

Aspects of Relational Learning: Essential Ingredients in the SPICE Project

Sue Berry

Assistant Professor, Division of Clinical Sciences,
Northern Ontario School of Medicine

Lynne Sihvonen

SPICE Project Lead

Michelle Addison

Lecturer, Division of Clinical Sciences,
Northern Ontario School of Medicine





Acknowledgments:

- ✓ Ministry of Health and Long-Term Care & the Ministry of Training, Colleges and Universities, through the *HealthForceOntario Interprofessional Care/Education Fund*
- ✓ SPICE Project Team
- ✓ Evaluation Consultant: Centre of Education and Research for Aging and Health (**CERAH**)

Context of the SPICE Project

Students Partnering in Interprofessional Care and Education



- Students practising in clinical teams on oncology/palliative care units for up to 10 hours per week
- Per module, a range of 3 – 7 different health professional students per team
- Skilled *Clinical Learning Facilitators (CLF)*
- Emphasis on combining experiential learning with reflective and relational learning

Pilot Project Demographics



To date, 3 Clinical Learning Team Modules involving a total of:

Students (N= 15)

Clinical Learning Facilitators (N = 7)

Palliative Care Patients (N = 15)



Focus of Paper

- In developing this IP project, both its intent and implementation and evaluation process, all learning processes were considered.
- Preliminary data is beginning to support and draws upon the relational learning work of D. MacKeracher (1996) & R. Josselson (1992)

(MacKeracher, D. (1996). Making sense of adult learning. Culture Concepts, Toronto, Ontario.

Josselson, R. (1992). The space between us: Exploring the dimensions of human relationships. San Francisco: Jossey-Bass.



Preliminary Qualitative Data

- Ethics approval received through Lakehead University and participating hospitals

Data for this paper was drawn from:

- Qualitative data set from daily recorded responses to standardized reflective questions by CLF
- Qualitative data set from daily reflective journals by each student

Sample of Reflective Questions:



(CLF) “To what extent do you think the students demonstrated interprofessional learning today?”

(Patient) “One of the goals of good care is to have students work together. Can you comment on how well you think the students caring for you today are working together?”

(Students) Journaling excerpts (open-ended reflections of IP clinical experiences)

Relational Learning

Def'n – the term “relational” is used widely in the adult learning literature described using words such as:

“interactivity”

“relationships”

“connectedness”

“interactions”

(MacKercher, D. (1996))



Dimensions of Relational Behaviors



According to Josselson (1992):

- Attachment
- Validation
- Mutuality
- Embeddedness



Relational Learning Behaviours

“Attachment”:

- relates to the responsiveness of other persons *(MacKercher, D.)*

IP examples included: how students responded to knowing or understanding other student professional roles or how CLFs encouraged students to share their experience and acknowledge their presence as a resource for IP learning

Quotes Highlighting “*Attachment*”



- **(Patient)** “ Saying I’ll do anything to help, its important that students have an opportunity to learn.”
- **(CLF)** “The patients have responded with a deep trust of “student x.”
- **(Student)** “I also enjoyed interviewing the patient with the RT student and following up with group discussion ... I really enjoyed hearing about the radiation procedure from the radiation therapy student.”

“*Mutuality*”



“Mutuality occurs when we:

- Experience companionship
- Work, collaboratively with others whether as facilitator or learner, and
- Stand with another in harmony, thereby creating a bond of friendship between us
- Mutuality is the relational behavior that we need to cultivate when learners are engaged in fieldwork placements.
- The facilitator and learner work together beside each other and look back on the experience together.”

(MacKercher, D. (1996)

Quotes Highlighting “*Mutuality*”



- **(Student)** “It was interesting to interview the patient with the nurse (facilitator), the respiratory therapist and lab tech student to see the types of questions they find valuable for their profession and how they interact with patients.”
- **(Student)** “The case studies I have done in the past were focused on my discipline alone which reinforced what I have learned, but the interprofessional case studies have given me a better appreciation for the entire patient cycle.”



“*Embeddedness*”

“Each person must find an acceptable balance between individuality and inclusion in the context.”

Within the group we both differentiate ourselves as autonomous individuals and seek commonality and connection.”

(MacKercher, D. (1996))



Quotes Highlighting “*Embeddedness*”

- **(Student)** “there were some debates including the cause/source of some of the patient’s symptoms and presentation .. Because the discussion involved students from different professions the discussion incorporated different perspectives and was not narrow-minded.”
- **(CLF)** “We talked extensively about the patient after it was the first time when the team made some timid recommendations about his needs, and the participants were also **adventurous** enough to speculate about the patient’s progress.”



“Validation”

“To the extent that we matter to someone else, we are able to value ourselves; to the extent that we feel understood, we empower ourselves to cope and learn.”

(MacKercher, D. (1996))



Quotes Highlighting “*Validation*”

- **(Student)** “I really valued the interaction I had with the patient I would like to discuss further the roles of respiratory and physiotherapy with the respiratory student next session.”
- **(Student)** “The session today also opened my eyes to how important it is be aware of other professions to better patients care.”

Trust

Trusting the Process:

- **(Patient)** “ Saying I’ll do anything to help, its important that students have an opportunity to learn.”





Discussion

- Preliminary qualitative data suggests that IPE & C student experiences provide evidence of themes of relational learning behaviors.



Conclusion

- Further work needs to be done in defining IP relational learning
- Further analysis of project data related to relational learning behaviors, in addition to, other characteristics that may be found to support relational learning in IPE & C

Thank you!

SPICE Team

Michelle Addison

Sue Berry

Tracey Hill

Lynne Sihvonen

sue.berry@normed.ca

