

Governor Dugaard's Task Force on Primary Care
August 30, 2012

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Interprofessional Education and Primary Care

Interprofessional Education and Collaborative Practice

Definitions

Interprofessional Education

When students from two or more professions
learn about, from and with each other
to enable effective collaboration
and improve health outcomes
(WHO, 2010)

Interprofessional Collaborative Practice

When multiple health workers
from different professional backgrounds
work together with patients, families,
caregivers, and communities
to deliver the highest quality of care
(WHO, 2010)

Interprofessional Competencies in Healthcare

Knowledge, skills, and values/attitudes that define working together across the professions, with other health care workers, patients, families and communities to improve health outcomes in specific care contexts

Interprofessional Teamwork

Cooperation, coordination and collaboration between professions in delivering patient-centered care

Concepts of Teamwork

D'Amour et al, 2005

- **Multiprofessional**
 - independent
 - parallel
- **Interprofessional**
 - integrated, translating themes and schemes
 - common goals and decision-making processes
- **Transprofessional**
 - consensus-seeking and opening up of professional territories
 - boundaries blur or vanish

History

- Introduced 40 years ago in North America and Europe
- Endorsed 20 years later by the World Health Organization (WHO 1988)
- Canadian government funded development of interprofessional collaborative projects in the provinces 6 years ago

Why IPE?

(WHO 1988)

- Develop ability to share knowledge and skills collaboratively
- Become competent in teamwork
- Decentralize curricula
- Integrate new skills and areas of knowledge
- Ease interprofessional communication
- Generate new roles
- Promote interprofessional research
- Improve understanding and cooperation between education and research institutions
- Permit collective consideration of resource allocation according to need
- Ensure consistency in curriculum design

What?

- Inviting practitioners from different professions to explain their roles and work
- Observation visits and placements to experience other professions at work
- Choosing case materials that represent other professions positively and purposefully
- Gathering students learning at sites concurrently for learning experiences and discussions

How?

- Debates and case studies
- Problem-based learning, collaborative inquiry, continuous quality improvement
- Joint patient visits by teams of students
- Simulation-based learning
- Practice-based – co-location for placements or working with existing IP teams
- E-learning, hybrid learning, lectures

Core Competencies for Interprofessional Collaborative Practice

IPEC Expert Panel Washington D.C., May 2011

- Interprofessional Competency Domains
 - Values/ethics
 - Roles/responsibilities
 - Communication
 - Teamwork and team-based care

Bud Baldwin

Baldwin D, *Journal of Interprofessional Care*, 1996

- Barriers
 - Limitations on the amount and timing of interprofessional inputs into the curriculum
 - Lack of functioning interprofessional clinical role models
 - Limitations in traditional "lock-step" education of professionals
 - Turf-guarding and territorial imperatives
 - Insular certification and accreditation requirements
 - Traditional professional power dispositions
 - Administrative resistance to new forms of education
 - Difficulties in matching academic schedules and students skills levels
 - Initial expense of new programs
 - Resistance of established programs

The Evidence for IPE

Reeves et al., July 2008, CIHC

- IPE
 - Is well received by participants
 - Has the potential to enable learning skills for collaboration
 - Has potential to enhance practice, improve delivery of services and make a positive impact on care
 - QI can support IPE in enhancing practice, delivery of services and patient care
 - Can be effective in a variety of settings

Evidence for IPCP

- After almost 50 years of inquiry, there is now sufficient evidence to indicate that interprofessional education enables effective collaborative practice which in turn optimizes health-services, strengthens health systems and improves health outcomes

Research evidence has shown a number of results:

- 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
- In community mental health settings collaborative practice can:
 - increase patient and carer satisfaction
 - promote greater acceptance of treatment
 - reduce duration of treatment
 - reduce cost of care -reduce incidence of suicide
 - increase treatment for psychiatric

Evidence

- Collaborative practice can improve:
 - access to and coordination of health-services
 - appropriate use of specialist clinical resources
 - health outcomes for people with chronic disease
 - patient care and safety

Competencies for interprofessional teaching

Freeth et al., Effective IPE, 2005

- A commitment to IPE and practice
- Credibility in the particular focus of the IPE to which the educator contributes
- Positive role modeling
- An in-depth understanding of interactive learning methods and confidence in their application
- A knowledge of group dynamics
- Confidence and flexibility to use professional differences creatively within groups
- Valuing diversity and unique contributions
- Balancing the needs of individuals and groups
- Inner conviction and good humor in the face of difficulties

Bud Baldwin

D'Avray L. Interview with DeWitt C. Baldwin, Jr. *Journal of Interprofessional Care*, October 2007; 21(S1):4-22

Observations of IPE and IPP in the US suggest that it appears to be most successful

- when the guiding concept is one of health rather than illness,
- when it is located outside of the hospital, addresses chronic rather than acute conditions, focuses on special populations like children and the elderly and
- is located in underserved rural or urban areas

UND SMHS

- 2006 – Interprofessional Health Care Course
 - 1900 students to students from ten health professions/disciplines
 - Required of five health professions
 - Expanding to clinical sites
- 1998 - Student Experiences and Rotations in Community Health (SEARCH)
 - 400 students in six health professions
 - Primary care practice in HPSAs
 - 60 communities
- Collaborative Rural Interdisciplinary Service Training and Learning (CRISTAL)
 - 46 students from several disciplines
 - Summer internship on North Dakota reservations learning about American Indian health and interprofessional teamwork

IPE Programs in the U.S.

- Medical University of South Carolina Creating Collaborative Care
- Jefferson Interprofessional Education Center
- University of Minnesota's Center for Interprofessional Education

Resources

- Effective Interprofessional Education – three book series Blackwell Publishing 2005
- Framework for Action on Interprofessional Education and Collaborative Care – WHO 2010
http://www.who.int/hrh/resources/framework_action/en/index.html
- Core Competencies in Interprofessional Collaborative Practice
<http://www.aacn.nche.edu/education-resources/ipcreport.pdf>
- Journals
 - Journal of Interprofessional Care <http://informahealthcare.com/jic>
 - Journal for Research in Interprofessional Education
<http://www.jripe.org/index.php/journal/index>
- Canadian Interprofessional Health Collaborative
<http://www.cihc.ca/>
- American Interprofessional Health Collaborative <http://www.aihc-us.org>

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