

Manitoba Initiative: Interprofessional Education for Collaborative Patient-Centred Care

Objective

To plan, demonstrate, evaluate, more broadly implement, and sustain IPE to improve the quality and safety of patient care by preparing interprofessional groups of students and faculty to work in a collaborative, interprofessional capacity. A strong research platform and graduate student participation were designed to initiate long-term sustainability of IPE. Target groups are Manitoba's northern and remote communities, Inuit and Aboriginal populations, and under-served populations in urban Winnipeg.

Project Approach

1. 51 pre-licensure students recruited from 5 units (7 health disciplines) at the University of Manitoba (Dental Hygiene, Dentistry, Pharmacy, Medicine, Nursing, Occupational Therapy, Physical Therapy)
 2. Students self-selected to one of three groups:
 - CONTROL GROUP: present for a 3-hour orientation session
 - EDUCATION GROUP: attended orientation and 3-day education session related to interprofessionalism
 - IMMERSION GROUP: attended orientation, education session, and 8-9 days in a clinical practice experience focused on interprofessional health care
- Immersion group attended a wrap-up session to debrief and share experiences
3. Students were surveyed to determine the effectiveness of various interventions on student attitudes, knowledge, skills and values (AKSV) related to IPE. A follow-up survey of the immersion group will assess the long-term impact of their experience.
 4. Iteratively, results will provide evidence for recommendations on developing and sustaining broad-scale IPE within the institution.

5. In parallel with the demonstration project, a graduate-level Readings course on IPE was designed; 4 students enrolled. Two PhD students are supported for research related to IPE.

Results

Anecdotally, students and faculty reported an overwhelmingly positive IPE experience. The opportunity to work and learn with health care students from different disciplines and to learn about the health care system from a patient perspective had a large impact on students. Data are being compiled and analyzed to determine the degree of change in AKSV related to IPE.

"It made me more aware of how important such a process ... change is. Teams can benefit patients if they are working well. If the team is not working well it can also affect the patient. It also makes me more aware of how I will want to practice in the future."

Conclusion

Our successes to date include increased knowledge and expertise in IPE and collaborative practice by all members of the working group (in 7 health professions) and positive experiences and feedback on the value of sustaining IPE from participating students, faculty, Partners and practice sites. We benefited by the support and encouragement of academic leaders and regional health management regarding the importance of the work and their commitment to find a means to sustaining IPE.

Resources

www.umanitoba.ca/faculties/medicine/education/iecp/iecp/index.html

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