

Preparing Tomorrow's Healthcare Providers for Interprofessional Collaborative Patient-Centred Practice Today

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ABSTRACT

Interprofessional collaborative patient-centred practice is increasingly recognized as a means of addressing the challenges facing today's health care environment, such as patient safety issues, human resource shortages, and populations with complex health care needs. However, in order to be able to practice collaboratively, future health care providers need to receive an education that gives them the competencies necessary for being an effective team member. Interprofessional education provides opportunities for students to develop the knowledge, skills, and attitudes required to work as a member of an interprofessional team. This paper discusses some of the main arguments in support of moving towards collaborative practice models and advocates the need to train future health care providers using an interprofessional approach in support of this shift. This paper provides a survey of the literature in support of incorporating interprofessional education into health and human service curricula.

INTRODUCTION

Interprofessional collaborative patient-centred practice is increasingly advocated as a means of improving patient outcomes and the cost effectiveness of care in a variety of settings from primary health care to acute care to rehabilitation.¹ Collaborative practice “is designed to promote the active participation of each discipline in patient care. It enhances patient and family centred goals and values, provides mechanisms for continuous communication among care givers, optimizes staff participation in clinical decision making within and across disciplines and fosters respect for the disciplinary contributions of all professionals”.²

In a health care environment faced with patient safety issues, human resource shortages, and populations with increasingly complex health care needs, health professionals must be able to work in collaborative practice models such as interprofessional teams, in order to ensure consistent, continuous and reliable care. Interprofessional education (IPE), “occasions when two or more professions learn with, from and about each other to improve collaboration and the quality of care”,³ provides opportunities for students to develop the knowledge, skills, and attitudes required to work effectively as a member of an interprofessional team.^{4,5,6} This paper discusses some of the main arguments in support of moving towards collaborative practice models and advocates the need to train future health care providers using an interprofessional

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approach. It concludes by arguing that interprofessional educational opportunities need to be integrated as a required component of health and human service program curricula if collaborative practice models are to become the new reality.

MOVES TOWARDS INTERPROFESSIONAL COLLABORATIVE PATIENT-CENTRED PRACTICE

The literature provides limited evidence of the actual impact of interprofessional collaboration (IPC) on patient care and outcomes.⁷ Current evidence contains mainly descriptive studies of interprofessional interventions. However, there are strong arguments made throughout the literature in support of interprofessional collaborative patient-centred practice as a means of improving patient care. Today's society is characterized by an aging population that is faced with increasing complex health co-morbidities, such as hypertension, osteoporosis, hypercholesterolemia, falls, etc. The resulting complexity of patient care has contributed to a growing awareness that new and

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innovative models of delivery are needed. This need is exacerbated when combined with the current reality of health human resource shortages, increasing health care costs, and patient safety issues. The literature suggests that effective interprofessional teams can help.^{8,9}

1. Reduce service duplication and minimize unnecessary interventions;
2. Reduce health care costs;
3. Enhance patient and health outcomes;
4. Improve retention and recruitment of health providers;
5. Enhance clinical effectiveness; and
6. Provide integrated, seamless care that is perceived as effective by the patient in a range of settings.

Interprofessional collaborative patient-centred practice models involve professionals from different disciplines working together closely, and communicating frequently, in order to optimize patient care. The team is organized around solving a common set of problems and meets frequently to consult. Each member of the team contributes his or her knowledge and skill set to augment and support the others' contributions. In addition, each member's assessment must take into account the others' contributions to allow for holistic management of the patients' complex health problems. Team members preserve specialized functions while maintaining continuous lines of communication with each other.⁹ The value of this model of practice lies in its potential to offer multiple perspectives on clinical issues and create opportunities for enhancing collaborative care.⁵ Examples of this type of teamwork are often seen in complex patient care areas such as palliative care, geriatrics, and mental health.⁹

Over the past decade, there has been a substantial increase in the uptake of interprofessional collaborative practice models internationally. This is demonstrated by the development of new models for IPC in primary care settings throughout Europe, the United Kingdom, the USA, and Canada.¹⁰ For example, in British Columbia (BC), Integrated Health Networks (IHN) are becoming a new way of caring for people with complex, chronic health conditions.¹¹ IHN's are being developed across the province by the BC Ministry of Health Services, the health authorities and the BC Medical Association. In this model, family physicians develop formal partnership with a healthcare team. This team may involve nurses, dietitians, pharmacists, specialist physicians and community agencies. The team works together to determine priorities and develop better ways of organizing and delivering a wide range of services to meet both individual and community needs. The team also works collaboratively with patients and their families to develop a care plan that reflects the patient's goals.

INTERPROFESSIONAL EDUCATION FOR COLLABORATIVE PATIENT-CENTRED PRACTICE

Along with movements towards collaborative practice models comes the need to find out how best to educate a work force that can work together effectively.¹ In 2002, the Health Canada-commissioned Romanow Report stated that "in view of... changing trends, corresponding changes must be made in the way health care providers are educated and trained. If health care providers are expected to work together and share expertise in a team environment, it makes sense that their education and training

should prepare them for this type of working arrangement".¹² However, existing professionally-based educational structures and practices facilitate discipline-specific learning and rarely address the need for collaboration between professions. Interprofessional education has been identified as a means of preparing future health care providers for collaborative patient-centred practice.

Interprofessional education brings students from different disciplines together to learn with, from and about each other. By engaging in IPE that is explicit, interactive, and relevant to their future practice, students can:¹³

1. Learn new knowledge and develop new abilities;
2. Develop the interpersonal skills needed to work effectively with others;
3. Gain experience working in team settings in which group members share common goals; and
4. Learn how to work with others to maximize the performance and output of the group.

While measuring changes in skills, knowledge, and attitudes is a complex issue, numerous benefits to students have been reported as a result of interprofessional training programs.¹⁴ Students who participate in IPE activities show increases in knowledge about the roles of other health professionals, have a greater respect for the contribution of other health care professionals, and understand the importance of working collaboratively to achieve optimal health outcomes.^{14,15,16} Through IPE, students can develop competencies that will enable them to work collaboratively throughout their chosen careers. Therefore, the need to define the essential competencies required for collaborative practice and to develop and implement educational interventions to ensure their adoption is widely recognized.¹⁷

The Canadian Interprofessional Health Collaborative has identified the following competencies necessary for interprofessional collaboration in their newly emerging national competency framework:¹⁸

1. Understanding one's own role, the roles of those in other professions, and using this knowledge appropriately to establish and meet patients' goals;
2. Integrating and valuing, as a partner, the input, and the engagement of patients and families in designing and implementing care;
3. Understanding the principles of team dynamics and group processes to enable effective interprofessional team collaboration;
4. Understanding and applying leadership principles that support a collaborative practice model;
5. Communicating with other professionals in a collaborative, responsive and responsible manner; and
6. Actively engaging self and others in positively and constructively addressing interprofessional conflict.

Faculty at the University of British Columbia (UBC) are engaged in the development of numerous initiatives and strategies that will ensure health and human service program students develop these interprofessional competencies. For example, a new pain management course is being developed which will bring students from different disciplines together to learn content that is common across their curricula. By having students interact around pain management in an interprofessional context, this course will ensure that all members of the team understand the different pain

management strategies and resources available. The students are able to work together to manage pain as well as the underlying disease or condition.

Another IPE strategy UBC has found effective is problem-based learning (PBL). Students and faculty involved in interprofessional PBL initiatives elsewhere have reported that collaborative PBL processes encourage the development of interpersonal skills, teamwork, and respect for all professional roles.^{19,22} Therefore, UBC has developed a module in which a clinical problem presented in a case acts as a vector through which students learn to work together. Students from different disciplines interact to develop a collaborative care plan for the patient in the case. Students who have been exposed to the module early in their program report that they learned about the roles of other disciplines and gained the confidence to share their own role with their team members.²³

These and other IPE initiatives highlight the importance of creating learning opportunities that: are relevant to learners' current or future practice; use typical, priority health problems that require interprofessional approaches for their solution; and incorporate learning methods which facilitate interaction between learners from different professions, including small-group learning formats such as case-based and problem-based learning.^{21,24,25} However, most importantly, IPE opportunities need to be accessible to students. Making IPE a required component of a student's program, rather than an elective or extracurricular activity, will facilitate this. These and other initiatives being developed at UBC have yet to be integrated as required learning in the health and human service program curricula.

REFORMING HEALTHCARE EDUCATION

Policy makers from Canada, the United Kingdom, New Zealand, and the United States are increasingly recommending changes in health professional curricula in order to ensure student acquisition of competencies that facilitate collaborative practice.^{1,8,14} However, for any educational program to work, it has to be supported by professions and the administration of the educational and clinical institutions involved, valued by students, and hold its appropriate place in curricula.^{1,8} Education programs which integrate interprofessional education throughout the curriculum, starting with the pre-qualification experience, continuing into postgraduate education, and extending into continuing professional development, offer the best potential for interprofessional learning.^{1,8} With the support of Faculty, and the interest of health professional students, IPE is more likely to become appropriately implemented into the curriculum across a variety of health care disciplines.

SUMMARY

The need for interprofessional collaborative practice models continues to grow, as does the need for health professional education programs that are committed to integrating interprofessional education into curricula. The complexity of patient care, shortages in health care professionals, increasing health care costs, and patient safety issues continue to challenge the health care system. Interprofessional collaborative patient-centred practice offers a possible means of addressing these challenges, while interprofessional education offers a means through which

students can develop competencies that will enable them to work collaboratively throughout their chosen careers. However, in order to support this argument, continued scholarly research is needed in order to determine whether there is a direct link between interprofessional education and interprofessional collaboration, and this collaboration and improved health outcomes. 

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