

WORKSHOPS SESSION 3
Tuesday, 6 April 2010: 1400 – 1600 hours

USING VIRTUAL COMMUNITIES TO PROMOTE INTERPROFESSIONAL EDUCATION: A NORTH AMERICA / BRITISH COOPERATIVE VENTURE

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Education today is moving away from didactic, classroom based, theoretical approaches towards learning experiences that mimic real clinical environments. Case studies and problem based learning (PBL) were innovative techniques that facilitated interprofessional learning. However they suffer from the limitations of being static and isolated from the complexity of everyday life. The focus tends to be on a problem rather than the person and their context, whilst the dynamic and complex nature of interprofessional working is not captured by static case studies.

Our workshop will demonstrate a different approach through the development of dynamic, virtual communities, which serve as enhanced clinical practice environments for various health care professions. We have shared ideas and expertise in the creation of three such communities in the UK, USA and Canada each representing a small but diverse neighborhood. Our narrative pedagogy model uses a multimedia approach to bring our communities to life for students. We also work closely with service delivery agencies to ensure maximum realism, this allows us to explore interprofessional working as a key theme.

Whether working online or in class, students access these interactions between health professionals, patients and families and base much of their learning on the problems and challenges they present. Through this interactive virtual clinical practice students learn with, from and about one another in ways similar to actual clinical situations. Interprofessional learning is facilitated by this context rich approach which produces re-usable resources, enhancing the sustainability of the model. Nursing, paramedic science, imaging science, social work and mental health students are currently involved in learning together whilst other agencies such as schools and the police are becoming involved.

We will explore with participants how virtual communities could be used to facilitate their own interprofessional learning requirements, using our own experiences, evaluations and research findings as resources.

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SHARING TOOLS AND PRODUCTS FROM THE AHP PRACTICE-BASED EDUCATION FACILITATION (PEF) PROGRAMME SUPPORTING THE WORKPLACE AS A LEARNING ENVIRONMENT

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The AHP PEF programme has been successfully received as a highly productive means to support the quality, capacity and capability of allied health professionals in practice education activities. In addition to the work within each local Health Board in Scotland, AHP PEFs from the smaller health boards alongside the regional coordinators have led national work focussing on priorities identified by the NES Practice Placements Projects and the AHP CPD needs report both produced in 2005. These national workstreams include:

1. Developing AHP Practice Placement Agreements (aka Memoranda of Understanding)
2. Adaptive placements
3. Support workers as educators
4. Developing quality standards for placements
5. Involving service users and carers in practice education
6. Systems to support student allocation
7. Clinical education career pathways
8. Accreditation of work-based learning
9. Education needs of practice educators

Outputs of the PEF programme include toolkits, reports, websites and other resources that have generated interest from a wider interprofessional perspective including nurses, paramedics, healthcare scientists and general practitioners. The development and application of these resources will be provided for interactive discussion:

- Models document for student practice education
- Ready for work website providing information for AHPs seeking work in NHSScotland – newly qualified, returners to practice and overseas qualified AHPs
- Support workers as educators report: an analysis of focus groups held across Scotland
- Accreditation of work based learning applying the Scottish Credit Qualifications Framework principles to AHP provided learning programmes
- Analysis of CPD needs for AHPs using eKnowledge Skills Framework
- Stakeholder statement agreed to promote partnership approach to student practice education
- AHP practice placements agreement promoting partnership approach and identifying roles and responsibilities
- development programme including clinical skills simulation,
- engaging service users and carers views as contributors to AHP education
- assisting interprofessional learning in clinical priorities e.g. dysphagia advice DVD

Opportunities for future collaboration will be explored with participants at the workshop.

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INTERPROFESSIONAL CLINICAL EDUCATION THROUGH FOUR DIFFERENT LENSES – PERSPECTIVES FROM POLICY, EDUCATION AND PRACTICE

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Improving the supply of suitably qualified staff in the Victorian health workforce is critical to meeting the public's expectations of safe, timely and accessible health services. Increasing and sustaining the number of students successfully completing relevant courses with suitable clinical skills and knowledge is central to achieving this outcome. Having available a sufficient number and mix of quality clinical placements is a significant challenge for health and human services, universities and government.

Victoria, through the Workforce Branch of the Department of Health, has a strategic focus on strengthening and extending clinical education. In this workshop, we will present a brief overview of the key challenges and policy directions and use examples from three funded projects that demonstrate how clinical capacity, efficiency and effectiveness can be improved through innovation. These projects aim to identify more efficient and effective training models, to enhance the quality of clinical placements through interdisciplinary and multidisciplinary models of training and to expand the overall clinical placement capacity across Victoria.

This interactive workshop will enable participants to experience activities from each of the projects in order to:

- explore the learnings from these ongoing projects for interprofessional training and practice;
- review the achievements to date with an emphasis on practical application to health and human service settings; and
- discuss the challenges and opportunities that lie ahead.

This collaborative workshop will be of interest to people from across the spectrum of policy, education, health and human services. Participants will have an opportunity to actively engage in a number of project activities to stimulate discussion and reflection on innovations that have potential for application in a wide range of settings.

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COLLABORATING FOR BETTER HEALTH IN WAITEMATA

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Collaboration and partnerships in a rural community embedding interprofessional learning and practice will be shared. Opportunities have been proactively taken in Wellsford, despite many challenges and barriers. Empowerment, education, disseminated service and alliance-building have been applied to reducing inequalities in health. Tertiary education and many services are still configured in silos, yet integrative models are required for contemporary service delivery. In Wellsford, innovative interprofessional education is supported and facilitated by the community and local practitioners, District Health Board and Universities. Infrastructure includes student lodge, management, clinical and professional champions. The approach is systemic with focus on what works and why in the context, openness to new ideas and learning as part of the day-to-day practice and culture. Interprofessional learning and practice span primary medical and health care services including family/whanau programmes, long-term condition and self-management support, strong acute services, nurse-led wellness clinics, occupational therapy, physiotherapy, counselling, podiatry and Maori home visiting nurses. Community development is valued as are indigenous and sustainable living skills. Findings are compelling and implementation experiences offer generalisable learnings.

The local partners are characterised by their passion for rural primary health care, teamwork and social entrepreneurship. The learnings are in the context of innovation experience in the District over the past five years. The time spent with stakeholders at the start of a programme or innovation and getting buy-in from all, especially the end user/customer/patient is most valuable. Time spent in collaboration produces a better end result. Everything takes longer than expected, due to bureaucracy and involvement of many people. Champions are necessary to progress an innovation and where there is limited budget it is passion and power sharing that make the difference to the outcome. Policy and managerial support make a huge difference to the success of the innovation; effective communication is essential throughout to ensure sustainability, and sharing knowledge is fundamental.

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METHODS FOR GATHERING EVIDENCE OF INTERPROFESSIONALISM AS A FOUNDATION FOR IMPROVEMENT

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This workshop explores in detail the variety of methods offered by the social sciences to gather evidence to evaluate the extent of interprofessional working. We explore the roles that particular methodologies and research strategies play in delivering evidence as a benchmark for improvement, and briefly consider the rationales that underpin research and evaluation generally, and qualitative and quantitative methods. The workshop focuses particularly on the triangulation of various methods to maximise their individual strengths and minimise their weaknesses. The workshop exemplifies this strategy with the IPL-IPP action research project currently underway in Australia. In particular, we consider the role played by questionnaires to deliver attitudes, by interviews and focus groups to deliver cultural beliefs, and ethnographic observation to deliver evidence of practices in real times and places. We show how the suite of methods used, and the results they delivered, were able to form a basis to improve interprofessional learning, education and practice.

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USE OF TRAINED OBSERVERS TO ASSESS STUDENT INTERACTION DURING A CASE-BASED INTERPROFESSIONAL GROUP DISCUSSION

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Effectiveness of interprofessional education (IPE) is often measured by students' change in perceptions or attitudes toward learning objectives such as teamwork and collaboration. Educators have developed a variety of attitudinal measurement scales. In addition to assessing student learning outcomes in the affective domain (attitudes/feelings), course instructors/facilitators should be proficient in evaluating cognitive, psychomotor and communication skills as measures of IPE effectiveness. This presentation addresses the use of trained faculty observers to rate student behaviors during an in class small group discussion of a patient case. Data was collected as part of a pilot study that included 60 students from six professions (Nursing, Osteopathic Medicine, Pharmacy, Physical Therapy, Physician Assistant, Veterinary Medicine). The first step involved the selection of four positive and three negative behaviors to be measured during 1-2 hour classroom sessions. Following a brief training session, faculty observers watched a video of student interactions and recorded student behaviors. Observer recordings were calibrated; inter-rater reliability was good for six of the seven observers. Observations were then made of eight student groups from the pilot study, which introduced a case-based approach to IPE. This interactive workshop will provide participants the same facilitator observation training.

Following this workshop, participant will

1. Identify student behaviors to be observed and rated.
2. Develop an assessment tool to measure student behaviors.
3. Develop strategies to make observations.
4. Create multi-media materials to train and assess faculty observers.
5. Recognize the challenges of using faculty observers to rate student behaviors.
6. Use standardized patients to train and standardize faculty observers.