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Issues

Tutor experiences of developing an interprofessional learning (IPL) programme in Higher Education

Article Index

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Abstract

Keywords: tutors, interprofessional education, interprofessional learning, parallel process

Pre registration health and social care students undertake IPL to optimise their interprofessional working skills in preparation for the reality of their future professional practice (Department of Health 2000). The importance of preparing students' tutors for interprofessional education (IPE) has also been identified (Barr, 2002) as well as the value of using the *"IPL team as a way of role modelling"* (Cooper, 2004). Additionally tutors' experiences of IPL can be used as a resource to support student learning (Page and Meerabeau 2004). Nine academic tutors were interviewed in this qualitative study which explored their experiences of planning and implementing a new IPL programme. Tutors described difficulties in relinquishing power, tribalistic behaviour, ineffective communication and geographical constraints during the planning process which hampered their own IPL teamwork. A 'parallel process' is identified indicating how tutor experiences in surmounting these issues mirror many of the same skills that the tutors aim to develop in supporting student learners during the IPL programme. Findings are interpreted alongside discussion of the 'parallel process' and practical strategies for responding to the challenges of IPL are identified. The value of tutor reflection is discussed in relation to tutors being able to optimally position themselves to support student learners and be effective role models for diverse groups of students undertaking IPL programmes.

Introduction and background

Fundamental changes in health and social care policy are taking place. In particular the continuing imperative to 'work together', viewed as one of the cornerstones of the 'modernisation' agenda in health and social care policy. (DoH, 2000), has led to the recognition that as professionals become increasingly specialised, greater levels of collaboration are necessary to meet users' complex needs and to provide user centred, holistic care. (Ross and Southgate, 2000).

IPL opportunities in education and in practice in both health and social care make an important contribution to promoting effective working relationships between different professional groups. However there are significant resource, capacity and cultural implications in moving away from uni- professional education programmes towards interprofessional programmes that are both integrated and sustainable, requiring a range of flexible responses in order to make the necessary changes in both classroom and practice settings. The need to promote the skills and knowledge for interprofessional practice is now

recognised as a crucial element of learning at all stages of professional education and training and is identified within the curricula and required competencies of most health and social work programmes

Despite the policy drive towards increased interprofessional working there are a number of reasons that have been consistently identified as inhibiting it in practice including poor communication, conflicting power relations, ideological differences between professions and role confusion (Rawson, 1994). The need to address these fundamental issues for students during pre qualification IPL programmes has been emphasised (Barr, 1998). However, tutors also need to recognise these issues and how their own behaviour can impact on effective team working.

The necessity for both tutors and students to challenge traditional barriers compartmentalised thinking and professional 'tribalism' (Carlisle et al, 2004; Smith & Roberts, 2005) has been identified as vital to effective IPL and the effective training of the future workforce. Whilst students are offered a range of ways in the IPL programme to address these issues, tutors themselves should also be encouraged to reflect on their own interprofessional team working and consider if they similarly need to challenge their own thinking and practice.

The importance of preparing teachers for interprofessional education is also recognised, (Barr, 2002) and the application of concepts such as complexity theory to interprofessional education have also drawn attention to the need to value diversity, recognise the unpredictability of events and to use the 'IPE facilitation team as a means of role modelling.' (Cooper et al, 2004: 185) This complex mix of educational and professional agendas, including the fact that the teaching team themselves have also undergone a process of professional 'socialisation' and experienced, at first hand, the dynamics of team working in practice, suggests that the teaching experience merits attention. This view is supported by Page & Meerabeau, (2004) who comment on the lack of attention paid to the experiences of course facilitators within the multiprofessional literature.

Interprofessional education programmes are significantly different from traditional subject specific based programmes. IPL programmes are not just about facts, problem solving and knowledge based skill that a student might learn on a pure science based course. IPL programmes need to be highly focussed on practice, involve holistic understanding of professional groupings,

empathy skills, listening and communication skills, requiring a clear fit between delivery and practice. It is very much about teaching the process of effective collaborative working. The opportunities presented for tutors to 'model the model' and to draw on this explicitly in their work with students highlights the notion of the parallel process.

The 'parallel process' is a concept used in literature focussing on psychotherapy principles (Morrissey, 2001). In psychotherapeutic literature 'parallel process' is interpreted in relation to the processes at work in the relationship between the therapist and the client and has its origins in the psychoanalytic concept of transference. However, for the purpose of this paper the concept of the parallel process is utilised to illustrate how role modelling becomes a central element of the tutoring process. Students can mirror tutors' behaviours and the tutors themselves need to reflect on their own behaviours and action to influence different outcomes with the student in an educational setting.

This paper will examine the results of a qualitative study undertaken with Faculty of Health academic tutors who were involved in the planning, design and delivery of a new interprofessional learning programme (IPL) to three hundred year one pre registration health and social work students. The implications of their verbalised experiences will be discussed. The strategies that promoted or hindered the tutors' progress in developing the interprofessional curriculum will be outlined. Particular attention will be paid to the existence of a 'parallel process' i.e. whether some of the experiences which the tutors recognise have affected their own ability to work interprofessionally are similar to the students' experiences of IPL. Elements of this process are identified and described and examples given to show how the IPL programme has usefully developed the parallel process to support both the students and tutors on the IPL programme. For the purpose of this paper, the following terms apply. The 'Faculty of Health IPL programme' is a new integrated approach which offers all pre registration health and social care students the opportunity to learn about and discuss each others professional roles and responsibilities in mixed group and workshop settings. Using a model of 'collaborative working' students are facilitated via group activities and discussion to learn how to effectively work together with other professionals to improve their empathy, knowledge, and communication skills for the benefit of the service users.

The IPL programme in the Faculty of Health

All pre-registration students in Physiotherapy, Occupational Therapy, Social Work, Dietetics, Speech and Language Therapy, Nursing and Community Health Care Nursing participate in the IPL programme. One-off, non assessed interprofessional workshops had been taking place in the Faculty of Health for some years. However, a new summatively assessed programme integrated into the curricula of all the health and social courses in the Faculty has commenced and this forms a central part of all students' pre registration education.

Tutors have been involved in developing the new programme which instead of being a non-academic credit "add on", is fully integrated and assessed in individual course modules. For example, a first year pre registration student would achieve academic credit points equivalent to half an academic module credit. This is standardised across the Faculty so all courses are seen show equal value for IPL. The core IPL programme has been planned by tutors from across the Faculty and has been designed to complement the other activities that students undertake in their own discipline. There are close links with workers from a range of health and social care practice settings to ensure that interprofessional learning is reflected in practice learning.

Students participate in two workshops per year and complete a summatively assessed IP workbook in multiprofessional student groups facilitated by a tutor who guides them throughout the academic year. The workshops and workbooks are underpinned by the following core themes which thread through all three academic levels of the programme:

- Communication skills
- Effective team working
- Assessment
- Ethical practice
- Working with diversity
- Reflective and critical practice

The mixed student group approach was chosen as a way of utilising educational approaches in IPE underpinned by the Contact Hypothesis, (Hean and Dickinson, 2005). This group approach is based on Allport's (1979) initial influential ideas, generated in the 1950s, about how intergroup working can

reduce individual and group prejudice in certain situations. This approach has subsequently been supported by meta analytic testing (Pettigrew, 1998) and via educational application (Slavin and Cooper, (1999); McWey et al, (2006)) and underpins the philosophy of many interprofessional programmes.

Methods

This was a small-scale exploratory qualitative study. Qualitative interviewing was chosen for the study's approach. It is regarded as "a flexible and powerful tool" (Britten, 1995) which allows researchers to investigate questions of immediate relevance to everyday work which might otherwise be difficult to investigate.

All the twelve tutors who had participated in the Faculty IPL development meetings and facilitated IPL workshops were invited by letter from the researchers to volunteer for interview. Three tutors were unable to take part due to teaching commitments and absence. The remaining nine tutors still represented all the professional groups taking part in the Faculty IPL. Representation across all the professional groups was regarded as important to enhance the authenticity and diversity of the views expressed. Individual taped interviews with the researchers were undertaken with these nine academic staff. A semi-structured interview questionnaire was used (see Box 2) focussing on each participant's practice prior to working at the University and their current experiences of IPL curriculum planning and development in the academic setting.

The transcribed qualitative data were read and re read, analysed by phrase unit, reviewed by both researchers, and coded for patterns, themes and categories (Cresswell, 1998). The emergent themes were grounded in the generated data. The findings are presented as key themes (Box 1) generated from this analysis.

It was recognised that the role of the interviewers, who were colleagues of the tutor participants, could be regarded as sensitive. The researchers were aware that interviewees might be reluctant to speak freely about negative experiences with a fellow colleague for fear of upsetting them. Free discussion of this process and its implications enabled participants' concerns to be addressed by the researchers. Participants felt strongly that they wanted a clear process whereby their concerns could be fed into the ongoing development of the IPL

programme. Colleagues were informed that issues relating to the development of the IPL programme would be anonymised in the transcript and fed back to the planning meetings via the agenda to enhance future development- a form of 'action research'. To reduce the possibility of the researcher biasing the interview towards their own profession's interests, the interviews were organised in such a way that neither interviewerinterviewed colleagues from their own or other closely related discipline.

Commentary on thematic findings

Each identified theme (see Box 1) is discussed specifically in relation to tutors' experience and then subsequently interpreted in relation to the concept of a parallel process.

Practical implications for the IPL programme for each theme are then outlined.

Box 1 Generated Themes

Theme 1	The tutors' commitment to their own subject area: the parallel process
Theme 2	The tutors' first experiences of interprofessional working in practice and in the University
Theme 3	Communication and understanding: the parallel process
Theme 4	How planning meetings themselves reflect the IPL process: the parallel process

Theme 1: The tutors' first experiences of interprofessional practice and in the University

All facilitators had previous experience of working in a health or social care environment with varying experiences of interprofessional working. Some tutors had worked interprofessionally clinically before entering HE and viewed this practice as their "cultural norm".

"Throughout my career I've worked more closely with other professional groups

than with my own."

Other catalysts for tutor involvement were more opportunistic. For example, knowing an *"enthusiast"* among the Faculty staff and a general feeling they should *"help out."*

Tutors felt that students' placements would prove as influential on students' understanding of interprofessional practice as the tutor's own professional practice in the NHS and social care practice had been an influence on them. Tutors said that it was only seeing the reality of team working in practice, often prior to their own current careers in HE, that they had realised that it was an essential part of effective practice but had often been neglected in their own pre registration education.

"It is not until students' experiences in practice placement have really developed that you understand the context of interprofessionalism"

The integrated curricular approach means that the tutors themselves will move away from viewing IPL as an *"add on"* and will then become acculturated to its total inclusion in their health and social work courses. This mimics how tutors who previously worked in a practice setting with a positive interprofessional culture view interprofessional practice and learning as a *"positive and normal"* way of working. Tutors are encouraged to use practice examples from their previous careers to verbally illustrate effective and non-effective examples of team working to the students. They are also encouraged to tell anecdotes and include humour in their story telling of previous clinical experiences. As they devise the IPL programme learning materials they are encouraged to write in real examples from their own practice. Tutors felt that a link to practice would help students understand the nature and challenges of inter-professional practice better and represent the natural continuum and reality of University based IPL. As such, practice learning facilitators and service users contribute to the IPL workshops at the University.

Practical implications

* The new curriculum means tutors do not view IPL as an 'add on'
* Use of more practice examples of team working based
  on tutors own experience
* Use of more humour and team 'anecdotes'

Theme 2: The tutors' commitment to their own subject area: a parallel process

There is frequently an assumption that professionals will readily facilitate effective interprofessional learning on the basis of their expertise as practitioner.

However, many tutors were highly skilled and specialised in their own subject area but showed anxiety about "letting go" of specialist knowledge areas to teach interprofessional groups. This mirrors the students themselves choosing their own professional course, wanting to learn specific subject based material relating to the skill base of their chosen profession. Tutors referred to being protective of their own subject specialist knowledge and wanting to "save it" for their own professional group.

'We tend to be over-protective…in our team we recognise the importance of interprofessional work, we teach about working interprofessionally.., but then when it comes to actually changing and saying, well we have to take a bit from here everybody says 'oh no you can't take a bit away from my [module].'

Professionally tribalistic behaviour is evident here and is counterintuitive to working together interprofessionally. Rolls et al (2002) describe how professional personhood can be described as *"the web of roles and relationships that are acquired and enacted in professional arenas"* and discusses how the problem of tribalism is *"embedded in the powerful and often conservative professional bodies which may be antithetical in terms of moving towards interprofessionalism".* (p 318).

Dombeck (1997) has argued that the *"reason that blurring or collapsing role boundaries are perceived as problematic is that they change and might threaten professional rights and responsibilities".* Indeed, professional tribalism emerges when these roles and responsibilities are guarded by individual professional groups. This tribalistic behaviour can occur at two levels; firstly at the level of the professional organisation and secondly through professional socialisation. (Rolls et al, 2002). The task of developing interprofessional education training to combat this needs to occur at both levels. Lindquist et al (2006) have also discussed the best way for academic tutors to develop students' professional

identity whilst making them both effective interprofessional workers and able to respond to the development of their own profession in the changing fields of health and social care in future years. The Faculty IPL programme preparation for tutors encourages them to recognise their own tribalistic behaviour and encourage tutors to critically reflect on its manifestation and usefulness in the hope that the same skills can be utilised by these same students with their mixed group of students.

"I worry about whether it is going to be difficult facilitating these mixed groups as I have only done it in my subject area…"

Tutors therefore need to be supported in developing their skills and confidence in the facilitation of interprofessional groups. Tutors felt that they needed to develop an understanding themselves of the needs of different professional groupings of the students. Some felt it helped articulating their own professional background to the students as a way of showing to the students that everyone, even the tutors, came with some form of "uniprofessional baggage" that they should value but try to distance themselves from in an interprofessional setting. One social work tutor stated:

"I think I will need to put my professional expertise to one side"

Many tutors recognised that the IPL workshop was not the forum to give subject specific knowledge in a didactic way but recognised how giving their own examples to the students from their own practice "brought IPL to life" for the students

Some tutors actually recognised that their own "tribalistic" behaviour in the Faculty IPL planning group meetings mirrored the behaviour of the students and individual professions in practice. However, in general, tutors seemed to be able to recognise and celebrate their own professional identity and expertise while still be able to explore broader team issues in the IPL context. One tutor, a nurse, described how all the students (not just the nursing students) in the multidisciplinary group were "listening attentively" when she described her own difficult team working experiences as a nurse in the clinical setting.

Most tutors also acknowledged changes in themselves as a result of taking part

in the planning manifested by either a change in their opinion about IPL or their expanding knowledge about another profession.

Practical implications

* Tutors encouraged to put aside their profession-specific language

* Tutors encouraged to articulate in planning meetings when they recognise they are being unnecessarily tribalistic or how they feel about how they perceive the position of their professional group in the discussion.

* Tutors are encouraged to use the experience of professional dominance in a consistent way with their mixed group of students

Theme 3: Communication and understanding: a parallel process

Barriers to effective interprofessional working include lack of knowledge of the capabilities of other professional groups and existing rivalries and resentments amongst qualified professionals. Pre registration IPL programmes have been shown to enhance the blurring of differences between professions (McPherson et al, 2001). This is supported by the tutors as they discussed their practical experiences of developing the IPL programme. Tutors, as well as students, need opportunities and appropriate environments to mix and meet to enhance their own team working.

It's not helped by the fact that we are somewhat separate, in separate buildings. Our offices tend to be kind of segregated…'

Separate campus buildings and a lack of staff social space were highlighted by tutors as barriers developing informal social relationships. The tutors welcomed the IPL meetings and planned training as a fixed opportunity to meet other Faculty tutors and learn about other professionals' knowledge. They said

You have to have something that forces you to be in contact…you learn so much about each other.'

'That was one of the things that struck me when I first got involved, …we just did things so completely differently.'

'I don't have a full understanding of everybody's role…it's about being a bit humble really.'

Students in the Faculty of Health work in the same environment as the tutors. There are separate buildings for separate professional groupings. Like the tutors this means that students rarely meet other health or social care students on campus. Planning of the integrated IPL programme has taken this into account. An informal shadowing system has also been developed. Just like the parallel process being engendered in the students, if the tutors are given the opportunity to value mutual consideration of each others' professions and personalities, this model of enhanced tolerance and understanding can be picked up "osmotically" (Rolls, 2002) by students.

Practical implications

   * Large venues for the student IPL workshops.
   * The social element of the IPL planning meetings and student workshops has been emphasised. Refreshments are provided so that more social bonding can occur between the tutors outside the formal
   * Shadowing system for IPL tutors

Tutors recognised that while IPL champions were useful to catalyse and "pump prime" a single project this would not be sufficient to maintain and sustain IPL over time. In fact some participants felt that having "champions" left other tutors feeling uninvolved and on the margins of the new development.

'It should be everybody's job really, everybody's responsibility.'

'If you make it compulsory for the students, it's the same for staff'

This has been mirrored in the findings of the PIPE project (Bray and Hawkins 2005) which emphasises that IPL should be embedded into curricula and move beyond individual champions into wider staff ownership. Bray and Hawkins (op cit) also emphasise how institutional IPL aims need to be facilitated at senior level and the importance of funding streams to show a demonstrable commitment to IPL. A nurse tutor said,

"We need proper valued hours to do it, you can't do it properly and effectively in your spare time"

This has now been addressed at the University where the new IPL curriculum is embedded in the modules of each professional area. Faculty-wide academic tutors have deployed hours which cover the planning, delivery, marking and preparation of IPL related activities. This formal process gives IPL value alongside the profession-specific modules. Staff who take part in the Faculty IPL programme are then given full opportunity to commit to the programme.

Likewise, in terms of the parallel process, IPL is now formally valued by the students as the integrated curriculum has a summative assessment component which contributes 50% of the credits of their course specific module per year. This approach to curriculum design allows the students time and credits to commit and enjoy learning about IPL in a sustained way and values their assessment contribution.

Practical implications

* Ring fenced deployed hours for all IPL tutors

Summative assessment of students' IPL which contributes to the students final module mark

Theme 4: How IPL planning meetings reflect the IPL process: a parallel process

Communication skills

"Negotiating, bargaining, compromise and discussion" (words of social work tutor) are the skills used by the tutors during the planning meetings. These skills are exactly the useful employability skills reflected in the learning outcomes of the IPL programme, which tutors foster so carefully in the health and social care students. Tutors monitored their own understanding of this process by using meta- cognitive strategies in development meetings i.e. tutors were encouraged to monitor their perceptions of their own negotiating, bargaining and compromising behaviours by conducting an 'internal conversation'. Tutors were then encouraged to use these skills with their mixed professional students groups to encourage their students to work more effectively in collaboration with

each other

Avoiding jargon

Tutors often challenged other tutors in IPL planning meetings if they heard *"professional jargon"* Communicating effectively between teams needs to be based on a shared language as a means of overcoming the cultural and language differences that Wenger (2002) describes as existing between groups. Corley & Eades (2006) discuss work in this area and refer to this negotiation of two or more sets of values and cultures to develop a shared discourse as *'bilingualism'*. Effective partnership working needs to create new language and meaning to address new realities.

The need for the IPL tutors to demonstrate this *'bilingualism'* is essential in the creation of interprofessional practices which facilitate effective communication. It helps the tutors, and consequently the students how to manage dominant and different discourses including the *'languages'* of other professions and of service users and carers. In terms of the *'parallel process'* the students themselves in their mixed groups hear students using terminology which is unclear to them. Students are then positively encouraged by tutors to challenge words they don't understand and seek a plain English equivalent for the use of profession specific terminology. They are taught strategies by the tutors to encourage the seeking of clarification from service users if terms are not clearly understood. Students are also encouraged to allow service users the opportunity to seek clarification from them.

Planning

Using the planning team as a model of effective interprofessional working.

The tutors are committed to participating in developing an effective interprofessional programme for the students. A nursing tutor stated

"We need to plan things together and show them (the students) we can work together too".

It is this that has ensured that the interprofessionalism of the tutors themselves is embedded in the developmental structure, the formulation of agenda items and the management of the programme. Students therefore witness tutors

working as an interprofessional team in the planning and delivery of their programme and undergo parallel immersion in the philosophy and practice of interprofessional practice during their three years completing the IPL programme. This mirrors Rolls (2002) suggestion that students can learn about the practice of effective interprofessional behaviour by "osmosis" in a variety of different ways.

Practical implications

   * The development of a shared plain language between tutors during IPL planning meetings is encouraged.

Tutors are encouraged to avoid profession specific terminology in an IPL setting

Discussion

It is essential to encourage both students and tutors to recognise the parallel processes as both groups engage with theory and practice of IP learning.

Tutors in the Faculty discussed the importance of reflecting on the IPL programme and their own behaviours. Tutors recognised they were preparing students for the wider world and how the fundamental relationships of interprofessional working needed to be exposed to a reflective process. Rather than being an individual activity, reflection should instead be understood as suggested by Dyke (2006), that:

"Experiential learning benefits from constructive engagement with the experience and knowledge claims of others".

In relation to critical reflection and IPL, there is a particular need for tutors to engage collectively in their own critical reflection (Brookfield, 1995) and to develop approaches based on mutual dialogue. (Brockbank & McGill, 1998). Because students undertaking IPL need to deeply engage in the process, a parallel necessity is that the tutors themselves take similar risks and manage the uncertainty of changing roles, drawing on their own experience to facilitate learning and themselves 'being vulnerable in the classroom' (Hooks, 1994). Just as with the students, preparation and support for tutors is essential and needs

to be embedded within the programme, rather than this being merely an 'add-on' to the 'real' work of preparing students for their specific profession.   Such a process necessitates tutors moving beyond their own professional identities to form new roles and multi-memberships. Wenger, (2002) refers to these groupings as "communities of practice" where the process and meaning of teaching is valued rather than teaching simply being the giving of facts and information. In terms of the parallel process, students need to undergo a process similar to that of the tutors. Students work in new mixed groups where their professional identity is "diluted as a result of being away from their uniprofessional cohort". Students, like tutors, also need to form new identities and reflect on their own power and changing dynamics in their IPL group

There is also significance in using effective collaborative working skills to address issues of diversity. In our large scale IPL programme there are a wide range of difference in terms of gender, age, family situation and previous educational and work experience as well ethnicity, religion and culture, itself reflecting the diversity of the service user population they will work with. Developing skills to effectively deal tactfully and respectfully with individual student peers in a mixed group is a good training ground for the future. Tutors themselves can model their own communication skills with their mixed student group to enhance the internalisation of this process.

A further dimension of the parallel process concerns the concept of parallel processing i.e. the ability to recognise and focus on more than one task or concept at a time is useful in this context. By encouraging the tutors' metacognition of their own collaborative behaviours, tutors became more aware of the principles they were trying to enhance in the students. This supports work on student involvement in collaborative learning strategies (Tinto, 1997) and Wikely and Bullock's (2003) work with schoolteachers exploring how teachers questioned their own collective understanding of learning and how this was mirrored in the students. It appears that students tune out when tutors are not engaged and therefore the tutor needs to be more consciously aware of their role in the learning process to enhance students' engagement.

Significant challenges exist for interprofessional educators in providing an interprofessional curriculum which will meet the developmental needs of the different professional groups and diverse student experiences, reduce tribalistic behaviour and improve communication and team working skills. Facilitation of the IPL mixed professional groups is regarded by the tutors as an all-

encompassing and challenging role. Supporting group learning activities requires an understanding of the process of collaborative learning by the tutors. This process is complex, coupling task-based and social elements. Performing team tasks well means not only having the skills to execute the task, but also collaborating well with team-mates. Collaborating well means, among other things, asking questions to gain a better understanding of key concepts, sharing and explaining ideas, and elaborating and justifying opinions. Heller et al (1992) have shown how when group members' combined skills suffice to complete the learning task, effective group work may result in greater overall achievement than individual learning. Joiner (1995) has shown, in computing, that students learning in effective teams benefit through both enhanced learning of the task, and improvement in the social interaction skills they need throughout their lives.

Many of the experiences of the tutors in the development of the IPL programme e.g. working together effectively, learning to communicate etc are identical to the issues experienced by the students learning "osmotically" and working interprofessionally in the University and in their placement settings. The acknowledgement and understanding of this parallel process by the tutor can be fed into their own interaction with mixed interprofessional groups of students via the citing of pertinent examples and 'modelled' behaviour and interactions.

This paper has explored how the development of recognition of the 'parallel process' as an empowering approach by tutors to the IPL learning task can enable students to build and refine their own reflective style in practice and lay the foundation for practice, which acknowledges and utilises the context and reality of issues in their workplace. It is recommended that the ' parallel process' of tutor and student IPL experience and the value of role modelling as a central element of the group work is explicitly articulated to tutors and students alongside the development of a culture of good institutional interpersonal relationships.

Conclusion

The IPL tutor as facilitator plays a key role in the success of IPL and the tutors' own experiences can be utilised as a teaching approach in IPL. This paper supports work done by Dolmans et al (2002) who suggest that more qualitative studies should be conducted to gain better insights into tutors' perceptions about the tutor role and student learning to better understand their behaviours.

The training and preparation of IPL tutors should encourage tutors to be consistent with the student learners but also give the tutors permission to acknowledge and reflect on how their own developmental and educational processes have helped them become effective interprofessional facilitators.

By the tutors themselves understanding and internalising these issues, they can then optimally position themselves to support students to engage in integrated interprofessional learning and be effective role models in interprofessional working.

Acknowledgement

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Box 2 Semi structured interview framework for the tutors
Schedule of Questions for the Interviews

1. How long have you been involved in professional education and training:

1. Less than one year
2. One to five years
3. Five to ten years
4. Over ten years?

2. What is your experience of interprofessional working in practice?

3. How did you become involved with IPL at Leeds Metropolitan University?

4. What is your motivation for involvement?

5. What has been your experience of implementing IPL in your own professional area?

6. How do you think IPL is viewed within your own professional area?

7. What support do you require to develop interprofessional learning?

8. What are the factors that you think may limit the development of interprofessional learning:
1. In general
2. Here in the Faculty of Health?

9. What are the factors that you think may promote the development of interprofessional learning:
1. In general
2. Here in the Faculty of Health

10. What resources, strategies and skills for working with others do you think you have?

11. How do these resources, strategies, and skills support your contribution to interprofessional learning?

12. What are the challenges for interprofessional learning in the future?

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