Interprofessional education: a “buzzword” or a real imperative?

Robert Greif, MD, MME, FERC
Professor; Department of Anesthesiology & Pain Medicine, Bern, CH
Director Peripheral Anesthesia Division
Director Medical Education
ERC Board Director Training and Education
ILCOR Task force ETI
ESA Academy – e-Learning
Chair SENA
No conflict of interest – no commercial money 😭

I am paid for teaching by the University Hospital Bern

I want the best-trained personnel ever for myself

Deeply biased towards “better” = more efficient teaching
Overview

- What is inter-professional education? – 15 min
- Why are we discussing that here?
- Do we have evidence that it works?

I invite you to follow and share some, most likely divergent and “provocative” thought

“if we do not abandon our common ways we never find new paths to other targets”
Why even discuss inter-professional education 2014/15?

- We work together for years
- We know the “others”
- Their attitudes, behavior, how to communicate

- Generation X, Y - work and educate
- Expectations and motivations changed
- “Work-life balance” - “Life-time balance”
- “Feminization” of medicine
- Part-time working – «part-time education»
- Patient safety movement – role of the professions in it
**Other Influences on Education 2014/15**

**Pressure to …**
- … train more and more people
- … increase skills (based on knowledge) to master
- … follow overwhelming new guidelines each year

**Less time**
- work time regulations
- financial pressure
- clinical case load ↑
- ↓ health care staff but ↑ patients
- ↓ time off from work - ↓ educational opportunities

- Separation between “academic medicine” ↔ “daily practice”
- Be a super health care provider hero

“evidence based acting, highly skilled, communicating empathically, open to all complaints, deciding wisely, lovely situationally alert health care professional having a counterbalanced socially acceptable private life”
**Improved Health Care in 21st Century = Team Success**

**Shift from the individual “individual hero” to group performance**

**Most learning happens in groups**
- Humans group together
- to work, to live, to learn, to play
- over thousands of years
- to survive
The ancestors of Man

Without Progress Decline
Inter-professional Education - IPE

- occasions when students from different professions in health care learn together during their professional training
- object of cultivating collaborative practice for providing patient-centered health care

- focuses on developing skills needed for health care providers to work together in teams,
- improving understanding of what various health professionals do, and how to effectively communicate and collaborate in patient care

1 Centre for the Advancement of Interprofessional Education (CAIPE), 1997. Interprofessional education - a definition. London; 2 http://www.cihc.ca/
Group or Team?

Different individual professionals working together in a group

↓

same people work together in teams

How can they work together if they don’t learn together?
Learners who received inter-professional education

- most IPE compulsory
- undergraduate level
- typically in group situations
- 47% developed countries
- 37% developing countries

http://www.who.int/hrh/nursing_midwifery/en/
2010 WHO - Framework for Action on Interprofessional Education & Collaborative Practice

Outcomes grouped under IPL
1. Teamwork: team leader & member
2. Understanding own & others roles
3. Communication: listening to team
4. Learning critical reflection & transferring IPL to the work setting
5. Recognize needs of the patient
6. Ethics: understand stereotypical views of others & self

2010 WHO; http://www.who.int/hrh/nursing_midwifery/en/
WHO - Summary of mechanisms that shape IPE

**IPE = more effective when:**
- principles of adult learning are used (e.g. problem-based learning, action learning sets)
- learning methods reflect the real world practice experiences of students (contextual learning)
- interaction occurs between students
- defined learning outcomes & assessment

**Educational mechanisms**
- Institutional support
- Managerial commitment
- Shared objectives
- Staff training
- Compulsory attendance
- Logistics and scheduling
- Champions

*Aristophanes*

*Teaching does not mean to fill up bottles, it means to spark the fire of learning.*

Inter-Professional Education

What else?
IPE: effects on professional practice & health care outcomes

- Effectiveness of IPE compared to separately learning or no educational intervention.
- Six included (4 RCT, 2 cohort)
- 4 of 6: IPE positive outcomes:
  - emergency department culture and patient satisfaction;
  - collaborative team behaviour;
  - management of care delivered to domestic violence victims
- 2 of 6: mixed outcomes or no impact on professional practice or patient care.
- not general conclusion effectiveness (small study number, heterogeneity of interventions, methodological limitations).

Reeves S et al., Cochrane Database of Systematic Reviews, 2008
Inter-professional Education 2015

- Not a “buzzword”
- It is a real imperative
- Improve health care now & in the future
- Changes needed on all levels of medical education
- To make learning, teaching & its application the practice of medicine more effective
The One-Minute Take-Home Exercise

- Write it down and look it up in 2 months from now
  - 1 or 2 personal aims, ideas, topics, and
  - 1 or 2 institutional aims, ideas, topics

you might
  - consider to change
  - or implement
to improve your current approach to inter-professional education, wherever you work.