youtube.com/watch?v=8m9PiKBrlMg>.

5.1 Understand the differences between IPE and IPCP

Interprofessional Education (IPE)

Interprofessional education (IPE) “occurs when two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes” (World Health Organization, 2010, p.13).

Interprofessional Collaborative Practice (IPCP)

Interprofessional collaborative practice in health-care occurs when multiple health workers from different professional backgrounds to provide comprehensive services by working with patients, their families, carers and communities to deliver the highest quality of care across settings. (World Health Organization, 2010, p.13)

References

1. World Health Organization (2010). *Framework for action on interprofessional education and collaborative practice*. Retrieved from http://www.who.int/hrh/resources/framework_action/en/.

5.2 Understand the benefits of IPE and IPCP

Beth Snyder, Director, Interprofessional Practice and Interim Director Acute Health Services and Dylana Arsenault, Director of Pharmacy Services and Professional Practice Lead for Pharmacy, Annapolis Valley, discuss the benefits of interprofessional education and collaborative practice in health care settings - <https://www.youtube.com/watch?v=i-JS9xWSh0c>.

The benefits of collaborative practice

Collaborative practice can improve:

- Access to coordinated health-services
- Appropriate use of specialist clinical resources
- Health outcomes for people with chronic diseases
- Patient care and safety

Collaborative practice can decrease:

- Total patient complications
- Length of hospital stay
- Tension and conflict among caregivers
- Staff turnover
- Hospital admissions
- Clinical error rates
- Mortality rates

Reference

1. World Health Organization (2010). *Framework for action on interprofessional education and collaborative practice*. Retrieved from http://www.who.int/hrh/resources/framework_action/en/.

The benefits of interprofessional education

The systematic reviews of the research literature suggest that more research is needed about whether and how pre-licensure interprofessional education impacts patient outcomes, but there is evidence that it has a positive effect on:

- Understanding of the roles and responsibilities of other professional groups
- Learners' attitudes towards one another's professions
- Knowledge of the nature of interprofessional collaboration
- Actual collaborative behavior in practice
- Organizational practice (referral practices, documentation)
- Delivery of care (patient satisfaction, length of stay)
- Clinical outcomes (clinical error rates, infection rates)

References

1. Reeves, S. (2009). An overview of continuing interprofessional education. *Journal of Continuing Education in Health Professions*, 29(3), 142-46.
2. Reeves, S., Goldman, J., Burton, A., & Sawatzky-Girling, B. (2010). Synthesis of systematic review evidence of interprofessional education. *Journal of Allied Health*, 39, 198-203.

Think About It

Think about your experiences with interprofessional practice and collaboration.

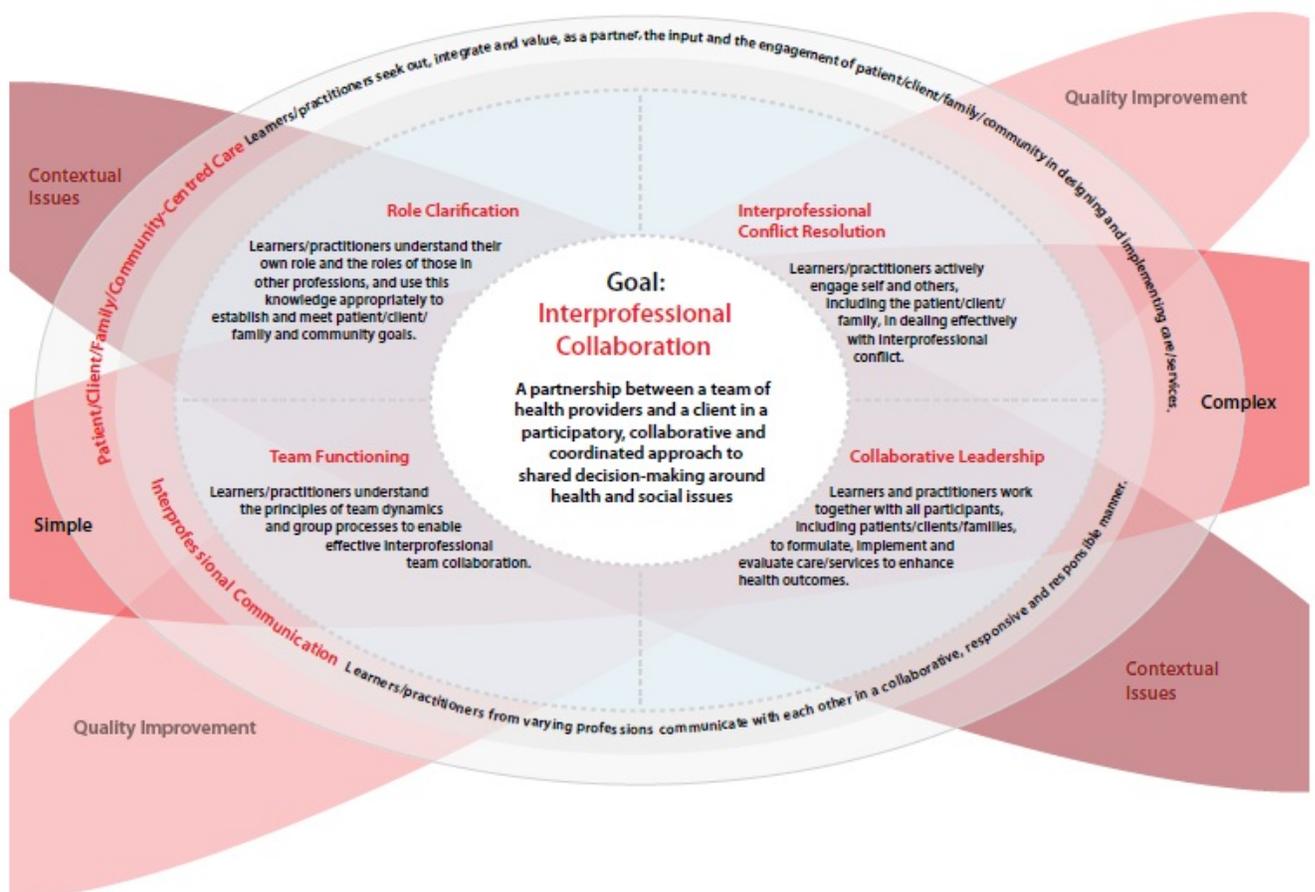
- What are the benefits of collaborative practice in your profession/setting?
- How have you benefited from collaborative practice?
- How have your clients benefited from collaborative practice?
- How could students benefit from exposure to collaborative practice?

5.3 Identify and apply the competencies of collaborative practice

The Canadian Interprofessional Health Collaborative (CIHC) has developed a National Interprofessional Competency Framework which describes the competencies required for effective interprofessional collaboration. Six competency domains highlight the knowledge, skills, attitudes and values that together shape the judgments that are essential for interprofessional collaborative practice. These domains are:

- Role Clarification
- Team Functioning
- Patient/Client/Family/Community-Centred Care
- Collaborative Leadership
- Interprofessional Communication
- Interprofessional Conflict Resolution

Figure 1: The National Competency Framework



For more information on the Canadian Interprofessional Health Collaborative National Interprofessional Competency Framework, click here:

http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf

The College of Health Disciplines at the University of British Columbia has developed a series of online modules based on the CIHC National Interprofessional Competency Framework. In this series of modules, IPC on the Run, each module addresses one of the six competency domains. For more information on IPC on the Run, click here: <http://www.ipcontherun.ca>.

References

1. Canadian Interprofessional Health Collaborative. (2010). *A national interprofessional competency framework*. Retrieved from http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf.
2. University of British Columbia, College of Health Disciplines. (2015). *IPC on the Run*. Retrieved from <http://www.ipcontherun.ca/>.

5.4 - Identify and create opportunities for your students to engage in IPE

Kristin Crocker, a Dalhousie University Occupational Therapy student, describes her interprofessional experience during a fieldwork/clinical placement at Soldiers Memorial Hospital in Middleton, Nova Scotia - https://www.youtube.com/watch?v=aoHw6Tp_TIA.

Key components of IPE experiences in the practice setting

- An **introduction to** or review of the six interprofessional competencies identified in the National Interprofessional Competency Framework
- The opportunity to **learn about** the roles and scopes of practice of other health professionals and to consider such issues as stereotypes, assumptions, hierarchies and areas of overlap within a team
- The opportunity to **practice**, in collaboration with students and professionals from other health or social service professions, skills related to these interprofessional competencies
- The opportunity to **reflect upon** the nature and process of interprofessional, collaborative practice and the personal development of competencies related to this practice

Reference

1. Godden-Webster, A., & Murphy, G. (2014). *Interprofessional collaboration in practice: A guide for strengthening student learning experiences*. Halifax NS: Dalhousie University. Retrieved from

<http://www.dal.ca/content/dam/dalhousie/pdf/healthprofessions/Interprofessional%20Health%20Education/Facilitator%20Guide%20FINAL%20-%20with%20links.pdf>

Possible IPE opportunities for students

- Allow students to participate on currently established teams in your workplace, such as Autism Team, Dysphagia Team, etc. Provide opportunities for the students to reflect on their observations of and experiences with the team.
- Encourage your student to work with one or more students from other professions to develop and present a workshop/presentation for other team members (e.g., dietary and speech-language pathology students work together to develop and offer a presentation on diet modifications and compensatory strategies to nursing staff).
- Arrange for your student to conduct collaborative assessments with one or more students from other health professions (e.g., occupational therapy and physiotherapy students complete assessments of clients/patients together).
- Encourage your student to work with one or more students from other professions to implement a group program/therapy program (e.g. social work and recreation therapy students collaboratively plan and implement a leisure education program for adolescents with disabilities).

Think About It

Think about interprofessional education in your workplace/setting.

- What other professionals do you currently work with?
- When/how do you collaborate with those colleagues?
- What IPE opportunities could you arrange for your student to observe/participate in?
- What other professionals also provide placements for students? Could these students collaborate with your student?

5.5 Getting Started: Setting up an IPE Experience for Students

Arrange an IPE experience for students in your work setting by:

- Identifying students with co-occurring placements in your organization
- Approaching preceptors and teams to ask if they would like their students to participate in an IPE experience

- Inviting a colleague or colleagues to collaborate with you in planning the IPE experience
- Considering various approaches/ways to provide an IPE experience for students

If you would like to engage students in a formal interprofessional student team experience, suggestions for developing these types of experiences are provided in [Dalhousie University's Interprofessional Collaboration in Practice: A Guide for Strengthening Student Learning Experiences](#). The [Preceptors in the Nexus Toolkit](#) has been developed by University of Kansas Medical Centre and the National Center for Interprofessional Practice and Education for preceptors who wish to educate interprofessional groups of students.

Reference

1. Godden-Webster, A., & Murphy, G. (2014). *Interprofessional collaboration in practice: A guide for strengthening student learning experiences*. Halifax NS: Dalhousie University. Retrieved from <http://www.dal.ca/content/dam/dalhousie/pdf/healthprofessions/Interprofessional%20Health%20Education/Facilitator%20Guide%20FINAL%20-%20with%20links.pdf>.

An Interprofessional Student Team Experience: One model

Some settings choose to bring a group of students together to form an interprofessional team that works collaboratively over a number of sessions. One model that has worked well in a variety of settings in Nova Scotia has included the following elements:

- Interprofessional student teams formed during periods of overlap in traditional uniprofessional student practicum/fieldwork placements (typically 4-5 weeks) in healthcare facilities or community agencies
- Usually 3 – 7 professions represented on each team, often from multiple educational institutions
- Student teams meet weekly with facilitators to discuss cases, healthcare delivery issues and programs
- Student teams complete care plans or projects
- Student teams may make a presentation to staff in the healthcare facility or community agency in which they demonstrate and discuss their experiences with interprofessional, collaborative patient/client/family-centred practice
- Providing opportunities for students to come together

Examples:

- A large interprofessional team of students divided into two groups to conduct assessments and develop care plans for two patients on a stroke unit. They met weekly with facilitators to discuss their plans, compare the interprofessional care for these two different patients, and discuss the process of interprofessional, collaborative, patient-centred care.

- An interprofessional team of students attended weekly rounds on a stroke unit and met weekly with facilitators to develop a “stroke discharge report card” for use with current and future patients on the unit.
- An interprofessional team of students associated with the Oncology unit in a children’s hospital collaborated to develop a poster for parents which outlined the roles of the different health professionals with whom the children and families would interact on the unit.
- An interprofessional team of students attended weekly rounds, identified a case and then met with facilitators to collaboratively develop a care plan. They then presented the care plan to the unit team at the end of the week. The following week, they attended rounds again and developed a plan for a different patient.
- An interprofessional student team at a Long Term Care facility met to discuss assessment findings and propose recommendations for particular clients in the facility. The recommendations were presented to other learners and staff within the LTC facility.

Listen again to Beth Snyder and Dylana Arsenault as they discuss their experiences with this model of IPE at Annapolis Valley Health -

<https://www.youtube.com/watch?v=Tzt0GCQjZMU>.

5.6 Guiding Interprofessional Learning

There are a number of ways to guide students to think about interprofessional collaborative practice. These include:

- Providing opportunities for students to describe their roles
- Providing opportunities for students to compare their roles to the roles of other health professionals
- Encouraging students from various professions to learn with, from, and about each other
- Providing opportunities for discussion of the issues confronted by interprofessional teams
- Encouraging exploration of how conflict related to these issues can be managed
- Guiding discussion concerning the link between interprofessional collaboration and patient/client/family/community-centred care
- Describing why interprofessional education and collaborative practice are important in your profession and work setting
- Modeling for the student your positive interactions with other professionals and team members

As a preceptor, you can also pose questions to your students to promote critical thinking and problem solving around issues in interprofessional collaborative practice. The following questions, based on the National Interprofessional Competency Framework’s six competencies, may help guide discussion and reflection about interprofessional, collaborative patient/client/family/community-centred care:

Role clarification:

What are the unique knowledge/skills that the different providers bring to the table?
What are some of the stereotypes and assumptions people make about different professions?
What are some of the similarities and differences between the different professions?
Is there any overlap in roles? How would you address this?

Conflict resolution:

What circumstances lead to conflict in a team?
How does the team manage conflict?
How does conflict among team members affect client care?

Collaborative leadership:

How are members of the team engaged in decision-making?
How would you engage team members in decision-making?
Do leadership roles rotate among team members?

Patient/client/family/community-centred care:

Is the patient/client/family a member of the team?
How does the team partner with the patient/client/family?
How is information shared with the patient/client/family?

Interprofessional communication:

How effective is communication between team members?
How are shared care plans developed?

Team Functioning:

What are the dynamics of the group?
Does the team reflect on its functioning as a team?

References

1. Canadian Interprofessional Health Collaborative. (2010). *A national interprofessional competency framework*. Retrieved from http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf.
2. Deutschlander S., & Suter, E. (2011). *Interprofessional mentoring guide for supervisors, staff and students*. Retrieved from <http://www.albertahealthservices.ca/careers/docs/WhereDoYouFit/wduf-stu-sp-ip-mentoring-guide.pdf>

Interprofessional Facilitation Scale (IPFS)

In this optional review exercise, enter your answers to the questions below. If you wish to have a copy of your responses sent to yourself via email, include your details and hit SEND.

The following items reflect some of the facilitation behaviours which have been shown to promote interprofessional and team learning. This exercise is designed to help you think about your own knowledge and skills in facilitation interprofessional learning. Please rate your current ability to do the following:

1. Describe why interprofessional education is important.
Poor Fair Good Excellent
2. Explain how interprofessional collaboration can enhance patient centred practice.
Poor Fair Good Excellent
3. Role-model positive interactions with other health professionals and how professionals can work together, for example, but working collaboratively with the co-facilitator.
Poor Fair Good Excellent
4. Create a learning environment in which the principles of interprofessional education were demonstrated or clearly explained (e.g., did not focus on one provider group; acknowledged all professionals' contributions; acknowledged, respected, celebrated diversity in the group).
Poor Fair Good Excellent
5. Openly encourage participants to learn from other health providers' views, opinions, and experiences (e.g., asked questions that generated free exchange of ideas, openness and sharing among all professions).
Poor Fair Good Excellent
6. Use learning and facilitation methods that encouraged participants from different professions to learn with, from and about each other. (e.g., icebreaker games, case studies, group discussions).
Poor Fair Good Excellent
7. Invite other professions to comment and share their experiences/perspectives as questions or comments that were made in the large group.
Poor Fair Good Excellent
8. Use appropriate facilitator skills to keep discussion topics on track.
Poor Fair Good Excellent

9. Acknowledge and respect others' experiences and perceptions.
Poor Fair Good Excellent
 10. Encourage members of all professions to contribute to decisions and seek opinions from others in the group during case or patient discussions and decision making activities.
Poor Fair Good Excellent
 11. Ask participants to share their professional opinions, perspectives and values relative to patient care and collaborative practice.
Poor Fair Good Excellent
 12. Identify professional differences in a positive manner as participants offered their professional experiences and perceptions.
Poor Fair Good Excellent
 13. Ask health professionals to indicate their profession and discuss each other's roles and responsibilities in the delivery of patient care.
Poor Fair Good Excellent
 14. Listen to and acknowledge participants' ideas without judgement or criticism.
Poor Fair Good Excellent
 15. Ask questions to encourage participants to consider how they might use each other's professional skills, knowledge and experiences.
Poor Fair Good Excellent
 16. Help participants work through differences in a spirit of openness and collaboration when differing opinions (e.g. led the discussion and ensured that all participants have an opportunity to express their views openly).
Poor Fair Good Excellent
 17. Use effective communication skills to clarify and resolve misunderstanding and conflict.
Poor Fair Good Excellent
 18. Discuss issues related to hidden power structures, hierarchies, and stereotypes that may exist among different health professionals.
Poor Fair Good Excellent
-
1. Sargeant, J., T. Hill and L. Breau. Development and testing of a scale to assess interprofessional education (IPE) facilitation skills. *J. Contin Educ Health Prof.* 2010. 30(2): p. 126-31.

Think About It

Take a moment to answer the following questions about guiding interprofessional learning:

- How do interprofessional teams differ from uniprofessional teams?
- What issues might arise that would be unique to the interprofessional context?
- What questions might you ask to guide a student's reflections on interprofessional collaboration?

5.7 Evaluating Interprofessional Competencies

There is increasing emphasis on the need to engage in competency-based assessment not only for clinical practice skills, but also for interprofessional collaboration skills. Many professions now include patient/client/family/community-centred care and interprofessional collaboration skills on their student practicum/fieldwork evaluation forms.

There are a number of instruments available for assessing competencies in the area of interprofessional collaboration, including:

- The *Interprofessional Collaborative Competencies Attainment Survey (ICCAS)*, which is a self-assessment tool based on the competencies identified in the CIHC's National Interprofessional Competency Framework. As a preceptor, you could ask students to reflect upon and assess their achievement of the interprofessional competencies through completion of this survey. <http://ennovativesolution.com/WeLearn/IPE-EN/ICCAS.Final.pdf>.
- The *Interprofessional Collaborator Assessment Rubric (ICAR)*, which is a competency-based assessment tool that may be used for either formative or summative assessment of interprofessional collaborator competencies. <http://www.med.mun.ca/getdoc/b78eb859-6c13-4f2f-9712-f50f1c67c863/ICAR.aspx>

References:

1. Canadian Interprofessional Health Collaborative. (n.d.) *Interactive Evaluation Framework*. Retrieved from: <http://www.cihc.ca/evaluation/framework/>
2. Archibald, D., Trumpower, D., & MacDonald, C. (2014). Validation of the interprofessional collaborative competency attainment survey (ICCAS). *Journal of Interprofessional Care*, 28(6), 553-558.
3. Curran, V., Hollett, A., Casimiro, L.M., McCarthy, P., Banfield, V., Hall, P., Lackie, K., Oandasan, I., Simmons, B. & Wagner, S. (2011). Development and validation of the interprofessional collaborator assessment rubric (ICAR). *Journal of Interprofessional Care*, 25, 339-344.

Exercise 1 Unscramble the letters and fill-in-the-blanks

http://preceptor.healthprofessions.dal.ca/?page_id=1671

Exercise 2 True-False

http://preceptor.healthprofessions.dal.ca/?page_id=1672

Exercise 3 Final Thoughts

http://preceptor.healthprofessions.dal.ca/?page_id=1672

References – Module 5

1. Archibald, D., Trumpower, D., & MacDonald, C. (2014). Validation of the interprofessional collaborative competency attainment survey (ICCAS). *Journal of Interprofessional Care, 28*(6), 553-558.
2. Canadian Interprofessional Health Collaborative (February 2010). *A national interprofessional competency framework*. Retrieved from http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf.
3. Canadian Interprofessional Health Collaborative. (n.d.) *Interactive Evaluation Framework*. Retrieved from: <http://www.cihc.ca/evaluation/framework/>
4. Curran, V., Hollett, A., Casimiro, L.M., McCarthy, P., Banfield, V., Hall, P., Lackie, K., Oandasan, I., Simmons, B., & Wagner, S. (2011). Development and validation of the interprofessional collaborator assessment rubric (ICAR). *Journal of Interprofessional Care, 25*, 339-344.
5. Deutschlander S., & Suter, E. (2011). *Interprofessional mentoring guide for supervisors, staff and students*. Retrieved from <http://www.albertahealthservices.ca/careers/docs/WhereDoYouFit/wduf-stu-sp-ip-mentoring-guide.pdf>
6. Drynan, D., & Murphy, S. (2013). *A Guide to Incorporating Interprofessional Experiences into the Practice Education Setting*. Retrieved from <http://physicaltherapy.med.ubc.ca/files/2012/09/IPE-Guide-2nd-ed.-May-2012.pdf>
7. Godden-Webster, A., & Murphy, G. (2014). *Interprofessional collaboration in practice: A guide for strengthening student learning experiences*. Halifax NS: Dalhousie University. Retrieved from <http://www.dal.ca/content/dam/dalhousie/pdf/healthprofessions/Interprofessional%20Health%20Education/Facilitator%20Guide%20FINAL%20-%20with%20links.pdf>.
8. Goldman, J., Zwarenstein, M., Bhattacharyya, O., & Reeves, S. (2009). Improving the clarity of the interprofessional field: Implications for research and continuing interprofessional education. *Journal of Continuing Education in the Health Professions, 29*(3), 151-156.
9. Reeves, S. (2009). An overview of continuing interprofessional education. *Journal of Continuing Education in Health Professions, 29*(3), 142-46.

10. Reeves, S., Goldman, J., Burton, A., & Sawatzky-Girling, B. (2010). Synthesis of systematic review evidence of interprofessional education. *Journal of Allied Health, 39*, 198-203.
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12. University of British Columbia, College of Health Disciplines. (n.d.). *IPC on the Run*. Retrieved from <http://www.ipcontherun.ca/>.
13. World Health Organization (2010). *Framework for action on interprofessional education and collaborative practice*. Retrieved from http://www.who.int/hrh/resources/framework_action/en/.