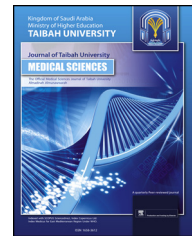




Taibah University Journal of Taibah University Medical Sciences

www.sciencedirect.com



Original Article

Measuring the attitudes of healthcare faculty members towards interprofessional education in KSA

Mona F. Al-Qahtani, PhD ^{a,*} and Salman Y. Guraya, FRCS ^b

^a Department of Health Information Management & Technology, College of Public Health, University of Dammam, Dammam, KSA

^b Department of Surgery, College of Medicine, Taibah University, Almadinah Almunawwarah, KSA

Received 28 August 2016; revised 30 September 2016; accepted 2 October 2016; Available online ■ ■ ■

المخلص

أهداف البحث: على الرغم من وضوح مفهوم التعليم المتداخل بين التخصصات في البلدان المتقدمة، إلا أنه لا ينظر له بشكل موحد في البلدان النامية. تهدف هذه الدراسة إلى قياس مواقف أعضاء هيئة تدريس التخصصات الصحية تجاه التعليم المتداخل بين التخصصات وقياس الاختلافات المهمة المحتملة في الخصائص الديموغرافية لأعضاء هيئة التدريس وجاهزيتهم لدمج هذا التعليم المتداخل بين التخصصات في المناهج الحالية.

طرق البحث: أجريت هذه الدراسة العشوائية البسيطة بواسطة توزيع استبانة مقياس جاهزية التعلم المتداخل بين التخصصات عشوائياً على ٢٠٠ عضو هيئة تدريس بالكليات الصحية في جامعة الدمام وجامعة طيبة في المملكة العربية السعودية. أجري الاستطلاع ورقياً بجامعة الدمام وعبر الإنترنت بجامعة طيبة.

النتائج: متوسط الدرجة لجمع البنود (معدداً - بند واحد) لمقياس جاهزية التعلم المتداخل بين التخصصات كانت مرتفعة (٣.٤ > المتوسط). وكانت هناك اختلافات ذات دلالة إحصائية بين الجنسين في القضايا المتعلقة بدور التعليم المتداخل بين التخصصات في تعزيز فهم الطلبة لحدود دورهم المهني، وكذلك في حاجة طلاب التخصصات الصحية للتعلم مع بعضهم. كما كانت هناك فروق ذات دلالة إحصائية بين استجابة أعضاء هيئة التدريس من جامعة الدمام وجامعة طيبة فيما يتعلق بنصائحهم لدور التعليم المتداخل بين التخصصات في تعزيز التفكير الإيجابي عن غيرهم من المتخصصين في التخصصات الصحية. وكذلك اعتقادهم بأهمية عامل الثقة والاحترام بين المهن في تحقيق نتائج ناجحة. أظهرت نتائج مقارنة مواقف أعضاء هيئة التدريس من مختلف الفئات العمرية وجود فروقات ذات دلالة إحصائية نحو التعليم المتداخل بين التخصصات يعتبر الإناث وأولئك الذين تتراوح أعمارهم بين ٤١ و ٥٠ عاماً التعليم المتداخل بين التخصصات أكثر إيجابية من غيرهم.

* Corresponding address: Department of Health Information Management & Technology, College of Public Health, University of Dammam, PO Box: 2435, Dammam 31441, KSA.

E-mail: malqahtani@uod.edu.sa (M.F. Al-Qahtani)

Peer review under responsibility of Taibah University.



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الاستنتاجات: أظهرت هذه الدراسة مواقف إيجابية لأعضاء هيئة تدريس التخصصات الصحية في كلا الجامعتين نحو التعليم المتداخل بين التخصصات. وقد توفر هذه النتائج المشجعة حافزاً للاندخراط المحتمل لأعضاء هيئة التدريس في الكليات الصحية السعودية في تقديم التعليم المتداخل بين التخصصات عند تطبيقه.

الكلمات المفتاحية: مواقف أعضاء هيئة التدريس؛ الكليات الصحية؛ متخصصو الرعاية الصحية؛ التعليم المتداخل بين التخصصات؛ المملكة العربية السعودية

Abstract

Objectives: Interprofessional Education (IPE), although well-understood in developed countries, is not uniformly perceived across developing countries. This study aimed to measure healthcare faculty attitudes towards IPE and to measure possible significant differences in demographic characteristics of faculty for their readiness to incorporate IPE in existing curricula.

Methods: This simple-random sampling study was conducted by administering the Readiness for Interprofessional Learning Scale (RIPLS) to 200 randomly selected faculty members of health colleges of University of Dammam (UoD) and Taibah University (TU) KSA. The survey was conducted as a paper-based survey at UoD and online at TU.

Results: The average score for all items (except one item) of the RIPLS were high (mean > 3.4). There were significant gender differences on issues related to the role of IPE in promoting students' understanding of their own professional limitations ($p < 0.05$) and on the need for healthcare students to learn together ($p < 0.10$). There were significant differences between faculty responses from UoD and TU with regard to their perceptions of

IPE's role in fostering positive thinking about other healthcare professionals ($p < 0.05$) and their belief in the role of trust and respect among professions for successful outcomes ($p < 0.10$). Comparisons of faculty attitudes of different age groups towards IPE showed significant differences ($0.000 \leq p \leq 0.09$). Females and those aged 41 to 50 considered IPE more positively than their counterparts.

Conclusion: This study showed favourable attitudes of healthcare faculty from both universities towards IPE. These encouraging findings might provide an impetus for potential engagement of faculty of the Saudi health colleges in the delivery of IPE when implemented.

Keywords: Faculty attitudes; Health colleges; Healthcare professionals; Interprofessional education; KSA

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Introduction

The World Health Organization defines interprofessional education (IPE) as 'occasions where two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes'.^{1,p.13} The main goal of IPE is to encourage shared learning, support trust and teamwork, enhance communication skills, and improve collaboration among health professions for the sake of improving patient care.^{2,3}

Among the main drivers for initiating and promoting effective collaboration between healthcare professionals are the increased incidence of chronic diseases, the increased number of patients in need of critical care, the ageing population, workforce pressures, and the requirements of accrediting bodies for healthcare profession education programmes.²⁻⁴

The literature emphasizes that effecting collaborative interprofessional practices has a positive impact on patient care, improves patient satisfaction, reduces medical errors, enhances efficiency and appropriate use of health services, and raises job satisfaction among healthcare professionals.⁵⁻⁷ Within the educational setting, many studies have reinforced the usefulness of IPE as a component of educational systems.⁸⁻¹⁰ For example, as a result of engagement in IPE, both students and faculty exhibit a deep understanding of multidisciplinary team roles and improved communication.¹¹⁻¹³ In addition, IPE enhances the knowledge and skills required for collaborative team work.¹⁴⁻¹⁶

Olenick and Allen¹⁷ argue that quality in healthcare is influenced not only by how well healthcare professionals work together but also by their attitudes towards IPE and interprofessional healthcare teams.

Attitudes towards IPE are considered to be the best predictor of intent to engage in IPE.¹⁷ A wealth of published literature emphasizes that faculty attitudes towards IPE

create a significant influence on the development of IPE initiatives in educational settings.¹⁸

At present, numerous indicators in KSA underline the pressing need for the development of IPE. For example, serious outbreaks of infectious illnesses during the annual Makkah pilgrimage (Hajj), the multi-disciplinary group of experts from different divisions who coordinate to plan the delivery of health services during the Hajj season, and growing chronic health problems such as diabetes mellitus, hypertension, and coronary artery diseases needing complex care by an inter-professional team,^{19,20} call for collaborative work by diverse disciplines. A potential example of specific collaboration from different disciplines could be the exchanging of healthcare professionals' expertise and perspectives to build up a common goal of safeguarding one's health and enhancing results while integrating resources. Other examples include conducting a series of small group IPE modules and supporting faculty development efforts that aim at increasing awareness and understanding of collaboration and shared learning. However, to the authors' knowledge, IPE is not formally and officially implemented in the educational system of Saudi Arabian medical schools.

The main objective of this study was to explore the attitudes of faculty of healthcare professions towards IPE. It is hoped that the findings of this study will help in needs analysis and goal-setting for medical educators and policy makers in designing and implementing IPE to meet the needs of our society.

Materials and Methods

Study setting

This study was conducted on faculty members of health colleges of UoD and TU, KSA.

Study design

A simple random sampling study was conducted from April to June 2016.

Target population and sample size

A total of 100 faculty members at health colleges of each university were selected by a simple sampling technique that involved the random selection of faculty members from different medical and allied health disciplines of both universities to create a representative sample for this research.

Data collection tools

Data were collected using a paper-based questionnaire at UoD and online at TU using Survey Monkey software. The software is Statistical Package for Social Science (SPSS) (IBM Corp, Chicago, Illinois, USA) version 20. The first page of each questionnaire had an explanation of the term 'interprofessional education' and the purpose of the study. The voluntary anonymous nature of participation and confidentiality was assured. Approximately 10–15 min were required to complete the questionnaire.

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