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# WEBINAR SERIES ON INTERPROFESIONAL HEALTH EDUCATION



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**Americas**



Universal health  
Access and coverage for all

# INTERPROFESSIONAL EDUCATION

## From Policies to Practice in the Region of the Americas

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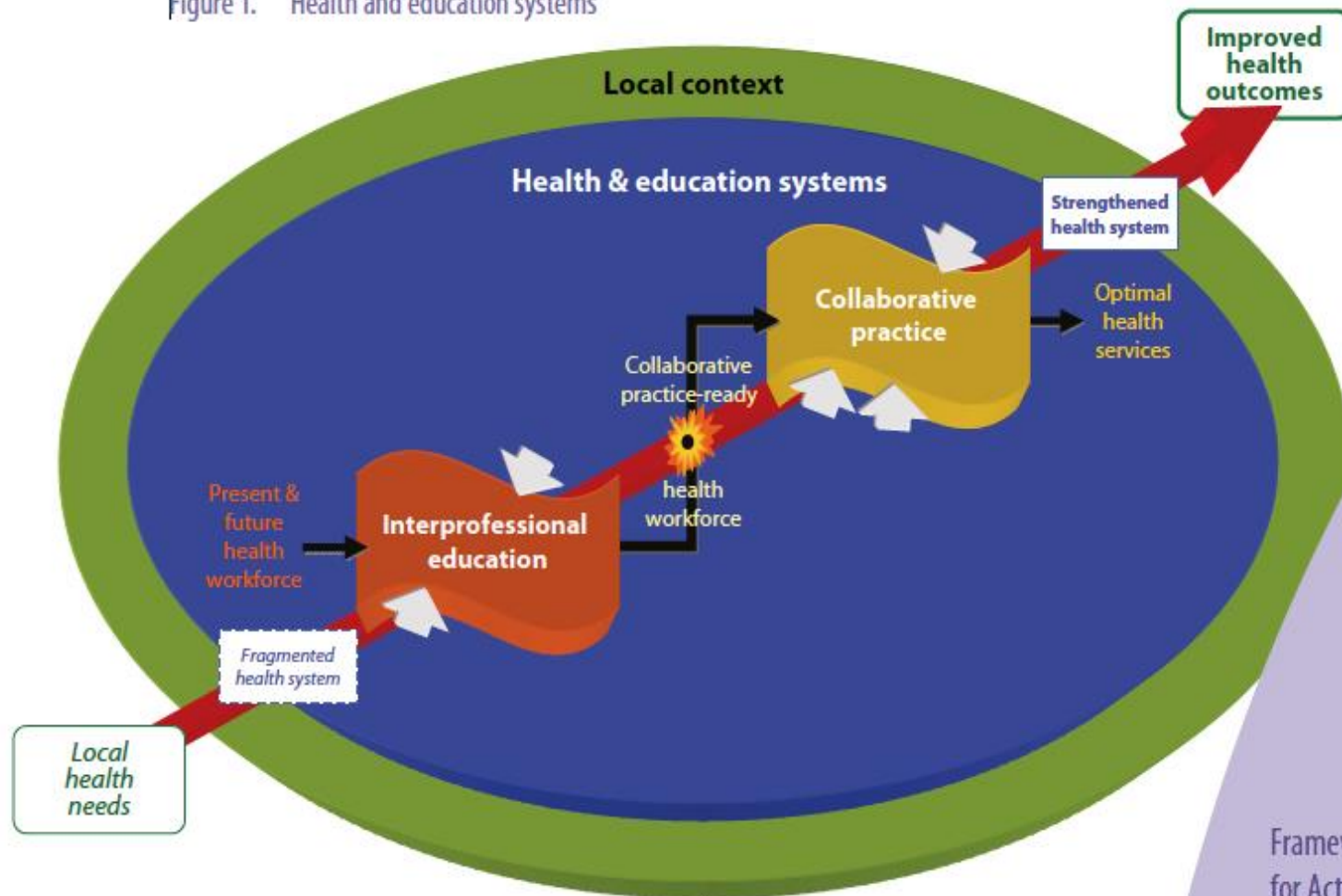


# IPE: A Metanarrative

- General Observations
- Curricular Challenges
- Collaborative Practice
- Practice Education
- A Major Lesson Learned
- A Vision for the Future

# IPE. 1. A Framework for System Change

Figure 1. Health and education systems



2010 [www.who.int/hrh/nursing\\_midwifery/en](http://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?

## A 3-Part Definition\*

1.0 Learning *With, From* and *About*

2.0 For the purposes of *collaboration*

3.0 To improve the *quality of care*

\* WHO (2010) Framework for Action on Interprofessional Education & Collaborative Practice – following the CAIPE definition (2002)

# IPE: Curricular Challenge:

## 1. 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
- I need to know what *YOU* know
- *WE* need to know what *WE* know
- *WE* need to know *WHEN* we need to know

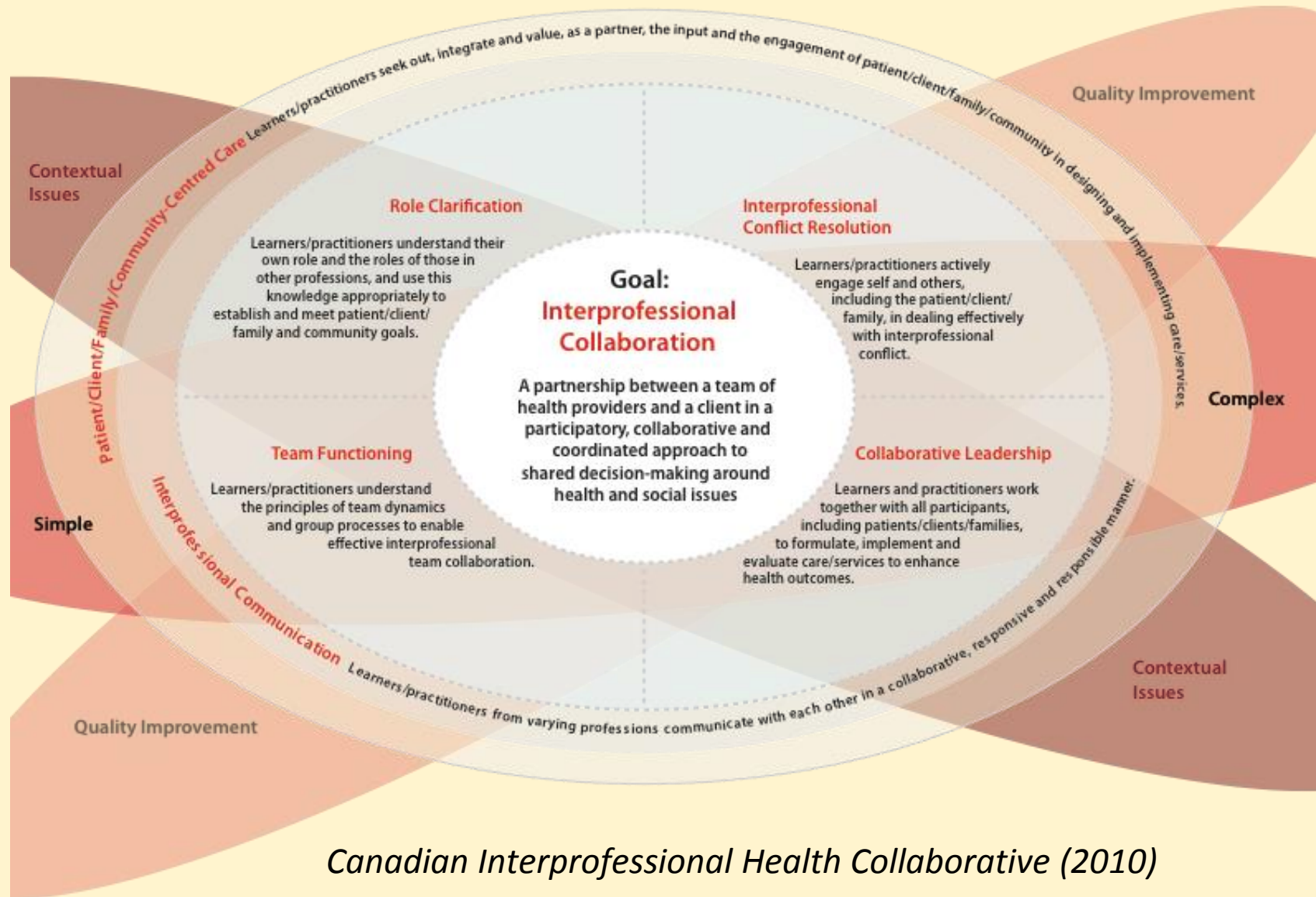


# IPE Curricular Challenge:

## 2. Faculty & Collaboration

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

# IPE Curricular Challenge: 3. Competencies



*Canadian Interprofessional Health Collaborative (2010)*

# IPE Curricula Challenge:

## 4. Competencies, Collaboration, Quality

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

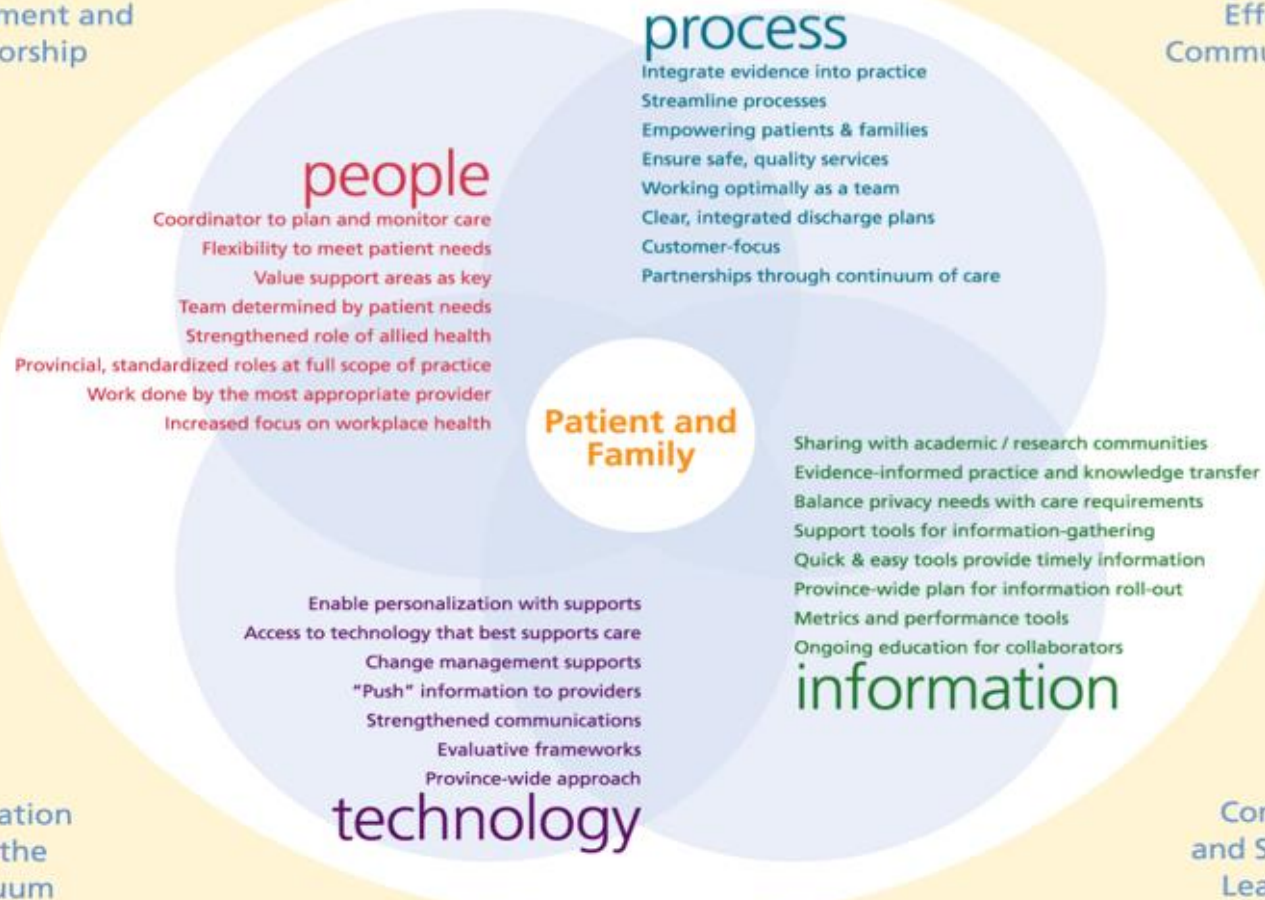
***Link competencies to the definition of IPE,  
and to scopes of practice.***

# IPE Curricular Challenge: 5. Practice

## Collaborative Care Model

Ongoing Staff  
Development and  
Mentorship

Strong and  
Effective  
Communications



Collaboration  
Across the  
Continuum

Committed  
and Supportive  
Leadership

*Nova Scotia Health, Canada. October 2008*

# IPE in Collaborative Practice

## 1. Patient Centred Care - 4 Core Principles

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

# IPE in Collaborative Practice:

## 2. 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 1 – Family Doctors & Nurse Practitioners Delivering Shared Care". THE ONTARIO COLLEGE OF FAMILY PHYSICIANS

# IPE in Collaborative Practice:

## 3. Skills Needed

*A trained ability to:*

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

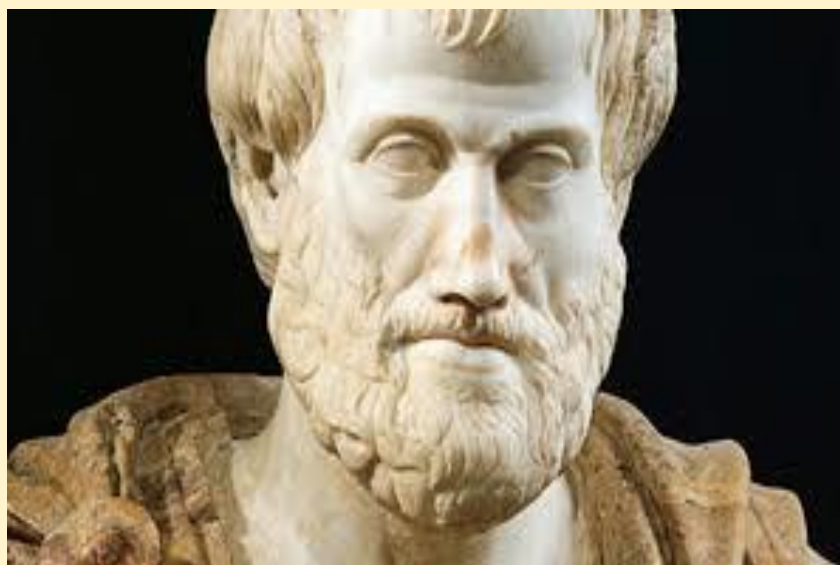


# IPE in Collaborative Practice:

## 4. 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))

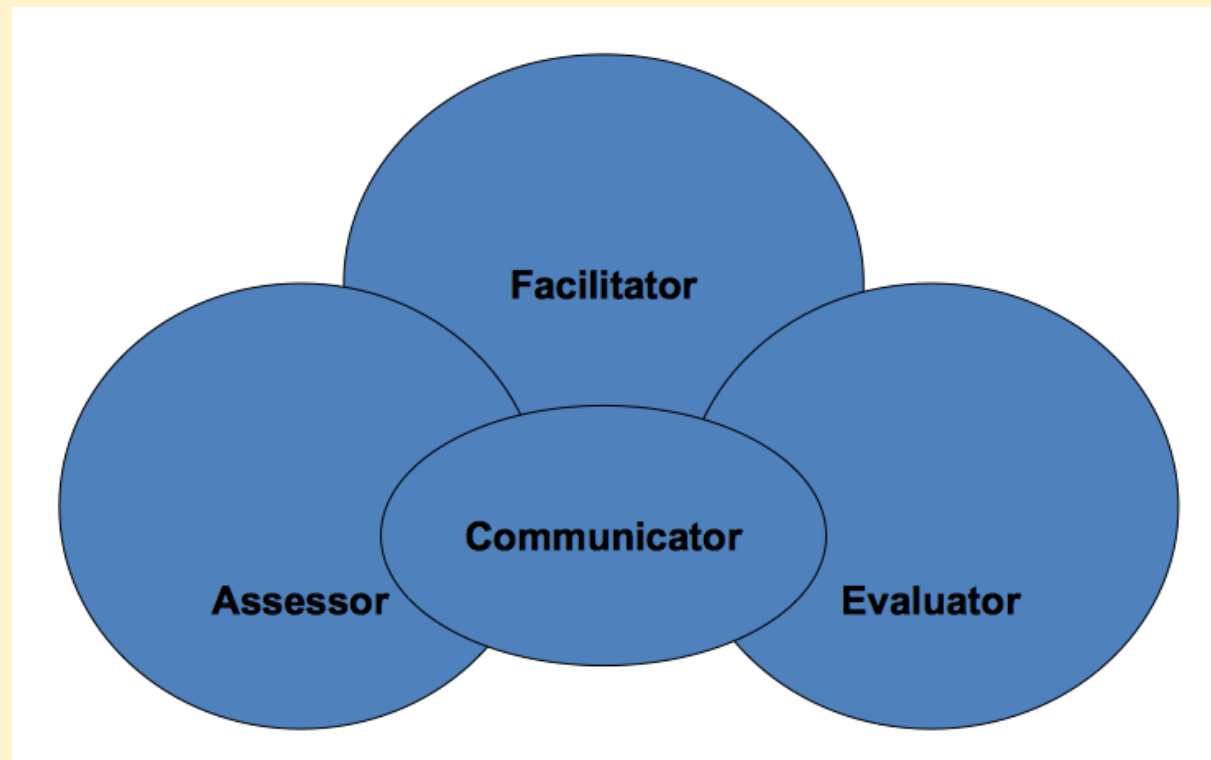




# IPE in Collaborative Practice

## 5. The 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.)

# IP Practice Education: 1. Building Curricula

## **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 i.e.:
  - Role Clarification
  - IP Conflict Resolution
  - Collaborative Leadership
  - Team Functioning

# IP Practice Education: 2. The Realities

- Classroom learning does NOT equal workplace practice.
- IP teamwork has to be taught and learned. It is NOT achieved by some miraculous means.
- The culture of IP teamwork must be built strategically:
  - every day,
  - with every patient, and
  - every care provider – professional and family.

# IPE: For the Framework to Succeed A Major Lesson Learned

## “Commit to sustain”

*The only cash flow is an institution's cash flow.  
Build on what exists.*

# IPE: The Americas - A Vision for the Future

“The best time to  
plant a tree is 20  
years ago.”

“The second best  
time  
is now.” *(Proverb)*

