Issues, applications and outcomes in interprofessional education

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Issues, Applications and Outcomes in Interprofessional Education

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Overview

In this issue, we are very pleased to present six articles, each of which has a strong interprofessional theme and which, we believe, collectively provide a flavor of the diversity of interprofessional community-oriented education, practice and research activity occurring internationally.

Early accounts of interprofessional education (IPE) are traced back to 1948 when, as pointed out by Tope,[1] the World Health Organisation (WHO) stated “Integrated interdisciplinary education in health care is a global issue.” Overall, developments in IPE have heavily relied largely on leaders in both education and practice, who are dedicated and determined pioneers.[2]

This is still the case as IPE and collaborative practice has moved forward in many countries internationally since the WHO[3] provided a Framework for action on interprofessional education and collaborative practice. This document built on the Centre for Advancement of Interprofessional Education (CAIPE) (2002) definition and stated:

“Interprofessional Education occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.”

The framework itself encouraged a community focus, working with the local people and organisations to review their health needs and building an interprofessional team, which included members from the community in seeking to collectively address identified health needs. While there is no doubt that the WHO document has encouraged more interprofessional developments internationally, many countries have also built on the experiences and publications of others and used best practices from around the world to inform their activities and programs.

It is perhaps not surprising that colleagues working collaboratively are often keen to share good practices and help others learn from both their successes and mistakes. This has resulted in a wealth of information on both resources available and summaries of learning that has taken place. Collaborative networks have been developed internationally to further help in this sharing of good practices, as Figure 1 indicates.

Adapted from Forman (2009)

The Network: Towards Unity for Health (TUFH) is proud to be one of these networks and its annual conferences always includes a theme, which further encourages the sharing of good interprofessional practices internationally. Within Network: TUFH, there is a designated taskforce dedicated to the development and implementation of best practices in IPE. This special issue of Education for Health (EfH) reflects this dedication and commitment.

Commentary on IPE Articles and Key Interprofessional Themes

As each article focus on local interprofessional community-oriented activities, it is interesting to note how they also touch on themes that are emerging as current topics for discussion in the context of global health.

Engagement Studios: Students and Communities Working to Address the Determinants of Health: University of British Columbia, Canada

As with the other IPE articles, this research article brings into focus the impact that interprofessional developments can have on highlighting the social determinants of health, both locally and nationally. The authors of this research article indicate that an “Engagement Studios model involves a partnership between community organizations and students as equal partners in conversations and activities aimed at addressing issues of common concern as they relate to the social determinants of health.” They emphasize the need to continue to carry out
research in IPE, a theme that is constant in the interprofessional world. In 2009, Reeves et al.\cite{4} undertook a Cochrane review of interprofessional articles that had been published, and also stressed the need for more research to look at the impact IPE has on individuals and the community. As work with the engagement studios continues, it is hoped that more research into the impact of this and similar programs can be conducted.

**Integrating Medical and Health Multiprofessional Residency Programs: The Experience in Building an Interprofessional Curriculum for Health Professionals in Brazil**

Encouraging IPE and collaborative practice is being advanced as part of the answer to addressing the needs of aging populations internationally. Other examples of how this has been achieved can be found in Cartwright et al.\cite{5} and Hoti et al.\cite{6} This research article, however, looks at the aging population in Brazil and the challenges posed in this culture. IPE has brought together previously distinct educational programs in medicine and multiprofessional health education. The research article emphasizes the need for review processes to be in place and outcome evaluation, which is crucial in all interprofessional interventions.

**Patients’ Nursing Records Revealing Opportunities for Interprofessional Workplace Learning in Primary Care: A Chart Review Study**

This article outlines research undertaken in Belgium in 2010, which involved 72 nurses and 336 patients. Overall, 2061 contacts were recorded between nurses and general practitioners (GPs). By recording the types of communication made as learning activities, the nurses were able to “notice and identify GP’s learning needs and learning activities.” This study provides a means of analysing and evaluating the types of interaction, which take place between the professions in practice settings. As the researchers indicate, this type of evaluation of interprofessional practice can help to enhance patient health outcomes, and also contribute to continuing professional development of healthcare professionals.

**The REACH Project: Implementing Interprofessional Practice at Australia’s First Student-led Clinic**

Developed in Australia, the REACH model outlined in this article demonstrates how learning from a model that works effectively in one country, namely America, can be adapted to another country, even when funding mechanism policies and practice differ. The article outlines how the student-led clinic has been developed and how tensions between not only the different professions but also competing healthcare principles have been managed.

**Community-oriented Interprofessional Health Education in Mozambique: One Student/One Family Program**

This brief communication points out the need to look at interprofessional competencies as it outlines the development of a program that works across five different medical schools. The article describes a program that moves beyond profession-specific educational efforts, to promote the initiation of interprofessional collaborative practice, as the key to safe, high quality, accessible and patient-centered care.

**Street Outreach and Shelter Care Elective for Senior Health Professional Students: An Interprofessional Educational Model for Addressing the Needs of Vulnerable Populations**

In this last brief communication, the University of New Mexico Health Sciences Center (UNMHSC) describe a program designed to bring together educators, clinicians and researchers in looking at a curriculum model, which incorporates case-based discussions. The authors outline how the focus of their case study looks at the interrelationships of homelessness, poor health outcomes, gaps in services and gaps in public policies. Similar to previous discussion by Forman et al.,\cite{7} the need for
strong and consistent leadership is emphasized in this article. Institutions, similar to the example presented in this article that are developing IPE and collaborative practice opportunities may well benefit from reflecting on a framework that has been developed through 5 years of research in Australia. The Interprofessional Curriculum Renewal Consortium, Australia[8] outlines the findings of past research and provides a framework, which is now being used internationally, to ensure that there is appropriate consideration of the multiple issues impacting IPE curriculum development.

Concluding remarks: Overall, the articles in this special issue of EFH point to the range and type of significant work that has been carried out and is still being conducted in the development and assessment of interprofessional competencies and capabilities. To this end, Thistlethwaite et al.[9] summarized how these developments have been led and also suggested directions for further research in the area of IPE.

The editors of this special EFH issue in themselves represent an international group of researchers who have a particular interest in IPE. They include: Professor Dawn Forman (Australia and UK), Professor Hugh Barr (UK), Professor Betsy Van Leit (USA), Dr. Janet McCray (UK) and Professor Marion Jones (NZ).[10] It is our hope that the articles in this special issue of EFH will stimulate more interprofessional community-focused initiatives. For those reading these articles who would like to take IPE to next stages of development, a recently published guide by Barr and Low[11] may be helpful. We would also like to encourage people, whether they are new to IPE or just wanting to update themselves, to check out their local networks for more information. And remember that there is a working group on IPE as part of Network: TUFH.

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References


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