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TALKING THE TALK AND WALKING THE WALK - DEVELOPING INTERPROFESSIONAL LEARNING IN HIGHER EDUCATION

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Introduction

There is currently a high level of interest in the need for 'joined up working' across a range of professions and agencies in health and social care. This represents one of the cornerstones of the 'modernisation' agenda and health and social care policy where interprofessional (IP) working is emphasised as an essential and integral aspect of professional practice. (DoH, 2000).

The need to promote the skills and knowledge for interprofessional practice is therefore 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.

The importance of preparing teachers for interprofessional education (IPE) is recognised, (Barr, 2002) and the need to value diversity and to use the 'IPE facilitation team as a means of role modelling.' (Cooper et al, 2004) is recognised.

Aim of Project:

This project explored the experiences of academic staff based in the Faculty of Health who are involved in the design and delivery of the interprofessional curriculum.

The project focussed particularly on the parallel process experienced by the team working together to develop and deliver (IPL) opportunities for students undergoing pre-registration training in health and social work.

The strategies that promoted or hindered progress in developing IPL in the curriculum were specifically identified.

Background:

Literature relating to IPL is increasing in line with the increasing attention being paid to interprofessional practice. The purpose of interprofessional learning has been examined, recognising that this may entail attitudinal change, a clear knowledge base and / or practice skills and competencies in collaborative team working, (Barr, 1998; University of Leeds, 2001).

The evidence base for the effectiveness of interprofessional education has also come under scrutiny and the need for a greater range of evidence has been proposed, recognising the limited availability of evidence particularly for pre-registration training within the academic, rather than practice setting. (Freeth et al, 2002).

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 of the teachers experience merits attention. This point is also made by Page & Meerabeau, (2004) who comment on the lack of attention paid to the experiences of course facilitators within the multiprofessional literature.

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Methodology and analysis

- 12 taped interviews with academic staff involved in the development and delivery of interprofessional teaching and learning.
- Convenience sampling was used to ensure representation from different professional groups.
- Information and consent forms were completed by all participants.
- A semi structured interview questionnaire was generated.
- The transcribed qualitative data was analysed and coded for themes (Cresswell, 1998).

Ethical approval was gained for this project from the Faculty Research and Ethics sub committee.

Findings and discussion

1. Staff involvement with IPL at the University

A range of factors appeared to influence how staff became involved in the IPE agenda in the Faculty of Health.

A positive experience in NHS or social care practice prior to working at the university embedded a sense that IP working was the "cultural norm"

"My working experience before I came here to the University was interprofessional anyway"

Otherwise, just knowing one of the Faculty coordinators, deployed hours, being a course leader or having a genuine interest in the subject area appeared to catalyse the move into IPL

2. Tutor commitment to subject area

Some tutors saw IPL as "an add on" for students. Some interviewees felt that IPL wasn't always regarded as important by all their colleagues.

Some participants identified that staff were being overprotective about their specialist subject area especially **"their pure content"**

"We teach about working interprofessionally when ..but 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"

3. Ownership and communication issues

i) Physical space

The Faculty of Health is divided into 3 different schools located on different floors and in different buildings. This was seen to hamper effective communication and limited the opportunity to build effective relationships.

ii) Enhancing awareness of each others roles at the University

Taking part in the IPL developments gave them the opportunity to learn more about each other's roles in the different academic subject areas in the Faculty.

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

iii) Wider staff ownership and involvement

Participants recognised that the risk of having IPL "champions" left other tutors feeling uninvolved and on the margins of the development.

Some participants were concerned that not all their colleagues were involved in tutoring on the IPL programme. One said,

"If it is compulsory for the students, then perhaps should all the staff be doing it too"

4. Meetings themselves reflected "real life"

Some participants mentioned that **"the negotiating, bargaining, compromise and discussion"** that occurred during the IPL planning meetings reflected the strategies that occur and are needed in "real life". Tutor felt that the students would also need to develop these skills in order to cope with their post qualifying employment and in future life.

Future action

- To recognise and use the diverse range of knowledge, skills and experience of the staff for the benefit of the students.
- To consider ways of encouraging those staff who feel less involved and less central to the developing IPL agenda.
- To promote the importance of IPL as an integral and necessary part of the health and social care student learning experience.
- To include these real examples of staff IP issues at the IP workshops to highlight the similarity between the student and staff experience.