



Interprofessional learning in practice for pre-registration health care: Interprofessional learning occurs in practice – Is it articulated or celebrated?

Netta Lloyd-Jones ^{a,*}, Sue Hutchings ^b, Stephanie H. Hobson ^a

^a Professional Practice Education, School of Health and Social Care, Oxford Brookes University, Jack Straws Lane, Marston, Oxford OX3 0FD, United Kingdom

^b Interprofessional Learning, School of Health and Social Care, Oxford Brookes University, Jack Straws Lane, Marston, Oxford OX3 0FD, United Kingdom

Accepted 26 March 2006

KEYWORDS

Interprofessional learning;
Placements;
Practice based learning;
Assessment

Summary This paper summarises the issues involved in promoting interprofessional learning in practice both on campus and within placement areas with reference to one particular university. National drivers of Interprofessional Learning (IPL) are outlined and then explored in relation to the portfolio of pre qualifying programmes within a large, multiprofessional School of Health and Social Care. In this particular context, rapid development of campus based IPL require equally robust developments in practise based learning. Integration of IPL across the whole curriculum is considered in the light of current practice based learning initiatives and projects. From this discussion an approach to integration emerges, built on the need to explicitly articulate examples of interprofessional collaboration as they arise in every placement. These interprofessional learning opportunities need to inform assessment strategies both on campus and in practice. Inherent in this approach is the assumption that IPL does occur in practice but is not explicitly articulated or celebrated.

© 2006 Elsevier Ltd. All rights reserved.

Introduction

Learning in practice is fundamental to all professional practice programmes. Sharing common learning and teaching opportunities is crucial to all

* Corresponding author.

E-mail addresses: netta.lloyd-jones@brookes.ac.uk, sehutchings@brookes.ac.uk, shhobson@brookes.ac.uk.

professional programmes, in order to equip students and future practitioners with skills, knowledge and values for contemporary practice. A key theme of contemporary practice is interprofessional learning (e.g. DH, 2000; DH, 2000b; DH and ENB, 2001; DH, 2001; Hale, 2003; NHS, 2003), although there are contentious issues of where, how and when this is best placed to happen (e.g. Finch, 2000; Barr, 2000; Barr, 2000b; Cooper et al., 2001).

It is important to draw out the particular characteristics of interprofessional learning in order to understand its implications for practice education. A widely accepted definition states that IPL 'is a process through which two or more professions learn with, from and about each other to improve collaboration and the quality of service (CAIPE 1997 cited in Colyer et al., 2005). The emphasis on process suggests that IPL is an approach to learning that allows an exploration of how people can work together collaboratively within multi-disciplinary teams and across different organisations in the health and social care context. Within the educational context, this exploration necessitates more interactive and discovery styles of learning, with opportunities to engage in reflective dialogue with others. Notably, these learning styles often require time to develop and to come to fruition and can be assisted by the skilled guidance of a perceptive facilitator.

Interprofessional learning within health and social care has been a key component of Brooke's School of Health and Social Care's philosophy and its learning and teaching strategy since the late 1990s. This strategy identifies the following key values at the centre of current and future development. These are:

- life long learning;
- the centrality of practice within health and social care professional education;
- accessibility, diversity and inclusion.

Elements which inform developments include a

- proactive and innovative approach to learning and teaching that enhances personal and professional development of the student;
- commitment to inter-professional learning and the delivery of multi-professional courses and programmes.

This philosophy has been reflected in the curriculum development in both pre-registration and post-qualifying programmes. We view interprofessional learning as a complement to profession-specific programme components; its main emphasis is

to explore and develop the skills, knowledge and values of collaborative working, so that patients/clients experience an integrated approach to care (Barr, 1996). As already stated, this approach is distinct from shared teaching, where students learn a common subject in the same classroom (Barr, 2002). Though this mode of delivery has certain pedagogical advantages, interprofessional learning involves more process-orientated ways of working together with the specific intention of developing such core skills as communication and team-work.

Historical context

Overcoming the workforce shortfall created in the 1980s, meeting current and future workforce demands through education and training of new staff and the diversification of professional roles have been identified as key policy management goals (DH, 2000; DH, 2001).

Aspirations of developing learning organisations, and a widely held view that interprofessional working and learning is beneficial to patient care, have been discussed and debated in many fora. The literature and evidence base to support these ideas, however, is relatively sparse (Wilcock and Headrick, 2000; Freeth et al., 2002). Nevertheless, many of the NHS policies developed in recent years have incorporated interprofessional learning and working as part of modernising education, as fundamental requirements (e.g. DH, 2000; DH, 2000b; DH, 2001). In addition, the NHS is committed to across-agency working and providing seamless services within and between health and social care, with the overall aim of improving the quality of service provision.

Other initiatives such as implementing Clinical Governance (NHSE, 1999), and the Essence of Care (NHS, 2003) and Placements in Focus (DH and ENB, 2001) all demand greater accountability of the organisation and the health care team. The importance of communication, team-working and the acknowledgement of core knowledge and values which enhance the quality of the patients experience is now fundamental to practice.

The impetus for change within the NHS has resulted in a continuous cycle of curriculum review and development within HEI's, requiring increasing partnership and collaboration with all stakeholders at every level. Key stakeholder requirements need to be addressed within professional practice programmes, For example, those required by

Download English Version:

<https://daneshyari.com/en/article/367647>

Download Persian Version:

<https://daneshyari.com/article/367647>

[Daneshyari.com](https://daneshyari.com)