

A Practical & Practice Approach to *Inter*professional Education (IPE)

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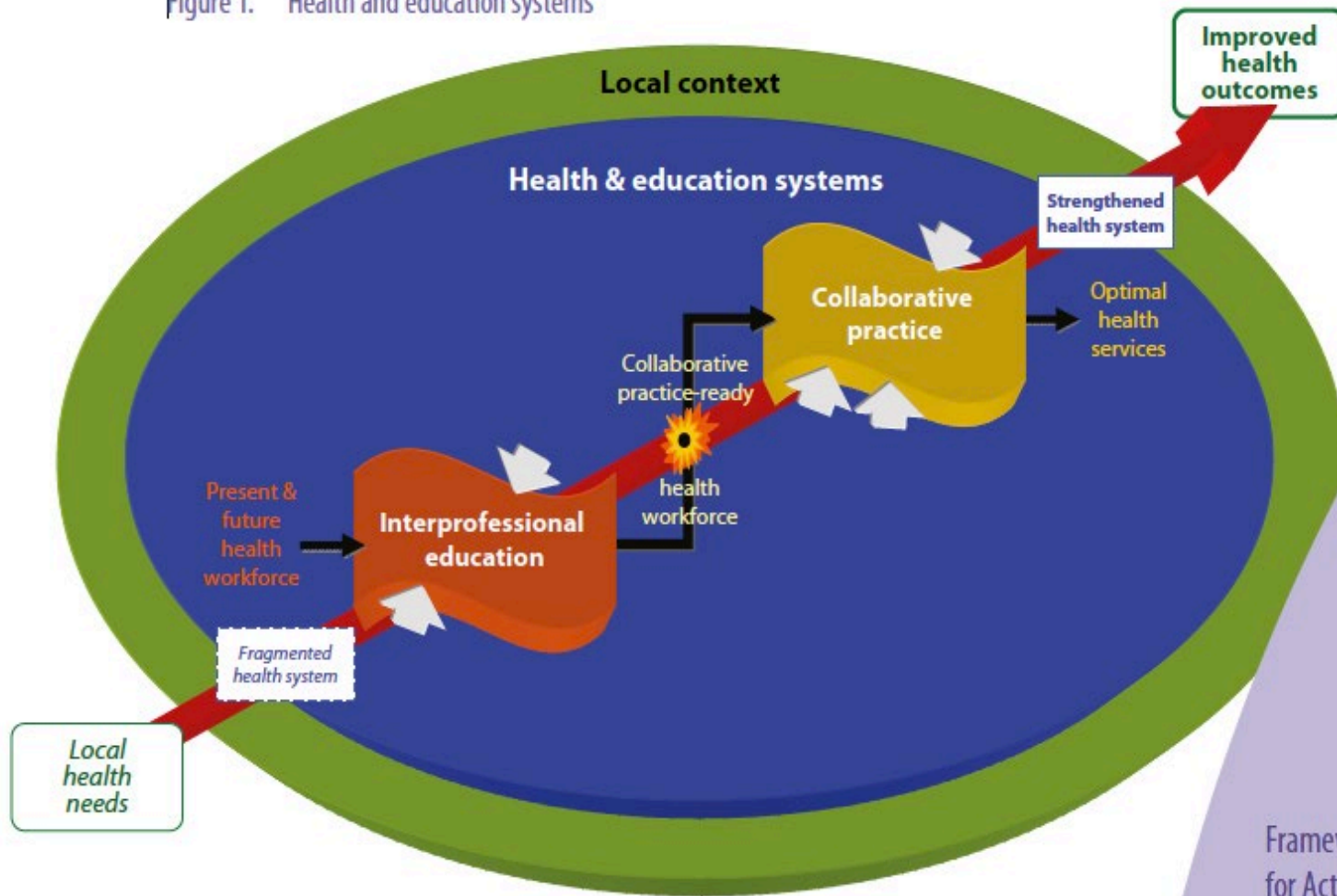
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Today's Metanarrative

- Some General Observations
- Some Curricular Challenges
- Considering Some Competencies
- IP Collaborative Practice
- Some Lessons Learned
- An Eternal Verity

IPE: 1. A Framework for System Change

Figure 1. Health and education systems



2010 www.who.int/hrh/nursing_midwifery/en

Framework
for Action on
Interprofessional
Education and

IPE: 2. Why An IP Approach is Important

The intent of an interprofessional approach to health and well-being is to:

- provide optimum client care,
- diminish duplication of services,
- address the gaps in service delivery, and
- overcome adverse consequences to patients

IPE: 3. What is it? Articulating the 3-Part Definition

Occasions when *members** or students of two or more professions:

- learn with, from and about each other,
- to improve collaboration, and
- the quality of care and *services**.



CAIPE definition (2002) *modified 2017

IPE: 4. Learning With, From & About?

- I need to know what *I* know
- I need to know what ***YOU*** know
- ***YOU*** need to know what ***YOU*** know
- ***YOU*** need to know what *I* know
- ***WE*** need to know what ***WE*** know
- ***WE*** need to know ***WHEN WE*** need to know

Curricular Challenge: 1



“Changing a college curriculum is like moving a graveyard

- you never know how many friends the dead have until you try to move them” *(Attributed to Calvin Coolidge)*



Curricular Challenge: 2 Faculty & Collaboration

- Recruit, Appoint, Prepare.
 - Who releases?
 - Who pays?
 - Who recognizes?

Curricular Challenge: 3 Faculty development

Develop mechanisms that appropriately recognize and reward the work of IP facilitators:

- formalize IPE faculty with titles & ***always*** include the practice community;
- share a strong message about IPE with Directors of professional programs; and
- NO professional *exceptionalism* in IPP/IPC.

Curricula Challenge: 4 A Built Environment

- All the structures people have built when considered as separate from the natural environment
- Surroundings created for humans, by humans, to be used for human activity.

(Professor Nishant H. Manapure, M. Arch. (Urban Design) Faculty of Architecture, MAHE, Manipal, India)



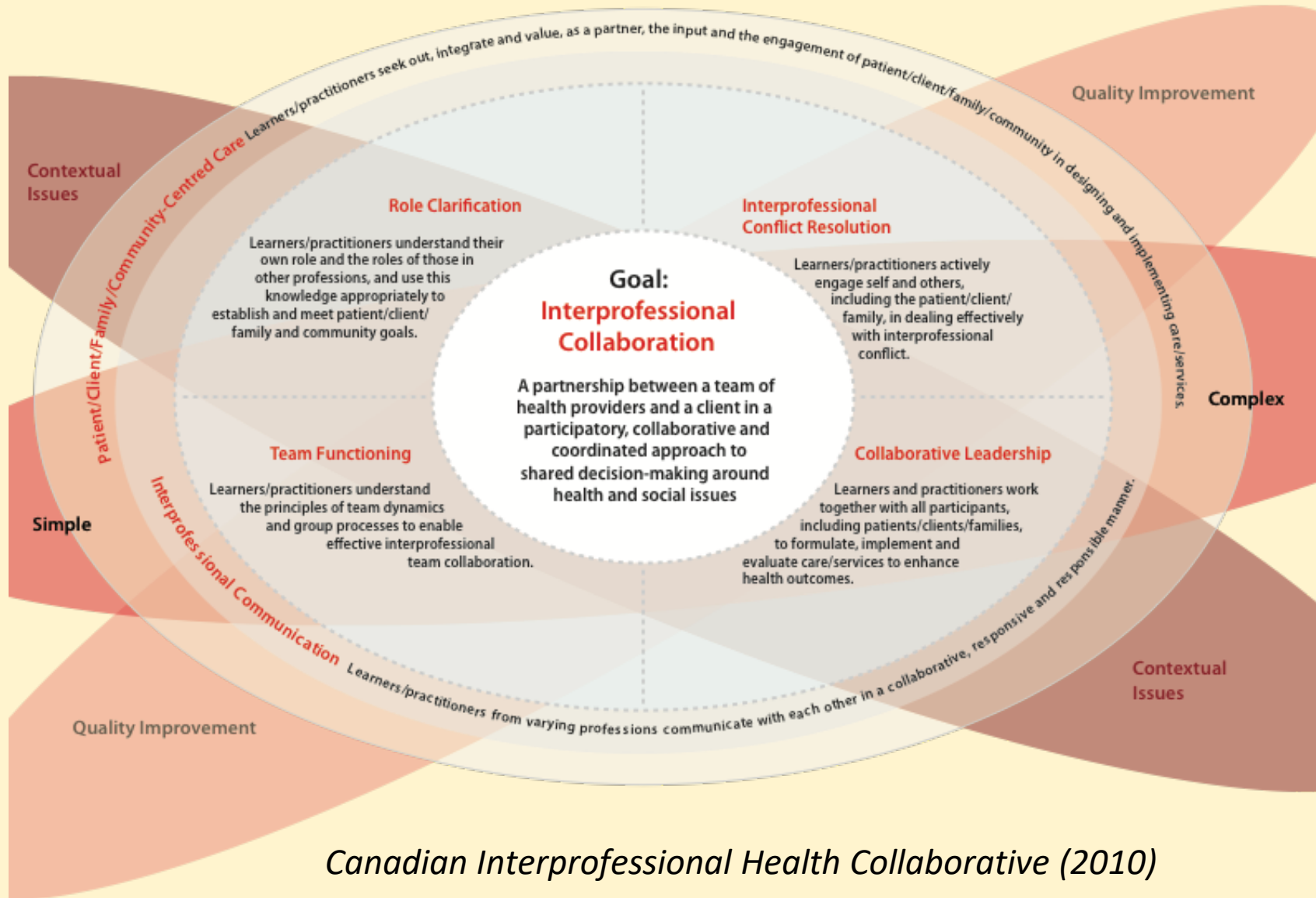
Considering Competencies



"If you are hiring a ditch digger, it doesn't matter if his IQ is 90 or 110 - *what matters is if he can use a shovel.*"

David McClelland (1973). Testing for competence rather than for "intelligence" American Psychologist, 28, 1-14

IP Competencies – one version



Canadian Interprofessional Health Collaborative (2010)

Competencies
Collaboration
&
Quality of Care

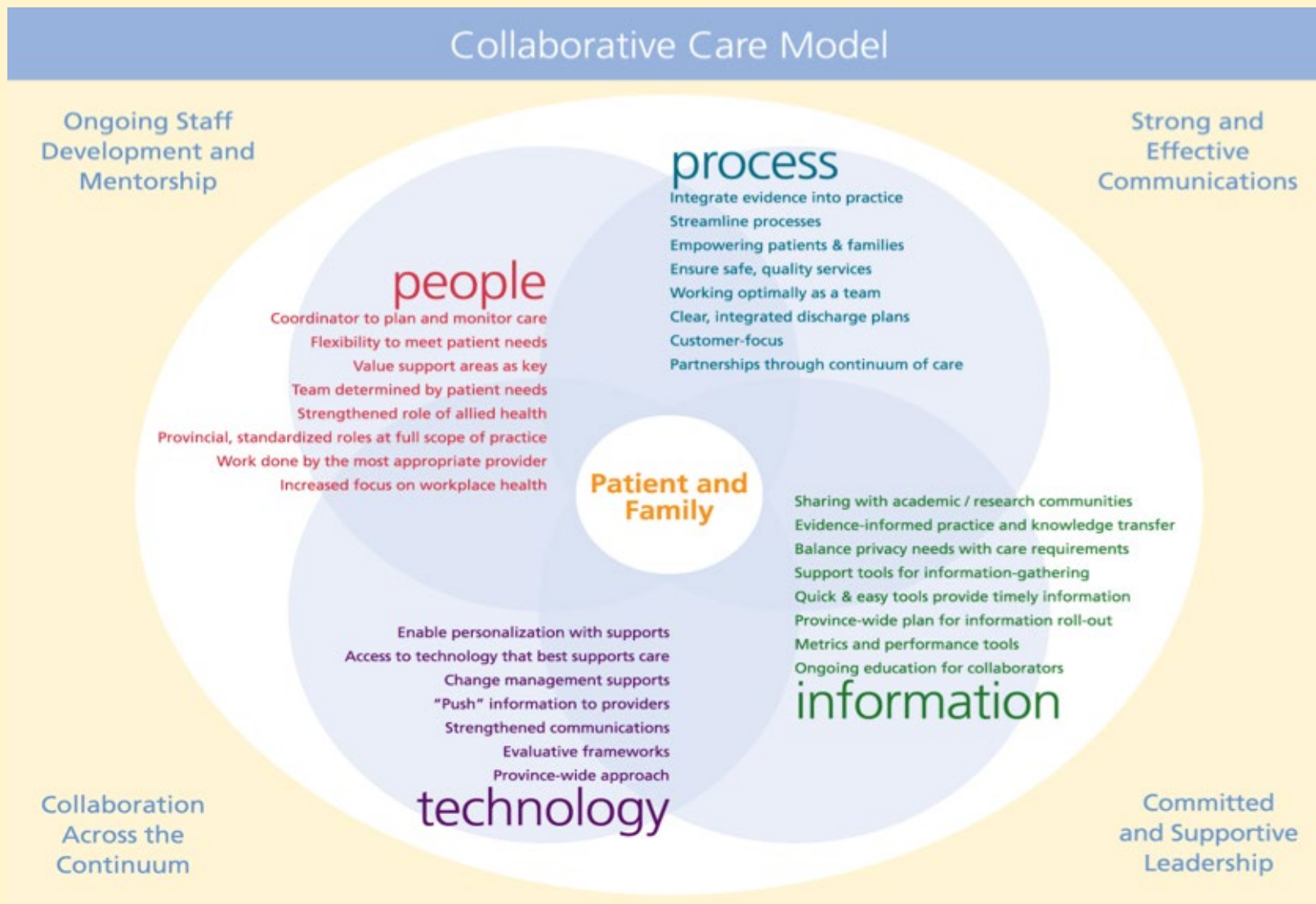
Link competencies to the
*definition of IPE, and scopes of
practice*

IP Role Clarification
IP Conflict Resolution
IP Collaborative Leadership
IP Collaborative Functioning

Competencies in Development & Evaluation

- Ground coursework in a Competency Framework.
- Use *assessment* and *evaluation* tools to measure cross-sectional and longitudinal success in system change.
- Plan and execute a *research strategy* that represents the definition of IPE.

From IP Curricula to Collaborative Practice



Nova Scotia Health, Canada. October 2008

IPE in Collaborative Practice

Its A Process

- *for communication and decision making that:*
- enables the separate and shared knowledge and skills of different care providers to:
- synergistically influence care provided, through changed attitudes and behaviours.*

* Way, D., Jones, L., Busing, N (May 18, 2000). "Collaboration in Primary Care I – Family Doctors & Nurse Practitioners Delivering Shared Care". THE ONTARIO COLLEGE OF FAMILY PHYSICIANS

IPE in Collaborative Practice

Process Some Core Principles

- **Dignity and Respect**
 - Active listening
- **Information Sharing**
 - Timely, accurate & complete
- **Participation**
 - Inform, consult, involve, empower
- **Collaboration**
 - Policy & programme implementation & evaluation

IPE in Collaborative Practice Process: Some Necessary Skills

A trained ability to:

- Network *Effectively*
- Communicate & Problem Solve *Clearly*
- Manage *Confidentiality*
- Cooperate *Reflectively*
- Negotiate *Honestly*
- Handle Conflict *Appropriately*
- Plan *Realistically,*

& follow through

IP Collaborative Practice

Some Genuine Problems

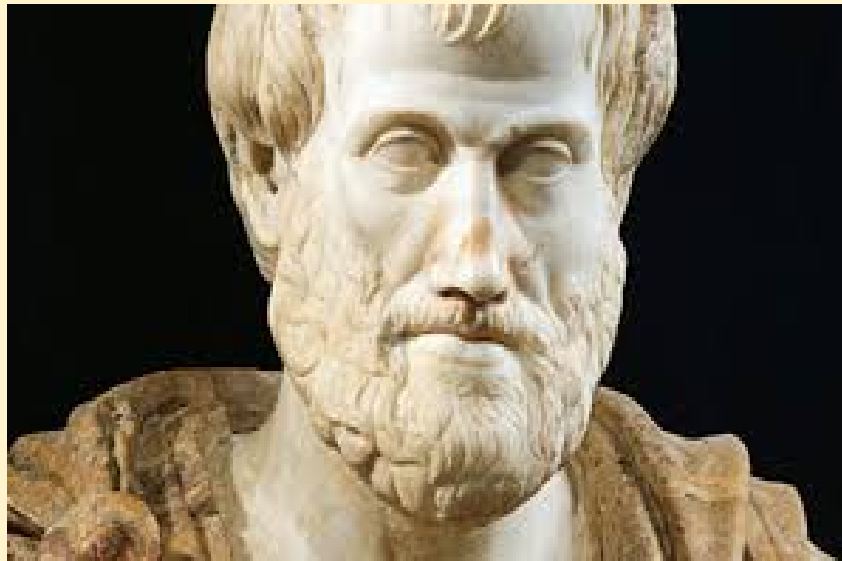
- ***interpersonal differences*** e.g. age, gender, culture
- ***fear of change*** e.g. place, time, persons
- ***stereotypic rivalry*** e.g. me, him/her, them
- ***power, income and status*** e.g. salary vs. fee-for-service
- ***language*** e.g. gender, profession, social class, jargon
- ***models of practice*** e.g. medicine, nursing, social work
- ***management structures*** e.g. acute care, community
- ***management priorities*** e.g. money, space, people



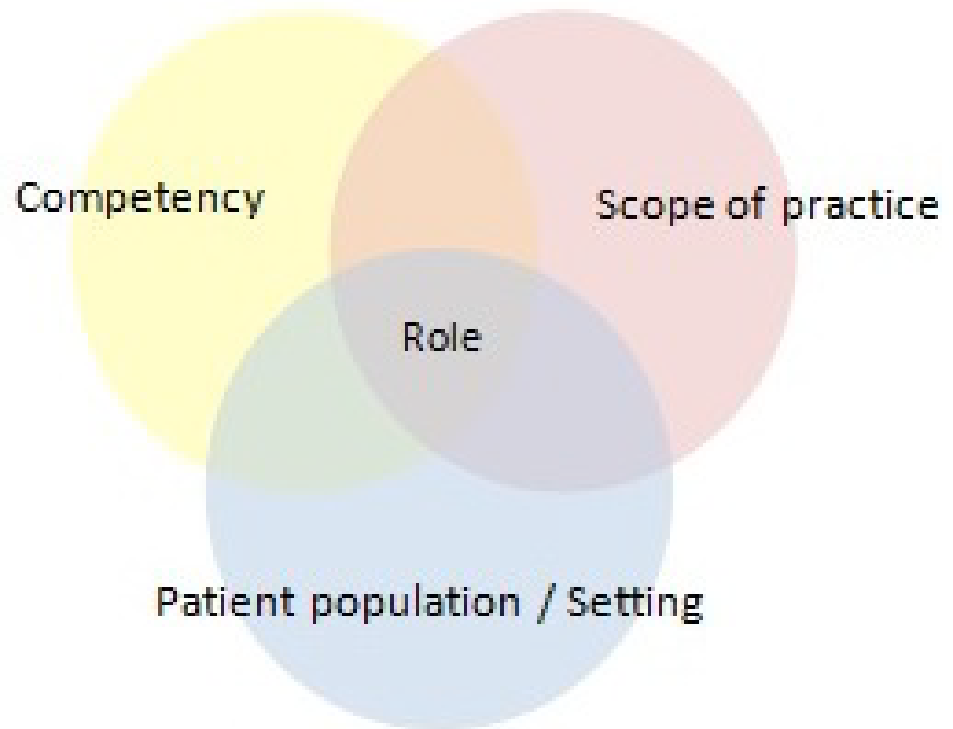
IPE in Collaborative Practice Practice Education (PE)

“For the things we have to learn before
we can do them, we learn by doing them.”

(Aristotle, Nicomachean Ethics (350 B.C.E))



The Practice Educator in the Health Care Team

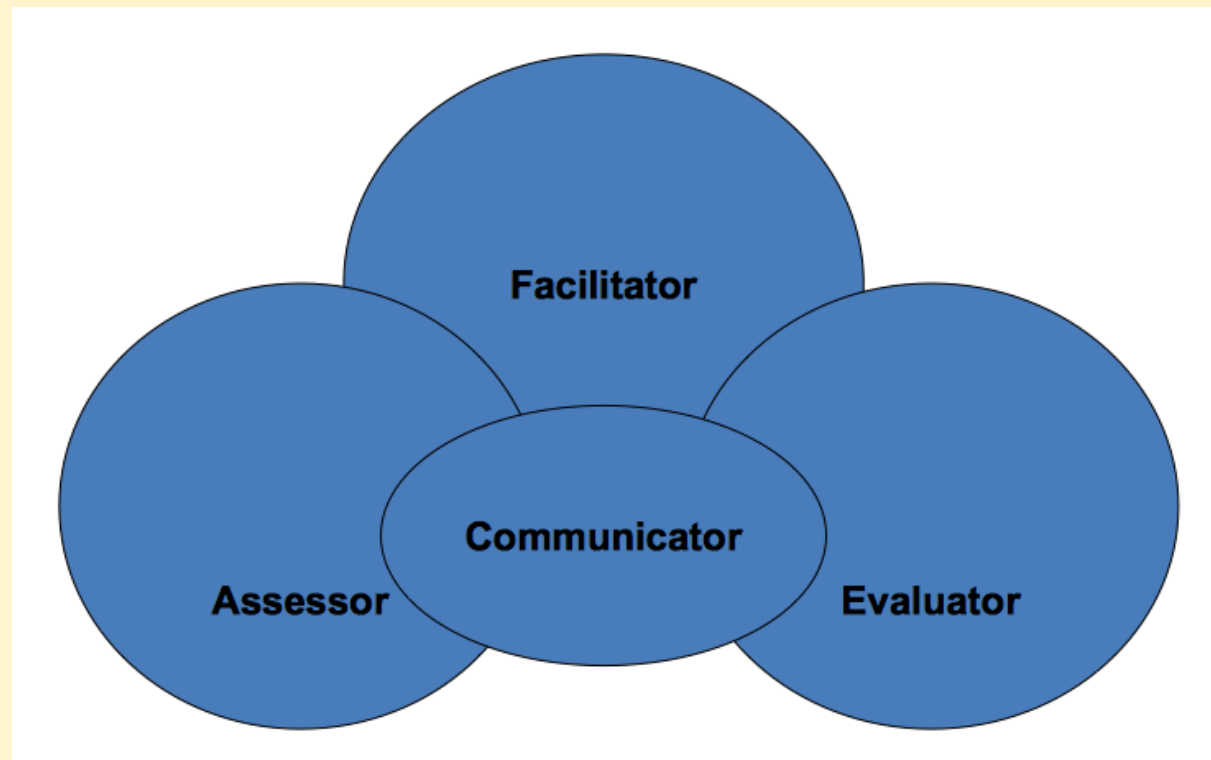


A professional's role in a healthcare team is dependent on three factors: the patient population or setting, the legislated scope of practice, and the professional's personal competency.

IPE in Collaborative Practice

The Roles of A Practice Educator

Engage,
Encourage,
Reward.



(Cross, V., Moore, A., Morris, J., Caladine, L., Hilton, R., & H. Bristow. (2006). The Practice-Based Educator A Reflective Tool for CPD and Accreditation. Chichester, UK: John Wiley.)



IPP/IPC Practice Education

Building Curricula

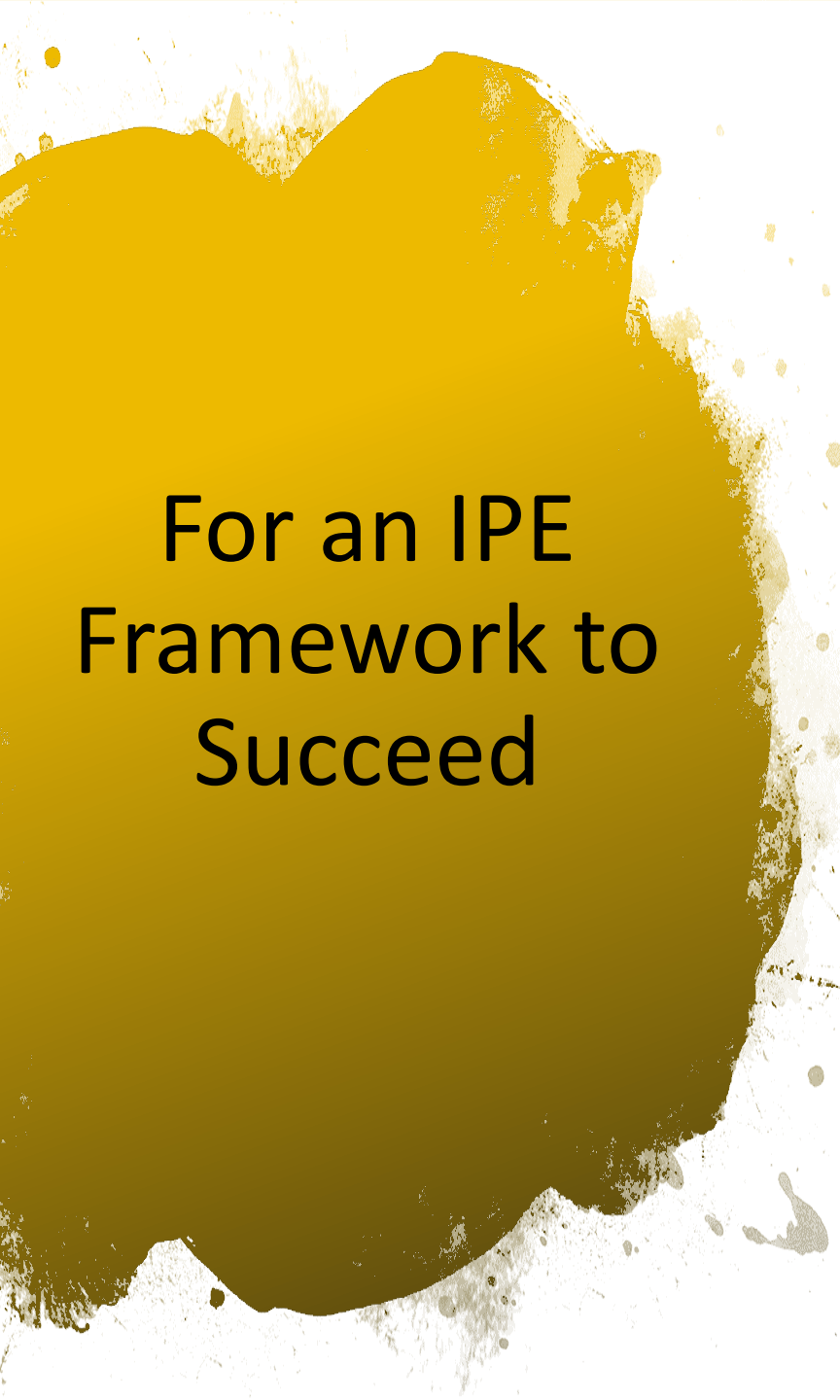
THAT MUST BE

- an integral part of the clinical/practice culture;
- lived experiences of students and practitioners;
- understood and agreed on by all stakeholders; and
- built on IP Competencies e.g.:
 - IP Role Clarification
 - IP Conflict Resolution
 - IP Collaborative Leadership
 - IP Collaborative Functioning

IPE/IPL/IPP/IPC: Some Lessons Learned

First: *Classroom learning does NOT equal workplace practice.*

- IP collaboration has to be taught and learned. It is NOT achieved by miracles.
- The culture of IP collaboration must be built strategically:
 - every day,
 - with every patient, and
 - every care provider – professional and family.

A large, textured yellow brushstroke shape on the left side of the slide, with some darker spots and a rough, hand-painted appearance.

For an IPE
Framework to
Succeed

Second:

Commit to sustain

*The only cash flow is
an institution's cash
flow.*

Build on what exists.

Third:

The IP Culture

A spreading circle of influence

“We overestimate the change that will occur in two years and underestimate the change that will occur in the next 10” (Bill Gates).



An Eternal Verity Cake Making Comes Before Cake Distribution

